# **South Ayrshire Health and Social Care Partnership**

# **REPORT**

Meeting of South Ayrshire Health and Social Care Partnership			Integra	ation Joint	Boa	rd				
Held on			14 <sup>th</sup> Ju	ine 2023						
Agenda Item	1		Item 1	0						
Title			Year E	nd Financ	ial O	utturn 2022	2-23			
Summary: The purpose financial outto						_	oint E	Board of th	e ac	tual
Presented b	у		Lisa D	uncan, Ch	ief Fi	nance Offic	cer			
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Implications						-				t
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Directions required to NHS Ayrshire & Arran South			1. No Dii	ectic	n Required					
Ayrshire Council, or both			2. Direct	ion to	NHS Ayrsh	nire a	and Arran			
			3. Direct	3. Direction to South Ayrshire Council						
				4. Direction to NHS Ayrshire and Arran and South Ayrshire Council						

# SOUTH AYRSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP INTEGRATION JOINT BOARD

14<sup>th</sup> June 2023

## **Report by Chief Finance Officer**

## **Year End Financial Outturn 2022-23**

#### 1. PURPOSE OF REPORT

1.1 The purpose of this report is to advise the IJB of the financial outturn for the financial year ended 31<sup>st</sup> March 2023. The report will also provide an update on the actual financial costs incurred this year in responding 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, funds for earmarking to use in 2023-24 and financial risks are also included.

#### 2. RECOMMENDATION

## 2.1 It is recommended that the Integration Joint Board;

- (i) Note the actual financial outturn for the year ended at 31st March 2023;
- (ii) Note the financial outturn in relation to Lead Partnership services;
- (iii) Note the financial outturn within the Acute Services budget and Set Aside budgets;
- (iv) Note the progress made towards savings;
- (v) Note the Covid-19 actual spend to 31st March 2023;
- (vi) Approve the earmarking of funds in Section 4.11 and 4.12;
- (vii) Note the carry forward of approved commitments in Section 4.13
- (viii) Approve the request to earmark funds for Improvement in Section 4.14
- (ix) Note the key financial issues and risks for the IJB

#### 3. BACKGROUND INFORMATION

The actual year end outturn for the financial year end 31<sup>st</sup> of March 2023 is an overall underspend of £14.769m. This includes the partnerships' share of the Lead Partnership underspends. The finalised expenditure in responding to the Covid pandemic this year is included in the report, 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 underspent by £10.996m,
- Managed services delivered by NHS Ayrshire and Arran are underspent by £2.237m,
- Lead Partnership arrangements are underspent by £1.535m, 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 £276.238m, with an actual year end underspend of £14.769m, a favourable movement of £8.470 m from Period 9, main movements are due to:

Older People Council Services, had a favourable movement of £2.8m. Of this £1.2m relates to underspends in CAH Capacity funding brought forward to be used over two years and delay in spend on analogue to digital community alarms, these underspends will be earmarked for use in 23-24. The Care at Home purchased budget underspend reduced by a further £0.550m, due to further reduced capacity in commissioned care a reduction of 120 hours per week or 1.8% since period 9. Within Care at Home employees' budget there was a favourable movement of £1.000m, period 9 had assumed £0.600m would be required to meet additional cost of pay uplift, this however was meet from other staffing turnover. Balance of variance due to transfer of budget from purchased care at home for staff TUPE'd, the budget was greater than actual staff costs of transfer.

Children and Justice Services favourable movement of £0.480m, of which £0.175m relates to income for Unaccompanied Asylum Seekers, £0.165m set aside in previous projection for emergency carers not required, less than expected costs of £0.100m for from adoption fees and orders. Legal costs of £0.040m set aside for Child Abuse Inquiry costs now met by corporate legal budget.

Learning Disabilities community living change fund favourable movement of £0.371m, due to Carrick Street Core and Cluster delay in opening, service development is dependent on this accommodation being in operation.

Addictions favourable movement of £0.400m, prior projection had assumed no earmarking for Alcohol and Drug Partnership (ADP) funding with expectation Scottish Government would reduce in year funding allocation by expected underspend. Returns submitted to Scottish Government have confirmed earmarking of underspends is allowable.

Mental Health favourable movement of £0.237m within community packages prior projection for option 2 Individual Service Funds was based on commissioned not actual spend, also underspends within voluntary organisations.

Carers Act funding favourable movement of £0.167m, commissioning exercise has now concluded with approval for spend in 23-24. Staffing investment in adult social work capacity and nursing capacity favourable movement of £0.800m, the new structure was approved by ELT in December, and recruitment in both adult structure and nursing is nearing completion.

Favourable movement on payroll turnover of £0.536m, due to recruitment challenges. Overall payroll turnover was £0.536m greater than budgeted target of £1.849m

Covid underspend by £0.704m, previous projection assumed a balanced position and funding would have been returned in year. This underspend will be earmarked to return to Scottish Government in 2023-24.

Specific budgets transferred from reserves £0.600m, including Grow Your Own, Community Care restructure, Justice Services property costs, Penumbra contract, reablement supervisor.

NHS staffing further slippage in recruitment within Allied Health Professionals and Intermediate Care Team £0.334m due to further slippage in recruitment.

Multi-Disciplinary Team funding favourable movement of £0.500m slippage in vacancies and recruitment to various posts.

Hospital at Home and AHP's funding allocations from SG favourable movement of £0.803m due to slippage in recruitment to various posts, funding to be carried forward.

Underspends in Lead Partnership Pressures approved in budget for 22-23, £0.123m in relation to our share of funding for Foxgrove the National Secure Adolescent Inpatient Service (NSAIS) delivered by North and Veterans First service delivered by East Ayrshire.

Lead Partnerships favourable movement of £1.149m of which £0.329m relates to Primary Care Services delivered by East Ayrshire Health and Social Care Partnership and £0.820m relates to services delivered by North Ayrshire Health and Social Care Partnership.

The above favourable movements are offset with adverse movements in:-

NHS Employee Costs adverse movement of £1.541m to fund additional pay award approved for 2022-23. This increase represents the additional costs incurred this financial year to meet increased pay award. Scottish Government allocated additional funding to NHS Ayrshire and Arran (NHS AA) to meet the additional pay award costs. Due to the significant level of staffing underspends already incurred within the budget, the pay uplift funding was not required. The funding increase has been included in the base employee budget for 2023-24 ensuring posts are fully funded.

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, an update on reserves position and earmarking of funds seeking approval. Progress on savings to be achieved, and a summary of Covid-19 financial cost for this year.

#### 4.1 Community Health and Care – underspend of £3.256m

Against a full year budget of £79.808m, there is an underspend of £3.185m (4%). The main reasons for the underspend are:

**Purchased Care at Home Service** actual underspend of £2.054m. The budget can afford 9,775 hours per week however due to capacity issues in the private sector we are only able to purchase 6,625 hours per week. This has reduced from 6,745 hours per week in period 9.

The partnership continues to collaborate with providers to recruit into jobs in health and social care: For example, a number of in-person recruitment events have been held

involving both in-house and private providers. We are starting to see progress in recruitment with expected vacancies within the mainstream service to be filled by the end of the financial year. The budget for 2023-24 approved virement of £1.4m into inhouse care at home service to recruit an additional  $50 \times 21$  hour care at home staff,  $4 \times 35$  hour assistant supervisors and  $1 \times 35$  hour admin post, as at May 23 these posts were filled with recruitment and various stages in the process.

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.

Care at Home Employees including reablement team actual underspend of £1.171m. There has been in year vacancies as well as transfer of two care home companies to internal care at home, where budget transferred has been greater than employee costs transferring to Council contracts resulting in further underspends.

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.

**Technology Enabled Care** actual underspend of £0.282m from a budget of £0.581m for this year's analogue to digital community alarm transfer, due to supply issues with providers less than expected kit has been able to be purchased this year, this underspend will be earmarked to allow transfer to progress in 23-24.

**Allied Health Professionals** – underspent by £0.742m, due to slippage in filling posts from previous investments, a full service review of AHP posts will assess future staffing establishment.

Intermediate Care and Rehab – underspent by £0.223m, due to vacancies in year.

**Winter Planning Reserves** – underspent by £0.885m. Funding for additional care at home capacity £1.554m and interim care places £0.760m was earmarked for use in 2022-23. The full details of spending plans are included in <u>IJB Reserves Update 2022-23</u> approved by the IJB on the 17<sup>th</sup> of August 2022.

During the year £0.669m was spent from the care at home capacity allocation, with £0.885m to be earmarked for use in 2023-24 to continue the following investments. The interim care places funding of £0.760m was fully utilised in supporting 54 interim care places during the year.

Investment	Purpose	Amount 23-24 £000s
Care at Home Quality Assurance Team	To provide additional capacity on a temporary basis to facilitate review of care packages in order to release capacity and provide training resource for new starts.	67
Additional Social Work	,	40
Resource in Ayr Locality	meet assessment and review demands	

Occupational Therapist Assistants (RUNAT)	Increase capacity in the community to provide support to people whose needs are not currently being met this is a preventative approach to avoid needs escalating and avoid hospital admissions	93
South Lodge	Increase capacity in the community by providing 13 step up and 2 step down beds at South Lodge, to reduce delayed discharge and provide a reablement service prior to transfer to care at home	397
Interim Care Beds	To fund remaining 11 interim care beds, until community care capacity can be optimised.	288
	TOTAL	£885

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

Care Homes – overspent by £0.758m. The care home budget can afford for 878 placements, as at end of January there was 849 people in care homes. In 2020 Pre-Covid care home placements were 67% Nursing and 33% residential. This ratio has now changed to 75% nursing and 25% residential, this has resulted in an overspend as cost of nursing is greater than residential care. This overspend has also been compounded by a decrease in self-funders and an increase in people receiving funding from the Council. In 2020 self-funders accounted for 43% of placements, this has reduced to 39%. Council are therefore funding 62% of placements compared to 57% in 2020.

**Biggart Hospital** – actual overspend of £0.702m, of this £0.316m relates to nonfunded element of the pay uplift for 22-23. Balance of overspend is due to increase in staffing establishment and additional use of bank and borrowed staff to support increase levels of one to one support required. As at end of March 23 there was 27 delayed discharges in Biggart Hospital. In 22-23 there were 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 discussed including pathways for orthopaedics, stroke and palliative care. The next stage is to agree with acute colleagues a 7 day Advanced Nurse Practitioner (ANP) model and planned medical support to meet the Biggart model going forward, this will include an agreed plan for reduction in beds to fully realise the model. This is dependent on an increase in community capacity allowing for reduction in Delayed Transfers of Care (DTOC). The bed reduction can be achieved on a sliding scale as DTOC reduce. From a financial perspective £0.835m has been approved to be allocated from reserves in 2023-24 to meet the costs of the additional beds for one year during the transition period to the new model.

**Girvan Hospital** – overspent by £0.149m of which £0.090m related to the increased pay uplift and the balance due to increase in bank staff to cover maternity and staff sickness.

**Income** – a shortfall of £0.100m in income mainly due to delay in implementation of day care charging, shortfall in income from non-personal care charging.

**Community Nursing –** actual overspent by £0.204m, of this £0.095m was due to pay uplift shortfall in 22-23, balance of overspend relates to continued use of bank and borrowed shifts to cover weekend working, staff sickness, carer breaks and maternity leaves.

#### 4.2 Children and Justice Services – actual underspend of £1.923m

Against a full year budget of £27.086m, there is an underspend of £1.923m (7%), the main variances include underspends in:

**Family Placements** – underspent by £1.174m. This includes internal foster placements currently 27 less than budgeted resulting in a £0.672m 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 underspent by £0.145m as well as income of £0.113m has been generated from completion of referrals from other local authorities in respect of adoption orders.

Further underspend of £0.053m within carers in the community the budget can afford 31 placements based on average cost per week currently there are only 15 placements. Supported Carers underspent by £0.022m and Kinship care placements are £0.115m underspent, budget can afford 143 placements at end of year there were 103.

**Outwith Authority Placements** - underspent by £0.215m, at year end there were 42 placements compared to a full year budget of 50 placements. The budget disinvestment included reducing out with authority foster placements over the course of the year this has been achieved.

**Legal Fees** – underspend of £0.041m, budget set aside for anticipated costs from historic child abuse inquiry, costs incurred have been met by the corporate legal budget.

**Voluntary Organisations** - underspent by £0.080m including Penumbra £0.024m, funding for Distress Brief Intervention allocated from reserves for contract to end of Aug 23. Balance of underspend following contract reviews.

**Health Visiting** – underspent by £0.076m, due to staff slippage, additional investment made this year as part of budget process.

**Unaccompanied Asylum Seekers** - as part of the National Transfer Scheme, South Ayrshire Council have committed to the intake of unaccompanied asylum seeking children. To date, South Ayrshire Council have 11 young people in various placement types. A contribution towards the looking after of the young people is provided by the UK Border Agency this funds the costs of the placements and the staffing costs to provide support. As at March 23, income of £0.318m had been received against a spend of £0.143m to support young people. Balance of £0.175m is requested to be carried forward into 23-24 to provide budget to recruit staff to provide support in this area to meet expected increase in demand.

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

**Children with Additional Support needs –** community care packages overspend of £0.101m reflecting full year costs of an increase of 21 new care package from prior year.

## 4.3 Mental Health Services – actual underspend of £1.993m

Against a full year budget of £35.965m, actual year end underspend of £1.993m (5.5%). The main reasons for the overall underspend are:-

**Learning Disabilities community care packages** – actual underspend of £1.136m, as a result of full year effect of prior year savings.

**Learning Disability respite care** – actual underspend of £0.130m 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 Community Living Change Fund** – actual underspend £0.371m to be earmarked into 23-24 to progress with redesigning service. This has been delayed as service redesign was reliant on Carrick Street Core and Cluster being finalised. The funding of £0.411m was provided by Scottish Government to implement changes to reduce the number of delayed discharges for those with complex needs, repatriate people who are inappropriately placed outside Scotland and redesign services for people with complex needs.

**Health Learning Disability Team –** actual underspend of £0.080m, based on the vacant posts at beginning of the year offset with an additional cost of £0.024m for 22-23 pay award not funded.

**Addictions** – actual underspend of £0.566m, of this £0.423m relates to ADP funding and will be carried forward to 23-24, mainly due to National Drugs Mission funding and MAT (Medical Assisted Treatment) funding received from Scottish Government for specific priorities to be achieved over a two year period.

A further £0.020m underspend for the ADP Development Co-ordinator funded from reserves to be earmarked for use in 23-24, balance of underspend is due to vacancy slippage within Health Team.

The current National Drugs Mission funding for residential rehabilitation from the Scottish Government is £0.113m per annum and can fund on average 6 placements per year. This funding was allocated to ensure that anyone who requested residential rehab for an addiction issue was able to access this support with preparatory aftercare support provided by the Roads of Out of Alcohol and Drugs (ROADS) team. During 22-23 we spent £0.211m on residential rehab with 16 placements in the year. The additional cost has been met from National Drug Mission residential rehabilitation reserves in 22-23.

The demand for this service is not financially sustainable in 23-24, Scottish Government have been made aware that funding allocation is not sufficient to meet the demand and further allocations are required to meet outcomes expected. The projected costs for 23-24 is £0.690m based on the admissions since the service began, and 3 anticipated each month to March 24, a total of 40 admissions in 23-24. Scottish Government are still to respond, and any financial implications will be highlighted in 23-24 budget monitoring reports.

**Mental Health Community care packages –** actual underspend of £0.100m at end of year, reflecting issues in market capacity.

**Mental Health Voluntary Organisations** – underspent by £0.128m based on current contracts with voluntary organisations

**Supported Accommodation** – underspent of £0.103m due to time taken for provider organisation to achieve full workforce capacity.

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

**Learning Disability residential care** – actual overspend of £0.401m, at end of year.

## 4.4 Support Services actual underspend of £5.545m

Within the Council there is an actual underspend of £3.376m relating to the following --

- Adult Locality structure underspend of £0.800m, due to time taken to approve and then recruit posts, underspends includes £0.250m allocated from reserves in 21-22 now no longer required, as permanent funding for the new structure has been allocated;
- Grow Your Own underspend of £0.250m, funding approved from to be earmarked for use to 2026;
- Carers Act underspend of £0.427m, funds allocated in period 9 following analysis of spend based on carers needs;
- Winter Planning Investment underspend of £0.759m, funds set aside for support functions and underspend in NHS Occupational Therapy and nursing posts in 22-23 full budget allocation not required;
- Staff turnover exceeded target of £1.894m by £0.536m due to recruitment challenges;
- Locality Planning underspent by £0.066m on community capacity funding due to delay in groups meeting back up following the pandemic, request to earmark this underspend for use in 23-24:
- Contract uplifts £0.265m of a balance remaining that was set aside for use in contract uplifts with providers out with the local authority;
- AHP capacity funded from reserves underspend of £0.113m, funding no longer required posts have all been allocated permanent budget;
- Underspend of £0.124m in temporary posts funded from reserves, this will be earmarked for use in 23-24.

Within Health there is a projected underspend of £2.169m, of which £0.255m relates to underspend in Business Admin and Directorate employee costs. Underspends in winter pressure funding for Multi-Disciplinary teams of £1.001m, further underspend of £0.158m, from financial pressure approved in budget 22-23 to meet our share of Lead Partnership pressures not fully required this year. Hospital at Home and AHP unscheduled care funding of £0.663m to be earmarked for 23-24.

#### 4.5 Hosted Services actual overspend of £0.139m

The Continence Team overspent by £0.133m 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. Contract increase pressures have been included in the 2023-24 Budget Pressures.

Community Equipment store overspent by £0.101m as a result of increase costs to meet demand and supply issues, particularly for beds purchased to meet delayed transfers of care. This issue is not expected to continue. Contract increases for other items have been included in 2023-24 Budget Pressures.

Family nurse partnership are underspent by £0.087m, this is due to income received from NHS Education for Scotland (NES). Projection assumes Scottish Government funding allocation matches the cost of the posts recruited to in year. With full funding allocation anticipated next year.

## 4.6 Covid Expenditure

During the year the partnership continued 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.

This is the final year of Covid funding allocations at the end of the year total spend was £2.185m, including £0.003m to be earmarked for unpaid carers PPE costs to continue into 23-24.

Local Mobilisation Plan	Ac	Actual Spend 22-23			
Description of Expenditure	NHS £'000	SAC £'000	Total £'000		
Additional Community Hospital Bed Capacity	545		545		
Additional Staff Costs	222	277	499		
Additional PPE		62	62		
Social Care Provider Sustainability Payments		414	414		
Social Care Support Fund Claims		582	582		
Chief Social Work Officer		80	80		
Actual Spend for 22-23	767	1,416	2,182		
PPE to be Earmaked to 23-24 Unpaid Carers		3	3		
TOTAL SPEND	767	1,419	2,185		

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.

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.

A PPE steering group met during the year and reviewed spend on PPE items, during the year these reduced significantly as restrictions were lifted. The Group recommended the only continuation of PPE should be to the unpaid carers group who have received PPE over the course of the last three years. An allocation of £0.003m has been made for 23-24 to ensure we can provide a supply of PPE for unpaid carers.

Provider sustainability principles are approved by the Scottish Government, the Social Care Staff Support Fund ended on 31<sup>st</sup> March 2023, this fund ensured staff are paid their expected income if absent or self-isolating due to Covid.

#### 4.7 <u>Covid Reserves</u>

On the 12<sup>th</sup> September a letter was received from Scottish Government's Director of Health Finance, Corporate Governance and Value Directorate providing an update on Covid Reserves. The letter stated that due to a number of significant changes to Public Health policies in relation to Covid over the summer, resulting in a reduced profile of spending compared to when funding was provided to IJB's for Covid purposes. The Scottish Government will reclaim surplus Covid reserves to be redistributed across the sector to meet current Covid priorities.

A further letter was received on the 16<sup>th</sup> January 2023, regarding the arrangements to enable Covid reserves to be returned. This was carried out through a negative allocation to the NHS Board's back to Scottish Government.

South Ayrshire IJB's excess reserves of £8.677m was passed back to Scottish Government. This represents reserves of £11.666m less £2.989m projected spend as at month 8. Confirmation has been received that all expenditure will be fully funded, a year end final spend submission will determine if any funding is due or a surplus to be paid back.

At year end there was a surplus of £0.804m to be paid back to Scottish Government in 23-24, of the £0.515m was adjusted as a negative allocation to the NHS budget. The Council allocation is £0.704m underspent this represents £0.289m to be paid back to Scottish Government, and SAC to pay back £0.412m back to NHS, and £0.003m to be earmarked for unpaid Carers PPE.

#### 4.8 Lead Partnerships underspent by £1.535m

The table below shows recharges to East and North for services we host, income of £0.096m received, being their share of our £0.139m overspend, as noted in Section 4.5 Hosted Services.

The recharges from other Partnerships is our share of East's actual underspend of £2.187m and North's actual underspend of £2.840m.

	Annual Budget 22/23	Actual Outturn	Variance (Over)/ Underspend
Recharges to other Partnerships	(2,284)	(2,380)	96
Recharges from other Partnerships	49,721	48,282	1,439

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	Ayrshire	North Ayrshire NRAC Share £'000	South Ayrshire NRAC Share £'000	NRAC Basis
East Ayrshire	1,814	579	670	565	Community - East 31.9%, North 37%, South 31.1%
Primary Care	373	466	(157)	65	Primary Care Fund Based on Actuals
North Ayrshire	2,313	757	893	663	Mental Health - East 32.8%, North 38.7%, South 28.6%
Action 15	527	255	125	146	Action 15 Based on Actuals
South Ayrshire	(139)	(44)	(51)	(43)	Community - East 31.9%, North 37%, South 31.1%
TOTAL	4,888	2,013	1,480	1,396	

**East Ayrshire Health and Social Care Partnership** lead on Primary Care services, at the end of the year underspent by £2.187m in total. After taking account of earmarking this underspend reduces to £0.518m to £1.669m for 2022-23. The main underspends are due to:

- Primary Care and Out of Hours Services are underspent by £1.953m. This includes a net overall underspend of £0.373m on the Primary Care Improvement Fund which has been earmarked for carry-forward on an actual spend basis at individual IJB level, as well as Mental Health Wellbeing Funding in Primary Care funding £0.109m and Dental Childsmile funding £0.036m, which have also been carried-forward at individual IJB level on a NRAC share basis. The £1.110m underspend in Dental services includes savings due to reduced service provision with an anticipated increase in staffing costs going forward.
- The Prison and Police Healthcare services underspent by £0.214m largely due to net staffing savings. In addition, the medical contracts at both Prison and Police have reduced and is contributing to the underspend.
- Other Lead services underspent by £0.020m, wholly relates to less than budgeted Marie Curie care and support services.

**North Ayrshire Health and Social Care Partnership** lead on Mental Health Services, are underspent by £2.802m on Mental Health Services and underspent by £0.039m on Immunisation services. Within this position are the following variances:

- An overspend in Adult Inpatients of £0.589m, mainly due to the use of supplementary staff and staff in redeployment and reduced bed sale income and provision for the band 2 to band 3 upgrade.
- UNPACS (Unplanned Activities) is overspent by £1.503m. 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 (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.
- Mental health pharmacy overspent by £0.019m due to an increase in substitute prescribing costs. This is the position after drawing £0.100m of Buvidal funding held in reserves.
- Learning Disability services are overspent by £0.223m. 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 outturn includes cross charging another HSCP for the ongoing costs of the person as detailed above where, despite giving extensive time to identify an alternative placement there has, as yet, been no solution identified.
  - Elderly Inpatients overspent by £0.403m mainly due to the use of supplementary staffing and provision for the band 2 to band 3 regrade.
  - The Innovation Fund is underspent by £0.210m due to recruitment slippage within some of the projects and not all of the funding was allocated.
  - CAMHS underspent by £2.176m of which £0.592m relates to payroll turnover on the main CAMHS budget and £1.584m relates to an underspend on the additional Scottish Govt funding. This £1.584m will be earmarked and carried forward for use in 23-24.
  - The turnover target for vacancy savings for the Lead Partnership is held within the Lead Partnership as this is a Pan-Ayrshire target. There is an overrecovery of the vacancy savings target of £1.857m in 2022-23, further information is included in the table below:

Vacancy Savings Target	(£0.481m)
Achieved at March 2023	£2.338m
Over/(Under) Achievement	£1.857m

The areas contributing to this vacancy savings position are noted below:

Adult Community Health services £0.183m

- CAMHS £0.592m
- Mental Health Admin £0.468m
- Psychiatry £0.158m
- Psychology £0.873m
- Associate Nurse Director £0.064m

**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 an overspend of £0.139m. Our share of this is £0.043m with the balance £0.096m received from the other Partnerships, reflected in the Recharges to other Partnerships line in the IJB financial report on Appendix A.

#### 4.9 Acute Hospitals

The 2022-23 annual budget for Acute Services was £405.690m, which includes areas covered in the set aside budget. The year end overspend was £18.3m, this is a result of savings not expected to be achieved and overspends due to increase in drugs, supplies and equipment and nursing pay overspend due to use of agency nurses. The increase in agency nurses is largely driven by the additional beds open in hospitals.

As at week commencing 27<sup>th</sup> of March, there were 215 delayed discharges, a reduction of 49 from period 9). Of these 126 were on the two main acute hospital sites. 52 were in Community Hospitals with a further 37 in Mental Health facilities

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 during the year to establish a system to calculate the baseline of resources for each partnership based on actual activity. The activity from 2020-23 has been used for this purpose, with costs based on historic cost plus inflation.

The table below highlights South Ayrshire's use of resources with the latest information available as at year end 2022-23, this shows we are using more than our "fair share" as determined by NRAC.

	2022/23	2022/23	2022/23	2022/23
All Ayrshire	NRAC	<b>Budget Share</b>	Spend	Variance
IJB	%	£	£	£
East	31.9%	28,534,100	26,555,104	1,978,996
North	36.8%	32,917,081	32,267,475	649,606
South	31.3%	27,997,409	30,626,010	(2,628,602)
Total	100%	89,448,590	89,448,590	0

#### 4.10 Budget Movements

The budget was approved on the 16<sup>th</sup> of March 22, appendix E highlights the movement in the overall budget position from intial 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:

- Budget allocation of Aids and Adaptations to Council Social Services budget £0.790m
- 2. Transfer of earmarked budget from Reserves to Council of £16.789m, detail included in the appendix
- 3. NHS Set Aside budget of £30.626m based on 2022-23 activity
- 4. Lead Partnerhsip budget allocations for 2022-23 £40.437m
- 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 increase of £2.182m
- 8. Public Health Funding for BBV £0.138m
- 9. Transfer of Community Equipment Budget and costs of £0.350m funded from replacement stock budget
- 10. SG Allocation of 22-23 Multi-Disciplinary Team budget £0.750m
- 11. SG funding of £0.071m to meet costs in supporting the new process for Learning Disabilities Social Secuirty Allowances
- 12. Insurance Allocations of £0.140m to cover corporate insurance charges.
- 13. Covid refund of overpayment in 21-22 £8.677m
- 14. Hospital at Home £0.466m transfer from Acute to earmark for 23-24
- 15. Corporate Council Employee budget year end allocations £6.422m

#### 4.11 IJB 2022-23 Reserves Position

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 Scottish Government Emergency Budget Review published 2 November 2022 outlined cuts totalling £615m from its budget to fund wage settlements with trade unions and to support people through the cost of living crises (including doubling both the Fuel Insecurity Fund and the Scottish Child Bridging Payment). The cuts outlined were in addition to £560m of cuts announced in September, which were used in part to finance an improved wage offer to local government. The majority of savings will be found through reprioritisation in the Health portfolio, including funding allocations in 2022-23 for the Primary Care Improvement Fund (PCIF), Alcohol and Drugs Partnership (ADP) and Multi-Disciplinary Teams (MDT) will be reduced by up to the sums earmarked within IJB Reserve balances at 31 March 2022. Returns have been submitted to Scottish Government for these funding streams with all earmarked reserves allocated to meet in year costs.

The table below, details the £21.680m Earmarked reserves that were transferred out in 22-23 to budgets in both Council and NHS, and the requirement to earmark £4.830m

for use in 23-24 in relation to the same. The table below highlights the status of approval, with some being underspends from previous earmarked funds and other new requests from 22-23 underspends.

Appendix F shows the full reserves position as at the end of March 23.

Description	Balance as at 31st March 22	Transfers Out 22-23	Transfers In 22-23	Balance as at 31st March 2023	Approval Status
	£000's	£000's	£000's	£000's	
Earmarked Reserves					
ADP	502	(502)	423	423	22-23 Underspend for approval
East Lead Partnership PCIF	1,543	(1,543)	65	65	22-23 Underspend for approval
East Lead Partnership Primary Care Other	477	(477)	304	304	22-23 Underspend for approval
North Lead Partnership Action 15	182	(182)		0	Fully utilised
North Lead Mental Health	1,735	(1,735)	809	809	22-23 Underspend for approval
Covid- 19 Remobilisation	11,666	(11,666)	700	700	£289k to return to SG £411k SAC to NHS
Covid-19 C&F MH and Wellbeing	47	(47)		0	Fully utilised
Community Living Fund	410	(410)	371	371	Previously Approved, 22-23 underspend
Training SVQ	72	(72)		0	Fully utilised
Adoption Orders Delayed	200	(200)	172	172	Previously Approved, 22-23 underspend
Fostering - Advertising for Carers	17	(17)	20	20	Approval Requested
Community Care Assistant Post in Reablement Team	88	(88)	32	32	Previously Approved, 22-23 underspend
Mobile Attendants additional resource	27	(27)		0	Fully utilised
SG Care at Home Additional Capacity	1,554	(1,554)	885	885	Previously Approved, 22-23 underspend
Whole Family Wellbeing Funding	63	(63)		0	Fully utilised
Mental Health Officer Additional Capacity Funding	57	(57)		0	Fully utilised
Unaccompanied Asylum Seeking Children National Transfer Scheme	11	(11)	175	175	Approval Requested
SG Interim Care Funding	760	(760)		0	Fully utilised
SG Unscheduled Care - interface carer programme	517	(518)		(1)	Fully utilised
SG Hospital at Home Funding	607	(607)	466	466	Previously Approved, 22-23 underspend
SG 9 month Funding for AHP Front Door Posts	198	(198)	198	198	Previously Approved, 22-23 underspend
AHP Band 4 contract (April to June 22 costs)	8	(8)		(0)	Fully utilised
Dementia Post Diagnostic Support Posts	79	(80)	60	59	Previously Approved, 22-23 underspend
SG School Student Nurses	25	(25)		0	Fully utilised
SG Staff Wellbeing Funding	91	(92)	70	69	Previously Approved, 22-23 underspend
SG Winter Pressures for Multi-Disciplinary Teams	501	(501)		0	Fully utilised
SG Funding to accelerate MDT Posts	80	(80)	80	80	Previously Approved, 22-23 underspend
CAP Technician 2 Band 5 for 6 months	36	(37)		(1)	Fully utilised
Band 2/3 Health Care Assistants	127	(128)		(1)	Fully utilised
TOTAL EARMARKED	21,680	(21,685)	4,830	4,825	

## 4.12 Request for Earmarking

Request for approval to earmark specific items from this year's underspends are noted in the table below, including description of what the funds are to be used for. The request also includes reserves to be allocated for Biggart Hospital and Interim Care

Beds approved in the budget for 23-24, but included for completeness to highlight all reserves allocated.

Service Area	Description	£'000s
Allied Health Professionals	AHP's have underspent due to difficulties in recruitment, this funding is to address recruitment and retention issues and includes investment in:- Staffing - £206 – including temp maternity cover, admin support and upgrades Equipment - £144 – including walking aids, vascular testing equipment and orthopaedic aids. Training - £59 – for all staff including on non-medical prescribing Mobiles - £8 – to upgrade existing Accommodation - £2 – for speech and language therapy family groups Travel - £1	420
Intermediate Care Team	Request for funding to replace mobile phones	8
Health Visiting	Funding to provide opportunity to recruit two student health visitors providing training and development for future vacancies	71
Tec Enabled Care	Carry forward of underspend to provide budget to ensure full implementation of Analogue to Digital community alarm replacement	282
Reablement	Carry forward of underspend to provide additional temp resources to meet current demands	89
Training and Development	Resources to support newly qualified social worker (NQSW), this is for a two year time period, providing mentors with an additional payment to support NQSW	63
Care Leavers	Funding for a phone app	33
Children's Services	Resources required to enhance the internal of McAdam House	37
Occupational Therapy	An additional OT for a period of 2 years to meet demand in assessments	113
Social Care Finance Support Team	Temporary funding for 1 Level 7 within Corporate Finance to meet current demands	40
Planning and Performance	Consultancy to review services and roles to	48
Locality Planning	Carry forward of current underspent within small grants budgets for locality planning groups	66
Addiction (ADP)	Support for Women Scoping Study to understand the support needs of women who are parents and affected by alcohol or drug use. SG funding outcome awaited.	20
Addiction (ADP)	One year funding for current Navigator Service provided to support individuals on remand or on long term sentences	36
Unpaid Carers	Funding from SG Covid allocation to meet costs of PPE for unpaid carers in 23-24	3
Biggart Hospital	To provide funding on a temporary basis to meet costs of additional beds to March 24 to meet DTOC demands	835

Interim Care	To continue to fund interim care to meet demands from DTOC	530
South Lodge	To fund South Lodge interim care beds to March 24	250
Mental Health	Mental Health in Primary Care allocation from Scottish Government is outstanding. Request to earmark £211 to allow for recruitment of 2FTE Mental Health Practitioners, 1FTE Community Link Co-ordinator and 1FTE Digital Navigator. This will provide additional capacity in the community to meet current demands	211
	TOTAL NEW EARMARKING REQUESTS	3,155

#### 4.13 Funds Committed for Improvement

Over the course of the past two years various funds have been committed for improvement. The table below relates to commitments approved with two requests to extend funding — Promise Posts extension to Sep 23 and the Support Worker for Addictions One Stop Shop to be extended for an additional year, this will bring this post funded for the same term as other posts in this service funded from Corra foundation.

Description	Status	Balance as at 31st March 23 £000's
Learning Disability Lead Practitioner	Post funded to Sep 23	42
Public Protection Policy Officer	Post funded to Sep 24	57
ADP Development Officer	Post funded to Mar 24	54
Absence Management Officer	Post funded to May 23	5
Promise Posts	Extend posts to Sep 23	30
Penumbra – Distress Brief Intervention	Funded to Aug 23	24
Grow Your Own – Social Work Qualifications	Funded to March 2026	250
Addictions One Stop Shop Support Worker	Approved in period 9 for one year request extension for 2 years	84
	TOTAL	546

## 4.14 <u>Creation of an Improvement and Innovation Fund</u>

The Medium Term Financial Forescast (MTFF) presented to IJB on the 17<sup>th</sup> of May 2023, noted a request to creae an Improvement Fund would be presented for approval as part of the year end outturn report.

The purpose of an Improvement and Innovation Fund is to set aside a specific sum of money from current uncommitted reserves to be used to improve services to ensure future financial sustainability. The funding will be allocated to specific projects and investments on a non-recurring basis and in line with current strategic objectives. All recurring funding has been committed to services in the budget for 2023-24 approved by IJB on the 15<sup>th</sup> March 23.

Examples of what the improvement and innovation fund could be used for include investment in technology enabled care, additional temporary staffing to review current processes, assist in current demand pressures and clear backlogs, building community capacity to support early intervention approaches. Consideration of appropriate level of risk in recruiting to permanent posts from the improvement and innovation fund in the first instance with permanent funding identified through workforce planning, future funding streams or savings.

The budget working group met on the 7<sup>th</sup> of June and recommend earmarking £4m to the fund to be used over the next three years to March 2026, with a review each year of the level of funding available and any recommendations to change the level of the fund presented to IJB for approval as part of the Year End Financial Outturn report.

Services would be able to bid for funding through an application process with approval recommended at Director Level of £0.100m, any projects above this to be presented to Budget Working Group for scrutiny and discussion prior to approval by IJB.

An operating procedure for the Improvement and Innovation Fund will be created to ensure financial regulations are adhered to, process is clear and improvements are measured and reported regularly.

#### 4.15 Reserves Summary

Based on approval of reserves as requested in sections above, a summary of the reserves balances as at 31st March 23, is noted in the table below.

Uncommitted Reserves of £7.303m, represent 3.7% of the IJB 23-24 managed services budget of £194.890m. The managed services budget excludes Lead Partnership and Set Aside budgets. The IJB Reserves Strategy recommends a minimum of 2% to be held in uncommitted reserves. The Chartered Institute of Public Finance and Accountancy (CIPFA) recommend that uncommitted reserves should be between 2% and 4%.

	£000's
Earmarked Reserves	7,981
General Reserves for previous approved	546
improvements	
Improvement and Innovation Fund	4,000
Uncommitted General Reserves	7,303
TOTAL RESERVES BALANCE	19,830

#### 4.16 Savings Targets

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

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	Balance Remaining
В	0.000	0.000	0.000
G	0.151	0.151	0.000
Α	0.000	0.000	0.000
R	0.116	0.000	0.116
Total	0.267	0.151	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.

## 4.17 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:
- Implementation of National Care Service remains uncertain;
- Change in levels of demand for services, this is under constant review;
- Health and social care work force challenges and reduction in market capacity impacting meeting demand for services;
- 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 above risks will continue to be monitored during the year through the budget monitoring process and operational performance reports. 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 RESOURCE IMPLICATIONS

#### 6.1 Financial Implications

6.1.1 The financial implications for the IJB Integrated Budget 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.

#### 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 report sets out the financial risks.
- **8.2** The IJB Risk Management Strategy categorises the level of financial risk as high.

#### 9 EQUALITIES IMPLICATIONS

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

#### 10 SUSTAINABILITY IMPLICATIONS

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

#### REPORT AUTHOR AND PERSON TO CONTACT

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## **BACKGROUND PAPERS**

## **APPENIDX A**

# South Ayrshire Health & Social Care Partnership Financial Report as at 31st March 2023

	2022/23								
	Integrated								
Table 1	Budget	Projected Outturn	Variance (Over)/ Underspend	Period 9 Variance	Movement from Prior YearFavourable/ (Adverse)				
	£'000	£'000	£'000	£'000	£'000				
Older People	55,386	52,135	3,251	414	2,837				
Physical Disabilities	4,003	3,979	24	(52)	76				
Biggart Hospital	5,075	5,777	(702)	(289)	(413)				
Girvan Hospital	1,498	1,647	(149)	(34)	(115)				
Community Nursing	3,990	4,194	(204)	49	(253)				
Intermediate Care and Rehabilitation	1,542	1,319	223	223	0				
AHPs	8,314	7,572	742	943	(201)				
Total Community Care & Health	79,808	76,623	3,185	1,254	1,931				
C&F Social Work Services	23,890	22,053	1,837	1,413	424				
Justice Services	273	263	10	18	(8)				
Health Visiting	2,923	2,847	76	158	(82)				
Total Children and Justice Services	27,086	25,163	1,923	1,589	334				
Learning Disabilities	25,017	23,915	1,102	983	119				
Mental Health Community Teams	7,334	7,009	325	117	208				
Addictions	3,614	3,048	566	164	402				
Total Mental Health Services	35,965	33,972	1,993	1,264	729				
Directorate	9,733	4,745	4,988	1,967	3,021				
Other Services	1,522	1,501	21	(83)	104				
Payroll management target	536	0	536	0	536				
Total Support Services	11,791	6,246	5,545	1,884	3,661				
Integrated Care Fund/ Delayed Discharge	787	845	(58)	13	(71) 13				
Scheme of Assistance	810	797	13	0					
Inter Agency Payments	(9,548)	(9,548)	(0)	0	( <mark>0)</mark>				
Prescribing  Constant Madical Consists	26,000	26,000	0 67	0 47	20				
General Medical Services  Total Primary Care	18,881 <b>44,881</b>	18,814 <b>44,814</b>	67	47	20				
Community Store	635	736	(101)	(87)	(15)				
TEC	0	(7)	7	7	0				
Family Nurse Partnership	2,236	2,148	88	48	40				
Continence Team	446	579	(133)	(100)	(33)				
Total Hosted Services	3,317	3,456	(139)	(132)	(8)				
Debt Repayment	802	802	0	0	0				
COVID Expenditure	2,476	1,771	704	0	704				
PARTNERSHIP TOTAL	198,175	184,941	13,234	5,920	7,314				
Recharges from other Partnerships	49,721	48,282	1,439	289	1,150				
Recharges to other Partnerships	(2,284)	(2,380)	96	90	6				
Acute Hospitals	30,626	30,626	0	0	0				
IJB Core Budget Total	276,238	261,469	14,769	6,299	8,470				
Earmarked Primary Care	0	370	(370)	0	(370)				
Earmarked Mental Health	0	809	(809)	0					
Earmarked ADP	0	423	(423)	0					
Earmarked COVID - 19	0	700	(700)	0					
Earmarked Reserves	0	10,227	(10,227)	0					
Uncommitted Reserves	0	2,240	(2,240)	0					
FINAL OUTTURN POSITION	276,238	276,238	0	6,299	(6,299)				

## **APPENDIX B**

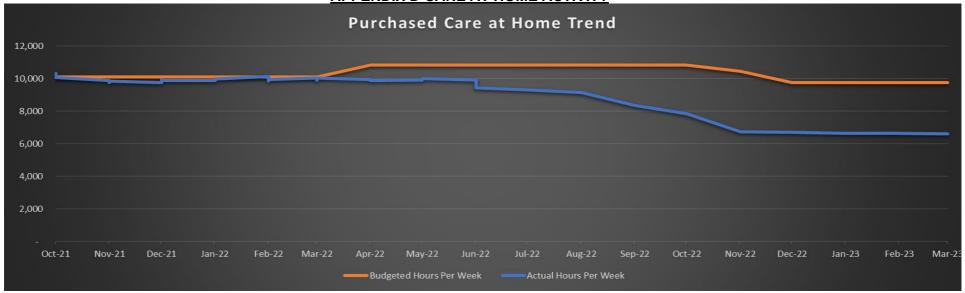
## South Ayrshire Health & Social Care Partnership Financial Report as at 31st March 2023

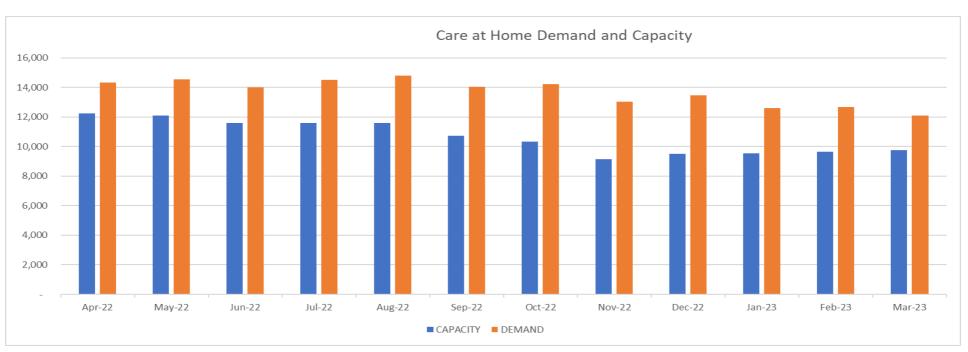
		2022/23			2022/23		2022/23				
		Council			NHS				Integrated		
Table 1	Budget £'000	Projected Outturn £'000	Variance (Over)/ Underspend £'000	Budget £'000	Projected Outturn £'000	Variance (Over)/ Underspend £'000	Budget £'000	Projected Outturn £'000	Variance (Over)/ Underspend £'000	Period 9 Variance £'000	Movement from Prior YearFavourable/ (Adverse) £'000
Older People	55,386	52,135	3,251	0	0		55,386	52,135	3,251	414	2,837
Physical Disabilities	4,003	3,979	24	0	0	0	4,003	3,979	24	(52)	76
Biggart Hospital	0	0	0	5,075	5,777	(702)	5,075	5,777	(702)	(289)	(413)
Girvan Hospital	0	0	0	1,498	1,647	(149)	1,498	1,647	(149)	(34)	(115)
Community Nursing	0	0	0	3,990	4,194	(204)	3,990	4,194	(204)	49	(253)
Intermediate Care and Rehabilitation	0	0	0	1,542	1,319	223	1,542	1,319	223	223	0
AHPs	0	0	0	8,314	7,572	742	8,314	7,572	742	943	(201)
Total Community Care & Health	59,389	56,114	3,275	20,419	20,509	(90)	79,808	76,623	3,185	1,254	1,931
C&F Social Work Services	23,890	22,053	1,837	0	0	0	23,890	22,053	1,837	1,413	424
Justice Services	273	263	10	0	0	0	273	263	10	18	(8)
Health Visiting	0	0	0	2,923	2,847	76	2,923	2,847	76	158	(82)
Total Children and Justice Services	24,163	22,316	1,847	2,923	2,847	76	27,086	25,163	1,923	1,589	334
Learning Disabilities	24,531	23,509	1,022	486	406	80	25,017	23,915	1,102	983	119
Mental Health Community Teams	4,231	3,867	364	3,103	3,142	(39)	7,334	7,009	325	117	208
Addictions	2,201	1,750	451	1,413	1,298	115	3,614	3,048	566	164	402
Total Mental Health Services	30,963	29,126	1,837	5002	4846	156	35,965	33,972	1,993	1,264	729
Directorate	7,084	4,265	2,819	2,649	480	2.169	9,733	4,745	4,988	1,967	3,021
Other Services	1,522	1,501	21	2,043	0	2,100			4,988		104
Payroll management target	536	1,501	536	0	0	-	1,522 536	1,501 0	536	(83)	536
, ,	9,142	5.766	3,376	2.649	480	2.169	11,791	6.246	5.545	1,884	3.661
Total Support Services Integrated Care Fund/ Delayed Discharge	381	436	(55)	406	409	(3)	787	845	(58)	1,004	(71)
	810	797	13	406	<b>409</b>	0	810	797	13	13	13
Scheme of Assistance	(21,463)	(21,463)	0	11,915	11,915	(0)	(9.548)	(9.548)		0	(0)
Inter Agency Payments	(21,403)			26,000	26,000	0	26,000	26,000	(O) O	0	(0)
Prescribing	0				18.814	67			67	47	20
General Medical Services Total Primary Care	0			18,881 <b>44,881</b>	18,814 <b>44,814</b>	67	18,881 <b>44,881</b>	18,814 <b>44,814</b>	67 <b>67</b>	47 <b>47</b>	20
	0			635	736	(101)	635	736	(101)	(87)	(15)
Community Store TEC	0	0	0	035	(7)	7	635		(101)	(67)	(15)
Family Nurse Partnership	0	0		2,236	2,148	88	2,236	( <del>7)</del> 2,148	88	48	40
·	0	0	0	2,236	2, 148 579	(133)		2,148 579	(133)	(100)	(33)
Continence Team	0	0	0			(133)	3.317	3.456	(133)	(100)	(8)
Total Hosted Services	802	802	0	<b>3,317</b>	<b>3,456</b>	(139)	3,317	<b>3,456</b> 802	(139)	( - /	(8)
Debt Repayment	2,119	1,415	703	357	356	0	2,476	1,771	704	0	0
COVID Expenditure	, -	*				0.007				5 222	704
PARTNERSHIP TOTAL	106,306	95,309	10,996	91,869	89,632	2,237	198,175	184,941	13,234	<b>5,920</b>	7,314
Recharges from other Partnerships				49,721	48,282	1,439	49,721	48,282	1,439		1,150
Recharges to other Partnerships				(2,284)	(2,380) 30,626	96	(2,284)	(2,380)	96	90	6
Acute Hospitals				30,626	30,626	0	30,626	30,626	0	0	0
IJB Core Budget Total	106,306	95,309	10,996	169,932	166,160	3,772	276,238	261,469	14,769	6,299	8,470
Earmarked Primary Care			0		370	(370)	0	370	(370)	0	(370)
Earmarked Mental Health			0		809	(809)	0	809	(809)	0	(809)
Earmarked ADP		423	(423)			0	0	423	(423)	0	(423)
Earmarked COVID - 19		700	(700)			0	0	700	(700)	0	(700)
Earmarked Reserves		7,810	(7,810)		2,417	(2,417)	0	10,227	(10,227)	0	(10,227)
Uncommitted Reserves		2,063	(2,063)		177	(177)	0	2,240	(2,240)	0	(2,240)
FINAL OUTTURN POSITION	106,306	106,305	0	169,932	169,933	0	276,238	276,238	0	6,299	(6,299)

## **APPENDIX C SAVINGS SCHEDULE**

				£	£	
				Achieved	Balance	
Saving Title	Partner	Approved	BRAG Status	22/23	remaining	Comments
						Prior Year Saving Ongoing - met on temp basis this
LD Day Services	SAC	2019-20	G	(55,900)	0	year
						Not implemented - on hold awaiting the outcome of
						the Scottish Government recommendation to remove
Day care charging	SAC	2019-20	R	0	(116,000)	community charges.
Cunningham Place Children's House						Savings achieved through reduction in one residential
Development	SAC	2021-22	G	(95,000)	0	placement.
Prior Year Efficiencies				(150,900)	(116,000)	

## **APPENDIX D CARE AT HOME ACTIVITY**





## **APPENDIX E BUDGET MOVEMENTS**

	Permanent		
<u>Council</u>	or	CIOOO	CIOOO
Approved Budget	Temporary	£'000	£'000
Approved Budget	P		91,479
Aids and Adaptations	Т		810
Transferred from Reserves:-	_		
ADP	T _	502	
Covid- 19 Remobilisation	T _	11,666	
Covid-19 C&F MH and Wellbeing	Т	47	
Community Living Fund	Т	410	
Training SVQ	T	72	
Adoption Orders Delayed	Т	200	
Fostering - Advertising for Carers	Т	17	
Community Care Assistant Post in Reablement Team	Т	88	
Mobile Attendants additional resource	Т	27	
SG Care at Home Additional Capacity	Т	1,554	
Whole Family Wellbeing Funding	Т	63	
Mental Health Officer Additional Capacity Funding	Т	57	
Unaccompanied Asylum Seeking Children National Transfer Scheme	т	11	
SG Interim Care Funding	T	760	
Carefirst Finance Project Officer to 31st March 23	Т	53	
SDS Support Officer to 31st March 23	T	53	
Children and Families Belmont First Project	T	57	
Champions Board extension of staff to 31st March 23	T	10	
The Promise extension of posts to 31st March 23	T	30	
Legal Costs incurred for Historic Child Abuse Inquiry	T T	50	
Learning Disability Lead Practitioner	T T	101	
Learning Disability Champion Board Officer	T	40	
Public Protection Officer	T	113	
Health Visiting I-Phone	T	7	
Young Carers Officer	T T	50	
Adult SW Review	T T	150	
Commissioning Team Resource	T	40	
ADP Development Officer Post	T	70	
Frailty capacity within MDT	т т	131	
AHP Capacity	T	200	
Absence Management Officer	, T	60	
District Nursing Workforce review	† † †	100	
Total Transferred from Reserves	<u>'</u>	100	16,789
Mediation Officer YPST	т т		30
Signs of Safety	T		4
Belmont First Project	<del>  '</del>		47
Insurance Budgets	T T		15
Overmills Janitor	P		(11)
Janitors Childrens Houses	T		71
Social Security Learning Disability	T T		71
ELT 409 Temp CAH Recruitment Advisor	T T		(32)
To Housing ASC uplift	P		(10)
Insurance Budget Allocation	T T		166
Covid- 19 Remobilisation - correction	<u> </u>		(9,548)
FRS 17	<u> </u>		6,113
Employee benefit accrual	<del>'</del>		308
People to Young Carers	<u> </u>		300
Budget as at Period 12	1		106,306

	Permanent			
<u>NHS</u>	or	01000		
Appreciat Dudget	Temporary	£'000		
Approved Budget	<del> </del>	98,252		
Set Aside	T	30,626		
Lead Partnerships	Р	47,437		
Lead Partnership 22/23 Budget allocations	Р	(162)		
Resource Transfer Ailsa	Р	46		
Funding for Hospital at Home/Urgent Scheduled Care	Т	(1,124)		
AHP Clinical Admin Budget Transfer	Р	(188)		
Prescribing uplift/cres	Т	403		
BBV / Public Health Funding	Т	138		
ADP Funding to North PSST Support	Т	8		
Community Store to DEL	Т	(350)		
Drug Tariff Reduction	Т	(263)		
Medical&Dental Pay Award	Р	2		
MDT	Р	750		
Pulmonary Rehab physio Funding	Р	(23)		
Podiatry from East	Р	14		
AHP Clinical Admin back from North	Р	21		
District Nurse Funding	Р	12		
ADP	Т	159		
Prescribing Uplift	Т	1,469		
NSAIS Contribution	Т	(11)		
School Nursing Posts	Р	324		
Covid Refund	T	(8,677)		
Tec to Css	T	(53)		
Diabetes Prevention	T	44		
Mental Health Admin from North	T	2		
Dementia PDS	T	59		
ADP	T	792		
Rev to Capital transfer - scanners	T	(15)		
Trak Post in North	P	(17)		
Veterans 1st Contribution	P	(34)		
Long Covid Support	T	126		
ABI to Primary Care	T	(5)		
RX Prescribing	T	310		
Family Nurse Partnership return	T	(201)		
•	T	` '		
Apprenticeship levy		111		
Hospital at Home	T	466		
Covid Year End refund  Budget as at Period 12	T	(515) 169,932		

## **APPENDIX F RESERVES POSITION**

Description	Balance as at 31st March 22	Transfers Out 22-23	Transfers In 22-23	Balance as at 31st March 2023	Approval Status
Earmarked Reserves	£000's	£000's	£000's	£000's	
ADP	502	(502)	423	423	22-23 Underspend for approval
East Lead Partnership PCIF	1,543	(1,543)	65	65	22-23 Underspend for approval
East Lead Partnership Primary Care Other	477	(477)	304	304	22-23 Underspend for approval
North Lead Partnership Action 15	182	(182)		0	Fully utilised
North Lead Mental Health	1,735	(1,735)	809	809	22-23 Underspend for approval
Covid- 19 Remobilisation	11,666	(11,666)	700	700	£289k to return to SG £411k SAC to NHS
Covid-19 C&F MH and Wellbeing	47	(47)		0	Fully utilised
Community Living Fund	410	(410)	371	371	Previously Approved, 22-23 underspend
Training SVQ	72	(72)		0	Fully utilised
Adoption Orders Delayed	200	(200)	172	172	Previously Approved, 22-23 underspend
Fostering - Advertising for Carers	17	(17)	20	20	Approval Requested
Community Care Assistant Post in Reablement	88	(88)	32	32	Previously Approved, 22-23
Team  Mobile Attendants additional resource	27	(27)		0	underspend Fully utilised
SG Care at Home Additional Capacity	1,554	(1,554)	885	885	Previously Approved, 22-23 underspend
Whole Family Wellbeing Funding	63	(63)		0	Fully utilised
Mental Health Officer Additional Capacity Funding	57	(57)		0	Fully utilised
Unaccompanied Asylum Seeking Children National Transfer Scheme	11	(11)	175	175	Approval Requested
SG Interim Care Funding	760	(760)		0	Fully utilised
SG Unscheduled Care - interface carer programme	517	(518)		(1)	Fully utilised Previously Approved, 22-23
SG Hospital at Home Funding	607	(607)	466	466	underspend
SG 9 month Funding for AHP Front Door Posts	198	(198)	198	198	Previously Approved, 22-23 underspend
AHP Band 4 contract (April to June 22 costs)	8	(8)		(0)	Fully utilised
Dementia Post Diagnostic Support Posts	79	(80)	60	59	Previously Approved, 22-23 underspend
SG School Student Nurses	25	(25)		0	Fully utilised
SG Staff Wellbeing Funding	91	(92)	70	69	Previously Approved, 22-23 underspend
SG Winter Pressures for Multi-Disciplinary Teams	501	(501)		0	Fully utilised Previously Approved, 22-23
SG Funding to accelerate MDT Posts	80	(80)	80	80	underspend
CAP Technician 2 Band 5 for 6 months  Band 2/3 Health Care Assistants	36 127	(37) (128)		(0) (1)	Fully utilised Fully utilised
		` ,		, ,	r dily ddiised
TOTAL EARMARKED	21,680	(21,685)	4,830	4,826	
NEW EARMARK REQUESTS					
AHP Team			420	420	Approval Requested
Intermediate Care Team			8	8	Approval Requested
Student Health Visitors Tec (Analogue to Digital)			71	71	Approval Requested Approval Requested
Reablement			282 89	282 89	Approval Requested Approval Requested
Newly Qualified Social Worker (NQSW) Support			63	63	Approval Requested
Care Leavers phone app			33	33	Approval Requested
Internal refurbishing works for McAdam House			37	37	Approval Requested
Occupational Therapy Social Care Finance Support Team			113 40	113 40	Approval Requested Approval Requested
Horizons Research			48	48	Approval Requested
Locality Planning - Small Grants			66	66	Approval Requested
Unpaid Carers PPE			3	3	Approval Requested
Support for Women Scoping Study ADP  Navigator Service Addictions			20 36	20 36	Approval Requested Approval Requested
DTOC - Biggart Hospital			835	835	Approval Requested Approved 23-24 Budget
DTOC - Interim Care			530	530	Approved 23-24 Budget To contiune beds to March
DTOC - South Lodge Interim Beds			250	250	24
Mental Health - Primary Care Posts			211	211	Approval Requested
TOTAL NEW EARMARKING			3,155	3,155	
TOTAL EARMARKED	21,680	(21,685)	7,985	7,981	

Description	Balance as at 31st March 22	Transfers Out 22-23	Transfers In 22-23	Balance as at 31st March 2023	Status
	£000's	£000's	£000's	£000's	
GENERAL RESERVES					
Funds Committed for Improvements					
Learning Disability Lead Practitioner	101	(101)	42	42	Post Funded to Sep 23
Public Protection Policy Officer	113	(113)	57	57	Post Funded to Sep 24
ADP Development Officer	70	(70)	54	54	Post funded to March 24
Absence Management Officer	60	(60)	5	5	Post funded to May 23
The Promise posts	30	(30)	30	30	Extend funded to Sep 23
Penumbra - Distress Brief Intervention	49	(49)	24	24	Funded to Aug 23
Grow Our Own - Social Work Qualifications	250	(250)	250	250	Funding to 2026
Addictions One Stop Shop Post			84	84	Approved in period 9 for one year - extension for 2 years
Improvement and Innovation Fund			4,000	4,000	Approval Requested
Uncommitted Reserves	5,068		2,446	7,514	
TOTAL GENERAL FUND	7,026	(1,958)	6,992	12,061	0
TOTAL RESERVES BALANCE	28,707	(23,643)	14,766	19,830	0