



Month 2 Finance Report

Governing Body meeting



4 July 2019

Author(s)	Chris Cotton, Deputy Director of Finance
	Pat Lunness, Senior Finance Manager
Sponsor Director	Jackie Mills, Director of Finance
Purpose of Paper	

This report provides information on the financial position at Month 2 (May 2019), together with an assessment of the risks and existing mitigations available to deliver the CCG's control total of in year break even position (which also equates to a cumulative year end surplus of £18m).

Key Issues

Governing Body approved the financial plan for 2018/19 at its meeting on 1 March 2019. This report provides a summary of expenditure to date against the approved budgets, together with an assessment of forecast outturn and risks to the delivery of the control total agreed with NHS England.

The overall year-to-date (YTD) position shows a surplus of £3.3m, which is in line with our planned YTD surplus of £3.0m. At this early point in the financial year, it is difficult to accurately forecast the year end position, given the numerous factors that will come into play and the limited data which is available to date. Whilst there remain a number of key risks and issues that need to be managed we are, however, forecasting delivery of our planned surplus.

Is your report for Approval / Consideration / Noting

Consideration of the risk assessment and existing mitigations to manage the risks to deliver the CCG's year end control total of a £18.0m outlined in section 2.

Approval of the budget movement noted in section 6.

Recommendations / Action Required by Governing Body

Governing Body is asked to consider the risks and mitigations to deliver the planned year end position and approve the budget movements detailed in Section 6.

Governing Body Assurance Framework

Which of the CCG's objectives does this paper support?

Strategic Objective - To ensure there is a sustainable, affordable healthcare system in Sheffield. It supports management of the CCG's principal risks 3.1, 4.1, 4.2 and 4.3 in the Assurance Framework.

Are there any Resource Implications (including Financial, Staffing etc)? Not specifically Have you carried out an Equality Impact Assessment and is it attached? Please attach if completed. Please explain if not, why not Not applicable Have you involved patients, carers and the public in the preparation of the report? Not applicable

Month 2 Finance Report

Governing Body meeting

4 July 2019

1. Executive Summary

Key Duties	Year to date	Forecast	Key Issues
Deliver £18.0m Surplus (CCG's Control Total) against Commissioning Revenue Resource Limit (RRL) + RCA combined	(£3.3m) Under Spend	(£18.0m) Under Spend	The surplus brought forward from 2018/19 was £18.0m. For 2019/20 the CCG has been set an inyear breakeven control total by NHS England, i.e. we are required to maintain our brought forward cumulative surplus. We are forecasting achievement of this surplus.
a) Achieve a surplus against the Programme Allocation	(£2.9m) Under Spend	(£16.8m) Under Spend	At this early stage of the financial year, there are a number of risks and challenges that need to be managed (see section 2). In particular, there are risks associated with full delivery of the QIPP plan (£15.2m).
b) Remain within Running Cost Allowance (RCA) of £12.64m.	(£0.4m) Under Spend	(£1.2m) Under Spend	At the plan stage, we agreed £1.0m of our surplus should come from the RCA. Additional savings have been identified and reported this month.
Remain within the Cash Limit (i.e. Maximum draw down set by NHS England)	£0.8m closing balance	Breakeven	The CCG's maximum draw down for 2019/20 notified in May was £902.2m. To remain within this limit, which requires the revenue position to be brought in on plan, cash payments will need to be managed to meet this target.

Key:

Red	Significant risk of non-delivery. Additional actions need to be urgently pursued.
Amb	er Medium risk of non-delivery requires additional management effort.
Gree	Low risk of non-delivery – current management effort should deliver success.

2. Summary of the reported position

The overall position is summarised in table 1 below.

Table 1: Summary Position at 31 May 2019	Annual Budget	Year to Date Variance	Forecast Variance	Forecast Variance
	£'000s	£'000s	£'000s	%
Acute Care	443,082	31	(194)	0%
Mental Health & Learning Disabilities	91,730	(60)	68	0%
Community	87,397	(6)	(45)	0%
Continuing Care	60,096	43	72	0%
Primary Care	191,995	(3)	881	0%
Collaborative	835	(59)	0	0%
Other Programme	7,813	(29)	(31)	0%
Reserves including planned surplus	26,086	(2,838)	(17,566)	-67.4%
Programme Costs	909,035	(2,922)	(16,815)	-1.9%
Running Costs	12,643	(414)	(1,207)	-9.5%
Year to date and Year end Surplus	921,678	(3,336)	(18,021)	-2.0%

Figures are subject to rounding

We are reporting an overall year-to-date (YTD) surplus of £3.3m, which is in line with our planned YTD surplus of £3.0m. At this early stage in the financial year, it is difficult to accurately forecast the year end position, given the numerous factors that will come into play. Whilst there remain a number of key risks and issues that need to be managed we are currently forecasting delivery of our planned surplus.

Further detail of spend in different areas can be found at Appendix A (summary level) and a more detailed position by programme category is then provided in Appendix B. Appendix C provides a summary of the financial position for our main contracts with Sheffield providers (STHFT, SCFT and SHSCT). Appendix D historically reports on the activity and expenditure for STHFT, however it's too early in the year to provide any meaningful information. Therefore Appendix D at month 2 summarises the overall position for budgets within the scope of the BCF arrangement with Sheffield City Council (usually Appendix E). Appendix F (Additional Income) will be provided in month 3.

Overall Risk Assessment

The largest area of risk to delivery of the overall financial position identified to date relates to QIPP delivery. Information on the current available data in relation to QIPP is provided separately in the Director of Commissioning's QIPP report. There are differential risks associated with the schemes therefore it is imperative that we maintain the focus on the delivery of them all.

Our assessment using the information available to date is a risk range of £5.8m upside to £7.7m downside, which is fairly normal for this stage in the financial year. Based on known risks at Month 2, we have assessed that we should have sufficient mitigating actions to manage our risks. However, there are likely to be new risks emerge over the coming months, and so intense scrutiny and early identification of potential issues remains key.

Risk Assessment within context of Sheffield ACP and SY&BL ICS Financial Position

The overall assessment above is based on the CCG's own organisational risks. This takes into account our view on the level of funding which will flow under our existing commissioning and contractual arrangements to our key partners.

The SY&BL ICS Director of Finance produces a monthly report summarising the financial position for all NHS organisations within the ICS. These are the positions as reported to our respective national regulators NHS England and NHS Improvement.

At this point it is too early to provide any meaningful information on risk within these areas.

3. Further Information on Key Budgets and related risks

Acute Hospital Activity:

Sheffield Teaching Hospitals (STH) is by far the most significant contract in value terms as it is planned to account for £433m (including the MSK and Walk in Centre contracts). At month 2, we are reporting a £0.1m (0.2%) overspend for the contract overall.

It is important to note that the phasing of QIPP savings means that £1.1m of the £8.2m attributed to the STH contract is phased into the first 2 months as there are some schemes which have an impact from later months. The delivery of the agreed QIPP plan is vital to the delivery of the financial position.

The issue relating to uncoded activity continues to be a problem and a high proportion of the M2 activity is currently being valued using estimates and assumptions about whether the CCG or NHSE commission the activity. Approximately 70% of May activity is uncoded. STHFT are currently working through additional options to help with staffing levels but at the moment this is expected to continue to be an issue until the end of the financial year. It is perhaps worth noting that despite this issue, we do receive local contract monitoring data from STHFT six working days before the national deadline.

As we currently have one month of fully coded data. As a result, it is not appropriate to extrapolate the position to date forward to the end of the year. The limited data available suggests that we have an overspend on planned activity and an underspend on some elements of the urgent activity.

The contract now includes the "Blended Plus" arrangements, any underspend against the elements of the contract included within the threshold would result in the establishment of a gain share investment fund. Current indications are that these budgets are approximately at break-even against plan (noting the caveats around the level of uncoded activity). Any underspends would be used to generate the gain share investment fund, whilst any overspends would be paid for at a 20% marginal rate.

The table below shows the value of budgets included within the blended plus agreement, reporting for this will be developed in future months when a memorandum will be added to Appendix C to provide the monthly position and forecast.

STHFT Blended Plus agreement	Annual Budget (£000's)	Year to date Target (£000's)	Year to date Actuals (£000's)	Year to date Variance (£000's)
Urgent Care (NEL, A&E, CDU, BPT)	£137,886	£23,116	£23,116	0
Community (including Intermediate Care and Reablement)	£57,338	£9,556	£9,556	0
Other Acute (including CQUINS)	£6,352	£1,059	£1,059	0
Primary Care - Out of Hours	£1,826	£304	£304	0
Total	£203,402	£34,035	£34,035	0

Sheffield Children's (SCH): The reported positon shows a small YTD underspend with a forecast reported underspend of £149k. The majority of the underspend relates to activity under-performance on planned care in both elective inpatients and outpatients.

Non Contract Activity (NCAs): Currently there is limited data received that relates to this year therefore the forecast is per plan. The risk to be managed going forward is the ongoing increase in private sector expenditure, particularly in regards to ophthalmology.

Continuing Health Care (CHC) and Funded Nursing Care (FNC): Having seen a year on year reduction in FNC patient numbers over the last three years, our financial plan for 19/20 assumes, prudently, that numbers will remain broadly static. However, the final 2018/19 numbers were lower than planned, meaning that we have started 19/20 with a smaller patient base than expected. As a result, we are reporting a year to date underspend of £45k, leading to a year-end forecast underspend of £274k.

Children's continuing care is showing a year to date overspend of £54k and a year-end forecast overspend of £326k. This is the result of higher than expected patient numbers, offset slightly by a reduction in the average cost of care packages. We are anticipating that care package reviews during 19/20 will address some of this overspend.

Primary Care: There is a small year to date underspend on primary care budgets of £150k. However, as previously reported, the late change to primary care allocations has left an unfunded (full year) cost pressure on delegated primary care budgets of £938k. PCCC confirmed the CCG's commitment to underwriting the expected impact of full implementation of the revised GP contract. The forecast financial impact has been mitigated through the application of the contingency reserve of £400k, and forecast slippage at M2 of £38k, leaving a residual pressure of £500k.

In terms of the residual £500k forecast overspend, some further guidance has been issued on the new contract settlement, and the forecast incorporates the latest information. However there is more work to do to update the forecast as the year progresses, particularly regarding the role-reimbursement scheme, which may yield some further slippage.

Prescribing: The latest data received relates to April 2019 and shows an average cost per item of £6.61. This has reduced slightly from the cost of £6.63 reported in March 2019. However there has been a significant increase in the growth of items when we compare this data to April 2018 (6.45%) and as a result we are reporting a YTD

overspend of £163k. April data is normally compounded by Easter and the differential impact that this can have on year on year spend. At this stage, we are reporting a breakeven forecast as we only have one month's actual data and it is too early to indicate whether the growth in items is a one-off or is expected to continue for the remainder of the year.

Collaborative Working: Appendix A includes a separate section to report spend on our collaborative working with partners, particularly as Sheffield CCG is the host organisation for both the SY&BL Integrated Care System (ICS) (incorporating the previous commissioner working together arrangements) and the Sheffield Accountable Care Partnership (ACP).

This will capture, in summary level, expenditure against allocations from eg NHS England, which the CCG receives on behalf of the ICS and contributions from Sheffield CCG. The CCG will be collecting income from all partner organisations to contribute to ICS and ACP costs and this income will be offset against relevant expenditure, hence only the net position is reported on Appendix A. In this regard, it is important to note that separate financial reporting will occur to the public sessions of both ICS and Sheffield ACP Boards during 2019/20 and so it is not the intention that detailed reporting occurs in this CCG financial report.

At month 2, the ICS is still awaiting confirmation of funding from NHS England, both in terms of transformation funding as well as funding for the cancer alliance. In addition, the ICS is bidding for a range of funding which if successful will increase the confirmed allocation in future months. The budget reported for ICS (including Cancer Alliance) relates only to agreed slippage from last year (£260k) together with a notional budget (£240k) to fund year to date spend.

Section 75 Framework Partnership Agreement (Better Care Fund): Appendix E shows the citywide position in relation to the Better Care Fund. The year to date position shows a small overspend (£24k) in relation to CCG budgets and an underspend of £1.3m in relation to council budgets, all of which were breakeven or underspent with the exception of Independent Living Solutions, which was £115k overspent.

The overall forecast is an overspend of £1.8m. Sheffield CCG reported a small pressure of £144k in relation to Ongoing Care, with Sheffield City Council reporting a £1.6m overspend. Of the £1.6m, Ongoing Care is forecast to be £3.0m overspent and this is offset by savings on Capital Grants (£1.5m) and smaller savings on People Keeping Well in their Local Community and Independent Living Solutions.

As reported elsewhere in this report, the majority of budgets managed by the CCG are currently forecast to breakeven, given we are at an early stage in the financial year. However, Sheffield City Council are reporting that they expect some slippage currently reported will be utilised later in the financial year and/or there are additional activity pressures that will materialise later in the financial year. As a result there is a significant difference between the year to date and forecast positions.

Running Costs: The forecast spend against the £12.6m running cost allocation is summarised in the table below. At month 2 we are reporting a £1.2m underspend, which is an increase of £0.2m to the £1.0m agreed at the planning stage. This is primarily due to slippage on pay budgets.

Category	Annual Budget £'000s	YTD Variance £'000s	Forecast Variance £'000s
Pay	9,159	(140)	(205)
Non Pay	3,564	(108)	(2)
Income	(1,172)	0	0
Running Costs Reserve	92	0	0
Running Costs Planned Surplus	1,000	(167)	(1,000)
Running Cost Budget	12,643	(414)	(1,207)

Figures are subject to rounding

Additional Income: Under the Financial Management Principles previously approved by Governing Body we are seeking to maximise additional income, over and above the CCG's core allocations, to be able to support delivery of our commissioning intentions. Given the early point in the year, there is a level of uncertainty with regards to additional funding that may be received. As a result, Appendix F, which has historically detailed the additional funding the CCG has secured, is not currently available. We anticipate being *able* to report this position from month 3 onwards.

QIPP: At month 2 we are reporting a break-even year to date and forecast position. A detailed report is being written for the Integrated QIPP working group.

Portfolio	Annual Gross Savings Plan (£'000)	Annual Gross Savings Forecast (£'000)	Annual Gross Savings Forecast Variance (£'000)	Year to Date Gross Savings Plan (£'000)	Year to Date Gross Savings Actual (£'000)	Year to Date Gross Savings Variance (£'000)
Care Outside of Hospital	(2,460)	(2,460)	0	(284)	(284)	0
Children & Young People	(375)	(375)	0	(52)	(52)	0
Elective Care	(1,894)	(1,894)	0	(252)	(252)	0
Medicines Optimisation	(4,861)	(4,861)	0	(756)	(756)	0
Mental Health	(1,532)	(1,532)	0	(280)	(280)	0
Ongoing Care	(1,718)	(1,718)	0	(286)	(286)	0
Urgent and Emergency Care	(600)	(600)	0	(100)	(100)	0
Sub Total - Portfolios	(13,440)	(13,440)	0	(2,010)	(2,010)	0
Other Commissioning	(800)	(800)	0	(134)	(134)	0
Running Costs	(1,000)	(1,000)	0	(166)	(166)	0
Sub Total - Other	(1,800)	(1,800)	0	(300)	(300)	0
Grand Total	(15,240)	(15,240)	0	(2,310)	(2,310)	0
% Achievement		100%			100%	

Whilst full delivery of the QIPP programme is currently forecast, an assessment is being made as to the risk of financial underperformance. This has been included in the overall assessment of financial risk reported in section 2.

4. Delivery of Cash Position

The CCG was notified of a maximum cash drawdown limit of £902.2m at month 2. The total cash used to the end of May was £154.3m against a requested cash drawdown of £137.8m, prescribing & home oxygen of £14.7m, other income of £2.5m and a brought forward balance of £149k. The cash balance at bank at the end of the month was £0.8m. A minimal cash balance at bank is planned for the year end.

5. Better Payment Practice Code

The Better Payment Practice Code requires the CCG to pay all valid invoices by the due date or within 30 days of receipt of a valid invoice, whichever is later. A summary of the position for the 12 month period to the end of May is reported in the table below:

Measure of compliance	12 months to May-19 Number	12 months to May-19 £'000
Non-NHS Payables		
Total Non-NHS Trade invoices paid in the year	16,900	199,584
Total Non-NHS Trade Invoices paid within target	16,689	198,943
Percentage of Non-NHS Trade invoices paid within target	98.75%	99.68%
NHS Payables		
Total NHS Trade invoices paid in the year	3,900	645,343
Total NHS Trade invoices paid within target	3,842	644,749
Percentage of NHS Trade invoices paid within target	98.51%	99.91%

6. Key Budget Movements

In line with the Scheme of Budgetary Delegation, the Governing Body is required to sign off all budget movements over £2m. There were no budget movements over £2m in month 1. In month 2 there was one budget movement of £2.2m in relation to Directed Enhanced Services (DES) for the Network DES new investment.

In addition, in line with the section 75 agreement with Sheffield City Council (SCC), any proposed changes to Better Care Fund budgets in excess of £1m are required to be approved by the Governing Body (as well as by SCC). There have been no proposed changes over £1m in months 1 or 2.

Recommendations

Governing Body is asked to:

- Consider the risk assessment and existing mitigations to manage the risks to deliver the CCG's year end control total of a £18.0m surplus as outlined in section 2.
- Approve the budget movements noted in section 6.

Paper prepared by: Chris Cotton, Deputy Director of Finance and Pat Lunness, Senior Finance Manager

On behalf of: Jackie Mills, Director of Finance

June 2019

	1	Year to Da	te: May	1		Year End	l Forecast O	ut-turn		Forecast
	Budget Expenditure Variance							Variance @		
	Buaget	Experientare	Over (+)/ I		Budget	rorcoast	Over (+)/		Change from prev	Month 1
	£'000s	£'000s	£'000s	%	£'000s	£'000s	£'000s	%	month*	£'000s
PROGRAMME COSTS										
Revenue Resource Limit	149,602	149,602	0	0.0%	909,035	909,035	0	0.0%	\rightarrow	0
EXPENDITURE	11	1								
Acute Hospital Care	-									
Elective	26,927	27.000	73	0.3%	162.595	162,420	(175)	-0.1%	J	0
Urgent care	30,510		(107)	-0.4%	176,344	176,325	(19)	0.0%	1	0
Other Acute Care / Ambulance Services	16,581	16,646	65	0.4%	104,143	104,144	(13)	0.0%	↑	0
Acute Hospital Care	74,018		31	0.0%	443,082	442,888	(194)	0.0%	J	0
		, , , , , , , , , , , , ,					(- /		·	
Mental Health & Learning Disabilities										
Mental Health & Learning Disabilities	15,299	15,239	(60)	-0.4%	91,730	91,798	68	0.1%	1	0
Community Services	II									
Elective Community Care	3,674	3,674	(0)	0.0%	22,151	22,143	(8)	0.0%	↓	0
Intermediate Care & Reablement	7,666		0	0.0%	45,991	45,991	(6)	0.0%		0
Local Authority	3,209		(6)	-0.2%	19,255	19,218	(37)	-0.2%		0
Community Services	14,549		(6)	0.0%	87,397	87,352	(45)	-0.2%	Ψ	- 0
Community Cervices	14,545	14,040	(0)	0.070	01,031	01,002	(40)	0.170		
Long Term Care and End of Life	II									
Long Term Care and End of Life	9,884	9,927	43	0.4%	60,096	60,168	72	0.1%	1	0
Primary Care										
Primary Care Co-commissioning	12,206		(169)	-1.4%	75,424	76,324	900	1.2%	1	0
Locally Commissioned Primary Care Services	3,353	3,372	19	0.6%	22,777	22,777	0	0.0%		0
Prescribing	15,597	15,744	148	0.9%	93,795	93,776	(19)	0.0%		0
Primary Care	31,156	31,153	(3)	0.0%	191,995	192,876	881	0.5%	1	0
Other Programme	II									
Collaborative Working	555	495	(59)	-10.7%	835	835	0	0.0%	\rightarrow	0
Other Services	1.302	1,273	(29)	-2.2%	7,813	7,782	(31)	-0.4%	,	0
Other Programme	1,857	1,769	(88)	-4.7%	8,648	8,617	(31)	-0.4%		0
		i i	` '			·	` '			
Reserves										
Reserves	2,838	0	(2,838)	-100.0%	26,086	8,520	(17,566)	-67.4%	↓	(17,004)
TOTAL EXPENDITURE - PROGRAMME COSTS	149,602	146,681	(2,922)	-2.0%	909.035	892,220	(16,814)	-1.9%	Ţ	0
TOTAL EXILETION ET TROOTS AND TOTAL	0,002	0,00	(2,022)	2.070	555,555	002,220	(10,011)	1.070		
(UNDER)/OVER SPEND - Programme Costs	(0)	(2,922)	(2,922)		(0)	(16,815)	(16,814)		\downarrow	0
RUNNING COSTS ALLOWANCE										
Running Cost Funding	2,097	2.097	0	0.0%	12,643	12.643	0	0.0%	\rightarrow	0
Total Running Cost Expenditure	2,097		(414)	-19.7%	12,643	11,436	(1,207)	-9.5%	j	(1,000)
			\ /!			,	, , , , ,			
(UNDER)/OVER SPEND - Running Costs	0	(414)	(414)		0	(1,207)	(1,207)		\downarrow	0
TOTAL	•									
Revenue Resource Limit	151,699	151,699	0	0.0%	921,678	921,678	0	0.0%	\rightarrow	0
Expenditure	151,699		(3,336)	-2.2%	921,678	903.657	(18.021)	-2.0%		(18,004)
TOTAL (A)	(0)		(3,336)	/0	(0)	(18,021)	(18,021)	2.070	\rightarrow	(18,004)
	(0)	(0,000)	(0,000)		(0)	(.0,011)	(.0,021)			(10,004)

^{*} \uparrow = deterioration, \downarrow = improvement, \rightarrow = no change.

Appendix A (cont)

RESOURCE LIMIT ALLOCATIONS			Annual Cash Drawdown	
	Recurrent	Non Rec	Total	Requirement incl Capital
	£'000s	£'000s	£'000s	£'000s
Programme Costs - CCG				
Published Allocations - final allocation after place-based pace of change	805,733		805,733	
Published Allocations - other funding after pace of change	3,840		3,840	
Published Delegated Allocations - final allocation after place-based pace of change	82,473		82,473	
Delegated - reduction for central indemnity scheme	(2,374)		(2,374)	
IR PELs transfer	1,342		1,342	
Brought Forward Surplus/(Deficit)		18,021	18,021	
Month 2 Programme Costs Resource Limit	891,014	18,021	909,035	0
Running Costs				
Initial Running Costs allocation	12,643		12,643	
Month 2 Running Cost Resource Limit	12,643	0	12,643	
CLOSING LIMITS (B)	903,657	18,021	921,678	C

Memo Table: Planned Surplus

	£'000
Historic Surplus b/f	6,161
Plus release of 1% reserve in 2016/17	8,124
Plus release of 0.5% reserve in 2017/18	3,746
Cumulative surplus carried forward from 2018/19	18,021
Planned increase to surplus in 2019/20	0
Total planned surplus for 2019/20	18,021

Memo Table: Forecast In Year Financial Performance

Total Allocation 19/20 from the above table	921,688
Less cumulative surplus carried forward from 2018/19	-18,021
In Year Allocation	903,667

Expenditure:	
Forecast Expenditure (Programme Spend plus Running Costs)	903,657
Forecast under/(over)-spend against in year allocation	0

	Budget £'000s	Year to Da Expenditure £'000s	te: May Varia Over (+)/ £'000s		Budget £'000s	Forecast Forecast £'000s	Out-turn Varia Over (+)/ U £'000s		Forecast Variance @ Month 1 £'000s
PROGRAMME COSTS Revenue Resource Limit	149,602	149,602	0	0%	909,035	909,035	0	0%	
EXPENDITURE									
Acute Hospital Care Planned Care Sheffield Teaching Hospitals NHS FT	23,712	23,803	91	0%	143,614	143,614	0	0%	
Sheffield Children's NHS FT Other NHS Trusts	2,164 652	2,147	(18)	-1%	12,603	12,428	(175)	-1%	
STC & Extended Choice	398	652 398	(0)	0% 0%	3,914 2,465	3,914 2,465	(0)	0% 0%	
Planned Care Jrgent Care	26,927	27,000	73	0%	162,595	162,420	(175)	0%	
Sheffield Teaching Hospitals NHS FT Sheffield Children's NHS FT	27,159 2,181	27,056 2,177	(103) (4)	0% 0%	155,958 13,364	155,958 13,345	0 (19)	0% 0%	
Other NHS Trusts Jrgent Care	1,170 30,510	1,170 30,403	(107)	0% 0%	7,022 176,344	7,022 176,325	(19)	0% 0%	
Other Acute Care / Ambulance Services			, ,						
Sheffield Teaching Hospitals NHS FT Sheffield Children's NHS FT	10,293 448	10,387 456	94 8	1% 2%	66,423 2,678	66,423 2,679	0	0% 0%	
Other NHS Trusts Ambulance Services	358 4,420	358 4,420	0 0	0% 0%	2,150 26,523	2,150 26,523	0	0% 0%	
Other Acute Services including NCAs Other Acute Care	1,061 16,581	1,024 16,646	(37) 65	-4% 0%	6,368 104,143	6,368 104,144	0	0% 0 %	
SUB TOTAL - ACUTE SERVICES	74,018	74,050	31	0%	443,082	442,888	(194)	0%	
Mental Health & Learning Disabilities Sheffield Health and Social Care NHS FT	13,689	13,689	(0)	0%	82,136	82,136	o	0%	
Sheffield Children's NHS FT CAMHS Other Mental Health Services including Voluntary Sector	923 687	934 616	11 (71)	1% -10%	6,159 3,435	6,227 3,435	68 0	1% 0%	
SUB TOTAL - MENTAL HEALTH & LEARNING DISABILITIES SERVICES	15,299	15,239	(60)	0%	91,730	91,798	68	0%	
Community Services									
Planned Care Sheffield Teaching Hospitals NHS FT including MSK	2,830	2,830	0	0%	16,978	16,978	0	0%	
Sheffield Children's NHS FT Local Authority CSWs	632 116	626 119	(6) 3	-1% 2%	3,902 696	3,878 712	(24) 16	-1% 2%	
Other Community Services including Voluntary sector Planned Community Care	96 3,674	99 3,674	4 (0)	4% 0%	574 22,151	574 22,143	0 (8)	0% 0%	
ntermediate Care & Reablement									
Sheffield Teaching Hospitals NHS FT ocal Authority Social Care	7,062 303	7,062 303	0	0% 0%	42,369 1,817	42,369 1,817	0	0% 0%	
Community Equipment ntermediate Care	301 7,666	301 7,666	0	0% 0 %	1,805 45,991	1,805 45,991	0	0% 0 %	
	7,000	7,000		0 78	43,991	43,931	Ť	0 76	
Local Authority Grants	74	68	(6)	-8%	446	409	(37)	-8%	
Services within the Better Care Fund Social Care	3,135 3,209	3,135 3,203	(6)	0%	18,809 19,255	18,809 19,218	(37)	0%	
SUB TOTAL - COMMUNITY SERVICES	14,549	14,543	(6)		87,397	87,352	(45)		
Long Term Care and End of Life Continuing Care	7,838	7,895	58	1%	47,027	47,373	346	1%	
Funded Nursing Care St Lukes Hospice	1,213 464	1,167 464	(46) (0)	-4% 0%	7,278 2,784	7,004 2,784	(274)	-4% 0%	
Sheffield Teaching Hospitals NHS FT MacMillan Unit and Palliative Care	369	400	31	8%	3,007	3,007	0	0%	
SUB TOTAL - CONTINUING CARE SERVICES	9,884	9,927	43	0%	60,096	60,168	72	0%	
Primary Care Co-Commissioning									
Core Contract Premises	8,671 1,769	8,590 1,731	(81) (38)	-1% -2%	52,026 10,615	52,026 10,615	0	0% 0%	
Tonings OF Enhanced Services	1,285 295	1,272 263	(13) (32)	-1% -11%	7,711 3,951	7,711 3,913	0 (38)	0% -1%	
Primary Care Other Sub total - Primary Care Delegated	187 12,206	180 12,037	(6) (169)	-3% -1%	1,120 75,424	2,058 76,324	938 900	84% 1%	
ocally Commissioned Primary Care Services	2,618	2,637	19	1%	18,365	18,365	0	0%	
STH GP Collaborative Out of Hours Service	735	735	0	0%	4,412	4,412	ő	0%	
GP Prescribing	15 205	15,448	163	19/	91,913	01 013	0	0%	
Prescribing Medicines Management Team	15,285 311	296	(15)	1% -5%	1,882	91,913 1,863	(19)	-1% 0 %	
SUB TOTAL - PRIMARY CARE SERVICES	31,156	31,153	(3)		191,995	192,876	881	U%	
Collaborative Working Accountable Care Partnership	18	18	0	1%	109	109	o	0%	
ntegrated Care System Setter Care Fund	500 23	446 17	(54) (6)	-11% -25%	500 140	500 140	0	0% 0%	
Other Collaborative Working Collaborative Working	14 555	14 495	(59)	0%	86 835	86 835	0	0%	
Other Programme									
111 FR team	283	283 6	(0)	0% -46%	1,696	1,696	0	0% -8%	
Other Commissioning	11 472	481	(5) 9	2%	66 2,815	61 2,797	(5) (17)	-1%	
Development Nurses Continuing Healthcare Assessments	85 451	81 423	(4) (28)	-5% -6%	512 2,723	504 2,723	(8)	-2% 0%	
Other Programme	1,302	1,273	(29)		7,813	7,782	(31)		
Reserves Commissioning Reserves and Non recurrent reserve	0	0	0		5,051	5,051	(0)	0%	
General Contingency Reserve	0	0	0		3,854	3,709	(145)	-4%	
CS Reserves Primary Care	0	0	0		(240) 400	(240)	(400)	0%	
Jnidentified QIPP Planned Surplus	0 2,838	0 0	0 (2,838)	-100%	0 17,021	0 0	0 (17,021)	-100%	(17,00
Reserves SUB TOTAL - OTHER PROGRAMME SERVICES	2,838 4,141	0 1,273	(2,838) (2,867)	-100%	26,086 33,899	8,520 16,302	(17,566) (17,597)	-67%	(17,00
FOTAL EXPENDITURE - PROGRAMME SERVICES	149,602	146,681	(2,922)	-2%	909,035	892,220	(16,815)	-2%	(17,00
UNDER)/OVER SPEND - Programme Costs	(0)	(2,922)	(2,922)		(0)	(16,815)	(16,815)		(17,0
RUNNING COSTS ALLOWANCE							_		
Funding net of £1.0m transfer to commissioning budgets EXPENDITURE	2,097	2,097	0	0%	12,643	12,643	0	0%	
Accountable Officer	346 544	302 467	(44) (77)	-13% -14%	2,137 3,207	2,137 3 179	0 (28)	0%	
Commissioning & Performance Finance & Facilities	544 460	467 427	(33)	-14% -7%	3,207 2,766	3,179 2,736	(28) (29)	-1% -1%	
Nursing,Quality & Workforce Fransformation & Delivery	388 192	354 133	(34) (59)	-9% -31%	2,336 1,162	2,316 1,033	(20) (130)	-1% -11%	
Running Cost Reserve	0	0	0 (167)	-100%	35 1,000	35 0	(1,000)	0% -100%	(1,0
Running Cost Planned surplus	167			. 50,0	.,500	J	(.,550)	.0070	(1,0)
•	2,097	1,683	(414)	-20%	12,643	11,436	(1,207)	-10%	(1,0

NHS Sheffield Clinical Commisisoning Group Finance Report 2018/19 - Financial Position for Period Ending 31 May 2019

Main Provider Contracts

	Year to Da	ate: May	
Budget	Expenditure	Varia	nce
		Over (+)/ U	nder(-)
£'000	£'000	£'000	%

Year End Forecast Out-turn					
Budget	Forecast Variance				
		Over (+)/ I	Jnder(-)		
£'000	£'000	£'000	%		

EXPENDITURE	
Sheffield Teaching Hospitals NHS FT	
Planned Care - STH	
Urgent Care - STH	
Community Care - STH	
Other Acute - STH	
High Cost Drugs - STH	
Maternity Services	
Primary Care - Out of Hours	
Intermediate Care & Reablement	
End of Life Care	
	Sub Total
Sheffield Children's NHS FT	
Planned Care - SCH	
Urgent Care - SCH	
Community Care - SCH	
Mental Health Services - SCH	
Other Acute - SCH	
High Cost Drugs - SCH	
Safeguarding	
	Sub Total
Sheffield Health and Social Care NHS FT	
Mental Health & Learning Disabilities	
	Sub Total
1	

23,712	23,803	91	0.4%
27,159	27,056	(103)	-0.4%
2,830	2,830	0	0.0%
5,670	5,852	182	3.2%
2,734	2,734	0	0.0%
1,889	1,801	(88)	-4.7%
735	735	0	0.0%
7,062	7,062	0	0.0%
369	400	31	8.4%
72,160	72,273	113	0.2%
2,164	2,147	(18)	-0.8%
2,181	2,177	(4)	-0.2%
632	626	(6)	-1.0%
923	934	11	1.2%
291	306	15	5.2%
157	150	(7)	-4.3%
0	0	0	#DIV/0!
6,348	6,340	(9)	-0.1%
13,689	13,689	(0)	0.0%
13,689	13,689	(0)	0.0%
92,198	92,302	104	0.1%

143,614	143,614	0	0.0%
155,958	155,958	0	0.0%
16,978	16,978	0	0.0%
38,683	38,683	0	0.0%
16,407	16,407	0	0.0%
11,333	11,333	0	0.0%
4,412	4,412	0	0.0%
42,369	42,369	0	0.0%
3,007	3,007	0	0.0%
432,761	432,761	0	0.0%
12,603	12,428	(175)	-1.4%
13,364	13,345	(19)	-0.1%
3,902	3,878	(24)	-0.6%
6,159	6,227	68	1.1%
1,739	1,780	41	2.4%
940	899	(40)	-4.3%
0	0	0	#DIV/0!
38,706	38,557	(149)	-0.4%
82,136	82,136	0	0.0%
82,136	82,136	0	0.0%
553,603	553,454	(149)	0.0%

NHS Sheffield Clinical Commisisoning Group Finance Report 2019/20 - Financial Position for Period Ending 31 May 2019

Memorandum: Section 75 - Better Care Fund

	Year to Date: May			l	Year End Forecast Out-turn					
										Forecast
			l				_			Variance @ Month 1
Theme	Budget	Expenditure				Budget	Forecast		I	WOULT
	£'000s	£'000s	Over (+)/ L £'000s	naer(-) %		£'000s	£'000s	Over (+)/ (£'000s	Jnaer(-) %	£'000s
	£ 000S	£ 000S	£ 000S	%	l	£ 000S	£ 000S	£ 000S	%	£ 000S
Citywide Position					l					
People Keeping Well in their local community	1,495	1,246	(249)	-16.6%		8,309	8,157	(152)	-1.8%	0
Active Support & Recovery	9,433	9,224	(209)	-2.2%		55,500	55,617	117	0.2%	0
Independent Living Solutions	705	820	115	16.4%		3,994	3,805	(189)	-4.7%	0
Ongoing Care	24,188	23,801	(387)	-1.6%		142,414	145,517	3,103	2.2%	0
Emergency Medical Admissions - STH	11,437	11,437	Ò	0.0%		68,622	68,622	(0)	0.0%	0
Mental Health	18,169	18,139	(30)	-0.2%		109,017	109,410	393	0.4%	0
Capital Grants	604	76	(528)	-87.4%		9,322	7,816	(1,506)	-16.2%	0
TOTAL EXPENDITURE	66,032	64,744	(1,288)	-2.0%		397,179	398,945	1,766	0.4%	0
NHS Sheffield CCG										
People Keeping Well in their local community	253	253		0.0%		1,817	1,817		0.0%	0
Active Support & Recovery	7,622	7,622		0.0%		45,045		(0)	0.0%	0
Independent Living Solutions	301	301	0	0.0%		1,805		0	0.0%	0
Ongoing Care	7,611	7,635		0.3%		45,665		144	0.3%	0
Emergency Medical Admissions - STH	11,437	11,437		0.0%		68,622	68,622	(0)	0.0%	0
Mental Health	17,089	17,089		0.0%		102,534	102,534	(0)	0.0%	0
Capital Grants	0	0	0	0.0%		0	0	0	0.0%	0
CCG Total	44,313	44,337	24	0.05%		265,488	265,632	144	0.1%	0
0. (1.1.0); 0. (1.000)	_	ı								
Sheffield City Council (SCC)	4.040	000	(0.40)	00.00/		0.400	0.040	(450)	0.00/	
People Keeping Well in their local community	1,242	993		-20.0%		6,492	6,340	(152)	-2.3%	0
Active Support & Recovery	1,811	1,602		-11.6%		10,455	10,571	117	1.1%	0
Independent Living Solutions	404	520		28.5%		2,189	2,000	(189)	-8.6%	0
Ongoing Care	16,577	16,166		-2.5%		96,750	,	2,959	3.1%	0
Emergency Medical Admissions - STH	1 000	0	~	0.0%		0 400	0	0	0.0%	0
Mental Health	1,080	1,050		-2.8%		6,483	6,876	393	6.1%	0
Capital Grants	604	76		-87.4%		9,322	7,816	(1,506)	-16.2%	0
SCC Total	21,719	20,407	(1,312)	-6.0%		131,691	133,312	1,622	1.2%	0

Notes:

Key elements of each theme are summarised below:

	Includes Care Planning, Health trainers/ Community Support Workers, Community Grants and
People Keeping Well in their local community	Support to VCF sector, Public Health, Housing related support to Older People and other support
	services
Active Support & Recovery	Includes community nursing, Intermediate Care Beds, CICs, Transfer of Care Teams, STIT, Intermediate Care Assessment teams
Independent Living Solutions	Includes community equipment and adaptations
Ongoing Care	Includes CHC& FNC, Learning Disabilities, Adult Social Care. From April 2017, this excludes
Origoning Care	spend on mental health which is now included in the mental health theme.
Emergency Medical Admissions - STH	Includes Adult Inpatient Medical Emergency Admissions (excluding gastroenterology)
Mental Health	Includes all adult mental health services as commissioned by the CCG, with those for under 65 years purchased by SCC in 2017/18.