

**Transformational Funding Quarterly Update**  
**Primary Care Commissioning Committee Meeting**

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**8 November 2018**

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<b>Purpose of Paper</b>	
To provide a quarterly update on progress and expenditure of the £1,539k available in 2018/19 as agreed at March 2018 PCCC and to provide a high level options paper for consultation for approval of the remaining funds.	
<b>Key Issues</b>	
<b>As discussed at March 2018 PCCC</b>	
<ul style="list-style-type: none"> <li>• Adequate resource in the CCG to manage the programme</li> <li>• Non-recurrent funding of some of the elements</li> </ul>	
<b>Is your report for Approval / Consideration / Noting</b>	
For noting	
<b>Recommendations / Action Required by the Primary Care Commissioning Committee</b>	
The Primary Care Commissioning Committee is asked to note the report	
<b>Governing Body Assurance Framework</b>	
<b><i>Which of the CCG's objectives does this paper support?</i></b>	
2. To improve the quality and equality of healthcare in Sheffield 4. To ensure there is a sustainable, affordable healthcare system in Sheffield.	
<b>Are there any Resource Implications (including Financial, Staffing etc)?</b>	
Yes. There is an urgent need to implement a programme / project management approach to ensure progress / manage risks and issues. The current primary care team does not have the capacity to do this at this time.	
<b>Have you carried out an Equality Impact Assessment and is it attached?</b>	
<b><i>Please attach if completed. Please explain if not, why not</i></b> No	
<b><i>Have you involved patients, carers and the public in the preparation of the report?</i></b>	
No	

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**1. Introduction / Background**

- 1.1. On 22<sup>nd</sup> March 2018, the Primary Care Commissioning Committee (PCCC) received a paper on the use of the CCG Transformational Support funding across Sheffield general practice.
- 1.2. PCCC was assured that it would “receive on a quarterly basis progress and expenditure updates as part of the financial reporting process”.
- 1.3. The following paper aims to provide the second quarterly update, showing what has been committed from the 18/19 budget in quarter two of 2018 (beginning of July to end of September 2018).

**2. Context**

The GP Forward View (GPFV) sets out the key funding and infrastructure elements which support GP practices to become resilient, sustainable and able to transform to meet new system challenges. The 17/18 Planning Guidance stated that CCGs should plan to spend a total of £3 per head of population over a two year period in support of the primary care resilience, sustainability and transformation agenda.

Sheffield CCG will have invested the £3 per head over the two year period 2017/18 and 2018/19. This equates to a total of £1,766,000. £227,000 was spent in 2017/18 and £1,539,000 is available to spend in 2018/19.

**3. Update**

3.1. The March paper outlined five key priority areas for investment in 2018/19:

- Workforce
- Estates
- Digital Technology
- Neighbourhood and At Scale Working
- Support to GPFV High Impact Changes and Wider Sustainability (this was ‘Training to Mitigate Commissioning Risk’ in March’s paper)

3.2. The following table shows the expenditure committed so far for 18/19 and progress during quarter two 2018/19

<b>Priority Area</b>	<b>Committed Q2 (£)</b>	<b>Progress Q2</b>
Workforce	<ul style="list-style-type: none"> <li>• £269,750 to support physician associates (PAs) in primary care</li> <li>• £3,360 to support primary care strategic workforce lead time</li> <li>• £4,534 on Practice Manager post graduate study</li> <li>• £150,000 GPN ready scheme</li> <li>£2,760 GPFV event</li> </ul>	Significant work has taken place in Q2 to progress workforce strategy and plan. Key areas where support has been committed are workforce (PAs and GPN ready nurses) and role based training
Estates	<ul style="list-style-type: none"> <li>• £25,500 for primary care strategic estates lead (Mike Speakman from Willowbeck Management and Technical Consultants)</li> </ul>	Implementation of the Primary Care Estates Strategy continues Plan for Estates and Technology Transformation Fund (ETTF) submitted to NHS England Work underway with finance team to develop a process for void space utilisation in order to reduce CCG funded void space
Digital /Technology		Work has progressed to expedite delivery of remaining hardware. GPIT programme progressing eg deployment of wifi, e-consultation, APEX / Insight
Neighbourhood and At Scale Working	For context -50p and £1 a head being deployed (not part of transformation funding) to promote MDT and neighbourhood working / develop neighbourhood maturity	Significant work has taken place to support neighbourhood maturity and at scale working.
Support to GP Forward View High Impact Changes and Wider Sustainability (Training to Mitigate Commissioning Risk)	<ul style="list-style-type: none"> <li>• £15,360 for quality improvement</li> <li>• £12,500 for clinical coding and data management</li> <li>• £10,000 for resilience</li> <li>• £60,000 for microsystems and primary care flow coaching</li> </ul>	
<b>Total Committed In Q2</b>	<b>£ 553,764</b>	
<b>Total Committed To Date in 18/19</b>	<b>£ 757,664</b>	

#### **4. Plan**

As you will see from the Transformational Funding Quarter 2 Update above there was £1,539,000 available to spend in 2018/19 on primary care transformation and resilience. To date, a total of £757,664 has already been committed leaving £781,336 still to be allocated.

Following consultation with localities / primary care a number of suggestions have been received to date. The CCGs primary care team have developed the following plan;

Of the £781,336 still to be allocated

- £600k should be made available to enable four neighbourhoods (one in each locality) who have developed robust plans in order to enable maturity of at-scale working / new models of care.
- £181,336 should be made available to support a number of smaller scale projects aimed at increasing efficiency and resilience in primary care

As part of our engagement with localities and primary care, a proposal has been put forward to support the management of hypertension to NICE guidance within primary care. A draft business case has been developed and has been discussed extensively at the Citywide Locality Group and has significant support within primary care. However, it is not suitable for non-recurrent transformation funding as the business case requires a financial commitment beyond the end of March 2019. The business case will therefore be incorporated into CCG planning discussions and will develop as an invest to save proposal in order to secure the more long term funding commitment it requires.

#### **5. Action for Primary Care Commissioning Committee / Recommendations**

The Primary Care Commissioning Committee is asked to note the update provided and agree the high level plan presented for the remaining funding.

Paper prepared by: Sarah Burt, Deputy Director - Delivery, Care Outside of Hospital and Linda McDermott, Finance Manager (Primary Care)

On behalf of: Nicki Doherty, Director - Delivery, Care Outside of Hospital

Date October 2018