

Paper Title

SWAG Cancer Alliance Finances 2021/22

Sponsor and Author/s

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Action/Decision Required

For Decision

Executive Summary

Purpose

This paper presents the current Cancer Alliance (CA) allocation for 2021/22 and describes how it is being allocated.

Background

The Cancer Alliance receives a yearly allocation of funds, the majority of which is received by BNSSG CCG on behalf of stakeholders. The funds fall into three categories:

- Service Development Funding (SDF)-this includes core team funding
- Rapid Diagnostic Services Funding (RDS)
- Innovation Funding

Funding for 2021/22 is to be used to support COVID recovery and re-focus on the delivery of the cancer elements of the Long Term Plan

Recommendations

It is recommended to allocate the SDF funds in the following way:

Total SDF	4,224,000
Core Team	573,000
Personalised Care and Support	1,000,000
Cross Cutting	
CRUK Facilitators x2 WTE	112,000
Clinical Advisory Group Support	110,000
CSU BI/Data/Programme Management	120,000
Clinical Leadership	170,000
Genomics	50,00
Cross Cutting Total	562,000
Total	2,135,000
SDF Balance for Systems	2,089,000

It is recommended to allocate the RDS funds in the following way:

Total RDS	3,343,300
SWAG Top slice (20%) for RDC	
transformation support (system)	668,650
RDS Balance for Systems to be split on	2,674,650
a fair shares basis	

The table below indicates how SWAG is recommending allocating funds to each system, based on fair shares:

System	SDF – Recovery (f/s)	SDF – PCS (f/s)	RDC (f/s)	Innovations - Cytosponge	Total	
BNSSG	710,260	340,000	909,370	0	1,959,630	
BSW	501,360	240,000	641,920	111,000	1,494,280	
GCIS	459,580	220,000	588,420	111,000	1,379,000	
Somerset	417,800	200,000	534,940	0	1,152,740	
	2,089,000	1,000,000	2,674,650	222,000	5,985,650	

f/s = fair shares, BNSSG 34%, BSW 24%, GCIS 22%, Somerset 20%

Half the allocation confirmed will be released to BNSSG CCG in the first half of the year. This will be transferred in Q1, expected by end of month 2. The remaining half will be made available in the second half of 2021/22 and will include other funding streams not outlined, for example TLHC expansion funding. More details will follow regarding the funding process for the second half of 2021/22.

Please note allocations are transferred on the understanding that the reporting requirements associated with the work programmes are met.

As part of the planning process the Cancer Alliance are in the process of working with systems to determine the detail of how they allocate the monies in the table above.

The Board are asked to note the contents above and agree to allocating funds in the manner described