

Meeting of South Ayrshire Health and Social Care Partnership	Integration Joint Board									
Held on	Wednesday 25 th November 2020									
Agenda Item:	8									
Title:	Covid-19 Fi	nancial Implications								
Summary:										
The purpose of this report is to financial implications of the H		ntegration Joint Board of the projected use to the Covid-19 pandemic.								
Author:	Lisa Dunca	n, Chief Finance Officer								
Recommendations:										
Pandemic based on the ii. Note the funding receive	ost of £8.2 assumption ed to date	69m in responding to the Covid-1	9							
Route to meeting: Budget Working Group 11/11/	'20									
Directions:	\square	Implications:								
No Directions Required		Financial								
Directions to NHS Ayrshire & Arran		HR								
		Legal								
Directions to South Ayrshire Council		Equalities								
4. Directions to both SAC &		Sustainability								
NHS		Policy								
		ICT								



COVID-19 FINANCIAL IMPLICATIONS

1. PURPOSE OF REPORT

1.1 The purpose of this report is to provide the IJB with an update on the projected costs in responding to the Covid-19 pandemic.

2. **RECOMMENDATION**

- 2.1 It is recommended that the Integration Joint Board:
 - i. Note the estimated cost of £8.269m in responding to the Covid-19 Pandemic based on the assumptions;
 - ii. Note the funding received to date
 - iii. Note the financial risks faced by the IJB for 2020-21 until all funding has been confirmed

3. BACKGROUND INFORMATION

- 3.1 Responding to the Covid-19 pandemic has significant cost implications, from the outset of the pandemic the Health and Social Care Partnership had a clear plan of action to ensure we were responding to the specific needs in our community.
- 3.2 The local financial mobilisation return captures the operational activities alongside the financial impact, this plan is reviewed and updated regularly as plans change and new legislation comes into place. The financial mobilisation return for SAHSCP is submitted to Scottish Government on a regular basis by NHS Ayrshire Arran the return is a combination of costs from all Ayrshire HSCP's and NHS Ayrshire and Arran.
- 3.3 On the 29th of September, the Cabinet Secretary for Health and Sport announced £1.1bn of funding for NHS Boards and Health and Social Care Partnerships (HSCP's) this includes £83m already received by HCPS for local authority delegated services.
- 3.4 The £1.1bn, now covers all costs identified in the local mobilisation returns for Qtr1 and then 70% of projected costs for the rest of the year (up to NRAC/GAE share). However social care cost have only been allocated at 50% as these are largely driven by the sustainability payments for third party providers. The latest allocation was based on the Qtr1 local mobilisation return submitted on the 14th of August. This did not include the extension of the provider sustainability principles, and there was also a high level of uncertainty at this time of the projected costs. Scottish Government have committed to look at a further allocation in January. An additional return has been provided substantiated the provider sustainability payments made to date.
- 3.5 Of the £1.1bn, we have received to date funding of £4.629m based on Qtr1 return of £6.012m submitted on the 14th of August. The allocation of £4.629m split to NHS £0.847m and Council £3.782m. The latest submission on the 23rd



of October for Qtr2 increased the expected expenditure to £8.269m as a result of the extension of the sustainability payments and a surge in the virus has had implications to staffing levels in both partner organisation as well as with providers.

4. REPORT

4.1 The Qtr2 local mobilisation finance return was submitted to the Scottish Government on the 23rd of October, the return was based on actual costs to the end of September and estimated costs for the remainder of this financial year. This submission includes the financial costs associated with responding to the initial pandemic, recovery and renewal activities and extension of the provider sustainability payments.

The costs are categorised as shown below, with explanation of each cost and purpose detailed in following sections. The local mobilisation plan return is included in Appendix 1.

	NHS	SAC	Total Expected Spend
Areas of Spend	£'000	£'000	-
Delayed Discharges - Care home Beds		671	671
Delayed Discharges - Care at home hours		267	267
Delayed Discharges - Additional Biggart Beds	545		545
Community Equipment Store	367		367
Personal Protective Equipment (PPE)	16	934	949
Payments to Providers		1,845	1,845
Staffing Costs	613	1,244	1,856
Estates and Facilities Costs	115		115
Community Care		420	420
Children and Families		88	88
Offsetting Cost Reductions		(341)	(341)
Delay in Achieving Savings		445	445
Loss of Income		189	189
Other - small items	36	56	92
Remobilisation - Increase in care at home hours		642	642
Winter Planning		118	118
TOTAL MOBILISATION PLAN	1,691	6,577	8,269



Delayed Discharges

4.2 <u>Care Homes - £0.671m</u>

Initial response to the pandemic was to reduce delayed discharges, this was a national directive from the Cabinet Secretary to release beds in hospital to prepare for an increase in Covid-19 related admissions. During the period from 4th of March to 28th of April we reduced our delayed discharges from 76 to 30. This was facilitated by commissioning an additional 27 care home beds from the private sector. These costs are included in the financial mobilisation plan until the end of July 20, this being a reasonable estimate of when they would have been funded within the current HSCP care home budget had Covid not accelerated the necessity to move, and provided the additional funding necessary to facilitate as under current financial constraints the placements would have been delayed.

We also recommissioned the Buchanan Ward at Biggart Hospital preparing the ward to facilitate 30 community care beds if required. To date these beds have not been needed, due to the capacity available with private care home sector.

4.3 Care at Home - £0.267m

Additional care at home hours were purchased to facilitate delayed discharges with an additional 600 hours per week purchased initially, reducing by end of September, following same principle as care home beds there would be an expectation that these hours would be required and met within the current budget as when capacity became available.

4.4 Additional Biggart Hospital Beds - £0.545m

The current budget for Biggart meets the needs of 66 beds, in order to stay in a state of readiness and relieve pressure within the acute hospital, funding has been provided to enable 83 beds to be maintained. Funding required to support bank staff requirements for the additionality.

4.5 Community Equipment Store - £0.367m

Additional equipment was purchased at the outset of the pandemic again to facilitate delayed discharges. The equipment store was also expanded to provide a seven-day delivery service to support people at home with equipment requiring additional staff.

4.6 Personal Protective Equipment - £0.949m

The pandemic has caused unprecedented increase in demand for personal protective equipment (PPE) on a global scale. The increase in demand and guidance on what minimum requirements are for staff and carers. A PPE store has been set up and staffed to support the ordering, supply and distribution to health and social care staff, independent providers and carers. The store is



currently located at McCalls Avenue in Ayr. The weekly demand for our social care services is included in the table below. The PPE supply received from the NHS National Services Scotland (NSS) is distributed by the PPE store to independent care homes, providers and carers.

The PPE supply is under current review and procurement have been working with Scotland Excel to ascertain the effect on costs and supply following Brexit, there is also a National Group set up to look at the future of PPE delivery and distribution as not all partnerships are working consistently. Some are able to source all their PPE demand direct from NSS supply and others have incurred additional costs in procuring their own.

	Forecast Weekly Unit	Total Unit	
Details / Descripton	Requirement	Item Cost	Cost
Type IIR surgical masks @0.92	12,600	£0.92	£11,592
Full Face Visors	350	£0.73	£256
Eye Protection Frames & Lenses/Goggles	50	£6.00	£300
Disposable Aprons @ £0.10 per apron	12,600	£0.10	£1,260
Nitrile Gloves @ £0.06 per glove	35,280	£0.06	£2,117
Vinyl Gloves @ £0.03 per glove	15,120	£0.03	£454
		Per Week	£15,978

4.7 Provider Sustainability Payments - £1.845m

To ensure providers remain viable during this period and are reimbursed for excess costs associated in dealing with the pandemic, COSLA provided nationally agreed principles that align with COSLA guidance for commissioned services. These principles informed our response to providers to ensure financial sustainability. The additional costs associated with supporting providers are included in the mobilisation plan. On the 6th of November a further update on Provider Sustainability payments was approved extending the transitional arrangement for care home occupancy and payments for planned care. This was in recognition of the increase in Covid 19 virus in our communities.

The payment principles have been extended to support to care homes payments based on 50% of occupancy in November and payments on planned care for community-based support to be extended to end of November. The reimbursement of PPE costs and the Social Care Staff Support fund are to continue to the end of the year.

Discussions between stakeholders over November will take place to ensure new arrangements are put in place from the beginning of December.

Providers are expected to claim any national relief and business grants to ensure no duplication of financial support. They are also advised to look where costs can be reduced in their business models by for example redeploying staff.



The main elements of financial support are noted below:-

Additional Expenditure £0.400m– providers are able to claim for additional costs associated with increase in PPE costs, agency costs or increased staffing costs as a result of higher levels of sickness absence and infection control expenses. Evidence is requested to view costs for the three months prior to Covid-19 and any additional costs incurred are reviewed with supporting evidence, to allow reimbursement for the additional expenditure.

Occupancy Payments £1.245m – the National Care Home Contract (NCHC) is a spot purchased contract, the HSCP therefore only pay for current placements. In order to keep care homes financially viable, COSLA agreed to pay care homes based on their average occupancy levels for the three month period to 23rd of March 2020.

Social Care Staff Support Fund – £0.200m – the Scottish Government have set up this fund to ensure all social care workers who are absent from work due to Covid-19 either from contracting the virus or having to self-isolate are paid their expected income. This fund is being administered by HSCP alongside the above sustainability payments, and is active until the 31st of March 2021.

4.8 <u>Loss of Income - £0.189m</u>

The Council took a decision to delay the increase charges by inflation approved in the budget for 20-21, this included social care charges. The HSCP charge for non-personal care provided in the community, these charges were ceased at the beginning of the pandemic, as there could be no guarantee that providers would have capacity to provide all supports. As supports have now settled with the exception of day care and group supports, the charge will be reinstated at end of September, in line with the COSLA provider sustainability principles. Charges for community alarms and meals continue as there was no change to these services.

4.9 Staffing Costs - £1.856m

Responding to the pandemic has involved additional costs in supporting sickness levels and increased levels of demand for care in some areas.

Additional Staff time and Enhancement - £0.990m required to keep core services in operation, mainly key workers costs in care at home, our own care homes, community hospitals.

Children houses - £0.048m a new staff rota was put in place to ensure adequate cover and support available for the children living there.

Care Home rapid response team - £0.155m enhanced payments to a selected team of care at home assistants to provide rapid response to support commissioned care homes where they are experiencing a significant shortfall in staff as a result of an outbreak.



Allied Health Professionals (AHP's) - £0.165m have been redeployed to support critical services within Acute and Community wards and critical services on a Pan Ayrshire basis. Physiotherapy clinical leadership in respiratory care at Ayr Hospital has been developed, staff and are now working a 7 day shift pattern, resulting in enhanced payments.

Care at Home Out of Hours Service - £0.156m to increase capacity in the current service to provide support to respond to service users out with normal care at home delivery times, this provides reassurance to services user and has avoided unnecessary admission into hospital.

PPE store and Community Equipment store staff - £0.124m – the PPE store is a new service created as a result of the pandemic to maintain stock levels and distribute the PPE this involves additional staff, who were initially redeployed from Council services. As Council services return to normal we need to fund the additional 6 FTE's from 1st of September to the end of the year to support PPE store and the delivery of community equipment.

Chief Social Work Officer (CSWO) Support - £0.025m — funding has been agreed by the Chief Social Work Adviser to provide support to the Chief Social Work Officer in their additional role in the oversight of care homes in their area. This is being used to fund additional hours from business support.

Child Protection Officer - £0.035m – additional part year funding to provide support to meet the 50% increase in chid protection referrals.

Student Nurses - £0.133m were provided with short term contracts to support the Covid response, they are working within Biggart Hospital, Girvan Hospital and district nursing teams, the contracts are in place until end of September when some will go back to their studies and other's will be given opportunities to take up full time posts created within next phase of recovery and renewal.

Staff Group	Start Date	Apr/May	June	July	August	Sept	Example location
Band 3 Care Of Elderly Nrsg	13-Apr	5,151	3,220	3,220	3,220		Biggart
Band 3 General Acute Nursing	27-Apr	2,006	2,006	2,006	2,006		Girvan
Band 3 Learning Disab Nursing	27-Apr	1,891	1,891	1,891	1,891		House 4-7
Band 4 Care Of Elderly Nrsg	13-Apr	5,151	3,220	3,220	3,220	3,220	Biggart
Band 4 District Nursing Serv	13-Apr	8,870	5,544	5,544	5,544	5,544	DN Teams
Band 4 General Acute Nursing	13-Apr	2,663	1,664	1,664	1,664	1,664	Girvan
Band 4 Learning Disab Nursing	06-Apr	7,762	4,086	4,086	4,086	4,086	CLDT, House 4-7
		33,495	21,630	21,630	21,630	14,513	AIS109

4.10 Estates and Facilities Costs - £0.115m

Additional costs incurred in cleaning premises and equipment, including decontamination of vans used in community equipment store and hire of additional vans required to deliver equipment safely with the increased need of decontamination after each visit, this has resulted in additional transport



required to keep the distribution and collection of equipment at pre Covid-19 levels.

4.11 Other Community Care - £0.420m

Additional costs in supporting services users in the community have been incurred due to the closure of day care services. To continue providing service users meals a freezer was purchased and meals taken to users who would have received this when attending day care. Additional telecare has been purchased as staff were unable to retrieve old equipment during lockdown. Reconfiguration of adult respite care incurred additional costs in hiring a vehicle and unit cost increase in providing residential respite, it was necessary that these services continue to provide support to carers.

4.12 Children and Families - £0.088m

Due to social distancing measure the respite care for children with additional support needs reduced significantly. The HSCP recommissioned a service that had ended in January, resulting in additional costs, but this provided extra respite nights that were necessary to support carers and avoid family breakdowns.

4.13 Offsetting Cost Reductions - (£0.341m)

Due to the nature of services delivered by the HSCP and the measures put in place to stop the spread of Covid-19, there has been a reduction costs in day care provision £0.059m, adult group work £0.131m and meals provided to the day care by Ayrshire and Arran Health Board £0.050m. The pandemic also affected care home occupancy levels funding reducing our actual spend on care home beds by £0.100m from pre Covid levels.

4.14 Delay in achieving savings - £0.445m

Within budget for 2020-21 savings were approved for specific plans, that have now been paused as resources have been redirected to respond to Covid-19, it is anticipated that plans will resume to achieve the remainder of the savings.

Saving Description	Delay in Savings	Detail
Elba Gardens Development	£0.085m	Savings not expected to be achieved, review to be undertaken to see if savings amount can be reallocated
Commissioning of services	£0.035m	Savings through review of prior year recurring underspends £0.035m can not be achieved
Review of Adult Community Care Packages	£0.325m	The review and implementation of revised Self Directed Support practice was anticipated to achieve savings from changes in care delivery through greater choice and control



4.15 Other small items - £0.092m

This includes funding for IT equipment, supporting young carers and carers providing them with technology to maintain social interaction.

4.16 Remobilisation Plan 2 - £0.642m

Following the submission of the Health Board remobilisation plan 2, this identified additional costs within health and social care that are expected to continue into the recovery phase and at least to the end of the financial year.

Additional Care at Home Capacity - £0.545m, current performance highlights an increase of 5% in care required on average 1 hour per week additional to each service user. This has been evidenced from care managers advising deterioration in service users mobility and general health as an effect of isolation.

Additional Reablement Staffing - £0.098, to maintain levels of delayed discharge additional resource is required within the team to facilitate a home from hospital approach.

4.17 Winter Planning - £0.118m

Annually funds are allocated from the Scottish Government to prepare for supporting additional pressures in health and social care over the winter period, this year the funds have been allocated through the mobilisation plan.

4.18 Financial Risks

The financial risks within the IJB's delivery of health and social care services at present are:

- Anticipated funds from the Scottish Government allocated in local mobilisation financial returns does not meet all the costs associated in responding to the pandemic;
- Risk that any shortfall cannot be recovered in the financial year, and the IJB overspend and current debt repayment increases, we are already assuming payment of £1.092m this year within the budget and
- Uncertainty over funding requirements for 2021-22, particularly in relation to commissioned services from the private sector and the increase in PPE costs

However, there is no recommendation at present to implement a Financial Recovery Plan based on

- SG have provided assurance that additional costs will be funded following a due diligence exercise and transparency on unachieved savings
- The projected underspends identified this period through budget monitoring process and through analysis estimates the potential shortfall to be £1.026m



 The most significant cost in the Covid plan is PPE and Provider sustainability payments, these costs are being reimbursed in full

5. STRATEGIC CONTEXT

5.1 The IJB is expected to operate within the resources available. This report contributes to the IJB Strategic Objective to "operate sound strategic and operational management systems and processes."

6. IMPLICATIONS

6.1 Financial Implications

6.1.1 The financial implications in relation to the Covid-19 pandemic are outlined within the report.

6.2 Human Resource Implications

6.2.1 There are no human resource implications arising from this report.

6.3 Legal Implications

6.3.1 There are no legal implications arising from this report.

6.4 Equalities implications

6.4.1 There are no immediate equality implications arising from the report.

6.5 Sustainability implications

6.5.1 There are no environmental sustainability issues arising from the approval of this report by the IJB.

6.6 Clinical/professional assessment

6.6.1 There are no clinical or professional implications arising from this report.

7. CONSULTATION AND PARTNERSHIP WORKING

7.1 This report has been prepared in conjunction with colleagues from South Ayrshire Council and NHS Ayrshire and Arran.

8. RISK ASSESSMENT

8.1. Financial risks are included in the report.

REPORT AUTHOR AND PERSON TO CONTACT

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BACKGROUND PAPERS

None.

17.11.2020



	dditional COVID-19 Costs- HSCP									SEPTEMBER 2020				
For completion upon	atting Quarterry (зине, зері, і	Dec, ivial cit	,										
													Revenue	
H&SCP Costs (NHS delegated Costs)	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	2020/21	Supporting Narrative
Additional Hospital Bed Capacity/Costs - Maintaining Surge Capacity													-	
Delayed Discharge Reduction- Additional Care Home Beds													-	
Delayed Discharge Reduction- Additional Care at Home Packages													,	
Delayed Discharge Reduction- Other measures	274,000						317,917	45,417	45,417	45,417	45,417	45,417	819,000	Biggart Hospital Additional 12 beds to remain open to support Delayed Discharge/Acute Pressures
Personal protective equipment			6,581	(5,712)	7,634	1,015	1,015	1,015	1,015	1,015	1,015	1,015	15,608	
Deep cleans			923	(923)									-	
COVID-19 screening and testing for virus													-	
Estates & Facilities cost including impact of physical distancing measures			16,894	(2,397)	(3,334)	0	104,000						115,162	
Additional staff Overtime and Enhancements			8,643	(8,643)	161,136	(46,246)	25,000	25,000	25,000	25,000	25,000	25,000	264,890	
Additional temporary staff spend - Student Nurses & AHP			165,797	(24,048)	1,118	75,397	13,786	13,786	13,786	13,786	13,786	13,786	300,976	
Additional temporary staff spend - Health and Support Care Workers													-	
Additional temporary staff spend - All Other			8,725	81,307	(68,398)	0	4,167	4,167	4,167	4,167	4,167	4,167	46,634	Staff to Support CSWO £25k from Aug 20. (NHS admin in post)
Additional costs for externally provided services (including PPE)													-	
Additional Travel Costs				9,211	1,858	0	3,500	3,500	3,500	3,500	3,500	3,500	32,069	
Digital, IT & Telephony Costs			1,893	3,835	(3,789)	2,450							4,390	
Communications													-	
Equipment & Sundries			43,805	14,251	3,712	773	5,000	5,000	5,000	5,000	5,000	5,000	92,542	
Total	274,000	-	253,260	79,282	87,537	33,390	474,384	97,884	97,884	97,884	97,884	97,884	1,691,272	
											Ì	Subtotal		
Expected underachievement of savings (HSCP)													-	
Total	274,000	-	253,260	79,282	87,537	33,390	474,384	97,884	97,884	97,884	97,884	97,884	1,691,272	

						Reve	nue						Revenue	
H&SCP Costs (Local Authority delegated Costs)	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21		Supporting Narrative
Additional Hospital Bed Capacity/Costs - Maintaining Surge Capacity	Apr-20	may-20	0011-20	0ti-20	Aug-20	00p-20	001-20	1407-20	DCC-20	Juli-21	100-21	mai-£i	2020/21	Supporting Narrative
Additional Flospital Bed Capacity/Costs - Maintaining Guige Capacity														Actual Costs incurred £267k - 49 Care home beds to assist with Delayed Discharge in March (
Delayed Discharge Reduction- Additional Care Home Beds	6.044	161,429	41.861	44.667	13.124	54.285	54,285	54.285	54.285	54,285	54.285	54.285	647 120	27 beds to July - £267k) 22 full year costs additional £380k.
belayed bischarge reduction. Additional Gale Floric Beds	0,044	101,423	41,001	44,007	10,124	04,200	34,203	34,203	34,203	34,203	34,203	34,203	047,120	Actual Costs to July 20 £155k - 600 additional hours for care at home providers to support
Delayed Discharge Reduction- Additional Care at Home Packages	31.132	57,851	64,536	68.500	44.903	0	0	0	0	0	0	0	266 922	delayed discharges
Delayed Discharge Reduction- Other measures	1,114	37,031	11,502	9.649	1.215	0	0	0	0	0	0	0		Increasing capacity in our own care home - initial costs of recomissioning beds
Body od Bloomargo Hoddodon Othor mododroo	.,		11,002	0,010	1,210	- ŭ	-	Ů	Ů		ŭ	Ů		Increased £71k Additional PPE for social care sector inhouse needs NSS supply directed to NHS
Personal protective equipment	123,760	261,061	112.193	32.132	131.839	28.588	33.000	110.000	33.000	20.000	20.000	20.000		needs and independent sector.
Deep cleans	494	39	153	42	143	1.091	1,000	1.000	1.000	1,000	1.000	1.000	7.962	noods and mospondent dector.
COVID-19 screening and testing for virus	101	- 00	100		1.10	1,001	1,000	1,000	1,000	1,000	1,000	1,000	- ,002	
Estates & Facilities cost including impact of physical distancing measures														
Estates a Fasimise seet moraling impact of physical distancing measures														Care Home Rapid Response £170k, Care at Home out of hours £250k, C&F Res House cover
														£48k, students initial covid response £44k, £400k care at home/ care home/telecare staff
Additional staff Overtime and Enhancements	1.766	58.738	107,702	125.611	80.739	73.536	80.000	80.000	80.000	80.000	80.000	80.000	928 092	overtime
Additional temporary staff spend - Student Nurses & AHP	1,700	00,700	107,702	120,011	00,700	70,000	00,000	00,000	00,000	00,000	00,000	00,000	-	OVOLUMB CONTROL OF THE PROPERTY OF THE PROPERT
Additional temperary oran openia orangemental orangement and orangement and openia orang														Temp Staff to enhance out of hours service £156kpa. PPE and Community Equipment staffing
Additional temporary staff spend - Health and Support Care Workers		26.018	13.009	13.009	28.572	28.572	28,572	28.572	28.572	28,572	28.572	28.572	280 610	£124k from 1 Aug 20 to 31 March 31.
Additional temporary staff spend - All Other	0	0	0	0	0	5.042	5,042	5.042	5,042	5.042	5.042	5.042	35,294	Additional Child Protection Officer to support recovery from COVID from 1 Sep 20 - £35k
Additional temporary stain spend - All Other	0	U	Ü	U		5,042	3,042	3,042	3,042	3,042	0,042	5,042	00,204	Support now extended to Mar - PPE £400k, Staff Social Care support £200k, Care Homes
Additional costs for externally provided services (including PPE)		17.661	47.391	450.621	195.972	190.605	200.000	200.000	200.000	100.000	100.000	142.790	1.845.040	
Social Care Support Fund- Costs for Children & Families Services (where		17,001	47,001	430,021	155,572	130,003	200,000	200,000	200,000	100,000	100,000	142,730	1,040,040	21.27011
delegated to HSCP)								4.000	4.000	4.000	4.000	4.000	20,000	Estimate - £20k, nothing received to date , further email sent out with information and deadlines
Cost to 3rd Parties to Protect Services (where services are currently stopped)								4,000	4,000	4,000	4,000	4,000	20,000	Estimate - £20k, nothing received to date , further email sent out with information and deadlines
Additional costs to support carers	497	0	191					500	500	500	500	500	3.188	
Mental Health Services	431	0	191					300	300	300	300	300	3,100	
Iviental Fleatur Services														Providing alternative day care £60k , i.e. staff travel, lunches for service users. Telecare £20k
Other community care costs	1.363	372	12.304	4.589	36,569	51.613	52.000	52.000	52.000	52,000	52.000	50.448	417 257	Hansel Respite £337k
Other community care costs	1,303	312	12,304	4,303	30,303	31,013	32,000	32,000	32,000	32,000	32,000	30,440	417,237	Income charges waived for non personal care, and inflationary charges waived in line with
Loss of income	31.500	31.500	31.500	31.500	31.500	31.500							189 000	Council policy.
Staff Accommodation Costs	31,300	31,000	31,300	31,500	31,300	31,000							100,000	Countril policy.
Additional Travel Costs	3	3.762	5.443	3.718	4.001	9.166	4.000	4.000	4.000	4 000	4.000	4.000	50.093	Additional vehicles to support out of hours and respite mini breaks service
Digital, IT & Telephony Costs	0	307	0	1,614	600	3,100	500	500	500	500	500	500	5,521	Additional vehicles to support out of floars and respite mini breaks service
Digital, IT & Telephony costs	0	307	Ů	1,014	000		300	300	300	300	300	300	0,021	respite care provision for children with additional support needs, recommissioned a closed unit to
Children and Family Services	80	893	24,162	849	708	827	9.146	6.790	6.111	6.111	6.111	6,111	67 900	enable social distancing.
Official and Family Octobers	- 00	000	24,102	043	700	021	3,140	0,730	0,111	0,111	0,111	0,111	07,300	Additional staff to support reablement to maintain levels of delayed discharge and facilitate home
Costs associated with new ways of working- collaborative								19.576	19.576	19.576	19.576	19.576	97 878	from hospital
Winter Planning								13,370	39,444	39,444	39,444	13,570	118,333	non nospital
Whiter Fleining									55,444	55,444	55,444			Care at home service users on average 1 hour per week increase, annual 920 additional hours
Additional Care at Home Packages (hours increased)					31.157	104.733	68,164	67,945	67,945	67.945	67.945	67.945		per week to maintain service users at home.
Offsetting cost reductions - HSCP	(51 107)	(51 107)	(51 107)	(51 107)	(51 107)	(51 107)	(6.814)	(6.814)	(6.814)	(6.814)	(3.407)	(3.407)	(340,713)	por moon to manifesti ou vice doors at nome.
Total	146,647	568.524	420.840	735.393	549.934	528,450	528.895	627.396	589.161	476.161	479.568	481,362	6.132.330	12 1 4 9 0
1000	170,047	300,324	720,040	100,033	545,554	320,430	020,030	021,030	303,131	710,101	47.5,556	Subtotal	0,102,000	
Expected underachievement of savings (HSCP)	37.094	37.094	37.094	37.094	37.094	37.094	37.094	37.094	37.094	37.094	37.094	37.094	445.125	
Total	183.740	605.618	457.934	772.487	587.028	565.544	565,989	664,489	626.255	513.255	516.662	518.455	6.577.455	
Total	103,740	003,010	457,934	112,401	307,020	303,344	303,969	004,409	020,233	313,233	310,002	310,433	0,377,433	