

Bromley Borough Based Board

2nd September 2021

Month 4 Finance Report

1. Financial Position

- The table below sets out the CCG's financial position for the year to Month 4.

Headline Financial Performance										
	Bexley	Bromley	Greenwich	Lambeth	Lewisham	Southwark	South East London	Total SEL CCGs (Non Covid)	Covid-19	Total SEL CCGs
	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s
Year to Date Expenditure Position										
YTD Total Budget	39,321	69,063	52,142	57,530	45,978	45,441	1,015,744	1,325,218	10,382	1,335,600
YTD Total Expenditure	39,378	68,934	52,081	57,513	45,951	45,287	1,016,823	1,325,967	15,612	1,341,579
YTD In Year Total Surplus/ (Deficit)	(57)	129	61	16	26	154	(1,079)	(749)	(5,230)	(5,979)
YTD Expected Retrospective Allocation										5,979
YTD In Year Revised Surplus/ (Deficit)										-
YTD Planned In Year Surplus										-
YTD Variance against planned in year Surplus/ Control Total										-
YTD Variance against planned in year Surplus/ Control Total %										0.0%
Previous Month YTD Variance before adjustment	-	-	-	-	-	-	-	-	-	-

- At Month 4 the CCG is reporting overspends of £0.75m against its Business as Usual (BAU) budgets, and £5.23m against its Covid Budgets. Therefore an overspend of £5.98m overall.
- The BAU position represents expenditure of £0.75m on activity incurred with the independent sector in the delivery of the ERF. The Covid-19 position is represented by expenditure of £4.3m on Hospital Discharge Programme (HDP)2 and HDP3, £0.2m relating the Covid-19 vaccination programme, and £0.7m of costs associated with the Vaccination Sprint. In line with the guidance from NHSEI, once these costs/activity have been validated, the CCG is expecting to receive top-up allocations for this expenditure. **Therefore our forecast for the H1 period is a break-even financial position.**
- At a borough level, the Bexley budget is now showing a slight overspend, with the wider movement in the prescribing position reducing the available mitigations to offset mental health cost per case pressures. Bexley are continuing to identify mitigations to this position, however given the nature of some of the costs, a wider solution may be required to address the cost per case issue.

2. Month 4 Bromley Borough Financial Position by function

M4 Financial Position	H1 Budget	Budget	Actual	Variance
	£'000s	£'000s	£'000s	£'000s
Other Acute Services	344	229	229	0
Community Health Services	26,453	17,635	17,747	-112
Mental Health Services	4,878	3,252	3,149	103
Continuing Care Services	11,160	7,440	7,315	125
Prescribing	22,427	14,951	14,963	-11
Other Primary Care Services	1,604	1,069	1,066	4
Other Programme Services	9,510	6,340	6,340	0
Delegated Primary Care Services	24,835	16,561	16,561	0
Corporate Budgets	2,376	1,584	1,564	20
Total	103,588	69,063	68,934	129

- The Bromley H1 (Half year – April 2021 to Sept 2021) Budget is £103,588k
- The Bromley position at Month 4 is £129k underspent.
- The key variances at M4 are:
Community - £112k overspent due primarily to an overspend in Community Phlebotomy due to an increase in activity;
The Mental Health placement position is £103k underspent due to lower activity than budgeted;
Continuing Healthcare budgets are underspending by £125k due to activity being lower than budgeted.
- Bromley has received a Covid budget for H1 totalling £1,760k (£610k for borough costs and £1,150k for Bromley Healthcare) in addition to the budget set out above, these budgets are breakeven at Month 4. This excludes the HDP (Hospital Discharge Programme) Covid budget which is held at SEL CCG level. The cumulative Bromley HDP expenditure at Month 4 is £1,840k.

3. SEL CCG Proposed approach to H2 Financial Management

- Very limited information has been received to date regarding financial allocations or funding arrangements for H2 (October 2021 to March 2022) and beyond.
- While it appears unlikely that funding and contract mechanisms will return to (pre-pandemic) business as usual arrangements in H2, the key message from NHS financial leaders is a restoration of financial disciplines that were relaxed in 2020/21 and in H1 of 2021/22.
- While future available funding is currently unclear, it is reasonable to assume that all NHS organisations will be required to manage underlying run-rates of expenditure, deliver increased efficiencies and to ensure reliance non-recurrent funding is reduced.
- In preparation for this the CCG will need to ensure that:
 - We reduce our reliance on Covid related funding
 - We embed efficiency opportunities fast-tracked during the pandemic
 - We make best use of non-recurrent Service Development Funding (SDF) and are able to access national Elective Recovery Funding (ERF)
 - We return to pre-pandemic underlying run-rates of spend for directly commissioned areas (e.g. primary care prescribing, continuing healthcare)
 - We assess and review all provider contracts, including activity, investment and efficiency plans to delivery service and efficiency improvements as we exit the pandemic arrangements.

Appendix 1

SEL CCG Finance Report

Month 4 2021/22

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1. Executive Summary

At a glance position at Month 4

Month 4 represents the fourth month of the H1 budget period for 2021/22. In line with last year, the CCG will continue to receive both its confirmed allocation together with retrospective funding to cover various aspects of the Covid response and recovery. In addition, the CCG is receiving additional retrospective funding in relation to costs associated with the Elective Recovery Fund (ERF).

At Month 4 the CCG has received an **additional retrospective allocation of £41.2m in relation to Elective Recovery Funding (ERF)**. This relates to SEL system activity for Month 1 and Month 2 (paid at 90%). This money will primarily be used to cover NHS provider costs in the delivery of elective recovery activity, with £1.5m being used to cover the costs incurred by the CCG with the independent sector during Months 1 and 2. In addition, the CCG has received **£5.76m of retrospective allocation relating to the Hospital Discharge Programme**. This represents 80% of the incurred costs, and is an interim payment for Quarter 1 whilst NHSEI complete their validation process.

At Month 4 the CCG is reporting an overspend of £0.75m against its Business as Usual (BAU) budgets, and a £5.23m overspend against its Covid Budgets. The BAU position represents £0.75m of expenditure with independent sector providers to delivery activity under the ERF. In line with the allocation received this month, once NHSEI have validated this activity, these costs will attract a corresponding allocation adjustment which once confirmed will enable the CCG to report a break-even BAU financial position. The Covid-19 position represents £4.3m of expenditure on the Hospital Discharge Programme (HDP), £0.2m relating the Covid-19 vaccination programme and £0.7m of costs associated with the Vaccination Sprint. In line with last year, **NHS England/Improvement (NHSEI) will undertake a validation and provide to the CCG a top-up allocation based upon confirmed expenditure in relation to both HDP and vaccinations. The CCG is therefore expecting to receive sufficient funding to deliver an overall break-even financial position at the end of H1.**

The Covid-19 Hospital Discharge Programme (HDP) has incurred costs totalling £10.2m year to date (YTD). This expenditure relates to costs associated with HDP2 (up to 6 weeks of funding for patients discharged from hospital up to 31st March) and HDP3 (funding covering patients discharged from 1st April until 30th September). This covers costs incurred by the CCG and local authorities. These costs are expected to be covered by a top-up allocation during H1. Reimbursement is on a quarterly basis, of which £5.76m was received in Month 4.

Apart from ERF related expenditure, the CCG's recurrent BAU budgets reported a £0.40m overspend position in-month. This position reflects a circa £0.50m adverse movement in the prescribing position, with the CCG seeing a continuation of the price increases seen during the last year, and activity starting to increase following the reductions seen during 2020/21. This position is offset by an underspend on the remainder of the recurrent budgets (£0.10m) together the impact of the Q1 budget review process.

The CCG had a H1 savings target of £6.1m in start budgets. This is being delivered through a combination of recurrent and non-recurrent savings. Following a review of start H1 CCG budgets, savings of £1.2m were identified. As at Month 4, YTD budget underspends are £0.4m and a further £1.7m of budgets have been released following the Q1 budget review process. Therefore the amount of savings still to be delivered is £2.8m. During the remainder of H1 and into H2, the CCG will need to be focused on recurrent savings that generate a reduction in monthly run-rate expenditure.

2. Summary of Key Risks

The below table sets out the key issues facing the CCG in delivering its financial plan. These risks are mitigated within the H1 and year end forecast positions.

Issue/Risk	Summary of Issue/Risk	SRO	Mitigation	Month Identified	Expected Date for Completion	£m's	BAF Rating		
							Likelihood	Severity	Score
CCG Savings Target	Following the CCG's budget setting process, a shortfall/savings target of £6.1m was identified. This position reflected the impact of a number of allocation and guidance changes received in H1 planning.	Usman Niazi	The CCG will deliver savings through: 1) Undertaking a review of commitments against all CCG H1 budgets; 2) Reviewing all opportunities for non- recurrent savings; and 3) Undertaking a review of the CCG cost base to identify potential recurrent savings from the start of H2.	Month 1	Month 6	2.8	2	2	4
CHC Position	The CCG's CHC position carries a risk of increased activity during H1 as the anticipated unwinding of the HDP starts to impact upon BAU CCG budgets. Financial risks have specifically been identified within the Greenwich and Lambeth boroughs but all borough budgets will require an in-depth review.	Usman Niazi	The CCG is undertaking in-depth reviews of the financial commitments within the CHC budgets. At month 4, this has identified potential mitigations for the pressures within Greenwich and Lambeth. Further work is on-going.	Month 1	Month 4	4.5	2	3	6
Prescribing Position	The CCG's prescribing position is seeing price growth of 3.5% and an emerging activity pressure which may normalise around 1%. In line with national guidance, budgets were uplifted by 0.68%, generating an inflationary pressure of c3.8%.	Vanessa Burgess	The CCG's Medicine Management team is working to review the pressures and identify how they can be mitigated, given the pressures on the team in delivering the wider vaccination programme.	Month 4	Month 6	2.3	3	2	6

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YTD Expected Retrospective Allocation										5,979
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YTD Planned In Year Surplus										-
YTD Variance against planned in year Surplus/ Control Total										-
YTD Variance against planned in year Surplus/ Control Total %										0.0%
Previous Month YTD Variance before adjustment	-	-	-	-	-	-	-	-	-	-

- At Month 4 the CCG is reporting overspends of £0.75m against its Business as Usual (BAU) budgets, and £5.23m against its Covid Budgets. Therefore an overspend of £5.98m overall.
- The BAU position represents expenditure of £0.75m on activity incurred with the independent sector in the delivery of the ERF. The Covid-19 position is represented by expenditure of £4.3m on Hospital Discharge Programme (HDP)2 and HDP3, £0.2m relating the Covid-19 vaccination programme, and £0.7m of costs associated with the Vaccination Sprint. In line with the guidance from NHSEI, once these costs/activity have been validated, the CCG is expecting to receive top-up allocations for this expenditure. **Therefore our forecast for the H1 period is a break-even financial position.**
- At a borough level, the Bexley budget is now showing a slight overspend, with the wider movement in the prescribing position reducing the available mitigations to offset mental health cost per case pressures. Bexley are continuing to identify mitigations to this position, however given the nature of some of the costs, a wider solution may be required to address the cost per case issue.

4. Budget Overview

Month 4

	Bexley	Bromley	Greenwich	Lambeth	Lewisham	Southwark	South East London	Total SEL CCGs (Non Covid)	Covid-19	Total SEL CCGs
	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s
Year to Date Variance										
Planning and Commissioning	-	-	-	-	-	-	(749)	(749)	-	(749)
Other Acute Services	(0)	0	0	-	-	-	0	0	(223)	(223)
Other Community Health Services	154	(112)	(46)	(8)	1	(22)	(0)	(33)	-	(33)
Mental Health Services	(176)	103	175	328	(341)	(152)	(0)	(62)	-	(62)
Continuing Care Services	(36)	125	(221)	(248)	443	235	-	298	-	298
Prescribing	(64)	(11)	127	(345)	(104)	(49)	(2)	(448)	-	(448)
Other Primary Care Services	2	4	5	149	1	84	(0)	246	-	246
Other Programme Services	(0)	0	0	(0)	0	-	(404)	(404)	(609)	(1,013)
Delegated Primary Care Services	-	0	-	-	(0)	(0)	0	-	-	-
Corporate Budgets	62	20	21	140	27	58	75	403	(4,398)	(3,995)
Total Year to Date Variance	(57)	129	61	16	26	154	(1,079)	(749)	(5,230)	(5,979)

Month 3

	Bexley	Bromley	Greenwich	Lambeth	Lewisham	Southwark	South East London	Total SEL CCGs (Non Covid)	Covid-19	Total SEL CCGs
	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s
Year to Date Variance										
Planning and Commissioning	-	-	-	-	-	-	(1,852)	(1,852)	-	(1,852)
Other Acute Services	-	6	-	-	-	(0)	(2)	4	(371)	(367)
Other Community Health Services	69	(81)	(71)	(6)	(5)	(17)	-	(110)	45	(65)
Mental Health Services	(76)	50	0	123	(226)	(101)	-	(229)	-	(229)
Continuing Care Services	(53)	94	(43)	(29)	209	110	(0)	288	-	288
Prescribing	15	94	157	(193)	20	20	(14)	99	-	99
Other Primary Care Services	1	3	5	111	1	67	(0)	188	-	188
Other Programme Services	7	1	-	-	0	(0)	(541)	(533)	(513)	(1,046)
Delegated Primary Care Services	0	0	(0)	0	(0)	0	(0)	-	0	-
Corporate Budgets	51	64	61	24	12	39	40	292	(7,157)	(6,865)
Total Year to Date Variance	15	232	110	29	11	119	(2,369)	(1,852)	(7,996)	(9,848)

Overview:

- At Month 4 the CCG is reporting an overall overspend of £5.98m due to ERF activity and Covid-19 expenditure.
- In line with the position for Months 1&2 activity, the £0.75m ERF expenditure (which relates to Month 3 activity) is expected to attract an additional allocation. This position is shown against the Planning and Commissioning budgets.
- The £5.23m overspend expenditure on Covid relates to £4.3m on HDP, £0.7m against the Vaccination Sprint and £0.2m relating to vaccination centre costs. This expenditure is expected to be funded by an NHSEI retrospective allocation.
- The CCG has reported its prescribing budget based upon the latest Month 2 PPA data. This position, highlights a continuation of the price pressure seen over the last 16 months, with an emerging activity pressure coming through as we begin to see the unwinding of the Covid impact on demand. If this position were to continue, this would begin to indicate a significant risk to the CCG. A more robust 21/22 position is expected to be reported once Month 4 PPA data is available (Month 6 financial reporting).
- The CCG has reported a slight overspend against its Mental Health position, with cost per case pressures within three boroughs. This is driven by increases in patient activity. This position will be discussed with the mental health teams to identify what further mitigations can be utilised. This pressure will be need to be managed within the overall MHIS target.
- The CCG has reported its CHC position based upon a risk assessed view of boroughs patient databases. The pressures (and work to mitigate) remain within both Greenwich and Lambeth budgets. The Lambeth position reflects an anticipated transfer of funding from GSTT in respect of Minnie Kidd House.
- The CCG has reported its corporate budgets based upon actual spend against the agreed establishment. The cumulative underspend at Month 4 is £0.4m.

5. Covid-19

As at Month 4:

- The CCG is reporting year to date expenditure of £11.1m in response to the Covid-19 pandemic. This is summarised in the table to the right.
- The main driver to these costs is the hospital discharge programme (HDP) where £10.1m has been spent YTD. In month 4, the CCG received funding of £5.7m as an interim allocation for Q1. NHSEI have allocated funding based upon 80% of reported CCG costs whilst they complete their validation processes. Therefore overall, the CCG is expecting a further £5.23m of Covid-19 funding based upon expenditure to Month 4.
- The remaining area of spend relates to the Vaccination Sprint undertaken in June and July (£0.7m) and the Covid Vaccination centre commitments, where £0.2m has been reported as spent to Month 4.
- An additional £0.08m has been incurred on costs relating to testing asylum seekers within SEL.
- The CCG has agreed its Covid budgets for local use during H1. The planned expenditure for the H1 period was reviewed and signed off by the CCG's Covid Gold Command group. The identification of expenditure commitments for H1 has been led by the Borough teams and reflects local priorities. At month 4, the CCG has spent £2.32m against agreed budgets. The source of funding is the CCG's element of Covid budget allocated to the SEL health system.
- The CCG's H1 Covid expenditure plan includes £1.2m to support community services provided by Bromley Healthcare, given that they do not receive system Covid funding via the process in place for local NHS providers.

Month 4 Spend	Funding Received	Outstanding Top Up Funding
£'000s	£'000s	£'000s

Hospital Discharge Programme Spend

CCG Expenditure

3,189	1,792	1,397
6,924	3,934	2,990
10,113	5,726	4,387

Local Authority Spend

Total Hospital Discharge Programme Spend to Month 4

Other Covid Spend

Covid Vaccination Centre

200	165	35
728		728
80		80
1,008	165	843

Vaccination Sprint

Asylum Seekers

Total Other Covid Spend to Month 4

Total Covid Spend to Month 4

11,121	5,891	5,230
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6. Elective Recovery Fund

Overview:

- The 2021 operating plan outlined that Integrated Care Systems are to co-ordinate the plans to deliver “the highest possible level of activity for an elective recovery”, with additional funding available at a system level to support this. This funding is the “Elective Recovery Fund”.
- To secure funding the system needs to deliver activity above nationally set thresholds, based upon 2019/20 activity levels. These are the delivery of activity to 70% of 19/20 levels in April, 75% in May, 80% in June and 95% from July to September.

As at Month 4:

- Following assessed delivery of 95% and 98% in April and May, the CCG has received an ERF allocation of £41.23m (this covers April activity in full and due to the May assessment relating to flex data, 90% of the May delivery). In month, the CCG is expecting confirmation of the final month 2 payment, and the interim (based upon flex) payment for Month 3.
- For Month 3 onwards, the CCG is forecasting delivery at 89% and therefore is not expecting any further funding beyond the Month 3 position (which should be provisionally agreed at the end of Month 5).
- A small element of this funding (£1.5m) has been used to cover the CCG’s independent sector spend for Months 1 and 2, with the remainder being discussed with the local NHS acute providers to ensure that this funding is used appropriately within the SEL system.

7. Prescribing

Annual Comparison:

	Price Change From			Activity Change From		
	2018/19 vs.	2019/20 vs.	2020/21 vs.	2018/19 vs.	2019/20 vs.	2020/21 vs.
	2019/20	2020/21	2021/22	2019/20	2020/21	2021/22
April	0.3%	6.1%	3.5%	0.9%	0.4%	(0.4%)
May	0.4%	5.3%	3.2%	1.0%	(4.4%)	0.7%
June	(0.5%)	6.5%		0.6%	(3.5%)	
July	2.2%	6.1%		(1.6%)	(3.5%)	
August	2.5%	2.9%		1.4%	(4.9%)	
September	2.6%	4.6%		3.0%	(2.0%)	
October	2.9%	5.1%		0.7%	(3.2%)	
November	3.4%	5.0%		(0.5%)	0.5%	
December	4.1%	4.9%		3.3%	1.3%	
January	2.1%	7.0%		(0.9%)	(1.4%)	
February	3.3%	6.9%		(1.1%)	(0.2%)	
March	9.1%	(0.5%)		6.7%	(7.3%)	
Total	2.7%	4.9%		1.1%	(2.4%)	
YTD Comparison			3.4%			0.1%

Overview:

- The Month 4 prescribing position is based upon April 2021 data as the PPA information is provided two months in arrears. The CCG is reporting an overspend of circa £0.50m YTD.
- The annual comparison table shown to the left, highlights the impact of price and activity by month. This compares, the difference between the average item price and the average number of items prescribed. Cumulatively, for 2020/21 this shows a 4.9% price impact against a 2.4% activity reduction.
- For 21/22, following the Month 1 activity correction (for Covid-19 in 20/21) the activity has increased compared to the previous year by 0.7%, a 0.1% year on year increase. **If this activity increase was to continue it could add a £0.9m activity pressure to the budget** (in addition to the price pressure set out below).
- In price terms, the prescribing budget has faced a number of challenges including the Covid pandemic, the impact from exiting the EU on the supply chain and changes to Category M prices. These collectively generated a price pressure of 4.9% in 2020/21. This position appears to be continuing in 2021/22, with price increase of 3.4% on the year before. With budgets increased by 0.68% in H1, the **price pressure could be as much as £1.9m**.
- Whilst it is too early to forecast the position accurately, the above pressures would **represent a £2.8m, worst case overspend on the H1 budgets**. The prescribing position is being discussed on a on-going basis with the Medicine Management teams to both better understand current pressures and to identify appropriate mitigations that will best impact upon the current level of expenditure.

8. Continuing Healthcare

Overview:

- The CCG's overall CHC budget has reported an underspend of £0.30m to Month 4.
- The borough reporting positions are built off the patient databases, risk adjusted for identified reporting issues and local adjustments.
- Whilst the overall position is in broadly line with budget, the individual borough positions indicate underlying financial risks/pressures particularly within both Greenwich and Lambeth. As reported last month, work is on-going to review and better understand the positions in these boroughs, with actions undertaken to implement mitigations to address the pressures faced. Due to the nature of the validation process, the on-going work is causing some material in-month movements, as costs are validated. The budget review work for both Lambeth and Greenwich is expected to be completed for Month 5 reporting.
- As reported in Month 3, for Lambeth the reported position reflects the anticipated funding transfer from GSTT to offset the impact of the Minnie Kidd House closure. Further work is on-going to enable the boroughs to implement the required mitigations to manage further in-year pressures.
- In-month there is an emerging pressure in the Bexley budget, where mitigations are being undertaken to manage a number of higher cost patients.
- The position will face further challenge as the system starts to 'normalise' from the impact of the various HDP programmes. HDP1 (April – August discharges) has ceased, whilst HDP3 moves the funding arrangement down from 6 weeks to 4 weeks at the end of Quarter 1. These changes are expected to have an adverse impact on the underlying CHC financial position.

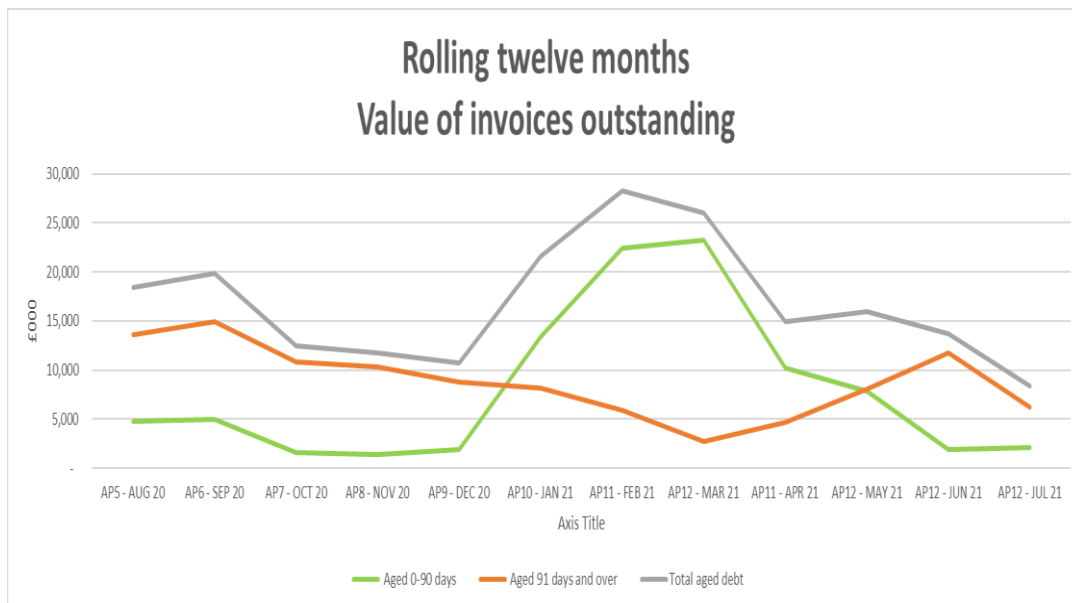
9. £6.1m Savings Target

Overview:

- During the 2021/22 planning round, the CCG identified a savings requirement/funding gap of £6.1m in start budgets.
- For H1, the CCG is identifying and delivering savings through:
 - A review of start H1 budgets;
 - Reviewing the potential for non-recurrent savings during Quarters 1 and 2; and
 - Reviewing the CCG cost base to identify potential recurrent savings opportunities.
- Following a review of the Month 4 position, £3.3m of the required savings have been identified, with:
 - £1.2m being identified following a review of start H1 budget commitments;
 - £0.4m being identified as the cumulative underspend within CCG budgets following Month 4 reporting. This position has worsened in-month following the movement in the prescribing position; and
 - £1.7m has been released following the Quarter 1 budget review process.
- This leaves savings of £2.8m to be delivered in the H1 period. The CCG can take assurance that the savings will be delivered in full.

	Savings Target
	£'000s
Initial Funding Gap	6,100
Budget Review	(1,200)
Month 2 Underspend	(500)
Month 3 Underspend	(300)
Month 4 Overspend	400
Quarter 1 Budget Review	(1,700)
Unidentified Savings	2,800
Savings Identified %	54.1%

10. Debtors Position



Overview:

- The CCG has an overall debt position of £8.3m at Month 4. Of, this £6.2m relates to debt over 3 months old, including circa £0.5m from legacy systems. Following the work undertaken last year to resolve much of the legacy debts the CCG is moving towards a more regular approach to debt management and will focus on ensuring recovery of its larger debts, and in minimising debts over 3 months old.
- The top 10 aged debtors are provided in the table below, with the main balances remaining with NHS England (predominantly GPIT), SE London local authorities and other local NHS organisations. These are being actively chased by borough finance colleagues.

Customer Group	Aged 0-30 days £000	Aged 1-30 days £000	Aged 31-60 days £000	Aged 61-90 days £000	Aged 91-120 days £000	Aged 121+ days £000	Total £000
NHS	84	180	114	748	1,372	2,601	5,099
Non-NHS	89	689	68	200	1,139	1,065	3,250
Unallocated	0	0	0	0	0	0	0
Total	173	869	182	948	2,511	3,666	8,349

Number	Supplier Name	Total Value £000	Total Volume	Aged 0-90 days Value £000	Aged 91 days and over Value £000	Aged 0-90 days Volume	Aged 91 days and over Volume
1	NHS ENGLAND	2421	11	76	2345	7	4
2	LONDON BOROUGH OF BROMLEY	1256	17	236	1019	3	14
3	NHS NORTH EAST LONDON CCG	651	12	492	159	3	9
4	GUY'S AND ST THOMAS' NHS FOUNDATION TRUST	620	20	95	525	5	15
5	GREENWICH LONDON BOROUGH COUNCIL	609	16	177	432	1	15
6	NHS NORTH CENTRAL LONDON CCG	398	32	372	26	5	27
7	OXLEAS NHS FOUNDATION TRUST	319	2	0	319	0	2
8	LEWISHAM LONDON BOROUGH COUNCIL	299	3	218	81	2	1
9	LAMBETH LONDON BOROUGH COUNCIL	292	9	5	288	1	8
10	NHS NORTH WEST LONDON CCG	230	94	19	211	3	91

11. Cash Position

- The Maximum Cash Drawdown as at Month 4 after accounting for payments made on behalf of the CCG by the NHS Business Authority (largely relating to prescribing expenditure) is £1,851m.
- There was a need to draw down supplementary cash in July to cover council payments and clearance of dated creditors. In August, following receipt of an allocation for Elective Referral Fund (ERF) monies, a supplementary drawdown had to be requested so that the providers could be paid in their main block payment for the month.
- At month 4, the CCG has drawn down 64.1% of the available cash (based upon 6 months funding) compared to the budget cash figure of 66.7%. It is expected that the CCG will utilise its cash allocation in full during H1.

72Q- Annual Cash Drawdown Requirement for 2020/21	2021/22 AP4 - JUL 21	2021/22 AP3 - JUN 21	2021/22 Month on month movement
	£000s	£000s	£000s
CCG ACDR	1,975,861	1,929,315	46,546
Capital allocation			
Less:			
Prescription Pricing Authority	(70,254)	(53,091)	(17,162)
Other Central / BSA payments- HOT	(718)	(552)	(166)
Pension uplift 6.3%	0	0	0
Add back PCSE System Error	238		238
Remaining Cash limit	1,851,484	1,875,672	29,456

Cash Drawdown	Monthly Main Draw down £000s	Supplementary Draw down £000s	Cumulative Draw down £000s	Proportion of CCG cash requirement %	KPI - 1.25% or less of main drawdown £000s	Forecast month end bank balance £000s	Percentage of cash balance to main draw
Apr-21	272,000	20,000	292,000	15.63%	6,800	782	0.29%
May-21	273,000	2,000	567,000	30.35%	6,825	192	0.07%
Jun-21	283,000	41,000	891,000	47.69%	7,075	1,236	0.44%
Jul-21	295,000	10,000	1,196,000	64.02%	7,375	1,782	0.60%
Aug-21	302,000	28,000	1,526,000	81.68%	7,550		
Sep-21	342,268		1,868,268	100.00%	8,557		
Oct-21					0		
Nov-21					0		
Dec-21					0		
Jan-22					0		
Sep-21					0		
Mar-22					0		
	1,767,268	101,000					

- The cash KPI has been achieved in all months so far this year, showing continued successful management of the cash position by the CCG's finance team and CSU to achieve the target cash balance.

12. Better Practice Payments Code (BPPC)

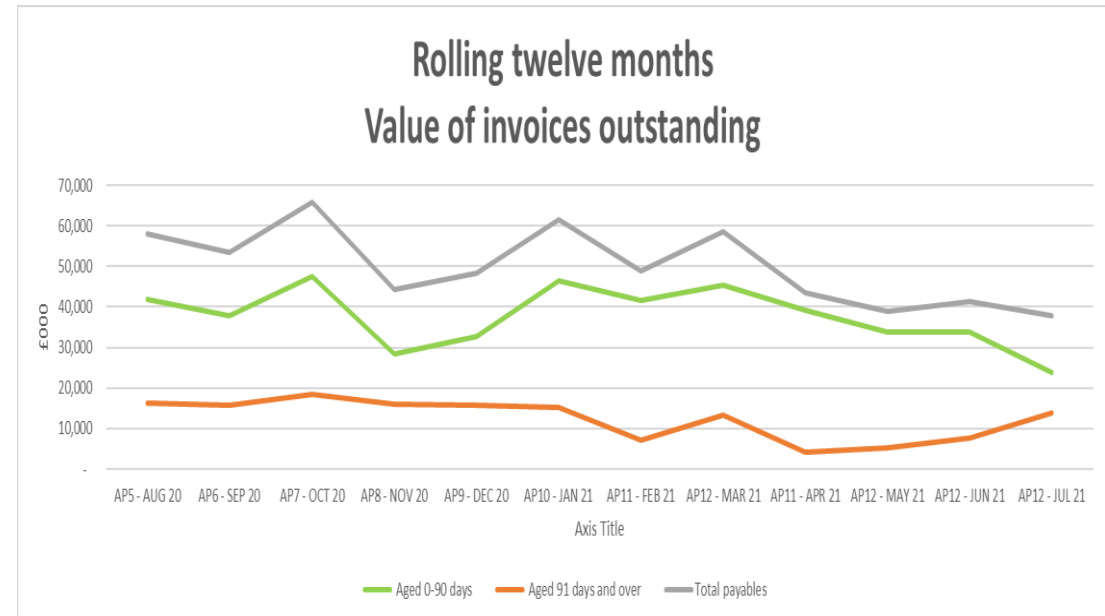
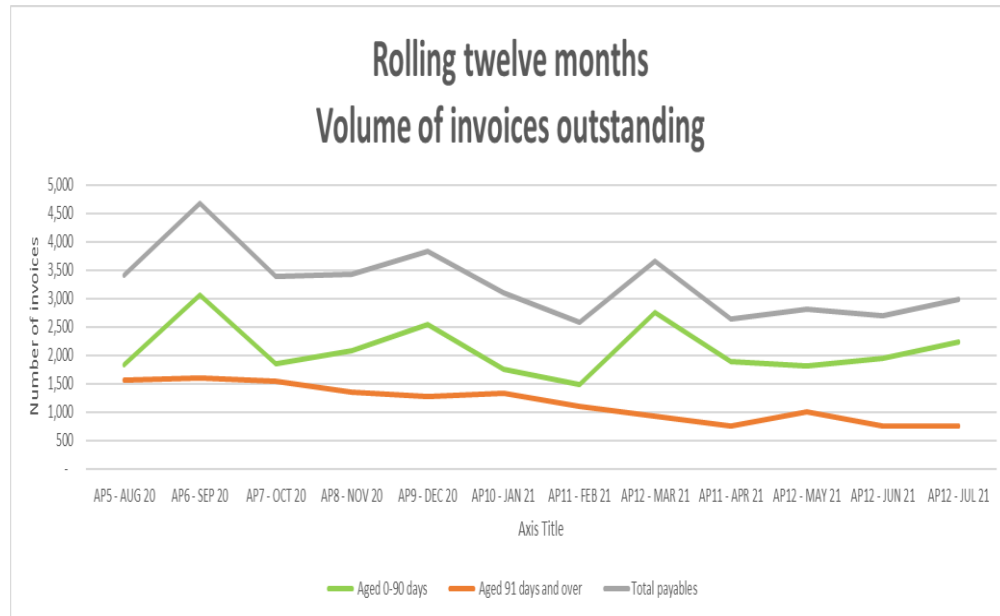
- Under the BPPC, CCGs are expected to pay 95% of all creditors within 30 days of the receipt of invoices. This is measured in terms of the total value of invoices and the number of invoices by count. To date the CCG has met the target cumulatively on both value and count by NHS and non NHS and therefore the target is green on all cumulative aspects. It is similarly expected that this target will be met in full at the end of the year.
- Due to the Covid-19 impact, NHSE/I has requested that all NHS organisations should during this time strive to pay creditors within 7 days to provide assurance on cash flows for organisations at this difficult time. This has obviously assisted in achieving good BPPC performance.

	2021/22		2021/22		2021/22		2020/21	
	AP4 - JUL 21		AP3 - JUN 21		Year to date		Outturn	
	Number	£000	Number	£000	Number	£000	Number	£000
Non-NHS Payables:								
Total Non-NHS trade invoices paid in the month	3,984	70,527	4,489	66,693	16488	269,401	49,774	811,200
Total Non-NHS trade invoices paid within target	3,840	69,514	4,297	63,142	15796	260,600	48,515	793,064
Percentage of non-NHS trade invoices paid within target	96.4%	98.6%	95.7%	94.7%	95.8%	96.7%	97.5%	97.8%
NHS Payables:								
Total NHS trade invoices paid in the month	116	235,979	97	255,334	573	936,807	5,299	2,427,869
Total NHS trade invoices paid within target	115	235,966	95	255,333	565	936,765	5,250	2,427,166
Percentage of NHS trade invoices paid within target	99.1%	100.0%	97.9%	100.0%	98.6%	100.0%	99.1%	100.0%
Combined non NHS and NHS:								
Total Non-NHS trade invoices paid in the month	4,100	307	4,586	322,027	17,061	1,206	55,073	3,239,069
Total Non-NHS trade invoices paid within target	3,955	305	4,392	318,475	16,361	1,197	53,765	3,220,230
Percentage of all trade invoices paid within target	96.5%	99.7%	95.8%	98.9%	95.9%	99.3%	97.6%	99.4%

13. Aged Creditors

- There continues to be ongoing work to reduce the levels of aged creditors both from the legacy ledgers and for the period April – September 2020. The graphs below show the ongoing reduction in volume but an increase in the value of these aged creditors (orange line). The volume of creditors in the 0-30 days period is now starting to increase, however the value of these items is reducing. Work is ongoing to clear as many dated items as possible prior to the setting up of the financial systems for the new ICS organisation.

As part of routine monthly reporting for 2021/22, high value invoices are being reviewed to establish if they can be settled and budget holders are being reminded on a regular basis to review their workflows.



14. Revenue Resource Limit

- The table below sets out the movements in the Revenue Resource Limit by borough and the overall financial allocation at Month 4. The main change in month has been the confirmation of additional non-recurrent funding allocations, the largest being the ERF allocation of £41.2m referenced above. The total financial allocation as at Month 4 is £1,982.3m. This follows the receipt of £52.2m of non-recurrent allocations during the month.

Bexley	Bromley	Greenwich	Lambeth	Lewisham	Southwark	South East London	Total
£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	

Budget Changes

Delegated Budget Adjustments

614	-	27	392	-	45	-	91	-	897	-
95									95	-

DWP Employment Advisors in IAPT

Allocations over £500k

Early Adopter Community Diagnostic Hub

									1,878	1,878
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ERF July Payment (April and 90% May)

									41,288	41,288
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Additional Community Services allocation

									5,726	5,726
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PCT Digital First Support

									979	979
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Allocations under £500k

Primary Care

									672	672
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Community Response

									498	498
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Children and Young People

									129	129
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Virtual WARD

									264	264
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Infection Prevention and Control

									118	118
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Covid

									165	165
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Post Covid

									368	368
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Other

									173	173
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Month 4 Budget

58,956	103,588	78,197	86,291	68,964	68,158	1,518,162	1,982,317
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