

Agenda item:
Paper no:

Committee:	Governing Body	Date: 26/01/2018
Venue:	Surrey Downs CCG	
Title of Report	Finance report	
Status:	FOR DISCUSSION	

Presented by:	Karen McDowell, Chief Finance Officer	
Executive Lead:		
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Finance Lead Sign off	Name: Karen McDowell, CFO Date: 19/01/18	

Relevant Legislation and Source Documents		
Conflict of Interest	None identified	
	Conflict(s) noted:	
	Name(s):	Item No:
	Mitigating Action(s) N/A	
Governance and Reporting <i>(relevant committees/forums the paper has previously been presented to)</i>	Committee: Finance and Performance Date: 19/01/18 Outcome: No changes	
Freedom of Information The Author considers:	Open – no exemption applies	

Attachments:	M9 Finance report
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Executive Summary
 This report is to assure the Governing Body that the CCG is reporting its financial position accurately and making every effort to discharge its financial duties in line with statute and guidance.

Implications:

Health/CCG strategic objectives	P1) Deliver the Financial Recovery Plan and CCG control total, based largely on a successful transformational QIPP programme
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Financial/Resource	
Legal/compliance	
Equality Analysis	
Patient and Public Engagement	
Risk (including reputational) and rating	Identified on Governing Body Assurance Framework as significant (score of 20)

Recommendation(s):

<p>(1) Review the report (2) Discuss highlighted matters of concern and areas where further assurance is required.</p>

Next Steps:






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Date of paper	19/01/18
For further information contact	Dan Brown

FINANCE COMMITTEE AND GOVERNING BODY FINANCE REPORT (M9).

1. Overview of Month 9 Financial Position

- 1.1. The purpose of this paper is to update the Governing Body on the Month 9 financial position, risks and actions for Surrey Downs CCG.
- 1.2. The key financial performance indicators are shown below:

Key Performance Indicator	Plan	Actual Performance	Forecast year end Performance	RAG	Performance improving?	Key Messages
Delivery of £10.495m deficit against the CCG Total Revenue Resource Limit (RRL)	-£10.495m	-£14.794m	-£10.495m	Red		Year to date Month 9 (31st December 2017) the CCG reported a deficit of £14.8m against the planned deficit of £7.9m resulting in a £6.9m adverse variance. The forecast is held to plan (£10.495m). The red rating is driven by the YTD over-performance and the level of risk held outside of the forecast outturn position. There are two key risks reported at M9 related to uncontracted QIPP and a cute over-performance. Although the CCG has explored opportunities for QIPP it will not find sufficient schemes to meet the shortfall.
Remain within Cash Resource Limit (CRL)	1.25% of monthly drawdown	£0.546m	1.25% of monthly drawdown	Red		The CCG has missed its cash KPI in December 2017. The cash balance at the end of the month was £0.546m which is 2% of the monthly drawdown.
Better Payment Practice Policy (BPPC)	95% of valid invoices paid within 30 days (Volume)	98%	95%	Green		The CCG did achieve its BPPC KPI in December 2017 at 99% however the YTD volume % is 94%, slightly lower than the target. The YTD average is 98%
Service Transformation Programme						
Remain within Running Costs Allocation	£6.191m	£4.643m	£6.441m	Green		The plan figure included a QIPP target of £0.25m which may not be achieved due to procurement costs. The actual allocation of £6.441m will not be breached so the CCG will still stay within the nationally set target on running costs. The YTD position is currently on target.
Key Performance Indicator	Risk value	Mitigation	Net Risk	RAG	Performance improving?	Key Messages
Risk	-£8.31m	£1.902m	-£6.408m	Red		The CCG has reported net risk of -£6.4m outside of the year end forecast which will create additional pressure if they materialise. Detail of the risks are in Section 12.0

Surrey Downs is reporting a YTD overspend of £6.9m. This year to date position includes the impact of £4.9m of QIPP that was neither contracted nor identified at 31 March 2017. The £4.9m represents 9/12ths of the full value of unidentified QIPP for the year of £6.6m. The CCG continues to forecast to plan (deficit -£10.5m). The impact of the QIPP that will not be achieved is held in risks and mitigations (reported net risk position at M9 £6.4m). Note that the impact of 'No Cheaper Stock Obtainable' (NCSO) drugs of £1.4m is included in the forecast position.

2. Key Assumptions and Risks

£1.2m is included in the forecast in respect of St Georges IR costs which were not adjusted for as part of the IR allocation adjustment exercise (i.e. there is an adverse impact to the SD CCG position of £1.2m). The IR cost and allocation exercise at St Georges is being revisited by NHSE with a conclusion due in January 2018 (the expectation being that SD CCG will be given additional allocation to meet the additional cost: this is assumed in the CCG's net risk position).

Risks to the position reported include unidentified QIPP of £6.6m (see above) and further acute over performance of £1.1m. These risks are partially offset by mitigations of £1.9m which include expected IR benefit and acute challenges on SLAM data to give a net risk position of £6.4m.

Governing Body Finance Report – Month 9

1. Introduction

- 1.1. The report details the financial position for Surrey Downs CCG for 2017/18 at the end of Month 9 (31th December 2017).

2. Financial Performance to 31st December 2017

Month 9 Financial Position December 2017	Budget YTD	Actual YTD	Variance YTD	Annual Budget	Forecast Outturn	Variance
	£000	£000	£000	£000	£000	£000
General & Acute	158,358	166,124	7,766	213,276	215,590	2,314
Mental Health	21,012	21,608	596	28,016	27,735	(281)
Community	17,597	17,882	285	23,463	23,463	0
Continuing Healthcare	17,930	17,500	(430)	23,906	24,767	861
Prescribing & Primary Care	38,465	38,424	(41)	51,006	51,306	300
Primary Care Co-Commissioning	0	0	0	0	0	0
Running Costs	4,642	4,643	2	6,191	6,441	250
Better Care Fund	6,927	6,867	(60)	10,390	10,390	0
Other Contracting	7,207	7,079	(128)	8,478	8,478	(0)
New Investments & Reserves	5,553	5,530	(24)	10,752	9,129	(1,623)
Contingency	1,042	0	(1,042)	1,821	0	(1,821)
Planned deficit	(7,870)	(7,870)	0	(10,495)	(10,495)	0
Total	270,863	277,787	6,924	366,803	366,803	0

3. Acute Position

3.1. Overview

The year to date acute position at M9 is an overspend of £7.8m. This is driven primarily by uncontracted QIPP of £4.9m and over-performance within 'Tier 1' provider contracts as per the table below.

Provider	Annual Budget £'000	YTD Plan £'000	YTD Actual £'000	YTD Variance £'000	FOT £'000	FOT Variance against budget £'000	Move on last month £'000
ESH	94,722	70,401	70,401	0	94,722	0	→ 0
Kingston Hospital	26,143	19,787	20,722	935	28,124	1,981	↑ -101
Surrey and Sussex Healthcare Trust	16,449	12,407	12,735	327	16,901	452	↓ 310
St George's	9,011	6,828	8,267	1,439	11,039	2,028	↓ 237
South East Coast Ambulance	9,581	7,201	7,201	0	9,581	0	→ 0
SWLEOC	7,559	5,596	5,596	0	7,559	-0	→ 0
Royal Surrey	6,783	5,121	5,075	-46	6,786	3	↓ 85
Royal Marsden	4,972	3,728	4,249	522	5,920	949	↑ -53
Ashford and St Peters	5,539	4,184	4,455	271	5,818	279	↓ 93
Guy's and St Thomas'	2,539	1,928	2,382	454	3,127	588	→ 36
University College London	1,270	954	894	-59	1,167	-103	→ 38
Moorfields	935	707	822	115	1,112	178	→ 23
Royal Brompton & Harefield	962	711	650	-61	837	-125	→ 31
Queen Victoria	650	493	563	71	728	77	→ -13
Kings	596	447	476	29	608	11	→ 21
Chelsea and Westminster	623	473	500	28	675	52	→ -5
Queen Mary	185	142	200	58	257	72	→ 2
Imperial College	599	454	546	92	677	78	→ -2
Royal National Orthopaedic Hospital.	437	328	272	-55	318	-119	→ 7
Frimley Park	344	261	371	110	450	106	→ 12
Great Ormond Street	119	89	132	43	168	49	→ 21
Croydon Health Care	231	174	207	33	352	121	→ -3
Dorking Healthcare	6,693	5,044	4,356	-687	5,891	-802	↑ -65
Epsom Medical	5,925	4,487	4,846	360	6,568	643	↓ 177
Ramsay Ashtead Hospital	3,834	2,882	2,422	-460	3,272	-562	↓ 165
Total Tier 1 Providers	206,702	154,827	158,343	3,516	212,657	5,955	1,015
Non Contract Activity	3,802	2,851	3,110	259	4,200	398	→ 0
Tier 2 Providers	2,208	1,656	1,659	3	2,253	45	→ 0
Cytokine Modulators (Epsom St Helier)	2,646	1,967	2,047	80	2,767	121	→ 0
Urgent and Planned Care	1,214	910	959	49	1,214	0	→ 0
RSS and IFR	481	360	372	12	481	0	→ 0
Acute contingency	879	303	0	-303	0	-879	→ 0
Uncontracted QIPP	-6,621	-5,987	-1,022	4,966	-6,621	0	→ 0
Prior year benefits / other	0	0	-65	-65	-1,175	-1,175	↓ 92
Total Other	4,609	2,062	7,062	5,000	3,118	-1,490	92
Winter Resilience	1,772	1,470	719	-751	939	-833	→ 0
TOTAL ACUTE	213,083	158,358	166,124	7,766	216,714	3,632	1,107

3.2. Provider Detail

3.2.1. St Georges

The reported outturn at St George's is £8.3m at M9, which is £1.4m (21%) over the year to date budget of £6.8m and also 11.5% higher than the expenditure reported at M9 in 2016/17.

Of the year to date overspend at St George's, approximately £0.9m is due to IR cost pressure of £1.2m. Other over-performance at the trust is attributed to higher than planned non-elective and critical care activity.

At M9 the CCG has included the impact of the additional IR cost in both the actuals and forecast position. However, the increase in cost as a result of the additional IR activity is being challenged through the lead commissioner and the CCG anticipates a revised allocation to reflect the additional cost in 2017/18. Note that the allocation adjustment is assumed in the CCG's 'expected outturn' projection as per section 5.2 (valued at a benefit of £1m).

3.2.2. Kingston

The reported outturn at Kingston is £20.7m at M9, which is £0.9m (4.7%) over the year to date budget of £19.8m and also 3.6% higher than the expenditure reported at M9 in 2016/17.

Over performance at Kingston has been trust-wide with the main area of financial over-performance for Surrey Downs being within non-elective which is 20% over prior year performance. The Trust has opened a front-end CDU which potentially means that capacity is increased and patients who were not admitted previously are now being admitted. The CSU has issued KHT with an AQN ('Activity Query Notice') challenging the current level of activity and a response is awaited.

3.2.3 Royal Marsden

Year to date activity at Royal Marsden is above plan by £0.5m, with critical care and emergency driving over performance. There has also been an increase in the number of elective breast procedures performed on Surrey Downs patients at the trust which the CSU is investigating.

3.3.3 Guy's and St Thomas'

Year to date over performance at Guy's and St Thomas' of £0.5m is due to two long stay critical care patients.

The first patient has a year to date cost of £320k. However, as the patient registered with a Surrey Downs GP part way through the critical care spell, the CSU expect that approximately 40% of this cost will be transferred back to another CCG, where the patient was previously registered. The second critical care patient has a YTD cost of £122k (of which a ~£45k may fall under NHSE responsibility), this patient has now been discharged from Critical Care but is still in hospital as an inpatient.

The year to date position includes the full cost of both critical care patients and the adjustments above will be actioned once the patients are discharged and their hospital spells are fully coded.

4. Prescribing

Year to date shows an underspend of £0.4m against a year to date budget of £30.8m although the forecast position is to breakeven against the annual budget of £40.8m.

Prescribing is experiencing cost pressures for 'No cheaper stock obtainable' of -£1.4m and this is included in the forecast position. QIPP schemes are on target to deliver £1.3m.

5. Mental Health

The overall year to date position for Mental Health is an overspend of £0.6m linked mainly to Section 117 patients and non-contractual referrals. The forecast, taking in to account a number of one off budget mitigations which have not been included in the year to date position yet and a slower than expected start-up of BEN Pathway should deliver an underspend of £0.5m.

The block contracts with SABP account for £21.3m of the mental health budget of £28.0m. Mental Health collaborative budgets year to date position is slightly underspent and the forecast outturn is shown to budget of £1.95m.

IAPT budgets year to date are underspending by £0.05m and this has been included in the forecast as a potential underspend of £0.075m.

Mental Health non contractual activity has increased mainly due to a patient at St Georges MH Trust and the overspend is likely to be £0.1m against a budget of £0.23m.

6. Continuing Healthcare and Free Nursing Care

CHC expenditure is identified on a Surrey-wide basis and then split between each member of the collaborative on a 'risk share' basis.

The risk share calculation is done on a three year rolling average of actual underlying activity per CCG. As a result of the underlying activity for SD CCG being proportionately higher in 2016/17, SD CCG's risk share percentage has increased under the rolling average calculation, which will give rise to an increase in cost of ~ £0.9m when compared to budget.

7. Better Care Fund

The BCF Year to date position is a slight underspend on telehealth and MH work services. This is carried through to the forecast financial position and is shown in the M8 table below as an underspend of £0.16m.

BCF Summary Category	Annual Plan 17/18	Forecast at M8	Forecast at M8 Variance to Annual Plan	Move on last month
Care Act Revenue	647,000	647,000	0	→ 0
Carers	621,000	621,000	0	→ 0
Health Commissioned Services	4,723,556	4,724,000	444	→ 0
Continuing Investment in Health and Social Care - CCG managed Schemes	2,029,017	1,992,810	-36,207	↗ -6
Continuing Investment in Health and Social Care - SCC	2,559,115	2,432,731	-126,384	↗ -109,056
Protection of Adult Social Care	6,195,000	6,195,000	0	→ 0
BCF Plan Submission Total	16,774,688	16,612,541	-162,147	
Disabled Facilities Grant	2,071,938	2,071,936	-2	↗ -2
Improved BCF and Spring Funding	1,869,286	1,869,284	-2	↗ -2
Carry Forward and Adjustments	0	0	0	→ 0
Grand Total	20,715,912	20,553,761	-162,151	

8. Running Costs

The CCG is expected to balance back to the allocated budget of £6.4m by year end and will continue to work towards the original QIPP targets of £0.25m for this area of spend.

9. Quality Innovation Productivity and Performance (QIPP)

9.1 QIPP 2017/18

The CCG QIPP budget for 2017/18 is £18.2m which represents 5% of the CCG's Revenue Resource Allocation (RRA). Of the £18.2m, the CCG is reporting £11.8m as being identified. At M9, the CCG reported QIPP delivery of £7.3m against a plan of £12.2m (£4.9m adverse variance).

The year to date variance is mainly due to unidentified QIPP (-£3.4m) and transformational acute schemes tracking behind plan, particularly within Urgent Care and Integration. The reported QIPP is based on finance and activity data for M8 extrapolated to M9 with activity QIPP calculated on a performance versus baseline basis.

The QIPP delivery summary produced by the CCG's Programme Management Office (PMO) currently tracks the progress of the schemes making up the identified QIPP of £11.8m. The projects are measured and tracked as part of the CCG's PMO assurance process. There are 37 schemes currently listed on the tracker, of which 12 are assessed as red, 8 as amber and 17 as green in terms of progress against M9 milestone and savings delivery.

Month 9 QIPP	Year to Date			Full Year		
	Plan	Actual	Var	Plan	FOT	Var
	£m	£m	£m	£m	£m	£m
Transactional						
Acute	0.3	0.3	0.0	0.4	0.4	0.0
CHC	1.0	0.6	-0.3	1.1	1.1	0.0
Other	1.1	1.6	0.5	1.7	1.7	0.0
Subtotal	2.4	2.6	0.2	3.1	3.2	0.0
Transformational						
Acute	6.4	4.7	-1.8	8.7	8.7	0.0
Other	0.0	0.0	0.0	0.0	0.0	0.0
Subtotal	6.4	4.7	-1.8	8.7	8.7	0.0
TOTAL Identified QIPP	8.8	7.3	-1.6	11.8	11.8	0.0
Undefined QIPP	3.4	0.0	-3.4	6.4	0.0	-6.4
TOTAL QIPP	12.2	7.3	-5.0	18.2	11.8	-6.4

9.2 QIPP Gap to £18.2m target and 18/19 Planning

Whilst the CCG continues to explore opportunities to minimise the gap to its £18.2m QIPP target for 2017-18, sufficient additional QIPP will not be identified to fully bridge the shortfall. The CCG is forecasting that it will achieve the identified QIPP of £11.8m although there is a level of risk associated with the forecast (+/-£1m).

To date, 75 schemes have been identified; from these, 33 Project Outline Documents (PODs) have been presented to Clinical Cabinet for review and feedback. These are expected to be worked up into Investment Mandate/ Decision Briefs. Of the remaining 42 schemes:

- 17 schemes were excluded for various reasons (not feasible or duplicate)
- Remaining 25 schemes are being reviewed

As planned by the Programme Delivery Board in December a 'QIPP – Exploring System Potential' workshop was held on 11 January. Outputs from this are in the process of being curated into a single document and emerging themes and potential ideas will be considered post analysis.

10. Risks and Mitigation

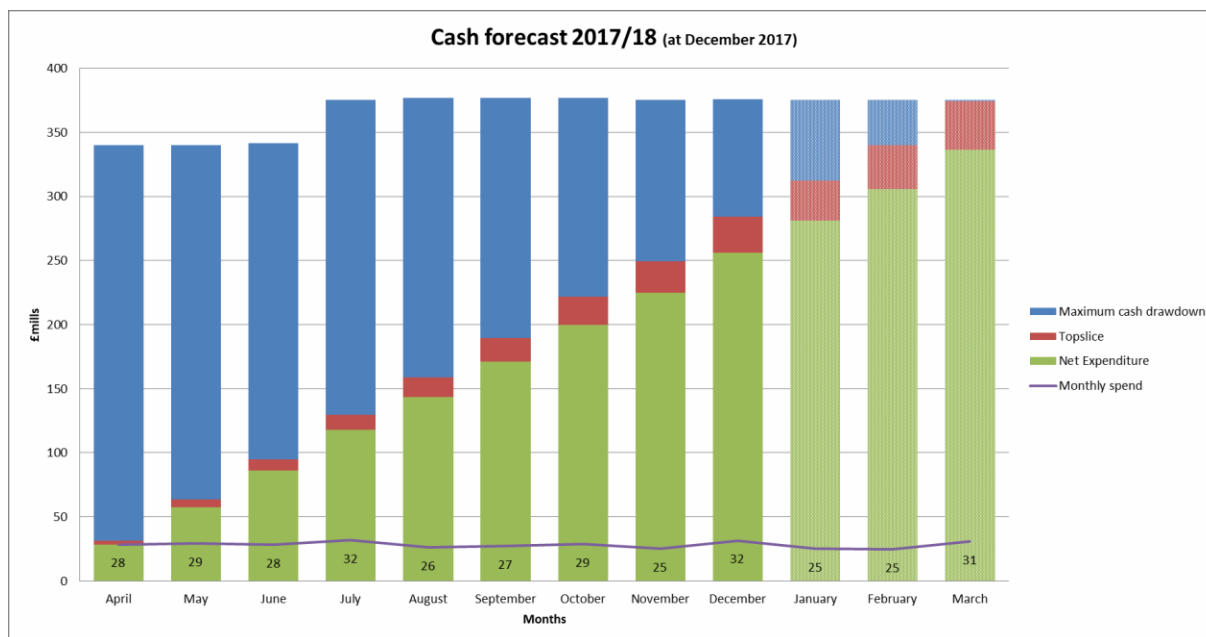
Risks to the position reported include unidentified QIPP of £6.6m, further acute over performance of £1.2m and additional contractual pressures of £0.5m. These risks are partially offset by mitigations of £1.9m which include expected IR benefit, one off budgetary mitigations and acute challenges on SLAM data to give a net risk position of £6.4m.

Area	Headline detail	Risks (£m)
Risks		
QIPP	Unidentified QIPP	-6.60
ESH	ESH one off stroke funding	-0.50
Acute SLA	Risk of further acute overperformance	-1.20
Subtotal: RISKS		-8.30
Mitigations		
Mitigations	Non-recurrent measures	0.50
Mitigations	Quality Premium	0.40
Mitigations	St Georges IR	1.00
Subtotal: Mitigations		1.90
Net Risk		-6.40

11. Cash / Debtors Position

11.1 Cash

The CCG had a maximum cash drawdown (MCD) at M9 of £375.6m. The cumulative deficit of £33.8m (£37.3m - £3.5m) was added to the MCD from July. At M9 the CCG has drawn down £284.8m (76%) of its MCD for 2017/18, leaving a balance of £90.8m. This drawdown of cash is slightly more than 9/12ths of the total cash available to the CCG and is due to payment of over-performance invoices relating to prior year. The CCGs spend profile, based on forecast, will reduce in the remaining months thus enabling the CCG to work within the MCD target.



Note the top slice shown in the cash forecast above relates to GP prescribing costs and home oxygen.

11.2 Debtors

Debtors (£000s)	1-30 days	31-60 days	61-120 days	121 -360 days	361+ days	Total
NHS Trusts	19	42	-	-	-	61
Others	114	0	-	65	8	187
Other CCG	421	46	-	75	153	695
SCC	-	7	58	-	15	166
Grand Total	547	145	-	155	262	1,110

Of the total debt due, £0.6m is overdue (i.e. over 30 days) compared to an overdue debt of £0.4m at M12 in 2016/17. Note that the outstanding £101k debt with SCC over one year old is fully provided for at 31.03.17. The CCG debts over 4 months old relate to on-going disputes over recharges for hospices where resolution is still actively being sought.

12. Conclusion

Whilst the current forecast is held to plan, the CCG is highly unlikely to deliver its plan deficit of -£10.5m given the £6.6m unidentified QIPP gap which was never projected to be bridged. The CCG continues to seek to minimise the gap to plan and to optimise its 2017/18 financial outturn.

Appendices

- A Month 9 Financial Summary**
- B Month 9 Budget Movements**
- C Surrey Downs CCG Activity and Finance Analysis**

APPENDIX A

Surrey Downs CCG

Board Summary Expenditure Summary for M9 December 2017	Current Annual Budget	M9 YTD			M9 Forecast Outturn		Prior Month YTD (M8)		Prior Month Forecast Outturn (M8)	
		YTD Budget M9	YTD Actual M9	YTD Over/(Under spend) M9	M9 Forecast Outturn	Forecast Over/(Under spend)	Over / (Underspend)	Movement (M8-M9)	Over / (Underspend)	FOT Movement (M8-M9)
General and Acute Commissioning										
Epsom/St Helier NHST	102,282	75,997	76,092	95	102,281	(1)	95	-	-	1
Kingston Hospital FT	26,143	19,787	20,763	976	28,124	1,981	869	107	2,082	101
Surrey/Sussex HC NHST	16,449	12,407	12,756	349	16,901	452	98	251	142	(310)
St Georges FT	9,196	6,970	8,312	1,341	11,224	2,028	946	396	1,790	(238)
Royal Surrey County	6,783	5,121	5,037	(84)	6,786	3	(142)	58	(82)	(85)
Ashford/St Peters	5,539	4,184	4,455	271	5,818	279	223	48	185	(94)
Royal Marsden	4,972	3,728	4,310	582	5,920	948	546	36	1,002	54
Other Acute NHS	9,306	7,019	7,765	746	9,119	(187)	628	118	818	1,005
South East Coast Ambulance	9,581	7,201	7,340	139	9,581	(0)	(452)	590	(0)	-
Acute Tier 2	16,452	12,413	11,406	(1,006)	15,731	(721)	(1,078)	72	(998)	(277)
Acute Non-NHS (Private Providers)	2,208	1,656	1,656	(1)	2,253	45	75	(75)	46	2
Headroom	879	303	-	(303)	-	(879)	(305)	2	(879)	-
High Cost Drugs	2,646	1,967	2,047	80	2,766	120	80	-	120	-
NCA/Cost per case	3,802	2,851	3,154	302	4,200	398	267	36	398	-
Winter Resilience	1,965	1,470	719	(751)	1,132	(833)	(667)	(84)	(833)	-
Unidentified QIPP	(6,621)	(5,987)	(1,022)	4,966	(6,621)	0	4,400	566	0	-
RSS/IFR/Service Re-design	1,694	1,271	1,335	64	1,694	(0)	41	23	(157)	(157)
General and Acute Commissioning Total	213,276	158,358	166,124	7,766	216,909	3,633	5,624	2,142	3,634	1
Mental Health										
Mental Health	28,016	21,012	21,608	596	27,546	(470)	579	17	(470)	-
Mental Health Total	28,016	21,012	21,608	596	27,546	(470)	579	17	(470)	-
Community Services Commissioning										
Central Surrey Health	21,135	15,852	15,755	(96)	21,135	-	195	(291)	-	-
Other Community Services	1,145	858	1,389	530	1,234	90	(44)	575	90	-
Voluntary Sector Contracts	1,183	887	738	(149)	1,183	(0)	54	(204)	(0)	-
Community Services Commissioning Total	23,463	17,597	17,882	285	23,553	90	205	80	90	-
Continuing Healthcare										
Adult Continuing Healthcare and FNC	21,397	16,047	16,097	50	22,158	761	(70)	120	760	(1)
CHC Hosted Service	1,055	791	645	(146)	1,055	-	160	(306)	-	-
Childrens Continuing Healthcare	1,455	1,091	757	(334)	1,455	(0)	(111)	(223)	(0)	-
Continuing Healthcare Total	23,906	17,930	17,500	(430)	24,667	761	(21)	(409)	760	(1)
Prescribing and Primary Care										
Practice Prescribing	40,768	30,787	30,432	(355)	40,768	-	(188)	(167)	-	-
Primary Care Other	8,413	6,309	6,396	87	8,118	(295)	(85)	172	(295)	-
GPV	1,202	901	902	0	1,202	-	(0)	0	-	-
Other Prescribing Costs	623	468	694	226	573	(50)	191	36	(50)	-
Prescribing and Primary Care Total	51,006	38,465	38,424	(41)	50,661	(345)	(82)	41	(345)	-
Running Costs										
Running Costs	6,191	4,642	4,643	2	6,441	250	327	(325)	250	-
Running Costs Total	6,191	4,642	4,643	2	6,441	250	327	(325)	250	-
Other Contracts										
Better Care Fund	10,390	7,792	7,777	(16)	10,390	0	(60)	44	0	-
NHS Property Services	4,451	3,338	3,299	(39)	4,451	-	0	(39)	-	-
Other Contracting	4,027	3,003	2,869	(134)	3,852	(175)	(114)	(19)	(175)	-
Other Contracts Total	18,868	14,134	13,945	(188)	18,693	(175)	(174)	(14)	(175)	-
New Investments, Reserves & Contingency										
Investments	8,967	5,404	5,530	126	7,044	(1,923)	(155)	280	(1,923)	-
Contingency	1,821	1,191	-	(1,191)	-	(1,821)	(1,042)	(149)	(1,821)	-
Non Recurrent Reserve	1,785	-	-	-	1,785	-	-	-	-	-
New Investments, Reserves & Contingency Total	12,573	6,595	5,530	(1,066)	8,829	(3,744)	(1,197)	131	(3,744)	-
Planned deficit										
Planned deficit	(10,495)	(7,870)	-	7,870	-	10,495	6,995	874	10,495	-
Planned deficit Total	(10,495)	(7,870)	-	7,870	-	10,495	6,995	874	10,495	-
Grand Total	366,803	270,863	285,657	14,794	377,298	10,495	12,257	2,537	10,495	-

Surrey Downs CCG

Summary of Month 9 Budget Changes	Month 8 Annual Budget	M8-M9 Movement	Current Annual Budget	Narrative of Changes
General and Acute Commissioning				
Epsom/St Helier NHST	102,282	0	102,282	
Kingston Hospital FT	26,143	0	26,143	
Surrey/Sussex HC NHST	16,449	0	16,449	
St Georges FT	9,196	0	9,196	
Royal Surrey County	6,783	0	6,783	
Ashford/St Peters	5,539	0	5,539	
Royal Marsden	4,972	0	4,972	
Other Acute NHS	9,306	0	9,306	
South East Coast Ambulance	9,581	0	9,581	
Acute Tier 2	16,452	0	16,452	
Acute Non-NHS (Private Providers)	2,208	0	2,208	
Headroom	879	0	879	
High Cost Drugs	2,646	0	2,646	
NCA/Cost per case	3,802	0	3,802	
Winter Resilience	1,772	193	1,965	Winter Resilience Additional allocation
Unidentified QIPP	(6,621)	0	(6,621)	
RSS/IFR/Service Re-design	1,694	0	1,694	
General and Acute Commissioning Total	213,083	193	213,276	
Mental Health				
Mental Health	28,016	0	28,016	
Mental Health Total	28,016	0	28,016	
Community Services Commissioning				
Central Surrey Health	21,135	0	21,135	
Other Community Services	1,145	0	1,145	
Voluntary Sector Contracts	1,183	0	1,183	
Community Services Commissioning Total	23,463	0	23,463	
Continuing Healthcare				
Adult Continuing Healthcare and FNC	21,397	0	21,397	
CHC Hosted Service	1,055	0	1,055	
Childrens Continuing Healthcare	1,455	0	1,455	
Continuing Healthcare Total	23,906	0	23,906	
Prescribing and Primary Care				
Practice Prescribing	40,768	0	40,768	
Primary Care Other	8,414	(1)	8,413	GP IT adjusted allocation
GPFV	1,202	0	1,202	
Other Prescribing Costs	623	0	623	
Prescribing and Primary Care Total	51,007	(1)	51,006	
Running Costs				
Running Costs	6,191	0	6,191	
Running Costs Total	6,191	0	6,191	
Other Contracts				
Better Care Fund	10,390	0	10,390	
NHS Property Services	4,451	0	4,451	
Other Contracting	3,642	385	4,027	Quality Premium
Other Contracts Total	18,483	385	18,868	
New Investments, Reserves & Contingency				
Investments	8,967	0	8,967	
Contingency	1,821	0	1,821	
Non Recurrent Reserve	1,785	0	1,785	
New Investments, Reserves & Contingency Total	12,573	0	12,573	
Planned deficit				
Planned deficit	(10,495)	0	(10,495)	
Planned deficit Total	(10,495)	0	(10,495)	
Grand Total	366,226	577	366,803	

