

Finance Report

Governing Body meeting

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7 July 2016

Author(s)	Jackie Mills, Deputy Director of Finance Chris Cotton, Senior Finance Manager
Sponsor	Julia Newton, Director of Finance
Is your report for Approval / Consideration / Noting	
<p>This report is for consideration: It provides information on the financial position at Month 2 (May 2016), together with a discussion on key risks and challenges to deliver the planned year end surplus of £3.5m (0.5%). The report is presented in the context that Governing Body is being asked to consider in private session the draft financial recovery plan requested by NHS England because the CCG does not meet the national business rule of planning for a 1% surplus.</p> <p>Given that it is early in the financial year, monitoring information is limited and it is difficult to accurately extrapolate this data. However, there are some emerging risks, particularly in relation to slippage against specific QIPP schemes.</p>	
Are there any Resource Implications (including Financial, Staffing etc)?	
None.	
Audit Requirement	
<u>CCG Objectives</u>	
<p><i>Which of the CCG's objectives does this paper support?</i> 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.</p>	
<u>Equality impact assessment</u>	
<p><i>Have you carried out an Equality Impact Assessment and is it attached? No. If not, why not?</i> There are no specific issues associated with this report.</p>	
<u>PPE Activity</u>	
<p><i>How does your paper support involving patients, carers and the public?</i> Not Applicable.</p>	
Recommendations	
Governing Body is asked to consider the risks and challenges to delivery of the planned 0.5% surplus identified at this early stage of the financial year.	

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1. Executive Summary

Key Duties	Year to date	Forecast	Key Issues
Deliver 1% Surplus (£7.5m) against Commissioning Revenue Resource Limit (RRL) + RCA combined	(£0.6m) Under Spend	(£3.5m) Under Spend	<p>A CCG's statutory duty is to breakeven but NHSE also have the business rule of a 1% surplus target. The CCG's current plan for a 0.5% surplus. This has meant NHS England have requested the CCG complete a Financial Recovery Plan which sets out the actions that it will put in place to return the CCG to a 1% cumulative surplus as soon as possible and how this position will be sustained from 2017/18 onwards.</p> <p>At this early stage of the year we are forecasting delivery of our 0.5% surplus with various risks and challenges to be managed, but do not yet have a plan which would take the CCG to a 1% surplus in 2016/17.</p>
a) Achieve a surplus against the Programme Allocation	(£0.3m) Under Spend	(£2.4m) Under Spend	There is limited information available. Some is suggesting early pressure points, but at this stage in the financial year it is envisaged these can be managed through use of reserves or corrective action during the year.
b) Remain within Running Cost Allowance (RCA) of £12.65m.	(£0.3m) Under Spend	(£1.1m) Under Spend	At the plan stage, we agreed £1.0m of our surplus should come from the RCA, leaving the CCG with £11.65m to spend on running costs, noting that this would present challenges as we look to deliver an ambitious service change programme.
Remain within Cash Limit (i.e. Maximum draw down set by NHS England)	£2.8m closing balance	Breakeven	The CCG's maximum draw down for 2016/17 is £827m and it is expected we will remain within this limit.
Hold 1% of CCG resources as a reserve to be released only with agreement of NHSE and only to be spent non recurrently.			The CCG has plans which demonstrate compliance with this requirement.

Key:

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

2. Forecast Revenue Position

2.0 Overview

The financial position at month 2 is shown in summary on Appendix A. This shows a surplus of £0.6m year-to-date (YTD) and forecast outturn (FOT) achievement of the CCG's current planned surplus of £3.5m. Appendix B breaks down the financial position by programme category. Whilst it is very early in the financial year, there are some indications of financial pressures particularly in relation to QIPP under-delivery, prescribing and Sheffield Children's emergency admissions emerging. These will need to be carefully managed through corrective action to ensure delivery of the surplus of £3.5m

Table A: Summary Position at 31 May 2016

	Annual Budget £'000s	Year to Date Variance £'000s	Forecast Variance £'000s	Forecast Variance %
Acute Hospital Care	396,682	30	0	0.0%
Mental Health & Learning Disabilities	80,640	24	0	0.0%
Primary & Community Services (Incl. CHC)	242,637	151	155	0.1%
Primary Care Co-commissioning	82,295	0	0	0.0%
Reserves including planned surplus	16,771	(516)	(2,516)	-15.0%
Programme Costs	819,025	(311)	(2,361)	-0.3%
Running Costs (analysis in section 2.1.12)	12,654	(337)	(1,139)	-9.0%
Total Budget 2016/17	831,679	(648)	(3,500)	-0.5%

2.1 Key Financial Risks, Issues and Challenges

2.1.1 Acute Hospital Activity: **Sheffield Teaching Hospitals (STH)** is by far the most significant contract in value terms as it is planned to account for £342m (excluding the MSK contract). At month 2, we are reporting a £281k (0.5%) underspend for the contract overall. Contract monitoring information at month 2 indicates that elective spend is £249k (1.5%) below plan, whilst urgent care spend is £141k (0.7%) below plan. It is important to note in this context that the phasing of QIPP savings means that only a relatively small element of the £13m attributed to the STH contract are phased into the first 2 months.

Issues experienced in 2015/16 following the introduction of Lorenzo mean that we are still unable to provide robust commentary about the changes to Waiting Lists for both Outpatients and Elective In-Patients. The Junior Doctors Strikes during April are likely to have impacted on the levels and type of activity planned by STHFT, although elective activity in May was not significantly higher than in April. The Urgent care information shows that the small under-spend on Inpatient stays, is partially offset by a significant over performance in relation to Excess Bed Days (where a couple of long stay patients were discharged in April). A&E also has a small financial under-spend but CDU activity has increased above plan by 8.6%.

In summary, at this stage in the financial year it is not possible to make an accurate forecast outturn position and for that reason we are reporting that the contract overall will be in balance. This does assume, by default, that QIPP will be achieved in full, which as discussed in the separate paper on QIPP to this meeting of Governing Body must be considered a significant risk.

M2 data from **Sheffield Children's** shows an overspend of £234k, mainly in relation to urgent care. 2016/17 plan for non-elective activity was based on a 5 year growth model as it was agreed 2015/16 activity seemed higher than normal. The levels of activity in 2015/16 have continued into April and May and at the same time the case mix (cost per patient) has increased by 15% compared to the first 2 months in 2015/16. Work is ongoing to sense check the activity and find explanations to the increases. As there is only 2 months data it is felt that it is too early to extrapolate this pressure for the full year however the position will be monitored closely over the coming months.

2.1.2 Sheffield Health & Social Care Trust (SHSC): Activity plans have been agreed with SHSC on an average of the last 2 years. No actual activity information has been received to date however it is felt the contract should be around a breakeven position in 2016/17.

2.1.3 Ambulance activity: Block contracts have been agreed with **Yorkshire Ambulance Service (YAS)** for 999 and PTS. There are only small other contracts within this area that will vary on activity therefore the financial risk is minimal.

2.1.4 Individual Funding Requests (IFR): Within acute IFR, there are currently 9 people with brain injuries receiving care. This continues to be the high number of cases seen last year. Whilst this spend is reflected in the year to date variance, it is too early to use this as a basis for the forecast which has been held at breakeven. However, if these patients remained in care for a full year, the variance could increase to an overspend of c£1m.

2.1.6 Continuing Health Care (CHC): The average cost per client within adult and children's CHC is currently slightly below plan. This has resulted in a small underspend of £58k. The budget allows for an increase in clients as expected from previous trends. The number of clients in receipt of funded nursing care is slightly below plan which has meant an underspend of £13k for Month 2. CCGs are still waiting for the national funded nursing care weekly rate for 2016/17 to be confirmed following a national review. There is an expectation that the review will result in a higher than inflation uplift. Until this information is available we are unable to assess whether our contingency reserve for this potential pressure is sufficient. The CCG has increased its funding of the team working on reviewing all the claims for historic periods of care as part of a drive to meet the national deadline for completion of all reviews.

2.1.7 Primary Care Co-commissioning: A detailed report was presented to the Primary Care Commissioning Committee. The report shows the slightly revised budgets as at Month 2. No variances are reported to date.

2.1.8 Prescribing: The actual April data showed spend of £8.1m which when taken with a local estimate of spend in May, gives a year to date overspend of £271k. When compared to prescribing activity in April 2015, the number of items prescribed per day has decreased by 0.55%. The cost per item is £7.19 which is an increase of 3p on the March figure. It is too early to understand the impact on the year end position due to fluctuations that always occur in year, partly linked to changes in Cat M prices and therefore the forecast has been held at breakeven.

2.1.9 Quality Innovation, Productivity & Prevention (QIPP): The 2016/17 QIPP Programme Governing Body paper for 7th July gives a more comprehensive view on progress. The month 2 position shows a shortfall of £543k against plan. In part this shortfall is linked to Lead Director forecasts about slippage on individual schemes and in part linked to the phasing of when saving will be realised. It is also early in the year and month 2 data has not been received yet. The year to date position by programme is shown below:

Area of CCG Expenditure	Gross Savings Plan Full Year	Gross Savings Plan M2	Gross Savings Actual M2	Gross Savings Variance M2
	£'000	£'000	£'000	£'000
Child Health	-1,405	-42	-26	17
Community Healthcare	-1,475	-167	0	167
Continuing Healthcare	-1,650	-167	-83	84
Elective Care	-5,068	-119	-82	37
High Cost Drugs	-737	-18	0	18
Mental Health	-470	-75	-67	8
Other	-350	-17	-17	0
Prescribing	-2,490	-255	-157	98
Urgent Care	-5,846	-311	-197	114
Total	-19,491	-1,170	-627	543

A number of next steps are highlighted in the QIPP programme paper.

2.1.10 Section 75 Framework Partnership Agreement (Better Care Fund): Appendix E shows the citywide position in relation to the better care fund. Overall, a forecast overspend of £6.4m is being reported (£0.2m in relation to CCG commissioned services and £6.2m in relation to SCC commissioned services).

Information reported on the CCG expenditure within the Better Care Fund is included within the overall CCG reported position in appendix A to D. An overspend of £228k is forecast in relation to the Independent Living Solutions contract.

Information received from Sheffield City Council (SCC) shows a forecast overspend of £6.2m against the SCC budgets of £106m (which equates to 6%). The main areas of overspend relate to:

- Forecast overspends against Purchasing Budgets (Learning Disabilities, Adult and Mental Health) which all show additional cost demands versus budget assumptions (all within Theme 4 : On-going care);
- Pressures on the Independent Living Solutions contract as noted in the CCG section above.

Work is underway to address the overspend and mitigate the non-delivery of proposed savings.

2.1.10 1.0% Non-Recurrent Reserve (£8.1m including primary care co –commissioning) Planning guidance from NHS England requires that all CCGs hold back at least 1% of the

programme revenue resource limit to be used on a non recurrent basis. In response to a HM Treasury requirement, NHSE have changed the business rule which in 2016/17 now requires CCGs to hold and not commit any of the resource, until agreed by NHSE, which is dependent on how well ALL organisations in the Sustainability & Transformation Programme (STP) are performing. If any organisations are failing to meet their finance targets, CCGs will be required to release all/portion of the 1% reserve to increase our reported surplus. If all organisations are demonstrating on plan, funding may be available to spend on non recurrent initiatives later in the year..

2.1.11 General Contingency Reserve: At month 2, the contingency reserve stands at £3.8m. This is likely to be required to manage some of the key risks identified elsewhere in this report.

2.1.12 Running Costs: The split of the £12.6m running cost allocation is summarised in the table below. The Governing Body approved at the planning stage to allocate £1.0m towards the delivered of the overall surplus.

Category	Annual Budget £'000s	YTD Variance £'000s	Forecast Variance £'000s
Pay	8,792	(54)	(185)
Non Pay	4,118	(116)	46
Income	(1,401)	0	0
Running Costs Reserve	145	0	0
Running Costs Planned Surplus	1,000	(167)	(1,000)
Running Cost Budget	12,654	(337)	(1,139)

There is an underspend above plan at month 2. This is mainly due to staff vacancies and limited spend year to date against such budgets as legal fees and consultancy. However a full year variance of -£1.1m is forecast (which is £0.1m greater than plan) mainly as a result of expected vacancies level during the year.

3. Delivery of Cash Position

The CCG was notified of a maximum cash drawdown limit of £827m at month 2. The total cash used to the end of May was £125.7m against a requested cash drawdown of £127.5m and other income of £1m. The cash balance at the end of the month was £2.8m. The profile of spend is in line with the previous year and detailed forecast is underway to reduce the cash balance at the end of each month.

4. Key Budget Movements

In line with the Scheme of Delegation the Governing Body is required to sign off all budget movements over £2m. At M2, there were no significant budget movements compared to the plan approved by the Governing Body in May.

In line with the section 75 agreement with Sheffield City Council (SCC), any proposed changes to the financial contributions of either party to the Better Care Fund are required to be signed off by the Governing Body (as well as the SCC Cabinet). There are no changes requiring approval at M2 as the section 75 agreement for 2016/17 is currently being finalised.

5. Recommendations

Governing Body is asked to consider the risks and challenges to delivery of the planned 0.5% surplus identified at this early stage of the financial year.

Paper prepared by: Jackie Mills, Deputy Director of Finance, Chris Cotton, Senior Finance Manager

On behalf of: Julia Newton, Director of Finance
June 2016

NHS Sheffield Clinical Commissioning Group
Finance Report 2016/17 - Financial Position for Period Ending 31 May 2016

	Year to Date: May				Year End Forecast Out-turn				Forecast Variance @ Month 2 £'000s
	Budget	Expenditure	Variance		Budget	Forecast	Variance		
	£'000s	£'000s	£'000s	%	£'000s	£'000s	£'000s	%	
PROGRAMME COSTS									
Revenue Resource Limit	133,605	133,605	0	0%	819,025	819,025	0	0%	0
EXPENDITURE									
Acute Hospital Care									
Elective	26,115	26,022	(93)	0%	160,693	160,693	0	0%	0
Urgent care	23,588	23,617	29	0%	137,527	137,527	0	0%	0
Other Acute Care / Ambulance Services	16,307	16,401	94	1%	98,463	98,463	0	0%	0
	66,011	66,040	30	0%	396,683	396,683	0	0%	0
Mental Health & Learning Disabilities									
Mental Health & Learning Disabilities	13,440	13,464	24	0%	80,640	80,640	0	0%	0
Community Services									
Elective Community Care	4,769	4,740	(30)	-1%	28,616	28,589	(28)	0%	0
Urgent Community Care	1,282	1,282	0	0%	7,691	7,691	0	0%	0
Intermediate Care & Reablement	7,294	7,338	44	1%	43,764	43,992	228	1%	0
Long Term Care and End of Life	10,366	10,287	(79)	-1%	61,801	61,781	(20)	0%	0
Prescribing	15,902	16,153	252	2%	98,904	98,878	(26)	0%	0
Other Commissioning	310	274	(36)	-12%	1,860	1,860	0	0%	0
	39,923	40,074	151	0%	242,637	242,792	155	0%	0
Primary Care									
Primary Care Co-commissioning	11,828	11,828	0	0%	70,970	70,970	0	0%	0
Locally Commissioned Services	1,888	1,888	0	0%	11,326	11,326	0	0%	0
	13,715	13,715	0	0%	82,295	82,295	0	0%	0
Reserves									
Reserves	517	0	(517)	-100%	16,771	14,254	(2,516)	-15%	(2,500)
TOTAL EXPENDITURE - PROGRAMME COSTS	133,606	133,294	(312)	0%	819,025	816,665	(2,360)	0%	(2,500)
(UNDER/OVER SPEND - Programme Costs)	0	(312)	(312)		0	(2,360)	(2,360)		(2,500)
RUNNING COSTS ALLOWANCE									
Running Cost Funding	2,087	2,087	0	0%	12,654	12,654	0	0%	0
Total Running Cost Expenditure	2,087	1,751	(337)	-16%	12,654	11,515	(1,139)	-9%	(1,000)
(UNDER/OVER SPEND - Running Costs)	0	(337)	(337)		0	(1,139)	(1,139)		(1,000)
TOTAL									
Revenue Resource Limit	135,693	135,693	0	0%	831,679	831,679	0	0%	0
Expenditure	135,693	135,044	(649)	0%	831,679	828,179	(3,500)	0%	(3,500)
TOTAL (A)	0	(648)	(649)		0	(3,500)	(3,500)		(3,500)

RESOURCE LIMIT ALLOCATIONS	Revenue			Maximum Cash Drawdown incl Capital		
	Recurrent	Non Rec	Total	Confirmed	Anticipated	Total
	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s
Programme Costs						
Initial CCG Programme Allocation	737,037		737,037	826,824		826,824
Primary Care Co-Commissioning	74,747		74,747			
2015/16 recurrent transfers post allocation setting (mth07)	(249)		(249)			
Brought Forward surplus/(deficit)		7,490	7,490			
Month 2 Programme Costs Resource Limit	811,535	7,490	819,025	826,824	0	826,824
Running Costs						
Initial Running Costs allocation	12,654		12,654			
Month 2 Running Cost Resource Limit	12,654	0	12,654			
CLOSING LIMITS (B)	824,189	7,490	831,679	826,824	0	826,824

Memo Table: NHS England Presentation of CCGs financial position

In-year allocation:		
16/17 Core Allocation	831,679	C
Allocation of prior years surplus for drawdown	-7,490	D
Total share of NHSE mandate for 2016/17	824,189	E=C+D
Expenditure:		
Forecast Expenditure (Programme Spend plus Running Costs)	828,179	A
Forecast under/(over)-spend against in year allocation	-3,990	E-A
In-year performance:		
Performance against 16/17 core allocation	3,500	F=C-A
Made up of:		
Planned use of prior year surpluses (agreed drawdown)	-7,490	D
Other in year under/(over)-spend against resource limit	-3,990	G=D+F
Memorandum: cumulative (historic) surplus/(deficit)		
Total share of NHSE mandate for 2016/17	824,189	E
Return of remaining prior year surplus/(deficit)	7,490	H
Total allocation plus historic surplus/(deficit) (equals closing limits per table above)	831,679	B (or E+H)
Forecast Surplus / (deficit) against total allocation	3,500	I=B-A
Target additional surplus/(deficit) required to meet business rules	-3,990	I-H

NHS Sheffield Clinical Commissioning Group
Finance Report 2016/17 - Financial Position for Period Ending 31 May 2016

	Year to Date: May				Forecast Out-turn				Forecast Variance @ Month 2 £'000s
	Budget	Expenditure	Variance		Budget	Forecast	Variance		
	£'000s	£'000s	£'000s	%	£'000s	£'000s	£'000s	%	
PROGRAMME COSTS									
Revenue Resource Limit	133,605	133,605	0	0%	819,025	819,025	0	0%	0
EXPENDITURE									
Acute Hospital Care									
Planned Care									
Sheffield Teaching Hospitals NHS FT	22,966	22,776	(190)	-1%	141,796	141,796	0	0%	0
Sheffield Children's NHS FT	2,106	2,178	73	3%	12,634	12,634	0	0%	0
Other NHS Trusts	528	530	3	0%	3,165	3,165	0	0%	0
ISTC & Extended Choice	516	538	21	4%	3,098	3,098	0	0%	0
Planned Care	26,115	26,022	(93)	0%	160,692	160,693	0	0%	0
Urgent Care									
Sheffield Teaching Hospitals NHS FT	20,743	20,602	(141)	-1%	120,454	120,454	0	0%	0
Sheffield Children's NHS FT	1,859	2,024	165	9%	11,153	11,153	0	0%	0
Other NHS Trusts	987	992	5	0%	5,920	5,920	0	0%	0
Urgent Care	23,588	23,617	29	0%	137,527	137,527	0	0%	0
Other Acute Care / Ambulance Services									
Sheffield Teaching Hospitals NHS FT	11,047	11,076	29	0%	66,284	66,284	0	0%	0
Sheffield Children's NHS FT	321	315	(6)	-2%	2,675	2,675	0	0%	0
Other NHS Trusts	297	298	1	0%	1,782	1,782	0	0%	0
ISTC & Extended Choice	17	17	1	4%	99	99	0	0%	0
Ambulance Services	3,869	3,892	23	1%	22,962	22,962	0	0%	0
Other Acute Services	756	802	46	6%	4,661	4,661	0	0%	0
Other Acute Care	16,307	16,401	94	1%	98,463	98,463	0	0%	0
Mental Health & Learning Disabilities									
Sheffield Health and Social Care NHS FT	12,236	12,236	0	0%	73,416	73,416	0	0%	0
Sheffield Children's NHS FT	601	603	3	0%	3,604	3,604	0	0%	0
Local Authority	467	467	(0)	0%	2,803	2,803	0	0%	0
Other Mental Health Services	136	158	22	16%	817	817	0	0%	0
Mental Health & Learning Disabilities	13,440	13,464	24	0%	80,640	80,640	0	0%	0
Community Services									
Planned Care									
Sheffield Teaching Hospitals NHS FT	1,442	1,442	0	0%	8,651	8,651	0	0%	0
Sheffield Children's NHS FT	761	761	0	0%	4,567	4,567	0	0%	0
Local Authority	2,298	2,292	(5)	0%	13,786	13,786	0	0%	0
Development Nurses	79	55	(24)	-31%	474	446	(28)	-6%	0
Other Community Services	190	190	0	0%	1,138	1,138	0	0%	0
Planned Community Care	4,769	4,740	(30)	-1%	28,616	28,589	(28)	0%	0
Urgent Care									
Primary Care Access Centre	462	462	0	0%	2,774	2,774	0	0%	0
111	197	197	0	0%	1,179	1,179	0	0%	0
Out of Hours	623	623	0	0%	3,738	3,738	0	0%	0
Urgent Community Care	1,282	1,282	0	0%	7,691	7,691	0	0%	0
Intermediate Care & Reablement									
Sheffield Teaching Hospitals NHS FT	6,670	6,670	0	0%	40,022	40,022	0	0%	0
Local Authority	303	309	6	2%	1,817	1,817	0	0%	0
Community Equipment	321	359	38	12%	1,925	2,153	228	12%	0
Intermediate Care	7,294	7,338	44	1%	43,764	43,992	228	1%	0
Long Term Care and End of Life									
Continuing Care	7,974	7,916	(58)	-1%	47,343	47,343	0	0%	0
Contribution to National Risk Pool - CHC retrospective claims	171	171	0	0%	1,028	1,028	0	0%	0
Continuing Healthcare Assessments	421	397	(24)	-6%	2,628	2,608	(20)	-1%	0
Continuing Care - IFRs	13	9	(5)	-35%	81	81	1	1%	0
Funded Nursing Care	1,052	1,039	(13)	-1%	6,313	6,313	0	0%	0
St Lukes Hospice	383	383	0	0%	2,296	2,296	0	0%	0
Sheffield Teaching Hospitals NHS FT	352	372	20	6%	2,112	2,112	(0)	0%	0
Long Term Care	10,366	10,287	(79)	-1%	61,801	61,781	(20)	0%	0
GP Prescribing									
Prescribing	15,692	15,963	271	2%	97,517	97,517	0	0%	0
Medicines Management Team	209	190	(19)	-9%	1,387	1,361	(26)	-2%	0
Prescribing	15,902	16,153	252	2%	98,904	98,878	(26)	0%	0
Other Commissioning	310	274	(36)	-12%	1,860	1,860	0	0%	0
Other Commissioning	310	274	(36)	-12%	1,860	1,860	0	0%	0
Primary Care									
Co-Commissioning									
Core Contract	7,999	7,999	0	0%	47,993	47,993	0	0%	0
Premises	1,711	1,711	0	0%	10,269	10,269	0	0%	0
QoF	1,239	1,239	0	0%	7,433	7,433	0	0%	0
Enhanced Services	527	527	0	0%	3,166	3,166	0	0%	0
Primary Care Other	351	351	0	0%	2,109	2,109	0	0%	0
Locally Commissioned Services	1,888	1,888	0	0%	11,326	11,326	0	0%	0
Primary Care	13,715	13,715	0	0%	82,295	82,295	0	0%	0
Reserves									
Commissioning Reserves	100	0	(100)	-100%	1,900	1,900	0	0%	0
General Contingency Reserve	0	0	0	0%	3,845	3,829	(16)	0%	0
Primary Care	0	0	0	0%	411	411	0	0%	0
1.0% Non Recurrent Reserve	0	0	0	0%	8,114	8,114	0	0%	0
Planned Surplus	417	0	(417)	-100%	2,500	0	(2,500)	-100%	(2,500)
Reserves	517	0	(517)	-100%	16,771	14,254	(2,516)	-15%	(2,500)
TOTAL EXPENDITURE - PROGRAMME COSTS	133,606	133,294	(311)	0%	819,025	816,665	(2,361)	0%	(2,500)
(UNDER)/OVER SPEND - Programme Costs	0	(311)	(311)		0	(2,361)	(2,361)		(2,500)

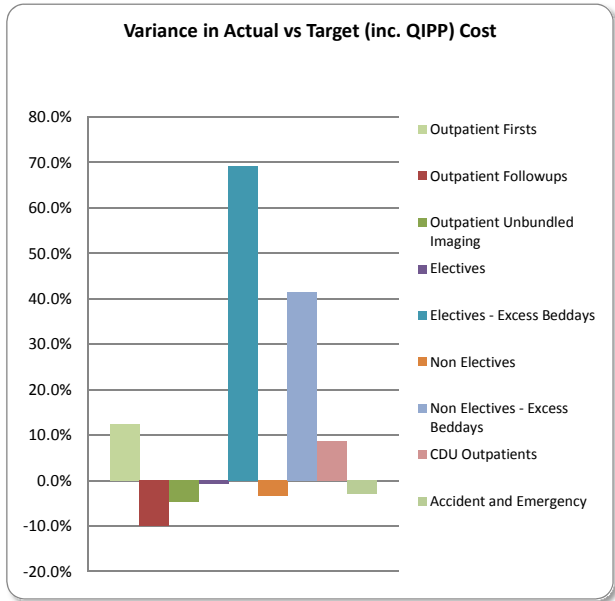
NHS Sheffield Clinical Commissioning Group
Finance Report 2016/17 - Financial Position for Period Ending 31 May 2016

Main Provider Contracts

	Year to Date: May				Year End Forecast Out-turn			
	Budget	Expenditure	Variance		Budget	Forecast	Variance	
	£'000	£'000	Over (+)/ Under(-)	%	£'000	£'000	Over (+)/ Under(-)	%
EXPENDITURE								
Sheffield Teaching Hospitals NHS FT								
Planned Care - STH	22,966	22,776	(190)	-0.8%	141,796	141,796	0	0.0%
Urgent Care - STH	20,743	20,602	(141)	-0.7%	120,454	120,454	0	0.0%
Community Care - STH	1,442	1,442	0	0.0%	8,651	8,651	0	0.0%
Other Acute - STH	6,924	6,997	73	1.1%	41,545	41,545	0	0.0%
High Cost Drugs - STH	2,056	2,056	0	0.0%	12,335	12,335	0	0.0%
Maternity Services	2,067	2,023	(44)	-2.2%	12,404	12,404	0	0.0%
Primary Care - Out of Hours	623	623	0	0.0%	3,738	3,738	0	0.0%
Intermediate Care & Reablement	6,670	6,670	0	0.0%	40,022	40,022	0	0.0%
End of Life Care	352	372	20	5.7%	2,112	2,112	(0)	0.0%
<i>Sub Total</i>	63,843	63,562	(282)	-0.4%	383,057	383,057	0	0.0%
Sheffield Children's NHS FT								
Planned Care - SCH	2,106	2,178	73	3.5%	12,634	12,634	0	0.0%
Urgent Care - SCH	1,859	2,024	165	8.9%	11,153	11,153	0	0.0%
Community Care - SCH	702	702	0	0.0%	4,214	4,214	0	0.0%
Mental Health Services - SCH	601	603	3	0.4%	3,604	3,604	0	0.0%
Other Acute - SCH	180	203	23	13.0%	1,827	1,827	0	0.0%
High Cost Drugs - SCH	141	112	(30)	-20.9%	848	848	0	0.0%
Safeguarding	59	59	0	0.0%	353	353	0	0.0%
<i>Sub Total</i>	5,647	5,881	234	4.1%	34,633	34,633	0	0.0%
Sheffield Health and Social Care NHS FT								
Mental Health & Learning Disabilities	12,236	12,236	0	0.0%	73,416	73,416	0	0.0%
<i>Sub Total</i>	12,236	12,236	0	0.0%	73,416	73,416	0	0.0%
	81,726	81,679	(48)	-0.1%	491,106	491,107	1	0.0%

Sheffield CCG Commissioned Activity and Costs - May 2016

Sheffield Teaching Hospitals NHS FT



Point of Delivery	Year to Date Activity Plan	Year to Date Actual Activity	Variance	
			Activity	%
Outpatient Firsts	0	0	0	#DIV/0!
Outpatient Followups	0	0	0	#DIV/0!
Outpatient Unbundled Imaging				
Electives	0	0	0	#DIV/0!
Electives - Excess Beddays				
Non Electives	0	0	0	#DIV/0!
Non Electives - Excess Beddays				
CDU Outpatients	0	0	0	#DIV/0!
Accident and Emergency	0	0	0	#DIV/0!
Total				

Year to Date Budget	Actual Expenditure	Variance	
		£'000s	%
£'000s	£'000s	£'000s	%
2,751	3,095	343	12.5%
4,332	3,896	-436	-10.1%
600	571	-29	-4.8%
15,202	15,078	-124	-0.8%
81	137	56	69.1%
16,743	16,172	-571	-3.4%
1,157	1,638	481	41.6%
268	291	23	8.6%
2,546	2,472	-75	-2.9%
43,680	43,349	-331	-0.8%

Note - This appendix currently reflects the total position at STHFT (including activity and original funding which now falls within the MSK Outcomes contract) and as such does not show the same position as the other appendices in the Governing Body report.

NHS Sheffield Clinical Commissioning Group
Finance Report 2016/17 - Financial Position for Period Ending 31 May 2016

Memorandum: Section 75 - Better Care Fund

Theme	Year to Date: May				Year End Forecast Out-turn				Forecast Variance @ Month 2 £'000s
	Budget	Expenditure	Variance Over (+)/ Under(-)		Budget	Forecast	Variance Over (+)/ Under(-)		
	£'000s	£'000s	£'000s	%	£'000s	£'000s	£'000s	%	
Citywide Position									
People Keeping Well in their local community	1,598	1,486	(112)	-7.0%	8,137	7,978	(159)	-2.0%	0
Active Support & Recovery	8,328	8,681	353	4.2%	50,049	50,146	97	0.2%	0
Independent Living Solutions	647	782	135	20.9%	3,879	4,191	311	8.0%	0
Ongoing Care	25,544	25,964	420	1.6%	151,931	158,133	6,202	4.1%	0
Emergency Medical Admissions - STH	9,566	9,566	(0)	0.0%	57,398	57,397	(0)	0.0%	0
Capital Grants	585	164	(421)	-72.0%	5,015	5,015	0	0.0%	0
TOTAL EXPENDITURE	46,267	46,644	376	0.8%	276,409	282,860	6,452	2.3%	0
NHS Sheffield CCG									
People Keeping Well in their local community	315	305	(10)	-3.2%	1,892	1,892	(0)	0.0%	0
Active Support & Recovery	7,182	7,187	6	0.1%	43,090	43,089	(1)	0.0%	0
Independent Living Solutions	321	359	38	11.8%	1,925	2,153	228	11.8%	0
Ongoing Care	11,097	11,061	(35)	-0.3%	66,079	66,080	1	0.0%	0
Emergency Medical Admissions - STH	9,566	9,566	(0)	0.0%	57,398	57,397	(0)	0.0%	0
Capital Grants	0	0	0	0.0%	0	0	0	0.0%	0
CCG Total	28,481	28,479	(2)	-0.01%	170,383	170,611	228	0.1%	0
Sheffield City Council (SCC)									
People Keeping Well in their local community	1,283	1,181	(102)	-7.9%	6,245	6,086	(159)	-2.5%	0
Active Support & Recovery	1,146	1,494	347	30.3%	6,959	7,057	98	1.4%	0
Independent Living Solutions	326	423	97	29.9%	1,954	2,038	84	4.3%	0
Ongoing Care	14,447	14,903	456	3.2%	85,853	92,053	6,201	7.2%	0
Emergency Medical Admissions - STH	0	0	0	0.0%	0	0	0	0.0%	0
Capital Grants	585	164	(421)	-72.0%	5,015	5,015	0	0.0%	0
SCC Total	17,787	18,165	378	2.1%	106,026	112,249	6,224	5.9%	0

Notes:

Key elements of each theme are summarised below:

People Keeping Well in their local community	Includes Care Planning, Health trainers/ Community Support Workers, Community Grants and 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
Emergency Medical Admissions - STH	Includes Adult Inpatient Medical Emergency Admissions (excluding gastroenterology)