



Northern, Eastern and Western Devon  
Clinical Commissioning Group



## **Plymouth Integrated Fund Finance Report – Month 7 2018/19**

### **Introduction**

This report sets out the financial performance of the Plymouth Integrated Fund for the period to the end of October and the forecast for the financial year 2018/19.

The report is in several sections.

- The first section details the performance of the Integrated Fund, including the section 75 risk share arrangements.
- The second identifies the Better Care Fund, which is a subset of the wider Integrated Fund, but has specific monitoring and outcome expectations.
- The third section details the financial performance of the Western Planning and Delivery Unit (PDU) of the Clinical Commissioning Group (CCG).
- Appendix 1 which shows the Plymouth Integrated Fund performance and risk share.
- Appendix 2 which shows the PDU managed contracts financial performance.
- Appendix 3 which is a glossary of terms used in the report.

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### **SECTION 1 – PLYMOUTH INTEGRATED FUND**

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#### **Integrated Fund - Month 7 Report 2018/19**

As highlighted in previous months, the pressures for health are mainly focussed on the variable use of the independent sector acute contracts. For Plymouth City Council there are pressures in residential, domiciliary care and children's packages.

The report highlights a breakeven position against budget for health at this stage in the year. For the Council, the forecast overspend is reflected at this stage without assuming further recovery.

The overall fund position is reflected in Appendix 1, and shows an overall forecast overspend of £4.6m, before corporate contingencies.

## Plymouth City Council Integrated Fund

Service	Latest Approved Budget M7	Latest Year End Forecast	Variation at Month 7	Variation at Month 6	Change in Month
	£m	£m	£m	£m	£m
Children, Young People & Families	37.142	41.675	4.534	5.699	(1.165)
Strategic Cooperative Commissioning	78.118	78.219	0.101	0.481	(0.380)
Education Participation and Skills	101.106	101.106	(0.000)	(0.000)	0.000
Community Connections	3.784	3.871	0.087	0.168	(0.081)
Director of People	0.295	0.295	(0.000)	(0.000)	0.000
Public Health	16.048	16.048	0.000	0.000	0.000
<b>Sub Total</b>	<b>236.493</b>	<b>241.215</b>	<b>4.722</b>	<b>6.348</b>	<b>(1.626)</b>
Support Service Recharges	14.473	14.473	0.000	0.000	0.000
Disabled Facilities Grant (Capital)	2.298	2.298	0.000	0.000	0.000
<b>Total</b>	<b>253.265</b>	<b>257.987</b>	<b>4.722</b>	<b>6.349</b>	<b>(1.626)</b>

The integrated fund for Plymouth City Council (PCC) is shown as gross spend and now also includes the Support Service Recharge costs for the People directorate and Public Health department along with the capital spend for Disabled Facilities Grant, which is funded from the Better Care Fund.

### Children, Young People and Families

The Children Young People and Families Service are reporting a budget pressure of £4.534m at month 7, a reduction of (£1.165m) from month 6, as part of the work that the action plan review group is doing. This will be monitored closely to ensure that it is on track for year end.

We are experiencing a big rise in the number of vulnerable children needing care, the cost of the care is particularly high due to the level of support needed to keep young people safe, such as specialist residential care placements with high levels of staffing. A number of very costly care packages are the result of Court of Protection orders that place a duty on the Council to provide specialist care.

This increasing financial demand on Children's Services is not just a local issue, but is seen nationally and is a culmination of rising demand, complexity of care, rising costs and the availability of suitable placements. Robust plans are in place to deliver £4.655m savings this year, delivering over £3m to date, although the Service has identified a savings plan £1.647m that will not be achieved this year.

There are a number of assumptions being made in the forecast outturn position going forward as an outcome of the following actions.

- Tightening of the front door for LAC - Action only HOS Children's Social work and Permanence can give consent for anyone to be accommodated and in her absence Service Director will cover.
- Fortnightly placement review to ensure step down of high cost placements
- Review of staying put arrangements and financial remuneration

- Maximize contribution from partners - Health and Education Action Complete required Health tool for all Residential placements. Review elements of contracts to ensure Education element is recharged correctly
- Service Director persistently raising matter of budgetary pressures at all staff meetings to ensure only essential expenditure and actions taken in a timely manner.
- Local residential placements are maximized to avoid higher out of area associated costs.
- Director & finance Review all financial assumptions on a monthly basis.

There are risks that continue to require close monitoring and management:

- Significant increase in cost and volume of young people's placements since budget setting autumn 2018.
- Lack of immediate availability of the right in-house foster care placements creating overuse of IFA's.
- There are still a number of individual packages of care at considerably higher cost due to the complex needs of the young people.
- Regional wide commissioning activity did not bring about the anticipated holding and reduction of placement costs in both the residential and IFA sectors.
- Residential placements are in line with the budgeted number of 36. However, there has been a 9% increase in the average weekly cost.
- There are 133 Independent Fostering Agency Placements with budget for only 119.
- There are 21 Supported Living Placements with budget for 15 we have seen a 55% increase in the average cost due to a small number of young receiving significant wrap around packages.
- A region wide lack of placements due to an increase in demand for placements, both national and regionally continues to impact negatively on sufficiency
- There has been a 6% increase in looked after children since October 2017, which compares with an 11.3% increase in the South West Region March 2017- March 2018.

The overall number of children in care at the end of September stands at 427 an increase of 3 in the month.

The number of children placed with independent fostering agencies stands at 133 against a target budget of 119 placements. Residential placements stands at 36 against a target of 36 budgeted placements with a number of these placements being high cost due to the complex nature of these children's needs. There is currently one young person placed in 'welfare' secure.

The In-House Foster Care placements have 169 including connected carer's placements against a target budget of 186 placements. There are no In House Parent & Child Assessment Placement, 1 court ordered Independent foster care placements and no high cost Residential placements. We currently have 21 Supported Living Placements with budget for 15. However, 30% of the placements are at a substantially high cost due to the complex nature of the placement.

Ongoing work continues all placements are reviewed regularly in order to reduce the pressure on cost and volume where appropriate.

Commissioning arrangements to increase the supply of local placements continues. The Peninsula residential framework tender has just closed, with 29 bidders. A contract award report will be presented to Cabinet in December. The Plymouth Caring in Partnership residential block contract continues to be developed – 3 beds have been added to the contract since March 2018, with a new solo home currently being registered. The Peninsula fostering contract began on 1st April 2018 and is embedding, with a wider group of providers engaged.

### **Strategic Co-operative Commissioning**

The Strategic Commissioning service is forecasting an adverse variation to year end of £0.101m, a reduction of (£0.380m) from the month 6 forecast. The reduction in forecast is a result of a drop in the number of clients being forecast to year end, however there is still a large pressure on residential and monitoring that will continue to be reviewed during the year.

There will continue to be management actions to reduce the pressure on the care packages in year, with continued “deep dives” taking place into the areas currently overheating.

### **Education, Participation and Skills**

The Education, Participation and Skills budget is forecast to balance to budget at year end.

A plan is being developed to scope all of the education related services within Education, Participation and Skills and recommend an approach and plan for transforming, in order to realise further savings.

### **Community Connections**

Community Connections is reporting an overspend of £0.087m at Month 7, a favourable variation of (£0.081m) from month 6.

Average B & B numbers for April to October have been 55 placements per night with a reduction in Housing Benefit income due to the change to the claiming through the universal credit system.

The net cost pressure for further reducing average placements by 5 from the current 55 to 50 per night is £0.087m, which the service is targeting to reduce with use of alternative properties provided through existing contracts as well as use of additional contracted staff to target single occupancy stays. The service is dedicating more resource to encourage clients to complete universal credit claims to increase the Housing Benefit received. There will also be capitalisation of equipment that will bring the spend back to budget.

### **Public Health**

Public Health is expected to come in on budget for 2018/19 despite a reduction in the Public Health grant received in 2018/19 of £0.405m from 2017/18. This will be contained by a variety of management actions, mainly around the contracts that are

held within the department, as well as using approximately £0.500m of grant that was carried forward from previous years.

### Plymouth City Council Delivery Plans

Between People Directorate and Public Health, over £11.5m of savings will need to be delivered during 2018/19, which includes savings of over £6m of savings brought forward from 2017/18 which were delivered as one-off savings. It is forecast that all savings will be achieved - breakdown shown below:

Plymouth City Council	Year To Date			Current Year Forecast		
Month 7 - October 2018	Budget	Actual	Variance Adv / (Fav)	Budget	Actual	Variance Adv / (Fav)
	£000's	£000's	£000's	£000's	£000's	£000's
Children, Young People & Families	2,715	2,715	-	4,655	4,655	-
Strategic Cooperative Commissioning	2,797	2,797	-	4,794	4,794	-
Education Participation & Skills	809	809	-	1,386	1,386	-
Community Connections	384	384	-	659	659	-
Additional People Savings (apportioned to depts above)	-	-	-	-	-	-
Public Health	44	44	-	75	75	-
	<b>6,749</b>	<b>6,749</b>	<b>-</b>	<b>11,569</b>	<b>11,569</b>	<b>-</b>

Plymouth City Council	Year To Date			Current Year Forecast		
Month 6 - September 2018	Budget	Actual	Variance Adv / (Fav)	Budget	Actual	Variance Adv / (Fav)
	£000's	£000's	£000's	£000's	£000's	£000's
Children, Young People & Families	2,328	2,328	-	4,655	4,655	-
Strategic Cooperative Commissioning	2,397	2,397	-	4,794	4,794	-
Education Participation & Skills	693	693	-	1,386	1,386	-
Community Connections	330	330	-	659	659	-
Additional People Savings (apportioned to depts above)	-	-	-	-	-	-
Public Health	38	38	-	75	75	-
	<b>5,785</b>	<b>5,785</b>	<b>-</b>	<b>11,569</b>	<b>11,569</b>	<b>-</b>

### Integrated Fund Summary

Health are reporting a forecast unplanned underspend of £0.2m whilst the Local Authority are reporting an unplanned overspend of £4.7m. The Health position is static against the variances reported in month 6 whilst the Local Authority are reporting an improvement of £1.6m.

No risk share impact has been calculated at this stage.

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## SECTION 2 – BETTER CARE FUND (BCF)

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### Better Care Fund (BCF) and Improved Better Care Fund (iBCF)

The table below provides a summary of the different types of the BCF, how they are funded, how the fund was spent in 2017/18 and how the fund is planned to be spent in 2018/19.

Note that parts of these plans are still under review and subject to change.

NHS Northern, Eastern and Western Devon Clinical Commissioning Group				
Plymouth City Council				
Better Care Fund				
	2017/18		2018/19	
	£000's	£000's	£000's	£000's
<u>Source</u>	<u>CCG</u>	<u>ASC</u>	<u>CCG</u>	<u>ASC</u>
BCF	17,701	2,126	18,044	2,298
iBCF_a		764		5,343
iBCF_b		5,800		3,660
<b>Total BCF</b>	<b>17,701</b>	<b>8,690</b>	<b>18,044</b>	<b>11,301</b>
<u>Application</u>	<u>CCG</u>	<u>ASC</u>	<u>CCG</u>	<u>ASC</u>
Intermediate Care	9,156	5,149	9,443	5,149
Social Care Support		3,396		3,452
DFG		2,126		2,298
Social Care Support (iBCF_a)		764		5,343
Meeting ASC Needs		1,449		2,160
Reducing NHS Pressure	3,351		1,500	
Stabilising SC market		1,000		
	<b>12,507</b>	<b>13,884</b>	<b>10,943</b>	<b>18,402</b>

These funds are being paid to the Local Authority and come with conditions that they are *“to be spent on adult social care and used for the purposes of meeting adult social care needs, reducing pressures on the NHS - including supporting more people to be discharged from hospital when they are ready - and stabilising the social care provider market.”*

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## **SECTION 3 – WESTERN PDU MANAGED CONTRACTS**

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### **Context / CCG Wide Financial Performance at Month 6**

This report sets out the outturn financial performance of the CCG to the end of month 7 of 2018/19.

The CCG plan for 2018/19 has been produced in conjunction with our main acute providers within a wider System Transformation Plan (STP) footprint encompassing South Devon and Torbay CCG (SD&T CCG).

The CCG's submitted Financial Plans for 2018/19 set out forecast deficits to 31st March of £20.0m and £5.0m for NEW Devon CCG and South Devon & Torbay CCG respectively. The challenge is significant both for each of the organisations and for the STP as a whole. The CCG plans require the delivery of a £78.597m savings programme in order to meet the respective positions agreed with NHS England. £70.847m of this challenge relates to NEW Devon CCG and the balance of £7.750m with South Devon & Torbay CCG.

The CCG is reporting forecast delivery of 92% against this plan at this stage.

Delivery of the required savings plan is the main financial risk and challenge to the CCGs, however there are other risks emerging in relation to out of area placements and within the independent sector contracts. These will require further investigation and continued focus, priority and joint working across the local community and wider STP foot print to mitigate or reduce the potential impact as a result.

### **Western PDU Finance Position**

#### **Introduction**

This report previously described emerging risks within the acute independent sector contracts and these risks continue. However, an improvement in the Placements position has offset this cost pressure. The Western PDU are reporting a forecast breakeven position.

The detailed analysis for the PDU is included at **Appendix 2**.

### **Acute Care Commissioned Services**

#### **University Hospitals Plymouth NHS Trust**

The 2018/19 contract plan for University Hospitals Plymouth has been set in accordance with the principles agreed by the Devon STP. The overarching agreement is for flat cash contracts, where the 2018/19 contract value is based upon the 2017/18 contract value with minor adjustments agreed for specific areas. Whilst growth and inflationary pressures have been identified the system expectation is that

these will be dealt with through demand management, efficiencies and cost reductions.

The 2018/19 contract value has been agreed at £184.5m for NEW Devon and £4.3m for SD&T CCG. The planned investment to support RTT achievement is not included at this stage.

### **Contract Performance**

2018/19 M07	NEW Devon CCG					Torbay and South Devon CCG				
	Planned Spend	Actual Spend	Variance	Variance Activity	Variance Spend	Planned Spend	Actual Spend	Variance	Variance Activity	Variance Spend
	£000s	£000s	£000s			£000s	£000s	£000s		
Elective	23,088	20,297	- 2,791	-6.2%	-12.1%	781	646	- 135	-5.3%	-17.3%
Non-Elective	41,774	41,353	- 421	6.0%	-1.0%	609	705	96	30.4%	15.8%
A&E + MIU	7,789	7,941	152	0.8%	2.0%	103	162	59	82.1%	57.0%
Outpatients	19,730	19,011	- 719	-3.3%	-3.6%	516	477	- 39	-3.3%	-7.5%
Excluded Services	12,903	13,660	757		5.9%	177	125	- 52		-29.4%
Penalties	-	- 324	- 324			-	14	14		
Drugs & Devices	7,831	8,077	246		3.1%	266	232	- 34		-12.6%
CQUIN	2,447	2,548	102		4.1%	55	53	- 2		-2.9%
Contract Adjustments	- 8,445	-	8,445			6	-	6		
<b>Total</b>	<b>107,118</b>	<b>112,564</b>	<b>5,446</b>		<b>5.1%</b>	<b>2,513</b>	<b>2,415</b>	<b>- 98</b>		<b>-3.9%</b>

Expenditure on Elective Care is 12.1% behind financial plan for NEW Devon and 17.3% for SD&T, representing a combined underspend of £2.9m to month 7 with £0.45m of this variance occurring in month. The primary drivers of underperformance include:

1. Orthopaedics – Underperforming by 16.9% worth £875k
2. Cardiology – Underperforming by 35.3% worth £544k
3. Neurosurgery – Underperforming by 36% worth £349k

Non-Elective activity is 6.3% ahead of plan compared with a 0.8% under performance in financial terms. This is after the contract was increased to reflect historical growth trends and includes the activity and spend taking place within the recently formed Acute Assessment Unit (AAU).

Accident and Emergency, which includes MIU activity which has been varied into the UHP contract, is ahead of plan by 1.7% or 1,096 attendances which is an improvement of 606 attendances since month 6, although still contributing towards an adverse variance of £0.2m or 2.7%. Whilst the Torbay and South Devon proportion of this part of the contract is small, it should be noted that the activity variance of 82.1% remains exceptionally high.

Outpatient activity and spend has continued to fall behind plan during month 7. Activity is 3.3% or £0.7m behind plan for NEW Devon. Outpatient procedures are ahead of plan by £0.25m whilst new and follow-up attendances are underperforming by £1.0m. At specialty level there are over performances in Plastic Surgery (£125k or



27%), Trauma (£116k or 29%), Paediatrics (£96k or 10%) and Endoscopy (£93k or 26%). However, these are offset by significant underperformances in Gastroenterology (£135k or 25%), Pain Management (£121k or 26%), Orthopaedics (113k or 16%) and Ophthalmology A&E (109k or 15%).

Passthrough Drugs and Devices are overspent by 3.1% or £0.25m, which is driven by passthrough drugs. The position has deteriorated by £0.2m since month 6 which is due to fluctuations in the homecare charging which is no longer smoothed by accruals.

The plan has an adjustment for system savings; this number reflects the differences between the PbR activity plan and the agreed system wide contract value and for NEW Devon is worth £14.5m. Any activity savings will fall into the reporting at the points of delivery in which they occur, therefore this line will show as a constant overspend all year. As at month 7 this shows an overperformance of £8.4m.

Overall, contract reporting illustrates an over performance of £5.4m. However, a significant contributor to over performance is in respect of the £8.4m STP contract adjustment. Ignoring these adjustments so that we can consider the contract variance against the agreed activity plan, contract reporting would indicate an under performance of £3.0m. Further still, we are in the final stages of agreeing additional investment into the UHP contract to support improvement in the RTT reporting standards. The investment value of £5.9m for NEW Devon CCG and £0.4m for South Devon and Torbay CCG – once this is varied into the contract the reported overall overperformance will reduce.

### **South Devon Healthcare Foundation Trust**

The 2018/19 South Devon Healthcare Foundation Trust contract has been set in accordance to the contracting principles agreed within the Devon STP. The fixed contract value is £5.991m.

Despite having agreed a fixed contract value we will continue to monitor and report on the variances against the agreed activity plan. As at month 7 the activity data shows an underperformance of £0.3m. This primarily driven by underperformances within non elective and passthrough drugs.

### **Independent Sector & London Trusts**

Risks continue to present for a significant overspend at Care UK and Nuffield Plymouth, which on an activity basis are forecast to overspend by £1.6m and £1.5m respectively. This overspend is a result of an increase in year on year activity and slippage in the delivery of savings plans.

We will monitor this closely and continue to align the management of this risk with our demand management plans.

A further risk of £0.3m is presenting within our variable London provider contracts.

### **Livewell Southwest**

The Livewell Southwest (LSW) Contract has been set in accordance to the agreed STP contracting principles which focus on delivering flat cash contracts.

For LSW this means a fixed contract value of £85.2m for 2018/19.

### **Discharge to Assess beds**

There is pressure in the cost of the Intermediate Care (Discharge to Assess) beds in the West, however, work focussed on the discharge pathway has significantly reduced the number of beds in use and the length of stay, such that the system is planning to move into financial balance in this financial year.

### **Primary Care Prescribing**

Month 7 shows a £101k underspend for the Western area. Overall the CCG is forecasting that our year to date QIPP target has been achieved but are reflecting the QIPP yet to be achieved within our risks. This is prudent based on the information to M05 and will be reconsidered as more data becomes available.

### **Primary Care Enhanced and Other Services**

Whilst the budgets and expenditure are reported in the Western PDU report, this is to ensure that all lines of expenditure for the CCG are reported in a PDU and there is integrity to the reports produced. There is, however, a separate governance structure for Enhanced Services that sits outside and alongside the two PDU structures to ensure there is segregation of decision making in primary care investments. The outturn expenditure is in line with budgets.

### **Conclusion**

The overall Integrated Fund is forecasting a year end overspend of £4.6m at this stage. Within this position the Council is forecast to overspend by £4.7m whilst the health position is forecast to be £0.2m underspent, but with emerging risks.

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**David Northey**  
*Head of Integrated Finance, PCC*

## APPENDIX 1

### PLYMOUTH INTEGRATED FUND AND RISK SHARE

Month 07 October	Year to Date			Forecast		
	Budget	Actual	Variance	Budget	Actual	Variance
	£000's	£000's	Adv / (Fav)	£000's	£000's	Adv / (Fav)
<b>CCG COMMISSIONED SERVICES</b>						
Acute	90,770	91,426	655	155,606	156,658	1,052
Placements	21,711	21,320	-391	35,657	35,055	-601
Community & Non Acute	29,333	29,348	15	50,284	50,318	33
Mental Health Services	21,331	21,347	16	36,567	36,595	28
Other Commissioned Services	9,203	9,173	-30	15,777	15,789	12
Primary Care	27,064	26,351	-213	45,979	45,774	-206
<b>Subtotal</b>	<b>199,412</b>	<b>198,965</b>	<b>53</b>	<b>339,870</b>	<b>340,188</b>	<b>318</b>
Running Costs & Technical/Risk	2,581	2,583	2	6,920	6,448	-472
<b>CCG Net Operating Expenditure</b>	<b>201,993</b>	<b>201,548</b>	<b>54</b>	<b>346,790</b>	<b>346,637</b>	<b>-154</b>
Risk Share					-	-
<b>CCG Net Operating Expenditure (after Risk Share)</b>	<b>201,993</b>	<b>201,548</b>	<b>54</b>	<b>346,790</b>	<b>346,637</b>	<b>-154</b>
<b>PCC COMMISSIONED SERVICES</b>						
Children, Young People & Families	21,666	24,310	2,644	37,142	41,674	4,533
Strategic Cooperative Commissioning	45,569	45,628	59	78,118	78,219	101
Education, Participation & Skills	58,979	58,979	-0	101,106	101,106	-0
Community Connections	2,208	2,258	51	3,784	3,871	87
Director of people	172	172	-0	295	295	-0
Public Health	9,361	9,361	-	16,048	16,048	-
<b>Subtotal</b>	<b>137,954</b>	<b>140,708</b>	<b>2,754</b>	<b>236,493</b>	<b>241,214</b>	<b>4,721</b>
Support Services costs	8,443	8,443	-	14,473	14,473	-
Disabled Facilities Grant (Cap Spend)	1,341	1,341	-	2,298	2,298	-
Recovery Plans in Development	-	-	-	-	-	-
<b>PCC Net Operating Expenditure</b>	<b>147,738</b>	<b>150,492</b>	<b>2,754</b>	<b>253,265</b>	<b>257,986</b>	<b>4,721</b>
Risk Share					-	-
<b>PCC Net Operating Expenditure (after Risk Share)</b>	<b>147,738</b>	<b>150,492</b>	<b>2,754</b>	<b>253,265</b>	<b>257,986</b>	<b>4,721</b>
<b>Combined Integrated Fund</b>	<b>349,731</b>	<b>352,040</b>	<b>2,808</b>	<b>600,055</b>	<b>604,622</b>	<b>4,567</b>

## APPENDIX 2

### WESTERN PDU MANAGED CONTRACTS FINANCIAL PERFORMANCE

Month 07 October	Year To Date			Current Year Forecast		
	Budget	Actual	Variance	Budget	Forecast	Variance
	£000's	£000's	£000's	£000's	£000's	£000's
<b>ACUTE CARE</b>						
NHS University Hospitals Plymouth NHS Trust	107,918	107,918	0	185,002	185,002	-
NHS South Devon Healthcare Foundation Trust	3,569	3,570	0	6,119	6,119	-
NHS London Contracts	997	1,161	165	1,709	2,033	325
Non Contracted Activity (NCA's)	5,456	5,457	1	9,354	9,354	-
Independent Sector	7,832	8,795	964	13,426	16,267	2,841
Referrals Management	1,506	1,506	0	2,581	2,581	-
Other Acute	13	3	-10	23	13	-10
Cancer Alliance Funding	730	730	0	1,252	1,252	-
<b>Subtotal</b>	<b>128,021</b>	<b>129,141</b>	<b>1,120</b>	<b>219,465</b>	<b>222,621</b>	<b>3,156</b>
<b>COMMUNITY &amp; NON ACUTE</b>						
Livewell Southwest	25,756	25,756	0	44,153	44,153	-
GPwSI's (incl Sentinel, Beacon etc)	973	973	-0	1,668	1,668	-
Community Equipment Plymouth	378	378	0	648	648	-
Peninsula Ultrasound	166	154	-12	285	285	-
Reablement	885	885	0	1,517	1,517	-
Other Community Services	149	149	-0	256	256	-
Joint Funding_Plymouth CC	5,081	5,081	-	8,711	8,711	-
Better Care Fund_Devon CC	-	-	-	-	-	-
<b>Subtotal</b>	<b>33,388</b>	<b>33,377</b>	<b>-12</b>	<b>57,237</b>	<b>57,237</b>	<b>-</b>
<b>MENTAL HEALTH SERVICES</b>						
Livewell MH Services	19,282	19,282	-	33,059	33,059	-
Mental Health Contracts	15	15	0	26	26	-
Other Mental Health	641	641	0	1,097	1,097	-
<b>Subtotal</b>	<b>19,939</b>	<b>19,939</b>	<b>0</b>	<b>34,182</b>	<b>34,182</b>	<b>-</b>
<b>OTHER COMMISSIONED SERVICES</b>						
Stroke Association	93	93	0	159	159	-
Hospices	1,563	1,495	-68	2,679	2,635	-44
Discharge to Assess	3,857	3,857	0	6,613	6,613	-
Patient Transport Services	1,354	1,354	-0	2,321	2,321	-
Wheelchairs Western Locality	1,050	1,100	50	1,800	1,880	80
Commissioning Schemes	111	95	-17	191	159	-32
All Other	721	701	-21	1,236	1,276	40
<b>Subtotal</b>	<b>8,750</b>	<b>8,695</b>	<b>-55</b>	<b>14,999</b>	<b>15,043</b>	<b>44</b>
<b>PRIMARY CARE</b>						
Prescribing	32,525	31,609	-916	55,156	55,055	-101
Medicines Optimisation	179	128	-51	307	307	-
Enhanced Services	5,561	5,563	2	9,533	9,533	-
GP IT Revenue	1,488	1,488	-0	2,550	2,550	-
Other Primary Care	2,492	2,492	0	4,272	4,272	-
<b>Subtotal</b>	<b>42,245</b>	<b>41,279</b>	<b>-966</b>	<b>71,818</b>	<b>71,717</b>	<b>-101</b>
<b>TOTAL COMMISSIONED SERVICES</b>	<b>232,342</b>	<b>232,430</b>	<b>88</b>	<b>397,701</b>	<b>400,800</b>	<b>3,099</b>

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**APPENDIX 3**  
**GLOSSARY OF TERMS**

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PCC - Plymouth City Council

NEW Devon CCG – Northern, Eastern, Western Devon Clinical Commissioning Group

CYPF – Children, Young People & Families

SCC – Strategic Cooperative Commissioning

EPS – Education, Participation & Skills

CC – Community Connections

FNC – Funded Nursing Care

IPP – Individual Patient Placement

CHC – Continuing Health Care

NHSE – National Health Service England

PbR – Payment by Results

QIPP —Quality, Innovation, Productivity & Prevention

CCRT – Care Co-ordination Response Team

RTT – Referral to Treatment

PDU – Planning & Delivery Unit

UHP – University Hospitals Plymouth NHS Trust