

Meeting of South Ayrshire Health and Social Care Partnership	Integration Joint Board	
Held on	17th August 2022	
Agenda Item:	8	
Title:	Budget Monitoring Period 3 – 30th June 2022	
Summary: The purpose of this report is to advise the Integration Joint Board of the projected outturn for the year as estimated at Period 3 the 30 th of June 2022		
Author:	Lisa Duncan, Chief Finance Officer	
Recommendations: It is recommended that the Integration Joint Board		
<ul style="list-style-type: none"> (i) Note the projected financial outturn to 30th of June 2022; (ii) Note the projected outturn in relation to Lead Partnership services; (iii) Note the projected outturn within the Acute Services budget and Set Aside budgets; (iv) Note the progress made towards savings; (v) Note the Covid-19 projected spend to 30th of June 2023; (vi) Approve the earmarking of funds in Section 4.11; (vii) Approve the budget virements in Section 4.12; (viii) Note the key financial issues and risks for the IJB 		
Route to meeting:		
Directions:		Implications:
1. No Directions Required <input type="checkbox"/>		Financial <input type="checkbox"/>
2. Directions to NHS Ayrshire & Arran <input type="checkbox"/>		HR <input type="checkbox"/>
3. Directions to South Ayrshire Council <input type="checkbox"/>		Legal <input type="checkbox"/>
4. Directions to both SAC & NHS <input type="checkbox"/>		Equalities <input type="checkbox"/>
		Sustainability <input type="checkbox"/>
		Policy <input type="checkbox"/>
		ICT <input type="checkbox"/>

BUDGET MONITORING PERIOD 3 – 30TH JUNE 2022

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to advise the IJB of the projected financial outturn for the financial year as at 30th June 2022. The report will also provide an update on the projected financial costs in the continued response to the Covid-19 pandemic, progress made against savings previously approved, movements on the annual approved budget for 2022-23. Request for approval on use of reserves and budget virements for approval are also included.

2. RECOMMENDATION

2.1 It is recommended that the Integration Joint Board

- (i) Note the projected financial outturn to 30th of June 2022;
- (ii) Note the projected outturn in relation to Lead Partnership services;
- (iii) Note the projected outturn within the Acute Services budget and Set Aside budgets;
- (iv) Note the progress made towards savings;
- (v) Note the Covid-19 projected spend to 30th of June 2023;
- (vi) Approve the earmarking of funds in Section 4.11;
- (vii) Approve the budget virements in Section 4.12;
- (viii) Note the key financial issues and risks for the IJB

3. BACKGROUND INFORMATION

- 3.1 The projected year end outturn as at end of June 2022 is an overall underspend of £4.397m. This includes the partnerships' share of the Lead Partnership underspends. The continued cost in responding to the Covid pandemic is included in the report based on the assumption that costs will be fully funded from carry forward reserves, full details are included in Section 4.6. The projected outturn is broken down as follows:

- Social care services delivered by South Ayrshire Council are projected to be underspent by £3.772m,
- Managed services delivered by NHS Ayrshire and Arran are projected to be underspent by £0.742m,
- Lead Partnership arrangements are projecting an overspend of £0.117m, this includes our share of East Ayrshire's underspend and North Ayrshire's overspend combined with their contribution to our lead partnership services overspend.

4. FINANCIAL COMMENTARY

The integrated budget for 2022-23 is £281.775m, with a projected underspend of £4.397m.

Appendix A provides the projected financial position for the partnership and highlights the variances in service expenditure. Appendix B provides detail per partner.

The following sections will provide an overview of the projected financial outturn and underlying assumptions. An explanation of budget movements in year along with use of uncommitted reserves and budget virements seeking approval. Progress on savings to be achieved, and a summary of Covid-19 financial impact. Reserves update and budget virements and use of reserves for approval.

4.1 Community Health and Care – projected underspend of £0.905m

Against a full year budget of £76.067m, there is a projected underspend of £0.905m (1.19%). The main reasons for the underspend are:

Purchased Care at Home Service projected underspend of £0.700m. The budget can afford 10,825 hours per week however due to capacity issues in the private sector we are only able to purchase 9,388 hours per week. We have been collaborating with providers to recruit into jobs in health and social care and held various in person events that have been well attended. The projection assumes a 10% increase in purchased care at home hours over the winter period.

Demand for care at home services at present exceeds the capacity available, with weekly information on unmet need collected, reviewed and presented to Scottish Government. The service have invested in Occupational Therapy Assistants in the Reablement Team to focus on working with service users who are not able to have their needs met. This team will focus on providing reablement support, optimise independence to reduce hospital admission and demand on mainstream care at home. Further investment in VASA to provide early intervention and preventative support to help reduce demand on services has also been approved.

Appendix E highlights the trend in purchased care at home over the last twelve months along with the demand for care at home and the capacity available.

Allied Health Professionals – projected underspend of £0.335m, due to delay in recruitment. Projection based on estimated start dates based on vacant posts approved for recruitment.

Intermediate Care and Rehab – projected underspend of £0.328m, projection assumes vacant posts are filled in remaining 6 months of the year.

Older People respite services projected underspend of £0.155m due to decrease in demand for residential and community based respite care.

The above underspends have been offset with overspends in the following services:-

Biggart Hospital – projected overspend of £0.308m due to use of bank and borrowed staff to support increase levels of one to one support required. As at 5th of August there were 34 delayed discharges in Biggart Hospital, 20 waiting on care at home services. At present there are 83 beds in use, with an additional 12 beds commissioned to provide capacity in responding to Covid the costs of these £0.545m are included in the local mobilisation plan.

The future model for Biggart Hospital has been agreed with a greater focus on specialist rehabilitation, end of life care and step up beds requiring a far smaller bed beds, however there are no immediate plans to reduce beds due to the current pressures on delayed discharges. The winter planning investment in the community workforce is intended to provide supports in the community to alleviate pressure on the hospital. This will not materialise until recruitment has been optimised and services are running with an increased workforce to meet demand. From a financial perspective any overspends will be offset by underspends in community care staffing investment and if required reserves, this will be continually monitored during the year.

Income – a shortfall of £0.272m in income mainly due to implementation of day care charging and a shortfall in income from non-personal care charging.

Community Nursing – projected overspend of £0.068m, use of bank staff to cover staff sickness and maternity leaves.

Winter Planning Reserves – funding for additional care at home capacity £1.554m and interim care places £0.760m was earmarked for use in 2022-23 the current assumption is this funding will be fully utilised, full details of spending plans are included in the IJB Reserves Update 22-23 report.

4.2 **Children and Justice Services – projected underspend of £1.812m**

Against a full year budget of £25.842m, there is an underspend of £1.812m (7.01%), the main variances include underspends in:

Family Placements – projected underspend of £1.2m. This projection includes internal foster placements currently 34 less than budgeted and projecting a £0.644m underspend. This reflects the budget investment made into internal placements and disinvestment in out with authority placements. Due to the focus on early intervention and prevention approaches through Signs of Safety and the Belmont First project the need to accommodate children has reduced significantly.

Adoption fees and orders are projecting an underspend of £0.251m.

Further underspend of £0.090m within carers in the community the budget can afford 18 placements currently there are only 15.

Outwith Authority Placements - projected underspend of £0.797m, there are currently 43 placements compared to a budget of 50 placements. The

budget disinvestment included reducing out with authority foster placements over the course of the year this has been achieved.

The above underspends have been offset with overspends in the following:-

SDS Options 1 and 2 - projected overspend of £0.171m due to full year effect of 21 new care packages from prior year.

A review of service provision and budget allocations will be carried out by the Head of Service and Service Managers with budget virements brought to future IJB meeting for approval.

4.3 Mental Health Services – projected underspend of £1.416m

Against a full year budget of £33.232m, there is a projected underspend of £1.416m (4.26%). The main reasons for the overall underspend are:-

Learning Disabilities community care packages – projected underspend of £0.964m as a result of full year effect of prior year savings.

Learning Disability respite care – projected underspend of £0.074m due to less demand for respite than budgeted, however there has been an increase in direct payments to provide alternative to residential respite.

Learning Disability residential care – projected underspend of £0.237m based on current placements remaining until the end of the year.

Health Learning Disability Team – projected underspend of £0.131m based on the vacant posts at beginning of the year, projection assumes posts are filled in the remaining 6months of the year.

Community Mental Health Team – projected underspend of £0.178m, mainly due to vacancies at start of year also.

Mental Health Residential care – projected underspend of £0.069m, based on current placements until the end of the year.

Mental Health Voluntary Organisations – projected underspend of £0.065m based on current contracts with voluntary organisations

The above overspends are offset with overspend in the following services:

Mental Health Community care packages - projected overspend of £0.122m, budget virement noted for approval in section 4.12 to realign budgets to actual spend patterns.

4.4 **Support Services projected underspend of £0.529m**

Within the Council there is total projected underspend of £0.292m due to £0.550m funding received within the Budget 22-23 from Scottish Government to be invested in additional social work additional capacity, currently projecting an underspend of £0.370m due to recruitment and approval process. Winter pressures and Carer's act funding £0.250m underspent, work ongoing in reviewing carers services and commissioning proposals to be defined, Underspends have been offset with an under recovery of SDS reclaims £0.302m, further analysis is being undertaken to look at profile of under recovery and changes in accumulated balances in Direct Payment accounts.

Within Health there is a projected underspend of £0.237m, of which £0.206m relates to staff vacancies in business admin and the balance due to less spend on supplies.

4.5 **Hosted Services projected overspend of £0.171m**

The Continence Team have a projected overspend of £0.101m due to an increase in purchase of supplies along with contract price increases and 0.5WTE additional to staffing establishment in the team to meet with demand pressures. A review of this service will be undertaken during the year to understand increase in demand and assess how to mitigate the financial pressure with new ways of working.

Community Equipment store is projecting an overspend of £0.118m as a result of contract increases to specific equipment purchases. Full details of volumes and prices have been requested and this will be factored into 2023-24 Budget Pressures.

Family nurse partnership are projecting an underspend of £0.049m, this was due to slippage in filling the school student nurse posts with the additional funding provided by Scottish Government.

4.6 **Covid Expenditure**

The partnership continues to respond to the covid pandemic following Scottish Government guidelines and legislation. Regular finance returns are submitted to the Scottish Government detailing the financial implications in responding to the pandemic.

The latest projected spend is £3.016m based on quarter 1 Local Mobilisation Plan (LMP) submitted on the 25th of July 22. This projection is based on the current principles in place for provider sustainability.

The table below does not include the costs incurred within the Set Aside Budget, this budget is delegated to the IJB. There is ongoing discussions with

NHS Director of Finance and Pan Ayrshire Chief Officers and Chief Finance officers to determine what items of Covid related spend are delegated and how this will be shared between each IJB.

The assumption at present is that all costs incurred in responding to Covid will be met from the Covid reserves of £11.666m.

Description of Expenditure	Projected Spend 22-23		
	NHS	SAC	Total
Additional Community Hospital Bed Capacity	545		545
Additional Infection Prevention and Control Costs			-
Additional Staff Costs	673	250	922
Digital IT Costs			-
Additional Equipment and Maintenance			-
Additional PPE		222	222
Additional Capacity in Community			-
Social Care Provider Sustainability Payments		820	820
Social Care Support Fund Claims		410	410
Remobilisation - Adult Social Care			-
Children and Family Services			-
Unachievable Savings			-
Loss of Income		97	97
TOTAL PER PARTNER	1,218	1,799	3,016

The costs include 12 additional community hospital beds at Biggart Hospital to relieve pressure on acute services and enable capacity at Ayr Hospital to be available. As mentioned earlier plans are in place to review the Biggart model and this will be dependent on the ongoing Covid recovery and response.

Staffing costs include additional staff to support the ongoing Covid response and recovery in meeting demand and backlogs and cover for Covid related staff absence.

Continued costs for sourcing PPE are expected to be recurring in nature, this has been highlighted to the Scottish Government. A PPE steering group has been set up to look at the ongoing supply of PPE with new arrangements to be decided. The current arrangements in place under the approved Memorandum Of Understanding are that we procure our own, with National Services Scotland providing a top up at no charge, this additional top up of PPE is distributed by the HSCP's PPE hub to personal assistants and unpaid carers to ensure they have an adequate supply at all times.

Provider sustainability principles are approved by the Scottish Government, the latest guidance includes an extension to the Social Care Staff Support Fund until 30th of September 2022, this fund ensures staff are paid their expected income if absent or self-isolating due to Covid. Other financial support available to 31st of March 2023 is reimbursement of costs incurred in relation to testing and vaccination.

4.7 Lead Partnerships projected overspend of £0.117m

The table below shows recharges to East and North for services we host, with an expected income of £0.117m projected, being their share of our £0.171m overspend, as noted in Section 4.5 Hosted Services.

The recharges from other Partnerships is our share of East's projected underspend of £0.373m and North's expected overspend of £1.136m.

	Annual Budget 22/23	Projected Outturn	Variance (Over)/ Underspend
Recharges to other Partnerships	(2,397)	(2,514)	117
Recharges from other Partnerships	50,388	50,622	(234)

The table below shows how the over and underspends have been allocated to each partner based on the NRAC shares noted in the table. These figures have been agreed by Ayrshire Finance Leads.

Host IJB	Underspend/ (Overspend) 22/23 £'000	East Ayrshire NRAC Share £'000	North Ayrshire NRAC Share £'000	South Ayrshire NRAC Share £'000	NRAC Basis
East Ayrshire	373	119	138	116	Community - East 31.9%, North 37%, South 31.1%
North Ayrshire	(1,136)	(368)	(418)	(350)	Mental Health - East 32.4%, North 36.8%, South 30.8%
South Ayrshire	(171)	(54)	(63)	(53)	Community - East 31.9%, North 37%, South 31.1%

East Ayrshire Health and Social Care Partnership lead on Primary Care services, the current projected underspend is £0.373m. The main underspends are due to:

- Primary Care and Out of Hours Services are projected to underspend by £0.591m, this due to Childsmile and the Dental Management Team both running with a number of vacancies. In addition, there are reduced costs within Primary Care Contracting and Support, largely due to vacant posts, as well as projected savings in Diabetic Retinopathy, East Ayrshire Community Hospital Medical and General Pharmaceutical, with an overall projected underspend of £0.240m.
- These reduced costs are partially offset by additional salary costs of the GP element of Out of Hours Services, as well as additional costs of the overnight nursing service. Projected overspend of £0.718m, with work ongoing to address and bring into line as far as possible over the course of 2022/23.
- The Prison and Police Healthcare services are projected to underspend by £0.252m, due to reduced new contracts, however there is a review of the

prison service being undertaken. It is expected that these funds will go towards improving the staff levels within the prison.

North Ayrshire Health and Social Care Partnership lead on Mental Health Services, and are projecting to be overspent by £1.136m. Within this position are the following variances:

- A projected overspend in Adult Inpatients of £0.200m, mainly due to the use of supplementary staff and staff in redeployment following the closure of the Lochranza Ward. There is also reduced bed sale income of £0.068m.
- UNPACS is projected to overspend by £1.4m based on current placements remaining until the year end. These placements are for individuals with very specific needs that require a higher level of security and/or care from a staff group with a particular skill set/competence. There are no local NHS secure facilities for women, people with learning disability or people with neurodevelopmental disorder. This can necessitate an UNPlanned Activities (UNPACS) placement with a specialist provider which can be out-of-area. The nature of mental health UNPACS spend is that it is almost exclusively on medium or long term complex secure residential placements which are very expensive so a small increase in placements can have a high budgetary impact. Due to the complexity and risk involved, transitions between units or levels of security can take many months. Applications to approve a placement are made to the Associate Medical Director for Mental Health who needs to be satisfied that the placement is appropriate and unavoidable prior to this being agreed.
- A projected overspend in mental health pharmacy of £0.100m due to an increase in substitute prescribing costs.
- Learning Disability services projected to overspend by £0.225m. This is mainly due to high usage of supplementary staffing, cross-charging for a LD patient whose discharge has been delayed and redeployment staffing costs. Supplementary staffing costs relate to backfill for sickness, increase and sustained enhanced observations and vacancies. The enhanced observations are reviewed on a daily basis however, due to the individuals being acutely unwell at present, this level of enhanced observations has been maintained for a lengthy period of time. The projection assumes that we begin cross charging for the ongoing costs of the person as detailed above who, despite giving extensive time to identify an alternative placement there has, as yet, been no solution identified.
- Elderly Inpatients are projected to overspend by £0.250m mainly due to the use of supplementary staffing.
- The turnover target of £0.481m for vacancy savings is held within the Lead Partnership as this is a Pan-Ayrshire target. There is a projected over-recovery of the vacancy savings target of £1.019m. Main areas contributing to this over achievement are noted below:

- Adult Community Health services £0.100m
- CAMHS £0.500m
- Mental Health Admin £0.300m
- Psychiatry £0.100m
- Associate Nurse Director £0.020m
- Psychology £0.480m

South Ayrshire Health and Social Care Partnership lead on the community equipment store, family nurse partnership and the continence team. Included in the partnership managed budget is a projected overspend of £0.171m. Our share of this is £0.054m with the balance £0.117m received from the other Partnerships, reflected in the Recharges to other Partnerships line in the IJB financial report on Appendix A.

4.8 Acute Hospitals

The 2022-23 annual budget for Acute Services is £373m, which includes areas covered in the set aside budget. The current overspend at period 3 is £2.1m, this is a result of savings not expected to be achieved and overspends due to increase in drugs, supplies and equipment and hotel services.

The “Set Aside Budget” as it is referred to in the Integration Scheme, represents the direct cost of six specialities and is focussed on unscheduled activity. The six areas of are Accident and Emergency, General Medicine, Geriatric Medicine, Respiratory Medicine, Rehabilitation Medicine and certain GP non-elective activity. The Integration Scheme makes provision for the Set Aside budget to be managed in year by the Health Board with any recurring over and underspends being considered as part of the annual budget setting process.

The set aside allocation within the 2022-23 budget was an allocation of £28.311m. This indicative allocation is used for the purposes of this financial monitoring report.

Work was undertaken last year to establish a system to calculate the baseline of resources for each partnership based on actual activity. The activity from 2019-20 is used for this purpose as it is the last full year available dataset reflecting actual activity and removes fluctuations experienced in 2020-21 as a result of the covid pandemic. This information will be reviewed on a quarterly basis as part of the Pan Ayrshire fair share pilot project and the use of directions to ensure that the delegated set aside budgets can be fully implemented from 2023-24.

The table below highlights South Ayrshire’s use of resources with the latest information available as at year end 2021-22, this shows we are using more than our “fair share” as determined by NRAC.

All Ayrshire IJB	2021/22 NRAC Share %	2021/22 NRAC Share £	2021/22 Spend £	2021/22 Variance £
East	31.9%	27,715,990	24,565,779	3,150,211
North	36.8%	31,963,285	33,979,624	(2,016,339)
South	31.3%	27,177,478	28,311,351	(1,133,873)
Total	100%	86,856,753	86,856,753	0

4.9 **Budget Movements**

The budget was approved on the 16th of March 22, appendix C highlights the movement in the overall budget position from initial approval. Section 8.2.5 of the Integration Scheme states that *“Either party may increase its in year payment to the Integration Board. Neither Party may reduce the payment in-year to the Integration Board nor Services managed on a Lead Partnership basis without the express consent of the Integration Board”*.

Explanation on main budget movements:

1. Budget allocation of Aids and Adaptations to Council Social Services budget £0.790m
2. Transfer of earmarked budget from Reserves to Council of £15.930m, detail included in the appendix
3. NHS Set Aside budget of £28.311m based on 2021-22 allocation
4. Lead Partnership budget allocations for 2022-23
5. Transfer of budgets to Lead Partnerships for Pressures agreed in budget 22-23
6. Income budget created for Hospital at Home and Urgent Scheduled Care from carry forward 22-23
7. Prescribing adjustment of £0.401m

4.10 IJB Reserves Balance

In the IJB annual accounts for 2021-22 reserves balance of £28.706m were approved. As noted in the tables below. Total Earmarked reserves of £21.680m were approved and allocations have been made to Council side of the budget. The NHS Earmarked allocations including Lead Partnerships will be actioned by next period's reporting.

Description	Balance as at 31st March 22	Transfers Out 22-23	Balance as at 30th June 2022
	£000's	£000's	£000's
Earmarked Reserves			
ADP	502	(502)	0
East Lead Partnership PCIF	1,543		1,543
East Lead Partnership Primary Care Other	477		477
North Lead Partnership Action 15	182		182
North Lead Mental Health Recovery and Renewal	1,735		1,735
Covid- 19 Remobilisation	11,666	(11,666)	0
Covid-19 C&F MH and Wellbeing	47	(47)	0
Community Living Fund	410	(410)	0
Training SVQ	72	(72)	0
Adoption Orders Delayed	200	(200)	0
Fostering - Advertising for Carers	17	(17)	0
Community Care Assistant Post in Reablement Team	88	(88)	0
Mobile Attendants additional resource	27	(27)	0
SG Care at Home Additional Capacity	1,554	(1,554)	0
Whole Family Wellbeing Funding	63	(63)	0
Mental Health Officer Additional Capacity Funding	57	(57)	0
Unaccompanied Asylum Seeking Children National Transfer Scheme	11	(11)	0
SG Interim Care Funding	760	(760)	0
SG Unscheduled Care - interface carer programme	517		517
SG Hospital at Home Funding	607		607
SG 9 month Funding for AHP Front Door Posts	198		198
AHP Band 4 contract (April to June 22 costs)	8		8
Dementia Post Diagnostic Support Posts	79		79
SG School Student Nurses	25		25
SG Staff Wellbeing Funding	91		91
SG Winter Pressures for Multi-Disciplinary Teams	501		501
SG Funding to accelerate MDT Posts	80		80
CAP Technician 2 Band 5 for 6 months	36		36
Band 2/3 Health Care Assistants	127		127
TOTAL EARMARKED	21,680	(15,474)	6,206

The total General Fund Balance of £6.570m includes funding previously approved for specific change activity and investment in staffing following

service reviews. Draw down of reserves will be actioned at year end with any carry forwards subject to approval as part of the year end process.

Description	Balance as at 31st March 22	Transfers Out 22-23	Balance as at 30th June 2022
	£000's	£000's	£000's
Change Fund Committed			
Learning Disability Lead Practitioner	101		101
Learning Disability Champions Board Officer	40		40
Public Protection Policy Officer	113		113
Health Visiting investment in I-Phone	7		7
Young Carers Officer	50		50
Wallacetown investment	0		0
Adult Social Work Review	150		150
Commissioning team resource	40		40
District Nursing Workforce review	100		100
ADP Development Officer Post	70		70
Developing community capacity	0		0
Frailty capacity within MDT	131		131
AHP Capacity	200		200
Absence Management Officer	60		60
Carefirst Finance Project Officer to 31st March 23	53	(53)	0
SDS Support Officer to 31st March 23	53	(53)	0
Children and Families Belmont First Project	57	(57)	0
Champions Board extension of staff to 31st March 23	10	(10)	0
The Promise extension of posts to 31st March 23	30	(30)	0
Legal Costs incurred for Historic Child Abuse Inquiry	50	(50)	0
Four WTE Occupational Therapy Assistants to focus on Unmet Need	150	(150)	0
Microenterprise Pilot	53	(53)	0
			0
Uncommitted Reserves	5,508	0	5,508
TOTAL GENERAL FUND	7,026	(456)	6,570
TOTAL RESERVES BALANCE	28,706	(15,930)	12,776

4.11 Request for Earmarking

The Year End 2021-22 Financial Outturn report for 21-22 approved the following two investments from the General Fund:-

- Four WTE Occupational Therapy Assistants to focus on UNMET need - £0.150m
- Microenterprise Pilot - £0.053m

These investments meet with the criteria included in the Care at Home Additional Capacity Earmarked funding and request is being made to transfer these investments to come out of this earmarked funding leaving £0.203m to

transfer to uncommitted reserves. An additional paper IJB Reserves Update 2022-23 will provide more detail on spending plans for Earmarked Funds.

A request is being made to earmark £0.049m to fund Penumbra, to provide support to young people who are experiencing high levels of emotional distress and/or are self-harming, who do not have any mental health diagnosis, using the principals of the Distress Brief Intervention (DBI) approach. The current funding ends in August 2022, a further 12 month funding is proposed with the service being evaluated prior to decisions on longer term funding requirements.

4.12 Virements for Approval

A tidy up of Mental Health care package budgets is requested for approval to ensure budget is in line with actual spend, proposal to Vire:-

- £60,000 from Mental Health Residential Care Budget
- £65,000 from Mental Health Voluntary Organisations Budget
- £125,000 to Mental Health Community Care Packages Budget

4.13 Savings Targets

Savings targets of £0.267m remain from prior years, as noted in Appendix D.

The table below, summarises the savings by BRAG status, defined as B – Saving is complete, R – Not on Track requires action, A – Minor issues mitigation required, G – savings on track for completion.

BRAG Status	Total Approved Efficiencies	Achieved 22-23	Projected to be achieved	Balance Remaining
B	0.000	0.000	0.000	0.000
G	0.151	0.056	0.095	0.000
A	0.000	0.000	0.000	0.000
R	0.116	0.000	0.000	0.116
Total	0.267	0.056	0.095	0.116

The only saving within the red status requiring action is the review and implementation of a revised charging policy outstanding from prior year. Due to the pandemic this work was paused in 2020-21, as consultation process could not have been facilitated with ease. However, the Independent Review of Adult Social Care was published in February 2021 and includes recommendations to remove charging for non-residential social care support. Until we are clear on the recommendations to be taken forward this work will continue to be deferred.

4.14 Financial Risks

The financial risks within the IJB's delivery of health and social care services over the next financial year are:

- The levels of non-recurring funding for specific policies are reducing the level of flexibility in managing the finances locally and directing to areas of specific need;
- Ability to financially plan in medium to longer term is hindered by the levels of non-recurring funding and the financial settlement from Scottish Government on an annual basis;
- Implementation of recommendations from the Independent Adult Care Review specifically the removal of non-residential charging if not fully funded will be a risk to financial sustainability;
- Uncertainty in levels of demand as we move out of the pandemic, this is under constant review;
- Implementation of fair shares for the Set Aside budget, South Ayrshire are using more than their current NRAC share;
- Cost of living increases is impacting commissioned services, with uplifts agreed for 22-23 based on inflation as at September 21, increase in fuel and energy prices is proving a significant burden to commissioned services. This is a national issue and has been raised in national forums with COSLA and Scottish Government;
- The pay award has not been agreed for both NHS and LA staff, whilst the NHS projection assumes Scottish Government funding for any increase over and above budgeted. The pay award for LA staff will need to be funded from existing budgets, for South Ayrshire Health and Social Care Partnership this is an additional cost of £0.932m, not included within this projection.

The above risks will be continued to be monitored during the year through continued budget monitoring, robust savings plans and transformation activities. The IJB is in a position this year that reserves are available to help mitigate any financial challenges that arise, however there is a balance that needs to be achieved in utilising reserves to support transformation and to assist in longer term financial sustainability.

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 for the IJB Integrated Budget are outlined within the report.

6.1 Human Resource Implications

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

6.2 Legal Implications

6.2.1 There are no legal implications arising from this report.

6.3 Equalities implications

6.3.1 There are no immediate equality implications arising from this report.

6.4 Sustainability implications

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

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. The reports sets out the financial risks.

8.2. The IJB Risk Management Strategy categorises the level of financial risk as high.

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BACKGROUND PAPERS

IJB Reserves Update 2022 – 23

Appendix

A

South Ayrshire Health & Social Care Partnership Financial Report as at 30th June 2022

Table 1	2022/23		
	Integrated		
	Budget	Projected Outturn	Variance (Over)/ Underspend
	£'000	£'000	£'000
Older People	53,071	52,512	559
Physical Disabilities	4,107	4,085	22
Biggart Hospital	4,840	5,148	(308)
Girvan Hospital	1,431	1,394	37
Community Nursing	3,550	3,618	(68)
Intermediate Care and Rehabilitation	1,639	1,311	328
AHPs	7,429	7,094	335
Total Community Care & Health	76,067	75,162	905
C&F Social Work Services	23,049	21,241	1,808
Criminal Justice	(4)	(13)	9
Health Visiting	2,797	2,802	(5)
Total Children and Justice Services	25,842	24,030	1,812
Learning Disabilities	24,330	23,263	1,067
Mental Health Community Teams	7,112	6,790	322
Addictions	1,790	1,763	27
Total Mental Health Services	33,232	31,816	1,416
Directorate	9,399	8,556	843
Other Services	1,104	1,418	(314)
Payroll management target	(1,254)	(1,254)	0
Total Support Services	9,249	8,720	529
Integrated Care Fund/ Delayed Discharge	1,021	1,021	0
Scheme of Assistance	790	790	0
Inter Agency Payments	0	0	0
Prescribing	24,443	24,443	0
General Medical Services	18,881	18,859	22
Total Primary Care	43,324	43,302	22
Community Store	930	1,049	(119)
TEC	-	0	0
Family Nurse Partnership	2,107	2,058	49
Continence Team	443	544	(101)
Total Hosted Services	3,480	3,651	(171)
Debt Repayment	802	802	0
COVID Expenditure	11,666	11,666	0
PARTNERSHIP TOTAL	205,473	200,960	4,514
Recharges from other Partnerships	50,388	50,622	(234)
Recharges to other Partnerships	(2,397)	(2,514)	117
Acute Hospitals	28,311	28,311	0
IJB Core Budget Total	281,775	277,379	4,397

**South Ayrshire Health & Social Care Partnership
Financial Report as at 30th June 2022**

Table 1	2022/23			2022/23			2022/23		
	Council			NHS			Integrated		
	Budget	Projected Outturn	Variance (Over)/ Underspend	Budget	Projected Outturn	Variance (Over)/ Underspend	Budget	Projected Outturn	Variance (Over)/ Underspend
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Older People	53,071	52,512	559	0	0	0	53,071	52,512	559
Physical Disabilities	4,107	4,085	22	0	0	0	4,107	4,085	22
Biggart Hospital	0	0	0	4,840	5,148	(308)	4,840	5,148	(308)
Girvan Hospital	0	0	0	1,431	1,394	37	1,431	1,394	37
Community Nursing	0	0	0	3,550	3,618	(68)	3,550	3,618	(68)
Intermediate Care and Rehabilitation	0	0	0	1,639	1,311	328	1,639	1,311	328
AHPs	0	0	0	7,429	7,094	335	7,429	7,094	335
Total Community Care & Health	57,178	56,597	581	18,889	18,565	324	76,067	75,162	905
C&F Social Work Services	23,049	21,241	1,808	0	0	0	23,049	21,241	1,808
Criminal Justice	(4)	(13)	9	0	0	0	(4)	(13)	9
Health Visiting	0	0	0	2,797	2,802	(5)	2,797	2,802	(5)
Total Children and Justice Services	23,045	21,228	1,817	2,797	2,802	(5)	25,842	24,030	1,812
Learning Disabilities	23,860	22,924	936	470	339	131	24,330	23,263	1,067
Mental Health Community Teams	4,252	4,106	146	2,860	2,684	176	7,112	6,790	322
Addictions	838	838	0	952	925	27	1,790	1,763	27
Total Mental Health Services	28,950	27,868	1,082	4282	3948	334	33,232	31,816	1,416
Directorate	5,458	4,852	606	3,941	3,704	237	9,399	8,556	843
Other Services	1,104	1,418	(314)	0	0	0	1,104	1,418	(314)
Payroll management target	(1,254)	(1,254)	0	0	0	0	(1,254)	(1,254)	0
Total Support Services	5,308	5,016	292	3,941	3,704	237	9,249	8,720	529
Integrated Care Fund/ Delayed Discharge	373	373	0	648	648	0	1,021	1,021	0
Scheme of Assistance	790	790	0	0	0	0	790	790	0
Inter Agency Payments	(19,831)	(19,831)	0	19,831	19,831	0	0	0	0
Prescribing	0	0	0	24,443	24,443	0	24,443	24,443	0
General Medical Services	0	0	0	18,881	18,859	22	18,881	18,859	22
Total Primary Care	0	0	0	43,324	43,302	22	43,324	43,302	22
Community Store	0	0	0	930	1,049	(119)	930	1,049	(119)
TEC	0	0	0	0	0	0	-	0	0
Family Nurse Partnership	0	0	0	2,107	2,058	49	2,107	2,058	49
Continence Team	0	0	0	443	544	(101)	443	544	(101)
Total Hosted Services	0	0	0	3,480	3,651	(171)	3,480	3,651	(171)
Debt Repayment	802	802	0	0	0	0	802	802	0
COVID Expenditure	11,666	11,666	0	0	0	0	11,666	11,666	0
PARTNERSHIP TOTAL	108,281	104,509	3,772	97,192	96,451	742	205,473	200,960	4,514
Recharges from other Partnerships				50,388	50,622	(234)	50,388	50,622	(234)
Recharges to other Partnerships				(2,397)	(2,514)	117	(2,397)	(2,514)	117
Acute Hospitals				28,311	28,311	0	28,311	28,311	0
IJB Core Budget Total	108,281	104,509	3,772	173,494	172,870	625	281,775	277,379	4,397



APPENDIX C PARTNERHSIP BUDGET MOVEMENTS

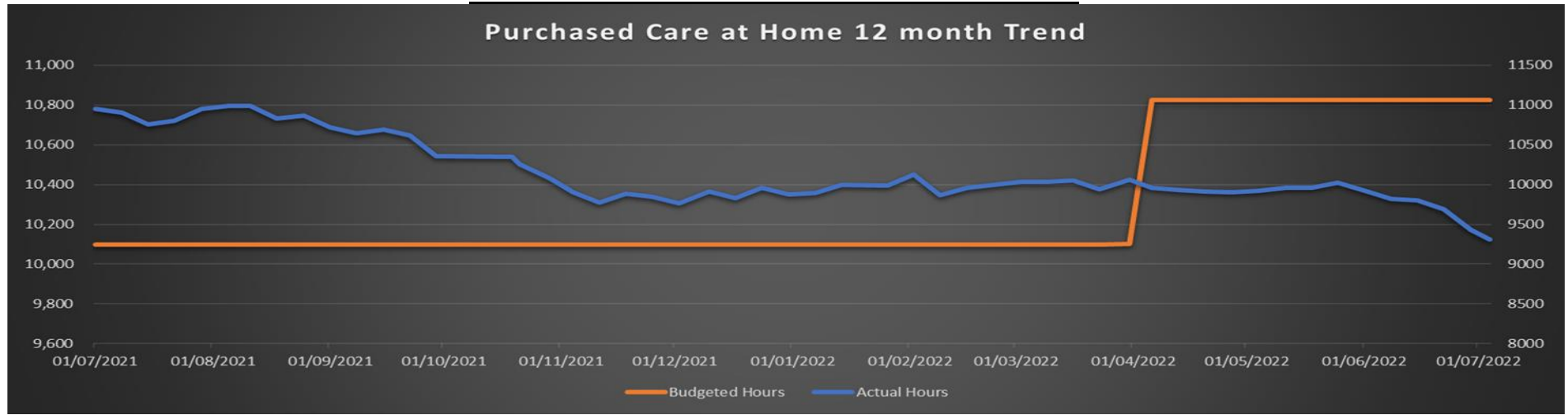
<u>Council</u>	Permanent or Temporary	£'000
Approved Budget		91,479
Aids and Adaptations		790
Transferred from Reserves:-		
ADP	502	
Covid- 19 Remobilisation	11,666	
Covid-19 C&F MH and Wellbeing	47	
Community Living Fund	410	
Training SVQ	72	
Adoption Orders Delayed	200	
Fostering - Advertising for Carers	17	
Community Care Assistant Post in Reablement	88	
Mobile Attendants additional resource	27	
SG Care at Home Additional Capacity	1,554	
Whole Family Wellbeing Funding	63	
Mental Health Officer Additional Capacity Funding	57	
Unaccompanied Asylum Seeking Children	11	
SG Interim Care Funding	760	
Carefirst Finance Project Officer to 31st March 23	53	
SDS Support Officer to 31st March 23	53	
Children and Families Belmont First Project	57	
Champions Board extension of staff to 31st March 23	10	
The Promise extension of posts to 31st March 23	30	
Legal Costs incurred for Historic Child Abuse Inquiry	50	
Four WTE Occupational Therapy Assistants to focus on Unmet Need	150	
Microenterprise Pilot	53	
Total Transferred from Reserves		15,930
Mediation Officer YPST		30
Signs of Safety		4
Belmont First Project		48
Budget as at Period 3		108,281

<u>NHS</u>	Permanent or Temporary	£'000
Approved Budget		98,252
Set Aside	T	28,311
Lead Partnerships	P	47,991
Lead Partnership 22/23 Budget allocations	P	(162)
Resource Transfer Ailsa	P	46
Funding for Hospital at Home/Urgent Scheduled Care	T	(1,124)
AHP Clinical Admin Budget Transfer	P	(221)
Prescribing uplift/cres	T	401
Budget as at Period 3		173,494

APPENDIX D SAVINGS SCHEDULE

Saving Title	£				£	£	£	Comments
	Partner	Approved	BRAG Status	Efficiencies	Achieved 22/23	Further achievement projected	Balance remaining	
LD Day Services	SAC	2019-20	G	(55,900)	(55,900)	0	0	Prior Year Saving Ongoing - met on temp basis this year
Day care charging	SAC	2019-20	R	(116,000)	0	0	(116,000)	Not implemented - on hold awaiting the outcome of the Scottish Government recommendation to remove community charges.
Cunningham Place Children's House Development	SAC	2021-22	G	(95,000)		(95,000)	0	Due to Covid works on the house have been delayed, savings anticipated to be made through reduction in one residential placement.
Prior Year Efficiencies				(266,900)	(55,900)	(95,000)	(116,000)	

APPENDIX E CARE AT HOME 12 MONTH TREND



Care at Home Demand and Capacity

