



Northern, Eastern and Western Devon
Clinical Commissioning Group



Plymouth Integrated Fund Finance Report – Month 9 2018/19

Introduction

This report sets out the financial performance of the Plymouth Integrated Fund for the period to the end of December 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.

SECTION 1 – PLYMOUTH INTEGRATED FUND

Integrated Fund - Month 9 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 an overspend position against budget for health of £3.4m at this stage in the year. For the Council, the forecast overspend of £4.1m 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 £7.4m, before corporate contingencies.

Plymouth City Council Integrated Fund Monitoring – Month 9

Service	Latest Approved Budget M9	Latest Year End Forecast	Variation at Month 9	Variation at Month 8	Change in Month
	£m	£m	£m	£m	£m
Children, Young People & Families	37.153	41.217	4.064	4.533	(0.469)
Strategic Cooperative Commissioning	78.401	78.401	0.000	0.101	(0.101)
Education Participation and Skills	101.106	101.106	0.000	0.000	0.000
Community Connections	3.784	3.784	0.000	0.026	(0.026)
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
Sub Total	236.787	240.851	4.064	4.660	(0.596)
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
Total	253.559	257.622	4.064	4.660	(0.596)

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 £4.064m at month 9, an increase of £0.030m in the month. The changes include the following:

- The assumption on minimising the pressure through a reduction in LAC has been removed £0.358m. It should be noted that the majority of the young people discharged are to other permanent arrangements such as Special Guardianship Orders, Child Arrangement Orders and Care Leavers that often require ongoing financial support albeit at a lower rate. The expected saving have been outweighed by the additional cost of new placements coming online as most of these packages have come in at a higher rate.
- The assumption for placements to stepdown has been adjusted down by £0.483m from (£0.670m) to (£0.187m) in line with savings already achieved and a review of the cohort of children who are likely to stepdown by year end. The service have realised savings of £1.471m in the first nine months through step down and step out of placements.
- However, the joint funding assumption with regard to health contribution for young people's placements has increased from (£0.304m) to (£0.404m) an increase of (£0.100m).
- Additional actions equating to (£0.500m) have been put in place to mitigate the above with robust plans to deliver by year end.
- Placements cost and volume overall have increased by £0.210m within the month this can be attributed mainly to two high cost placements one of which was extended due to the court of protection.
- An additional £0.079 of legal agents costs for court work.
- Additional partner funding of (£1.000m) of has been allocated in month 9 to offset part of the underlying additional placement costs.

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 £3.000m to date, although the Service has identified a savings plan £1.647m that will not be achieved this year.

The following actions are being taken to minimise the overheating budget.

- 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.
- Maximise local residential placements to avoid higher out of area associated costs.
- Director & Finance Review all Financial Assumptions

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.
- There are 35 Residential placements with budget for 36. However, there has been a 10.16% increase in the average weekly cost.
- There are 137 Independent Fostering Agency Placements with budget for only 119.
- There are 19 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 in the financial year, 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 December stands at 414, a reduction of 7 in the month.

The number of children placed with independent fostering agencies stands at 137 against a target budget of 119 placements. Residential placements stands at 35 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 are currently 3 young people placed in 'welfare' secure.

The In-House Foster Care placements have 159 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 1 high cost Residential placements. We currently have 19 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 to come in on budget at year end. This is a favourable movement of (£0.101m) from month 8.

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 that are still overheating.

Education, Participation and Skill

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

Community Connections

Community Connections is reporting a balanced budget at Month 9, a favourable variation of (£0.026m) from month 8.

Average B & B numbers for April to December have reduced from 53 to 52 placements per night, although there was a reduction in Housing Benefit income claimed at the start of the year due to the change across to the universal credit system.

There is still a possible variation of £0.026m but with an assumption that this will be mitigated by year end, with a further reduction to average placements by 3 from the current 52 to 49 per night. The service is targeting to reduce placements 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. Action is still ongoing to limit the overall cost pressure through lower placements and prevention work, as well as capitalisation of equipment that will help to bring 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 are being 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		
	Budget	Actual	Variance	Budget	Actual	Variance
			Adv / (Fav)			Adv / (Fav)
Month 9 - December 2018	£000's	£000's	£000's	£000's	£000's	£000's
Children, Young People & Families	3,491	3,491	-	4,655	4,655	-
Strategic Cooperative Commissioning	3,596	3,596	-	4,794	4,794	-
Education Participation & Skills	1,040	1,040	-	1,386	1,386	-
Community Connections	494	494	-	659	659	-
Additional People Savings (apportioned to depts above)	-	-	-	-	-	-
Public Health	56	56	-	75	75	-
	8,677	8,677	-	11,569	11,569	-

Integrated Fund Summary

Health are reporting a forecast unplanned overspend of £3.4m for services commissioned for patients registered with Plymouth GP practices whilst the Local Authority are reporting an unplanned overspend of £4.1m.

This position reflects a deterioration in the health position of £1.6m, largely due to investments to support STP Partners as part of a coordinated system approach to managing the system financial position.

The risk share adjustment that results from the respective health and local authority positions at month 9 indicates that an adjustment of £351k would be transacted, with a flow of funding into the local authority.

SECTION 2 – BETTER CARE FUND (BCF)

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
Source	CCG	ASC	CCG	ASC
BCF	17,701	2,126	18,044	2,298
iBCF_a		764		5,343
iBCF_b		5,800		3,660
Total BCF	17,701	8,690	18,044	11,301
Application	CCG	ASC	CCG	ASC
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		
	12,507	13,884	10,943	18,402

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.”*

SECTION 3 – WESTERN PDU MANAGED CONTRACTS

Context / CCG Wide Financial Performance at Month 9

This report sets out the outturn financial performance of the CCG to the end of month 9 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 96.8% 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 in relation to out of area placements and within the independent sector contracts. These are subject to 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. The Western PDU are reporting a forecast overspend of £2.5m for the contracts that are managed within the PDU.

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 £192.9m for NEW Devon and £4.7m for SD&T CCG. These values include the recent contract variations for RTT support and the Plymouth Orthopaedic Partnership.

Contract Performance

2018/19 M09	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	30,353	29,247	- 4,106	-6.4%	-13.5%	1,028	875	- 153	-4.9%	-14.8%
Non-Elective	53,879	53,722	- 157	4.2%	-0.3%	789	865	77	6.8%	9.7%
A&E + MIU	10,358	10,304	- 54	-0.8%	-0.6%	135	209	74	83.2%	54.5%
Outpatients	25,308	24,299	- 1,007	-4.1%	-4.0%	663	608	- 55	-4.5%	-8.2%
Excluded Services	16,434	17,214	780		4.7%	226	255	29		12.8%
Penalties	-	- 363	- 363			-	- 15	- 15		
Drugs & Devices	10,062	10,635	583		5.8%	341	315	- 25		-7.5%
CQUIN	3,256	3,286	30		0.9%	78	70	- 8		-10.0%
Contract Adjustments	- 6,537	-	6,537			300	-	- 300		
Total	143,101	145,344	2,243		1.6%	3,558	3,182	- 376		-10.6%

Expenditure on Elective Care is 13.5% behind financial plan for NEW Devon and 14.8% for SD&T, representing a combined underspend of £4.3m to month 9 with £1m of this variance occurring in month. The primary drivers of underperformance for NEW Devon include:

1. Orthopaedics – Underperforming by 25.1% worth £1.85m
2. Cardiology – Underperforming by 32.2% worth £643k
3. ENT – Underperforming by 24.5% worth £419k

We have been notified that there have been delays in processing the activity data from the newly operational Plymouth Orthopaedic Partnership which has significantly worsen the Orthopaedic position this month. We expect that this will be corrected in time for the month 10 reporting.

Non-Elective activity is 4.2% ahead of plan compared with a 0.3% under performance in financial terms for NEW Devon. This is after the contract was increased to reflect historical growth trends and includes the activity and spend taking place within the Acute Assessment Unit (AAU).

Accident and Emergency, which includes MIU activity which has been varied into the UHP contract, is ahead of plan by 0.1% or 128 attendances which is an improvement of 361 attendances since month 8, reducing the adverse variance to 0.2% in month 9. The Torbay and South Devon proportion of this part of the contract is small, it should be noted that the activity variance of 83.2% remains exceptionally high.

Outpatient activity and spend has continued to fall behind plan during month 9. Activity is 4.1% or 0.9m behind plan for NEW Devon. Outpatient procedures are ahead of plan by £0.32m whilst new and follow-up attendances are underperforming by £1.4m. At specialty level there are over performances in Plastic Surgery (£85k or

21%), Paediatrics (£103k or 8%), Trauma (£126k or 25%) and Dermatology (£157k or 20%). However, these are offset by significant underperformances in Hepatology (£181k or 18%), Neurosurgery (£171k or 16%), Gynaecology (£169k or 20%) and Clinical Haematology (£156k or 17%).

NEW Devon Passthrough Drugs and Devices are overspent by 5.8% or £0.58m, which is driven by passthrough drugs. Whilst South Devon and Torbay have an underspend of 7.5%, giving a combined overspend of 5.4% or £0.56m.

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 £8.7m. 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 9 this shows an overperformance of £6.5m.

Overall, contract reporting illustrates an over performance of £1.9m for both Devon CCGs. However, a significant contributor to over performance is in respect of the £6.5m 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 £4.3m.

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 9 the activity data shows an underperformance of £0.4m. This primarily driven by underperformances within non elective and passthrough drugs.

Independent Sector & London Trusts

This month the Independent Sector position has improved by £0.4m. This is driven by a reduction in the volume of work that has been going through the Care UK contract in recent months; particularly in hip and knee replacements because of CCG demand management programmes.

At the same time the Orthopaedic work that Care UK previously undertook has been transferred into the Plymouth Orthopaedic Partnership which commenced on the 13th October. University Hospitals Plymouth (UHP) host the Partnership and so this activity has transferred into the UHP contract. As the overall UHP contract is of a fixed financial value this activity has now been fixed, at a level that reflects the continued delivery of the demand management work described above.

Whilst Orthopaedics were the main specialty provided by Care UK, they do also provide other services such as Ophthalmology and Gastroenterology and these

services will continue to be provided by Care UK and be commissioned directly with the CCG.

A further risk of £0.35m 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 £77.3m 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 9 shows a £156k overspend 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 M07 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 £7.4m at this stage. Within this position the Council is forecast to overspend by £4.1m whilst the health position is forecast to be £3.4m overspend with risks continuing to emerge.

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APPENDIX 1

PLYMOUTH INTEGRATED FUND AND RISK SHARE

Month 09 December	Year to Date			Forecast		
	Budget	Actual	Variance	Budget	Actual	Variance
	£000's	£000's	£000's	£000's	£000's	£000's
CCG COMMISSIONED SERVICES						
Acute	119,889	120,693	803	159,852	160,857	1,005
Placements	27,419	26,340	-1,078	35,792	34,374	-1,418
Community & Non Acute	37,705	37,727	22	50,273	50,310	37
Mental Health Services	27,426	27,442	16	36,568	36,589	21
Other Commissioned Services	11,858	11,772	-85	15,810	15,696	-114
Primary Care	34,738	34,679	-58	46,087	46,032	-55
Subtotal	259,034	258,653	-381	344,383	343,859	-525
Running Costs & Technical/Risk	3,280	4,618	988	3,516	7,398	3,881
CCG Net Operating Expenditure	262,314	263,271	606	347,899	351,256	3,357
Risk Share				351	351	
CCG Net Operating Expenditure (after Risk Share)	262,314	263,271	606	347,899	351,607	3,708
PCC COMMISSIONED SERVICES						
Children, Young People & Families	27,865	30,912	3,048	37,153	41,217	4,064
Strategic Cooperative Commissioning	58,801	58,801	0	78,401	78,402	0
Education, Participation & Skills	75,830	75,830	0	101,106	101,106	0
Community Connections	2,838	2,838	-	3,784	3,784	-
Director of people	221	221	-0	295	295	-0
Public Health	12,036	12,036	-	16,048	16,048	-
Subtotal	177,591	180,639	3,048	236,788	240,852	4,064
Support Services costs	10,855	10,855	-	14,473	14,473	-
Disabled Facilities Grant (Cap Spend)	1,724	1,724	-	2,298	2,298	-
Recovery Plans in Development	-	-	-	-	-	-
PCC Net Operating Expenditure	190,169	193,217	3,048	253,559	257,623	4,064
Risk Share				-351	-351	
PCC Net Operating Expenditure (after Risk Share)	190,169	193,217	3,048	253,559	257,272	3,713
Combined Integrated Fund	452,484	456,488	3,654	601,459	608,879	7,421

APPENDIX 2

WESTERN PDU MANAGED CONTRACTS FINANCIAL PERFORMANCE

Month 09 December	Year To Date			Current Year Forecast		
	Budget	Actual	Variance	Budget	Forecast	Variance
	£000's	£000's	Adv / (Fav) £000's	£000's	£000's	Adv / (Fav) £000's
ACUTE CARE						
NHS University Hospitals Plymouth NHS Trust	145,276	145,276	1	193,701	193,701	0
NHS South Devon Healthcare Foundation Trust	4,713	4,713	-0	6,284	6,284	-0
NHS London Contracts	1,281	1,490	209	1,709	2,005	297
Non Contracted Activity (NCA's)	6,880	6,880	-0	9,174	9,174	-
Independent Sector	8,355	10,241	1,887	11,139	13,607	2,467
Referrals Management	1,936	1,936	-	2,581	2,581	-
Other Acute	17	7	-10	23	13	-10
Cancer Alliance Funding	192	192	-0	246	246	-0
Subtotal	168,650	170,736	2,086	224,857	227,611	2,754
COMMUNITY & NON ACUTE						
Livewell Southwest	33,105	33,105	0	44,140	44,140	-0
GPwSI's (incl Sentinel, Beacon etc)	1,251	1,251	0	1,668	1,668	-
Community Equipment Plymouth	486	486	-0	648	648	-
Peninsula Ultrasound	214	203	-10	285	285	-
Reablement	1,138	1,138	-0	1,517	1,517	-
Other Community Services	192	192	0	256	256	-
Joint Funding_Plymouth CC	6,533	6,533	-0	8,711	8,711	-
Subtotal	42,918	42,908	-10	57,225	57,224	-0
MENTAL HEALTH SERVICES						
Livewell MH Services	24,793	24,793	-	33,059	33,059	-
Mental Health Contracts	20	20	-0	26	26	-
Other Mental Health	823	824	1	1,097	1,097	-
Subtotal	25,636	25,637	1	34,182	34,182	-
OTHER COMMISSIONED SERVICES						
Stroke Association	120	120	-0	159	159	-
Hospices	2,096	2,065	-31	2,795	2,751	-44
Discharge to Assess	4,960	4,960	0	6,613	6,613	-
Patient Transport Services	1,741	1,741	-0	2,321	2,321	-
Wheelchairs Western Locality	1,350	1,410	60	1,800	1,880	80
Commissioning Schemes	143	121	-22	191	159	-32
All Other	817	751	-65	1,089	979	-110
Subtotal	11,226	11,167	-58	14,968	14,862	-106
PRIMARY CARE						
Prescribing	41,615	41,731	116	55,156	55,312	156
Medicines Optimisation	231	231	0	307	307	-
Enhanced Services	7,150	7,150	-0	9,533	9,533	-
GP IT Revenue	1,913	1,913	0	2,550	2,550	-
Other Primary Care	3,204	3,204	0	4,272	4,272	-
Subtotal	54,112	54,228	116	71,818	71,974	156
TOTAL COMMISSIONED SERVICES	302,542	304,677	2,134	403,050	405,854	2,804

APPENDIX 3
GLOSSARY OF TERMS

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