

Meeting of South Ayrshire Health and Social Care Partnership	Integration Joint Board				
Held on:	15 th of March 2023				
Agenda Item:	8				
Title:	IJB BUDGE	T 2023-24			
Summary: To provide detail on the delegand efficiencies for approval to	•	g to the IJB and service budget pressu ced budget for 2023-24	res		
Author:	Lisa Dunca	n, Chief Finance Officer			
Recommendations: It is recommended that the Integration Joint Board i. Note the 2023-24 Scottish Government Budget allocations; ii. Note the allocation from both partners to provide the Total Integrated Budget for 2023-24 for South Ayrshire Health and Social Care Partnership in Appendix 1; iii. Note the projected underspend for 2022-23; iv. Approve the budget virements in Section 4.7.3 v. Note the reserves position will be finalised in the year-end process; vi. Agree the proposed pressures in Section 4.10 and included in Appendix 2; vii. Approve the proposed uplift to providers contract rates in Section 4.12.7; viii. Approve the proposed savings included in Section 4.16 and Appendix 3; ix. Note the ongoing work on Set Aside resources and plan to present a commissioning plan to the IJB at a later date; x. Note the action to update the Medium Term Financial Plan that will be presented to IJB for approval in due course Route to meeting: IJB Budget Working Group - 7th March 2023					
Directions: 1. No Directions Required		Implications:			
Directions to NHS Ayrshire & Arran	Financial HR Legal				
Directions to South Ayrshire Council		Equalities Sustainability			
4. Directions to both SAC & NHS		Policy ICT			



IJB BUDGET 2023-24

1. PURPOSE OF REPORT

1.1 The purpose of this report is to provide detail on the delegated funding to the IJB, service budget pressures and savings proposals for approval to set a balanced budget for 2023-24.

2. **RECOMMENDATION**

2.1 It is recommended that the Integration Joint Board:-

- i. Note the 2023-24 Scottish Government Budget allocations;
- ii. Note the allocation from both partners to provide the Total Integrated Budget for 2023-24 for South Ayrshire Health and Social Care Partnership in Appendix 1;
- iii. Note the projected underspend for 2022-23;
- iv. Approve the budget virements in Section 4.7.3
- v. Note the reserves position will be finalised in the year-end process;
- vi. Agree the proposed pressures in Section 4.10 and included in Appendix 2:
- vii. Approve the proposed uplift to providers contract rates in Section 4.12.7;
- viii. Approve the proposed savings included in Section 4.16 and Appendix 3;
- ix. Note the ongoing work on Set Aside resources and plan to present a commissioning plan to the IJB at a later date;
- x. Note the action to update the Medium Term Financial Plan that will be presented to IJB for approval in due course

3. BACKGROUND INFORMATION

- 3.1 The Health Board and Local Authority will delegate function and make payments to the Integrated Joint Board (IJB) in respect of those functions as set out in the Integration Scheme. In addition, the Health Board will also "set aside" an amount in respect of acute services.
- 3.2 The IJB is a legal entity in its own right and is expected to operate under public sector best practice governance arrangements. The budget delegated by the Parties is used by the IJB to direct the two partner organisations to deliver health and social care services on behalf of the IJB. Whilst the principles of funding made available by the Parties is set out in the Integration Scheme, utilisation of the funding delegated by the Parties to the IJB is a matter of the IJB itself to determine in line with its Strategic Priorities as set out in the Strategic Plan.
- 3.3 The Strategic Plan sets out the ambition for the HSCP that brings together the contribution of all of our services and partners who together can make a difference to the physical and mental wellbeing of the people of South Ayrshire. It has a focus on prevention, place and wellbeing and looks to reflect progressive thinking around public service commissioning and service planning. The strategic priorities have been developed based on the engagement and



conversations we've had with our partners and the community. The priorities are:

- We focus on prevention and tackling inequality
- We nurture and are part of communities that care for each other
- We work together to give you the right care in the right place
- We build communities where people are safe
- We are an ambitious and effective Partnership
- We are transparent and listen to you
- We make a positive impact beyond the services we deliver
- 3.4 The budget proposals include pressures identified through service review, demand and capacity analysis to continue to meet the strategic priorities of the partnership. As well as pressures to meet specific policy requirements as defined by the Scottish Government.
- 3.5 The budget proposals have been developed through collaboration with the IJB Budget Working Group, Finance Directorate Management Team (DMT) meetings, Senior Management Team (SMT) and Ayrshire Finance Leads. There has been full oversight of the proposals in this paper by the IJB Budget Working Group.

4. REPORT

4.1 This report details the allocations from South Ayrshire Council and NHS Ayrshire and Arran for the following financial year. The report details the financial pressures facing the Health and Social Care Partnership (HSCP). The budget for South Ayrshire Council was set on the 1st of March 2023, and the delegated funding approved. NHS Ayrshire and Arran will set their budget on the 28th of March 2023. Any changes that affect the Partnership budget as a result of the NHS budget setting or changes to the final approved Scottish Government allocation will need to be reviewed and where necessary, the IJB Budget will be revised.

4.2 National Position – Scottish Government

- 4.2.1 The Scottish Government published their programme for Government <u>"A fairer, greener Scotland"</u> in September 2021, setting out clear priorities in recovery of health and care services including rebuilding capacity, and establishing a new form of care which people can access in a way, place and time which works for them. The programme commits to "Establish a Caring Nation" and sets out a vison for health and social care over the course of the Parliament to 2026-27:
 - Increase frontline health spend each year so it is at least £2.5bn higher by 2026-27;
 - Increase primary care spend by 25%, with half of all frontline health spend going on community health services;
 - Creation of a National Care Service;



- Improve national wellbeing with increased investment of at least 25% in mental health;
- Tackle the drugs death emergency by investing £250m, ensuring better outreach, treatment, rehabilitation and aftercare services in every local authority.
- 4.2.2 The Programme for Government 2022-23 was published on the 6th September , <u>A Stronger & More Resilient Scotland</u>. This document sets out the Scotlish Governments response to the cost of living crisis and the impact on the people, businesses, public sector and third sector. The programme was subject to the outcome of the Emergency Budget Review and the Budget for 2023-24.
- 4.2.3 Following on from the UK Emergency budget in September 2022, the Scottish Government held an emergency budget review (EBR) that was published on the 2nd of November. This was to supplement normal budget processes in order to direct additional resources to support those most in need, and ensure existing resources are allocated as effectively as possible meeting the financial challenges.
- 4.2.4 The EBR budget identified £35m for a range of initiatives to support people with the increased cost of living and £615m of savings were identified to increase public sector pay deals. This involved reprioritising £400m of Health and Social Care spending to support a fair pay offer to NHS staff. Further savings of £33m were found across Scottish Government and £180m of capital spending reductions identified.
- 4.2.5 The reprioritisation of £400m Health and Social Care funding was met from reduction in the 2022-23 funding allocations for the Primary Care Improvement Fund, Alcohol and Drugs Partnership and Multi-Disciplinary Teams. The 2022-23 allocations were reduced by the sums earmarked within IJB Reserve balances at 31 March 2022.
- 4.2.6 Within the EBR it was clear that the impact of the financial challenges would mean resetting previous spending plans and consideration to revenue settlement in the budget of 2023-24.

4.3 Finance Settlement 2023-24

- 4.3.1 The Scottish Government local finance settlement was announced on the 15th of December 22, this was followed up by a letter to NHS Boards and IJB CFO's. Currently these allocations are only provisional and may require to be updated following any amendments agreed through the Scottish Parliament's Budget Bill Process.
- 4.3.2 The Deputy First Minister has set out this budget in the context of the current cost of living crisis and funding parameters set by the Chancellor of the Exchequer in November 2022. This budget sets out the next steps to deliver the Health and Social Care commitments outlined in the Programme for Government, taking into account the current economic environment and recent Emergency Budget Review.



- 4.3.3 The level of funding delegated to Integrated Joint Boards for Health and Social Care Integration in 2023-24 per partner is as follows:
 - NHS payments to Integrated Authorities for delegated health functions must deliver an uplift of 2% over 2022-23 agreed budgets, and make appropriate provision for 2022-23 pay;
 - Transfer of net additional £95m to Local Government to support social care and integration, which recognises recurring commitments on:
 - i. Adult Social Care Pay in commissioned services £100m
 - ii. Inflationary Uplift on Free Personal Nursing Care rates £15m
 - iii. Offset by non-recurring Interim Care money £20m
- 4.3.4 The overall transfer to Local Government includes additional funding of £100 million to deliver a £10.90 per hour minimum pay settlement for adult social care workers in commissioned services, in line with Real Living Wage Foundation rate.
- 4.3.5 The funding allocated to Integration Authorities should be additional and not substitutional to each Council's 2022-23 recurring budgets for services delegated to IJB's and therefore, Local Authority social care budgets for allocation to Integration Authorities must be at least £95million greater than 2022-23 recurring budgets.

4.4 Funding Allocation from South Ayrshire Council

4.4.1 The Council presented their budget on the 1st of March 2023 and based on the financial settlement for 2023-24 confirmed contribution to the partnership of £96.349m as noted below, passing through Scottish Government allocations included in the settlement distribution. Also included in the funding allocation is a recurring contribution towards the 2022-23 pay increase, this represents social care share of the additional funding allocated to South Ayrshire Council to meet the pay increase for 2022-23.



	All Scotland	
Description	£m	SAC £m
2022-23 Baseline Budget		91.454
Social Justice Specific Grant		1.729
Add SG Allocation:-		
Adult Social Care	100	2.447
Free Personal Care	15	0.565
Non-Recurring Interim Care	(20)	(0.500)
Specific Grant - Social Justice Uplift		0.002
Other settlement adjustments		(0.265)
Contribution to 22-23 Pay Increase		0.917
2023-24 Council's Budget Contribution		96.349

4.5 Funding Allocation from NHS Ayrshire and Arran

- 4.5.1 The Scottish Government allocation letter states that NHS payments for 2023-24 for delegated health functions must deliver at least 2% uplift over 2022-23 agreed recurring budgets and make appropriate provision for 2022-23 pay.
- 4.5.2 The Government has not set out a public sector pay policy alongside the 2023-24 budget due to the need to conclude some pay deals when setting the budget. Finalised baseline budgets for NHS pay increases relating to 2022-23 have now been provided to NHS Ayrshire and Arran and will be reflected in budget for 2023-24 at a later date. This budget 2023-24 excludes both the increase in cost and increase in budget relating to the agreed pay award for 2022-23.
- 4.5.3 The agreed allocation has been confirmed by the Director of Finance NHS Ayrshire and Arran as £1.019m for the managed services allocated to South Ayrshire Health and Social Care Partnership.
- 4.5.4 The NHS budget is presented on a managed funding basis with services managed under lead partnership arrangements included within their allocated resources. The determination of the appropriate management services budget has been agreed with Ayrshire Finance leads and the Health Board Director of Finance as shown in table below.



NHS Ayrshire and Arran	£m
2022-23 Baseline Budget	97.523
Less Non recurring	
Prescribing (NHS A & A responsibility)	(24.220)
Primary Care (GMS (separate funding uplifts)	(18.881)
In Year allocations - ADP, Family Nurse Partnership, Winter Plan	(3.469)
Managed Budget	50.953
2% Uplift on Managed Budget	1.019
2023-24 Delegated Budget	51.972

4.6 2022-23 Projected Financial Outturn

4.6.1 The IJB financial position for 2022-23 at period 9, is a projected underspend of £6.299m, as presented to the IJB on the 15^{th of} February 2023. The final outturn will not be presented to the IJB until the 14th of June 2023. There is ongoing discussions with NHS Ayrshire and Arran regarding the IJB funding delayed transfers of care that have been impacted by the lack of care at home capacity. With a request made from NHS Ayrshire and Arran of a non-recurring one-off payment of £1.5m. Any proposal of funding transfer will be presented to the IJB for approval. However, there is a risk that the projected £6.299m will reduce to £4.799m.

4.7 Budget Realignment

- 4.7.1 As shown in the table below there is an in year underspend of £1.5m within purchased care at home. The current budget can afford 9,775 hours per week, however due to recruitment issues we are only able to purchase 6,700 hours per week on average. Two providers have ceased trading this year with staff transferring to the inhouse care at home team.
- 4.7.2 If the level of commissioned care hours remains at 6,700 hours per week based on the current budget, the projected underspend for 2023-24 would be £2.3m.
- 4.7.3 A care at home review has been progressed this year. One of the workstreams focussed on care at home recruitment initiatives these have proved successful with an increase in uptake of employment within the team over the last couple of months. Analysis work has been completed to enable understanding of Demand, Capacity And Queue (DCAQ)within the system. This was presented to the IJB workshop on the 8th of March 2023.



- 4.7.4 In order to create capacity to meet the demand within the system, the care at home review recommended the creation of more home care and assistant supervisor posts, this will provide more capacity in house that can be prioritised to meet delayed transfer of care within the hospital or within interim care beds.
- 4.7.5 Approval is requested to vire £1.4m from the purchased care at home budget to create 50 x 21-hour home care posts, 4 x 35 hour Assistant Supervisor posts and 1 x 35 hour admin post.

Spend Area	Projected Outturn 2022-23 (£m) Under/(Over)	Comments
Care at Home	1.500	Reduced capacity in purchased care at home due to recruitment and retention of staff within the care sector. Budget can afford 9,775 hours per week, there has been a reduction from 10,000 hours in April 22 to 6,700 hours in Feb 23
Residential Respite	0.276	Decrease in demand for residential respite. More carers are using Direct Payments and Individual Service Funds to arrange respite, providing greater flexibility to meet their needs.
Children and Families	1.426	Children's Family Placements underspend due to less than budgeted internal foster and kinship carers. Outwith Authority placements are also less than budgeted. This follows significant transformation and implementation of a whole family whole system approach providing intervention at the earliest stage through multi-disciplinary teams based in one school.
Adult Community Care Packages	1.180	Reduction in expenditure within adults community care packages, this has been due to change in service delivery during covid and creation of community supports delivered by volunteers, alongside new core and cluster developments providing shared care.
Staff Turnover	3.026	Over-recovery in anticipated staff turnover due to issues in recruiting posts both within NHS and Council. Over the last three months there has been a significant increase in staff intake both within NHS and Council
Lead Partnerships	0.379	Mainly due to staffing levels less than budgeted establishments
Income shortfall	(0.300)	Shortfall in income from charges due to less non-personal care delivered and less than expected income from charging orders.
Biggart Hospital	(0.289)	Additional beds in use to support delayed discharges, increased costs from staffing levels to support increase in one to one support.
Care Homes	(0.704)	The proportion of nursing care placements has increased by 8%, this has resulted in an increase cost to the budget, also there is has been a decrease of 4% self funders, further impacting on an increase in costs.
Children with Additional Support Needs	(0.195)	Increase in uptake of Direct Payments and Individual Service Funds to provide greater control and flexibility in meeting care needs
Total	6.299	



4.8 IJB Reserves

- 4.8.1 The updated Reserves Strategy was reviewed and agreed by the Performance Committee on the 5th of March 2021 and was presented to the IJB on the 24th of March 2021 for formal approval.
- 4.8.2 The updated Reserves Strategy advises the balance of reserves should be considered as part of the budget setting process. The reserves strategy outlines an optimum value of reserves to be held uncommitted in contingency. This is set as a minimum 2% of annual budgeted expenditure and, based on this the integrated budget 2022-23 would be £3.916m. The budget excludes Covid allocation, Lead Partnerships and Set Aside.
- 4.8.3 The IJB is established as a Local Government body therefore has the ability to hold reserve balances. Reserve balances are held as part of an approach to good financial management, the purpose of reserves is as follows:
 - a) As a working balance to help cushion the impact of uneven cash flows;
 - b) As a contingency to manage the impact of unexpected events or emergencies; and
 - c) As a means of building up funds, often referred to as earmarked reserves, to meet known or predicted liabilities.
- 4.8.4 The opening reserves for 2022-23 as at 1st of April 2022 were £28.706m made up of £21.680m earmarked reserves for specific known liabilities and £7.026m General Fund reserves.
- 4.8.5 Included in the earmarked reserves was £11.666m for Covid-19 Remobilisation this was following an allocation from Scottish Government on 25th February 2022 of £12.731m to cover 2021-22 covid related expenditure and any balance earmarked for the anticipated expenditure in 2022-23 arising from continuing to respond to the pandemic. Due to change in policies and status of the pandemic, not all of this funding was required. Regular financial reporting returns were submitted to Scottish Government detailing the projected expenditure throughout 2022-23.
- 4.8.6 A letter was received from Director of Health Finance and Governance on 12th September 2022 advising that the Scottish Government will reclaim surplus Covid reserves to be redistributed across the sector to meet Covid priorities. A further letter was received on the 16th January 2023 detailing the mechanism to return the underspent balances would be via a negative allocation to NHS Ayrshire and Arran.
- 4.8.7 Of the £11.666m Covid-19 earmarked reserve, £8.677m was returned to the Scottish Government. The balance of £2.989m is expected to meet our full year covid costs in 2022-23. If there is any balance remaining either under or over, this will be reconciled as part of the year end process. Any amounts due to the IJB will be fully funded by Scottish Government, any underspends will be passed back.



- 4.8.8 Also included in the earmarked reserves was specific allocations for Alcohol and Drug Partnership (ADP), Primary Care Improvement Fund (PCIF), Mental Health Action 15 and Winter Pressures Multi-Disciplinary Teams, during the year these reserves were used first prior to any further allocations for 2022-23.
- 4.8.9 The IJB has approved £1.878m of the General Fund Reserves to be committed for specific purposes mainly to support the partnership's recovery from the pandemic by investing in additional capacity and providing staff training opportunities to assist in retaining and upskilling staff. Leaving a balance of £5.148m in general fund reserves for future use.
- 4.8.10 At the IJB meeting on the 19th of February, the budget monitoring report included a request for earmarking £0.209m for specific liabilities was approved. This will be reflected in the year end outturn report.
- 4.8.11 At the end of the financial year, the IJB will have both earmarked reserves and general fund reserves. Whilst earmarked reserves are for specific purposes the general fund reserves provides opportunity for investment in transforming services to ensure future financial sustainability. Specific plans in utilising these reserves will be brought forward to the IJB in due course reflecting the strategic priorities approved in the Strategic Plan.

4.9 Total Integrated Budget for 2023-24

- 4.9.1 The total integrated budget for SAHSCP is expected to be £194.890m (excluding Set Aside Budget) and £223.201m including Set Aside Budget, as shown in Appendix one.
- 4.9.2 It should be noted that pressures include investments for specific policy areas including estimates for public sector pay increases, National Care Home Contract and adult commissioned services contract uplifts.

	SAC	NHS AA	Total
2023-24 Total Budget	£m	£m	£m
Baseline Budget	91.454	97.523	188.977
Criminal Justice Specific Grant	1.729		1.729
SG Funding Allocation 23-24	3.164	1.019	4.183
Specific Grant - Social Justice Uplift	0.002		0.002
2023-24 Budget Excluding Set Aside	96.349	98.542	194.890
Draft Set Aside Budget		28.311	28.311
2023-24 Budget Including Set Aside	96.349	126.852	223.201



4.10 Budget Pressures

4.10.1 Budget pressures for health and social care services are £7.955m. These have been developed in line with specific policies and funding allocations, and collaboration between Management Teams and Finance Officers to identify current and emerging financial pressures, taking into account historic and future demand. The Directorate Management Team and IJB Budget Working Group have scrutinised the pressures and prioritised those proposed for approval.

Type of Pressure	Social Care (SAC) £'000s	Health (NHS A & A) £'000s	TOTAL £'000's
Pay Award	1,913	630	2,543
Inflation/Contractual	3,395	-	3,395
Demand/Demographic	750	934	1,684
Lead Partnership	-	333	333
TOTAL PRESSURES	6,058	1,897	7,955

Details of pressures proposed by service category for 2023-24 are shown in Appendix 2.

4.11 Pay Award

4.11.1 The pay award for both Council and NHS staff for 2023-24 has been based on budget planning estimates within both partner organisations. Within the NHS the Agenda for Change settlement has still to be decided and approved and funding allocations will be revisited by the Scottish Government in line with the pay negotiation outcome. The Council pay award pressure also includes a shortfall of £0.583m on the 2022-23 pay uplift. The Council have passed on our share of the additional Scottish Government funding of £0.917 as shown in Section 4.4.1.

4.12 Inflation/Contractual

- 4.12.1 The budget for 2023-24 included an allocation of £100m transferred to Local Government to support the delivery of a £10.90 per hour minimum wage for adult social care staff delivering direct care in commissioned services from April 2023. South Ayrshire IJB's share of this allocation is £2.447m as shown in Section 4.4.1.
- 4.12.2 The Adult Social Care Pay uplift policy implementation letter received on the 1st of March 2023, detailed the application of the Adult Social Care Pay Uplift and funding allocation based on a national weighting of average full workforce costs for specific contracts.



- 4.12.3 The national weightings for the £10.90 uplift are as noted below:
 - o Residential care uplift applied to 71.8% of full contract value
 - o Non-residential uplift applied to 86.9% of full contract value
 - o Personal Assistants uplift applied to 90% of SDS Option 1 budgets
- 4.12.4 The policy is to uplift the minimum rate of pay for adult social care workers and provides funding for wages and on-costs within providers contracts. Local IJB's have the ability to offer increases to providers on the non-workforce costs within their contracts.
- 4.12.5 Various uplift options were reviewed by the Budget Working Group during the course of the budget process. The preferred option proposed is to provide an inflationary uplift of 10.1% on the non-workforce element of the contract, this is in recognition of the cost of living pressures that providers are experiencing. During 2022-23 we have experienced providers ceasing and others handing back work citing financial sustainability as an issue. The increase is therefore expected to help towards mitigating this risk.
- 4.12.6 The table below shows the application of the Adult Social Care uplift of £10.40 per hour to £10.90 per hour uplift or 3.81% uplift, would provide uplifts of 3.3% for non-residential, 2.7% for residential and 3.4% for personal assistants. The application of an additional inflationary 10.1% uplift on the non-workforce element of the contract will provide uplifts as noted in the total uplift column below.

Type Of Contract	% Workforce	Apply 3.81% to Workforce	%Non Workforce	Apply 10.1% on Non Workforce	TOTAL Uplift
Non- Residential	86.9%	3.3%	13.1%	1.3%	4.7%
Residential	71.8%	2.7%	28.2%	2.8%	5.6%
Personal Assistants	90.0%	3.4%	10.0%	1.0%	4.5%

4.12.7 The total uplifts applied to the current hourly rates for approval are included in the table below.

Type of Care	2022/23	2023/24	Uplift
Older People *	£19.21	£20.11	4.7%
Adult *	£19.21	£20.11	4.7%
Personal Assistant	£13.86	£14.48	4.5%
Sleepover	£12.81	£13.41	4.7%



*Rurality uplifts are also provided on above rates at 3% and 6%

- 4.12.8 Other contractual pressures include a 10% increase in Free Personal and Nursing care payments agreed by the Scottish Government as part of the annual uprating exercise under the National Assistance Act 1948. The National Care Home Contract uplift is still under negotiation and provision has been made in the current budget proposals based on anticipated increase which includes the minimum hourly rate uplift of £10.90 per hour and an allocation for inflationary pressures.
- 4.12.9 Children and Families contractual pressures are proposed at a 3% uplift on all contracts. Family placements including foster and kinship carers payments a 5% uplift is proposed to their current weekly rates.

4.13 Demand/Demographic Pressures

- 4.13.1 Investment of £0.080m on a non-recurring basis is required within the Practice Development team to support additional training needs identified from recent review of training demand and requests from services including chronology and case recording and dysphagia training.
- 4.13.2 Investment of £0.068m Service Manager post within the Children's Health Team is proposed to provide management capacity to support Health Visiting and School nurse teams, this post will support neurodevelopment and Speech and Language Therapists through joint working initiatives to identify children at risk at an earlier stage and also ensure delivery of the school nurse and health visiting pathways.
- 4.13.3 Investment of £0.035m is proposed to fund 50% share of Children Services Planning Group Lead Officer, the other 50% will be funded by Education. The Lead Officer will be responsible for policy implementation, monitoring of performance outcomes, training and engagement with services, third sector and other partners.
- 4.13.4 Investment of £0.055m in Champions Board to ensure continuation of the Board to support young people with care experience, funding enables flexible working opportunities, training and participation in network events. Previously funding was provided from the Life Changes Trust this has now ceased.
- 4.13.5 Investment of £0.031m to create a Band 3 Nursing Assistant to support the care home liaison nurse. Over the last three months the elderly community mental health team have been able to utilise a band 3 nursing assistant on a temporary basis to provide support to residents and carers within a care home setting. This has provided additional capacity in the team to meet the additional demand from care homes.
- 4.13.6 Non-recurring investment of £0.530m to support transition of current interim care placements to their assessed package of care. Funding required on a temporary basis whilst care capacity becomes available in the community.



- 4.13.7 Non-recurring investment of £0.835m to fund 17 additional beds in Biggart Hospital for one year only. Additional beds have remained open since March 2020 to provide additional capacity due to the pandemic, these beds were funded on a temporary basis from Covid Mobilisation funding. There is a plan in place to reduce these beds on a phased basis aligned to reduction in delayed transfers of care from expansion in community capacity.
- 4.13.8 Funding of £0.050m to provide additional PPE, this is an estimate at present based on current weekly demand for masks and gloves.

4.14 Lead Partnership and Pan Ayrshire Pressures

- 4.14.1 North Ayrshire Health and Social Care Partnership (NAHSCP) are the lead partnership for Mental Health services and East Ayrshire Health and Social Care Partnership (EAHSCP) are the lead for Primary and Urgent Care Services. Pressures for lead services have been identified and reviewed by Chief Officers, Ayrshire Chief Finance Officers and NHS Finance Director and agreed for inclusion in the budget, Appendix 2 details the pressures.
- 4.14.2 In total our contribution to NAHSCP is £0.072m and our contribution to EAHSCP is £0.091m. South Ayrshire Partnership leads on the Community Equipment Store and Continence services, our share of pressures relating to contract increases for community equipment and continence supplies is £0.044m.
- 4.14.3 Pan Ayrshire pressures are shared between the three Ayrshire's and NHS Ayrshire and Arran and relate to services that all partners benefit from, the total of investment required is £0.170m.

4.15 Budget Gap

4.15.1 The impact of funding the pressures increase the savings required to balance the budget. The total delegated funding increase for 2023-24 to the IJB is £4.183m. Pressures of £7.955m are estimated for pay awards, contractual pressures, demand and demographic pressures. Lead Partnership and Pan Ayrshire Pressures. The resultant gap or savings required to balance the budget is outlined below:



	SAC	NHS A & A	Total
	£m	£m	£m
Funding Increase Delegated			
from Partners	3.164	1.019	4.183
Pressures to be Funded	6.058	1.897	7.955
Total Savings Required	2.894	0.878	3.773

4.15.2 There is a requirement for an approved balance budget to be set prior to the start of the financial year. The following section provides proposals to enable a balance budget to be set.

4.16 Budget Savings

- 4.16.1 Savings have been developed with the Directorate Management Team and include financial analysis of current spend, the savings proposals have been subject to review and scrutiny with the IJB Budget Working Group. The table summaries savings proposed into specific categories. Appendix three provides detail of proposed savings and use of General Reserves to fund non-recurring pressures.
- 4.16.2 The savings on Appendix three, are classed as Green in terms of Risk of Achievement, this is based on the current projected spend, and pattern of expenditure inherent over the last couple of years, that has allowed for these savings to be achievable. The savings will be monitored as part of the ongoing budget monitoring process during 2023-24.

Type of Saving	Social Care (SAC) £'000s	Health (NHS A & A) £'000s	Total IJB Savings £'000's
General Reserves	610	835	1,445
Demand Management	1,050	0	1,050
Market Capacity	500	500	1,000
Transformation	180	0	180
Debt Repayment	98	0	98
TOTAL SAVINGS	2,438	1,335	3,773



4.17 Use of General Reserves

4.17.1 Included in the budget pressures are non-recurring costs of £1.445m, proposal to earmark General Reserves to fund these pressures in 2023-24 for one year only. The detail of these pressures is included in the previous pressures section at 4.10. To summarise the £1.445m relates to continuation of interim care beds £0.530m, additional Biggart care home beds £0.835m and Practice Development fund £0.080m.

4.18 Demand Management

- 4.18.1 Savings of £0.350m are proposed from Family Placement team budget, due to the significant transformation and investment in early intervention and prevention approaches, the budget is now in excess of demand, with 26 less fostering placements than budgeted.
- 4.18.2 Savings of £0.700m are proposed with Adult community care packages, this reflects the current underspend and anticipated future demand. The new Learning Disability strategy and the creation of the League of Champions has led to more person-centred supports being developed that has reduced the need for traditional community care supports.

4.19 Market Capacity

- 4.19.1 The current projected underspend relating to staff turnover is £3m. This is due to lack of capacity in the market for specific posts. South Ayrshire has a high dependency ratio, meaning we have less working age population to support an increasing older population. Services continue to develop new ways of attracting people to come and work in health and social care, with online media adverts and video promoting roles in the partnership.
- 4.19.2 Savings relating to an increase in staff turnover of £1m, are proposed, equally shared between each partner. These savings will be achievable in 2023-24 and will be subject to scrutiny in year through the budget monitoring process. These savings are short term and will need to be revisited in budget for 2024-25 and beyond.

4.20 Transformation

4.20.1 Savings of £0.180m are proposed to be achieved through a promotion of Self-Directed Support options. Training has recently been provided to staff from In Control Scotland, a charity specialising in self-directed support. The training included a refresh on the principles of Self Directed Support. Individual Service Funds and Direct Payments are tailored to meet service users and carers needs and provide greater flexibility than traditional commissioned care. Financial analysis on average costs of the various options shows savings can be achieved through increased uptake of direct payments and individual service funds.



4.21 Debt Repayment

- 4.21.1 In 2018-19 the partnership overspent by £3.277m. An agreement was reached with the Council's Leadership Panel to pay back £1.092m per year over 3 financial years from 2020-21. Budget provision of £1.092m was set aside for this purpose. The final payment of £0.802m will be made in 2022-23.
- 4.21.2 During the last two years investments were approved by the IJB from reserves, with the expectation that the investment would be recurring utilising the balance that would become available following debt repayments. Of the full £1.092m budget allocations will be made in the budget 23-24 on a recurring basis to fund the expenditure shown in Appendix 4. With exception of the Corporate Finance resource, this will be funded by the Council on a temporary basis for a period of two years, thereafter the budget will transfer in 2025-26.
- 4.21.3 The balance of £0.098m remaining will be used to meet the savings targets on a recurring basis.

5. Set Aside Budget

- 5.1 The Set Aside budget represents the direct cost of six specialities and is focussed on unscheduled activity. The six areas are Accident and Emergency, General Medicine, Geriatric Medicine, Respiratory Medicine, Rehabilitation Medicine and certain GP non elective activity.
- Unscheduled care is a key focus for development to align the "fair shares" along with other acute specialities in the community not included in the set aside budget. The Scottish government Medium Term Financial Framework includes an assumption of efficiencies from reduced variation in hospital to enable a 50% reinvestment in the community to sustain improvement. The three Ayrshire HSCP's are working in partnership with NHS Ayrshire and Arran to develop fair share allocations alongside Directions in 2023-24. This work commenced in 2022-23 with information on activity and costs presented to the Ayrshire Finance Leads further review and scrutiny of this information is ongoing.
- 5.3 A Commissioning Plan will be presented to the IJB during the year, detailing our Set Aside Budget and the corresponding activity levels this budget allows for.

6. Medium Term Financial Plan Update

- 6.1 The Medium-Term Financial Plan was approved by IJB in January 2020, the plan was based on the 2019-20 budget and looked at the financial trajectory of expenditure and funding over the five-year period to 2024-25.
- The financial plan used projected demographic and price demand information included in the Scottish Government's Medium-Term Financial Framework for Health and Social Care published in October 2018. This included Demographic growth within social care at 4%, NHS at 1% and pay awards at 2%. Funding



increases were based on 3.19% from Council Funding and 2.25% from Health Board.

6.3 The budget gap was presented in the Medium-Term Financial Plan as shown in table below.

	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25
	£m	£m	£m	£m	£m	£m
Funding delegated to the IJB	224.6	229.0	233.6	238.2	243.0	247.9
"Do Nothing" spend	(224.5)	(233.1)	(240.3)	(247.6)	(254.4)	(262.0)
Bugdet Gap	0.1	(4.1)	(6.7)	(9.4)	(11.4)	(14.1)

6.4 In the budgets set for the years 2019-20 to 2023-24 the actual budget gap is shown in the table below. This represents a cumulative total of £14.1m shortfall between funding delegated and pressures to be met.

Actual	2019/20	2020/21	2021/22	2022/23	2023/24
	£m	£m	£m	£m	£m
Funding Delegated to IJB	4.7	3.8	3.2	16.8	4.18
Pressures	8.6	7.0	6.6	16.7	8.0
Budget Gap	(3.9)	(3.2)	(3.4)	0	(3.8)

- 6.6 Significant investment in 2022-23 from the Scottish Government was to meet specific policy implementation to increase adult social care pay, increase capacity within the community and further implement multi-disciplinary team working.
- 6.7 A balanced budget was set in each of the financial years and savings met to bridge the gap. These savings were delivered from various transformation activities including:
 - Whole Family Whole System Approach in Children and Families
 - Family Group Decision Making
 - Transfer of out with authority placements to South Ayrshire
 - Implementation of a Care at Home Reablement Service
 - Increase capacity in mobile responder service
 - Creation of Supported Accommodation models
 - Commissioning Frameworks
 - Integrated Multi-Disciplinary Teams
 - Investment in technology



- 6.8 Financial planning for the medium to long term is essential in assessing the financial sustainability of the IJB in order to make decisions on shaping services for the future. The planning relies on national and local information and trends.
- 6.9 Scottish Government investment over the last two years has been in response to specific areas of need and allocations have been both recurring and non-recurring in nature. This has made financial planning challenging along with the budget settlements set annually.
- 6.10 The Scottish Government are updating their Health and Social Care Medium Term Financial Framework in 2023-24, this framework is a key document in the preparation of the HSCP's medium term financial plan.
- 6.11 It is recommended that the IJB Medium Term Financial Plan is updated this financial year. The updated plan will be presented to IJB for review and approval during 2023-24.

7. Financial Risks

- 7.1 The report outlines the delegated funding and the pressures to be met from within the overall integrated budget. This is based on information known at a specific point in time.
- 7.2 The pay awards have still to be approved for NHS and Local Authorities. Whilst the Scottish Government has provided assurance any increase over the public sector pay policy, this is not the case for Local Authorities. There is no guarantee that partners will pass on any pay related allocations from Scottish Government. Any increases in pay awards may have to be met from in-year resources or General Reserves.
- 7.3 The National Care Home Contract uplift is still under discussion and no agreement has been made to date. A best estimate has been included in the pressures to meet the anticipated uplift, any costs over and above this will need to be met from current resources.
- 7.4 The work on Set Aside budget may have financial implications to 2023-24 budget, if the budget is not sufficient to meet our demand and usage of the services included in this budget.

8. Managing Financial Risk

8.1 The preceding section detailed the specific financial risks. These will be monitored in year through the budget monitoring process. With specific focus on the activity drivers behind the costs to ensure we can monitor trends and changes in demand for care.



- 8.2 The reserves balance will provide a cushion for any fluctuations in expenditure that may arise during the year. Any use of reserves balances will be subject to scrutiny by the Budget Working Group prior to request for approval at IJB.
- 8.3 The Medium-Term Financial Plan will be a key document in providing context around the financial challenges over the next five years. The plan will also include what action is required to ensure financial sustainability whilst continuing to deliver services to the most vulnerable.
- 8.4 The Medium-Term Financial Plan will align to the HSCP Strategic Plan 2021-2031, South Ayrshire HSCP Workforce Plan 2022-25 and the Learning Disability Strategy 2022-2027. The developing commissioning plan for set aside budget, the refresh of the Digital Strategy, Community Mental Health and Children's Services Plan also need to be considered in the development of the Medium-Term Financial Plan.

9. Next Steps

- 9.1 A new Medium-Term Financial Plan will be created to reflect 2022-23 financial position and budget for 2023-24. This will be presented for approval to IJB.
- 9.2 The DMT will continue to review the current <u>transformation and improvements</u> plans, presented to IJB in Dec 2022.

10. STRATEGIC CONTEXT

10.1 The IJB is expected to operate within the resources available. This report contributes to the strategic priorities.

11. IMPLICATIONS

11.1 Financial Implications

- 11.1.2 The total directly managed services delegated budget for 2023-24 is £194.890m This budget increases to £223.201m when uplifted Set Aside resources of £28.311m are included.
- 11.1.3 The plans outlined in this report allow for a balanced financial position to be approved.

11.2 Human Resource Implications

11.2.1 The proposals include creation of additional posts these will advertised via the relevant partner's recruitment processes.

11.3 Legal Implications

11.3.1 The approval of the delegated budget for the IJB will ensure compliance with the terms of the Integration Scheme,

11.4 Equalities implications



11.4.1 An equality impact assessment on the full budget has been completed and is attached.

11.5 Sustainability implications

11.5.1 There are no sustainability implications arising from this report.

11.6 Clinical/professional assessment

11.6.1 There are no clinical/professional implications arising from this report.

12. CONSULTATION AND PARTNERSHIP WORKING

12.1 The content of this report and creation of the pressures and savings was developed in partnership with members of the budget working group alongside Heads of Service and Senior Managers within the Council and NHS.

13. RISK ASSESSMENT

13.1 For the forthcoming financial year, there are a number of financial risks noted in Section 8.

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3rd March 2023



APPENDIX 1

	00/04	00/04	00/04 T-1-1
	23/24 Budget	23/24 Budget	23/24 Total Budget
South Ayrshire Health and Social Care			
Partnership Budget	Council	NHS	Integrated
	TOTAL	TOTAL	TOTAL
	£'000	£'000	£'000
Community Care & Health			
Older People	54,100	0	54,100
Physical Disability	4,250	0	4,250
 Biggart Hospital	0	4,972	4,972
Girvan Hospital	0	1,470	1,470
Community Nursing	0	3,916	3,916
Intermediate Care and Rehabilitation	0	1,630	1,630
AHPs	0	8,139	8,139
Total Community Care & Health	58,350	20,128	78,478
Primary Care	20,000		,
Prescribing	0	24,220	24,220
General Medical Services	0	18,881	18,881
Total Primary Care	0	43,101	43,101
Mental Health Services		,	,
Learning Disability	24,702	486	25,188
Mental Health Community Teams	4,506	3,055	7,561
Addictions	336	1,101	1,437
Total Mental Health Services	29,544	4,643	34,186
Hosted Services			
Community Store	0	579	579
Family Nurse Partnership	0	2,090	2,090
Continence Team	0	444	444
Total Hosted Services	0	3,113	3,113
Children and Criminal Justice Services			
C&F Social Work Services	23,206	0	23,206
Justice Services	1,727	0	1,727
Health Visiting	0	3,048	3,048
Total Children and Criminal Justice Services	24,933	3,048	27,980
Integrated Care Fund/ Delayed Discharge	388	685	1,072
Support Services			0
Directorate	5,312	3,668	8,980
Other Services	589	276	865
Payroll management target	(2,388)	(500)	(2,888)
Total Support Services	3,513	3,444	6,957
Scheme of Assistance	0	0	0
Inter Agency Payments	(19,922)	19,922	0
Partnership Total	96,805	98,085	194,890
Acute Hospitals	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	28,311	28,311
IJB Total	96,805	126,396	223,201



APPENDIX 2

IJB FINANCIAL PRESSURES 2023-24

NHS Serv	vice Wide				
Partner	Category	Service	Funding Pressures Subject	Pressures 2023/24 £'000's	Recucring/Non Recurring
NHS	Pay Award	NHS Wide	NHS Pay Award	630	Recurring
			Total Funding Pressures NHS Service Wide	630	

Partner	Category	Service	Funding Pressures Subject	Pressures 2023/24 £'000's	Recucring/Nor Recurring
SAC	Pay Award	Social Care Wide	Council Pay Award	1,913	Recurring
SAC	Inflation/Contractual	Community Care and Health	Adult Social Care Contract Uplift	2,966	Recurring
SAC	Inflation/Contractual	Children and Families	Children and Families Contract increases including Family Placement Allowances	429	Recurring
SAC	Demand/Demographic	Social Services Wide	Practice Development funding to support Training Needs	80	Non Recurring (23/24 Only)
			Total Funding Pressures Council Service Wide	5,387	



Partner	er Category Service		Funding Pressures Subject	Pressures 2023/24 £'000's	Recucring/Non Recurring
NHS	Demand/Demographic	Children and Justice Services	Service Managers Post Band 8a (Health Visiting and School Nurse)	68	Recurring
SAC	Demand/Demographic	Children and Justice Services	Lead Officer - Children Services Planning Group	35	Recurring
SAC	Demand/Demographic	Children and Justice Services	Champions Board Resource	55	Recurring
			Total Funding Pressures Children and Families	158	

Partner	Category	Service	Funding Pressures Subject	Pressures 2023/24 £'000's	Recucring/Non Recurring
SAC	Demand/Demographic	Community Care and Health	Care Home Beds - impact of Interim Care Placements		Non Recurring (23/24 Only)
SAC	Demand/Demographic	Community Care and Health	Biggart Hospital - additonal 17 beds		Non Recurring (23/24 Only)
SAC	Demand/Demographic	Community Care and Health	Personal Protective Equipment	50	Recurring
			Total Funding Pressures Community Care and Health	1,415	



Partner	ertner Category Service		Funding Pressures Subject	Pressures 2023/24 £'000's	Recucring/Non Recurring
NHS	Pan Ayrshire	Pan Ayrshire	Integrated Breast Feeding Peer Support Service	57	Recurring
NHS	Pan Ayrshire	Pan Ayrshire	Child Death Overview Process Share of Team Lead	14	Recurring
NHS	Pan Ayrshire	Pan Ayrshire	Adult Tier 3 Specialist Weight Management Service	77	Recurring
NHS	Pan Ayrshire	Pan Ayrshire	Investment in NHS TEC Project	22	Recurring
SAHSCP	SAHSCP Lead Community Equipment Store	Lead Partnership	Contract increases with specific providers of aids, equipment and continence supplies	44	Recurring
EAHSCP	EAHSCP Lead Primary Care	Lead Partnership	Contract Increases (Prison Contract / Appropriate Adult Service)	20	Recurring
EAHSCP	EAHSCP Lead Primary Care	Lead Partnership	Community Phlebotomy service	28	Recurring
NAHSCP	NAHSCP Lead Mental Health	Lead Partnership	Neurodevelopmental Empowerment Strategy Team(NEST) Band 3 Admin support	10	Recurring
NAHSCP	NAHSCP Lead Mental Health	Lead Partnership	MAT Drugs Costs	62	Recurring
			Total Funding Pressures Lead Partnerships	333	



Mental Health						
Partner	Category	Service	Funding Pressures Subject	Pressures 2023/24 £'000's	Recucring/Non Recurring	
NHS	Demand/Demographic	Mental Health	Band 3 Nursing Assistant to support Care Home liaison nurse	31	Recurring	
			Total Funding Pressures Mental Health	31		



APPENDIX THREE

IJB SAVINGS 2023-34

	Children	Children and Families				
Ref	Partner	Risk of Achievement	Category	Savings Description	2023/24 £	
SP-2023-24-01	SAC	G	Demand Management	Current Level of Spend - Family Placement Team	350,000	
				Total Children and Families Savings Proposals	350,000	

	Community Care and Health					
Ref	Partner	Risk of Achievement	Category	Savings Description	2023/24 £	
SP-2023-24-02	SAC	G	Demand Management	Adult Community Care Packages	700,000	
SP-2023-24-05	SAC	G	Transformation	Promotion of Self Directed Support Options	180,000	
				Total Community Care and Health Savings Proposals	880,000	



	Council Service Wide					
Ref	Partner	Risk of Achievement	Category	Savings Description	2023/24 £	
SP-2023-24-04	SAC	G	Market Capacity	Payroll Turnover	500,000	
SP-2023-24-08	SAC	G	Debt Repayment	Debt Payback Budget	98,000	
				Total Council Service Wide Savings Proposals	598,000	

	NHS Serv	NHS Service Wide					
Ref	Partner	Priority	Strategic Priority	Efficiency Proposals	2023/24 £		
SP-2023-24-03	NHS	G	Market Capacity	Payroll Turnover	500,000		
				Total NHS Service Wide Savings Proposals	500,000		



APPENDIX FOUR DEBT BUDGET ALLOCATION 2023-24

	£'000's
Original Budget	1,092
QA Support Commissioning Team	40
Adult Social Work Structure	150
District Nurse Review	100
Developing Community Capacity	100
Frailty Capacity - OT posts	143
AHP Capacity	200
MHO Team Lead	67
SDS Lead Officer	63
Lead Practioner LD Transitions	61
Corporate Finance Resource	70
Total Funded Permanently	994
Recurring Balance Remaining	98