
NORTH AYRSHIRE COUNCIL

8 December 2020

Cabinet

Title: HSCP – Budget Monitoring Report

Purpose: To provide an update on the projected financial outturn for the financial year as at September 2020.

Recommendation: It is proposed that the Committee note the attached report.

1. Executive Summary

- 1.1 The attached report provides an overview of the financial position for the partnership and outlines the projected year-end outturn position informed by the projected expenditure and income commitments, these have been prepared in conjunction with relevant budget holders and services. The report also outlines the estimated financial impact of the Covid-19 response, the associated funding and financial risks.

2. Background

- 2.1 The Cabinet agreed to receive regular reports on the financial performance of the Health and Social Care Partnership. The Budget Monitoring report presented to the IJB on 19 November 2020 outlined the projected financial outturn for the financial year as at September 2020 and is attached as an appendix.

3. Proposals

- 3.1 It is proposed that the Committee note the report.

4. Implications

Financial:	The implications are outlined in the attached report.
Human Resources:	The implications are outlined in the attached report.

Legal:	The implications are outlined in the attached report.
Equality:	The implications are outlined in the attached report.
Environmental & Sustainability:	The implications are outlined in the attached report.
Key Priorities:	The implications are outlined in the attached report.
Community Benefits:	The implications are outlined in the attached report.

5. Consultation

5.1 The attached report outlines the consultation that has taken place.

For further information please contact **Caroline Cameron** on **07801 439900**.

Background Papers

None

Subject: **2020-21 – Month 6 Financial Performance**

Purpose: To provide an overview of the IJB's financial performance as at Period 6 including an update on the estimated financial impact of the Covid-19 response.

Recommendation: It is recommended that the IJB:

- (a) notes the overall integrated financial performance report for the financial year 2020-21 and the overall projected year-end underspend of £0.377m at period 6;
- (b) notes the estimated costs of the Covid mobilisation plan of £7.656m, including savings delays, and the associated funding received to date;
- (c) note the financial risks for 2020-21, including the impact of Covid 19, and that there is no recommendation at this time to implement a formal Financial Recovery Plan for the IJB;
- (d) approve the budget changes outlined at section 2.8.

Glossary of Terms	
NHS AA	NHS Ayrshire and Arran
HSCP	Health and Social Care Partnership
MH	Mental Health
CAMHS	Child & Adolescent Mental Health Services
RAG	Red, Amber, Green
UNPACS	UNPACS, (UNPlanned Activities) – Extra Contractual Referrals
NRAC	NHS Resource Allocation Committee
GAE	Grant Aided Expenditure
PAC	Performance and Audit Committee

1.	EXECUTIVE SUMMARY
1.1	The report provides an overview of the financial position for the partnership and outlines the projected year-end outturn position informed by the projected expenditure and income commitments, these have been prepared in conjunction with relevant budget holders and services. It should be noted that although this report refers to the position at the August period end that further work is undertaken following the month end to finalise projections, therefore the projected outturn position is as current and up to date as can practicably be reported.
1.2	The projected outturn, before the impact of Covid-19, is a year-end underspend of £0.377m for 2020-21 which is a favourable movement of £0.386m. There is scope for this position to fluctuate due to in-year cost and demand pressures and assumptions in

	<p>relation to funding and the achievement of savings. The position has been adjusted to reflect the potential impact of Lead Partnership services. In the absence of any alternative risk sharing agreement for lead partnership services an NRAC share of the projected position has been assumed as this would be in line with the allocation in previous years.</p>
1.3	<p>From the core projections, overall the main areas of pressure are learning disability care packages, looked after children and adult in-patients within the lead partnership. However, there has been significant progress to reduce the pressures in these areas. The financial position demonstrates that the work started before the pandemic to ensure the IJB moved into the new financial year in a financially sustainable position has not been reversed by the Covid-19 response. If this position can be sustained as we move through the year, and assuming all Covid-19 costs are fully funded, the IJB will secure financial balance and repay £1.5m of the debt to North Ayrshire Council as planned.</p>
1.4	<p>The most up to date position in terms of the mobilisation plan for Covid-19 based on the return to the Scottish Government in October projects £7.656m of a financial impact, which is split between additional costs of £6.5m and anticipated savings delays of £1.1m. The impact of savings delays has been built into the core financial projection above on the basis that there is less confidence that funding will be provided to compensate for this. There are financial risks associated with Covid-19 as the IJB has yet to receive confirmation of the full funding allocation. To date our total funding allocation to £5.491m, this allocation has been updated following the period 5 position where we reported that the North HSCP funding was £5.183m. This reflects further discussions at Finance Leads re the distribution of funding for lead partnership services and to reflect a fairer approach following the submission of updated Covid cost estimates in October.</p>
1.5	<p>Until the full funding for Covid-19 is confirmed there is a risk that there may be a shortfall in funding to fully compensate the North Ayrshire IJB for the additional costs. However, there is no recommendation at this time to implement a Financial Recovery Plan on the basis that:</p> <ul style="list-style-type: none"> • There is increasing confidence that additional costs will be funded based on the recently received and future expected funding allocations; • Offsetting reductions of £0.530m have not been included in the overall funding allocation and also have not been factored into the HSCP financial projections, therefore at this stage these would potentially remain available for North to re-direct to any funding shortfall; • The current estimated costs for which funding has not yet been allocated is around £1m, this is a level that can potentially be recovered through management actions later in the financial year; • The most significant area of additional Covid cost is the purchase of PPE for social care, the extension of the current MOU for the PPE Hubs includes an assurance that PPE costs will be reimbursed in full, this is also in line with the recent allocation for PPE being on an actuals basis; • The period 6 position projects an underspend position (excluding Covid) and this does not include any assumption re the £1.5m held by the Council towards the IJB debt, this position assumes the debt repayment is made as planned, this position also incorporates estimated delays with savings delivery. <p>The financial position will continue to be reported to the IJB at each meeting, these reports will outline the monthly financial projections and the updated position in relation</p>

	to estimates for Covid costs. This will include the ongoing consideration of whether a Financial Recovery Plan may be required in the future.
2.	CURRENT POSITION
2.1	<p>The report includes an overview of the financial position including commitments against the available resource, explanations for the main budget variances, an update on progress in terms of savings delivery and plans to work towards financial balance.</p> <p>The report also includes detail of the estimated costs and potential financial impact of the Covid-19 response.</p>
	FINANCIAL PERFORMANCE – AT PERIOD 6
2.2	<p>The projected outturn position at period 6 reflects the cost of core service delivery and does not include the costs of the Covid 19 response as these costs are considered separately alongside the funding implications.</p> <p>Against the full-year budget of £254.257m there is a projected year-end underspend of £0.377m (0.15%). The Integration Scheme outlines that there is an expectation that the IJB takes account of the totality of resources available to balance the budget in year. Following this approach, an integrated view of the financial position should be taken, however it is useful to note that this overall position consists of a projected overspend of £0.913m in social care services offset by a projected underspend of £1.290m in health services.</p> <p>As highlighted at the end of last year the payroll turnover target was to be centralised for future years as the approach in previous years left some service areas with unachievable targets whilst other areas were able to overachieve, it was agreed that a more transparent approach would be to manage the payroll turnover and vacancy savings centrally. This approach has been adopted for 2020-21, this has helped to de-clutter the financial report and to make it more transparent re the overall turnover target and the progress towards achieving this across the partnership. Section 2.6 highlights progress with the partnership vacancy target.</p> <p>Appendix A provides the financial overview of the partnership position. The sections that follow outline the significant variances in service expenditure compared to the approved budgets with detailed analysis provided in Appendix B.</p>
2.3	Health and Community Care Services
	<p>Against the full-year budget of £69.280m there is an underspend of £0.973m (1.4%) which is an adverse movement of £0.124m. The main variances are:</p> <p>a) Care home placements including respite placements (net position after service user contributions) – underspent by £0.649m (adverse movement of £0.138m). The care home budget moved into a sustainable position towards the end of 2019-20 and the opening position for the budget for 2020-21 was expected to be an underspend position as at that time we set the budget at a level to fund 810 places and we were funding 782. The occupancy in care homes has fallen further in the first quarter of 2020-21 and there are significant vacancies in care homes, the projected underspend includes a steady net increase of 10 placements per month until the year-end. The main reason for the adverse movement is a reduction in the projected amount of charging order income receivable (£0.117m) and a reduction in the respite underspend (£0.036m).</p>

	<p>b) Independent Living Services are overspent by £0.220m (favourable movement £0.011m) which is due to an overspend on physical disability care packages within the community and direct payments. There is an expectation that there will be some recovery of funds from Direct Payments where services have ceased, this may improve the projected position. There will be further work undertaken with the implementation of the Adult Community Support framework which will present additional opportunities for reviews and will ensure payment only for the actual hours of care delivered. The roll out of the CM2000 system for Adult services was postponed towards the year-end due to the Covid response and will be implemented early in the new year.</p> <p>c) Care at home was initially projected to overspend by £0.287m (adverse movement £0.190m). The financial projections reflect recent recruitment and assumes an increased service level both in house and purchased until the end of 2020-21. As this additional capacity was included in the Covid cost return this overspend has been excluded from the overall financial position, as the current level of overspend is below the level of Covid resources requested.</p> <p>d) Aids and adaptations projected underspend of £0.255m (£0.045m adverse movement). There have been significant delays with carrying out assessments and providing equipment and adaptations during lock down. It is expected that during the year there will be considerable delays with this spend, the level of projected underspend is less than the underspend in 2019-20. The final outturn depends on the level of assessments that can be undertaken in the coming months however this cannot be determined at this stage in the year. The service are working on plans to re-mobilise these services and address the waits for assessment and delivery of equipment and adaptations.</p> <p>e) Carers Act Funding is projected to underspend by £0.443m (no movement) based on the currently committed spend and delays with taking forward developments to support carers. The total uncommitted budget is £0.560m so this projected position assumes there will be carers' support plans undertaken and a level of demand/services identified from these plans to be delivered later in the year. The service plan to undertaken positive promotion of the services available to carers and are currently reviewing the process for a carers assessment to make this more accessible to individuals requiring support.</p>
2.4	Mental Health Services
	<p>Against the full-year budget of £77.108m there is a projected overspend of £0.744m (1%) which is an adverse movement of £0.231m. The main variances are:</p> <p>a) Learning Disabilities are projected to overspend by £2.320m (adverse movement £0.128m), included within this is £1.320m (£0.131m adverse movement) in relation to community care packages and £0.556m (£0.017m adverse movement) for residential placements. The 2020-21 budget for all adult care packages (LD, PD and MH) were realigned with any projected underspends in other areas being used to reduce the LD projected overspend. 2020-21 savings relating to the implementation of the Adult Community Support Contract are delayed as the full implementation of the CM2000 system has been postponed as the focus for providers has been on the response to COVID-19. This will commence with a phased roll out from January 2021, the financial benefits of the system are included in the projection later in the year but at a reduced level (causing an adverse movement of £0.147m) due to the delay. Community Learning Disability Care</p>

packages are proving to be one of the most challenging areas to address overspends. The current projection assumes the current level of commissioned support will continue for the year, there are opportunities to reduce this commitment as a significant number of these care packages were reduced or suspended during lock down, these will be reviewed when services are re-started to ensure support is re-started at the appropriate level, this may potentially reduce the year-end projected position and the opening projections for next year which are currently being collated to inform budget planning for 2021-22.

- b) Community Mental Health services are projected to underspend by £0.239m (£0.005m favourable movement) mainly due to a reduction in care packages. There has been a reduction in the number of care packages since the start of the year and there have been some temporary reductions to care packages during lock-down, currently these are assumed to be temporary reductions, these will also be reviewed when brought back online.
- c) The Lead Partnership for Mental Health has an overall projected underspend of £1.348m (adverse movement of £0.097m) which consists of:
- A projected overspend in Adult Inpatients of £0.583m (adverse movement of £0.043m due revised assumptions on bed sale income). The overspend is mainly due to the delay in closing the Lochranza ward on the Ailsa site. The ward closed during August 2020 but there remain staff to be re-deployed, the overspend may reduce if alternatives can be identified for displaced staff sooner.
 - UNPACS is projected to underspend by £0.040m (£0.113m adverse movement) based on current placements. The adverse movement is due to a new placement being made.
 - A projected underspend of £0.200m (£0.100m adverse movement) in Elderly Inpatients due to the completion of the work to reconfigure the Elderly Mental wards, this represents the part-year saving with the full financial benefit being available in 2021-22. The adverse movement is due to staffing levels for wards, the workforce tool for the wards is being run which will determine the final staffing.
 - A projected underspend in MH Pharmacy of £0.220m (£0.030m favourable movement) due to continued lower substitute prescribing costs.
 - The target for turnover or vacancy savings for the Lead Partnership is held within the Lead Partnership as this is a Pan-Ayrshire target. There is a projected over-recovery of the vacancy savings target of £1.268m in 2020-21, further information on this is included in the table below:

Vacancy Savings Target	(£0.400m)
Projected to March 2021	£1.668m
Over/(Under) Achievement	£1.268m

There were significant vacancy savings delivered during 2019-20 from lead partnership services and these were brought into the financial position during the year as it became clear that services were not going to be able to recruit to all vacancies. The current projection to the year-end is informed by the recruitment plans and the confidence in recruitment success and realistic timescales for filling individual vacancies.

The main areas contributing to this position are noted below:

- Adult Community Health services £0.133m
- Addictions £0.020m

	<ul style="list-style-type: none"> • CAMHS £0.295m • Mental Health Admin £0.330m • Psychiatry £0.488m • Psychology £0.383m • Associate Nurse Director £0.067m
2.5	Children Services & Criminal Justice
	<p>Against the full-year budget of £35.925m there is a projected underspend of £0.081m (0.2%) which is a favourable movement of £0.122m. The main variances are:</p> <p>a) Looked After and Accommodated Children are projected to overspend by £0.457m (adverse movement of £0.015m). The main areas within this are noted below:</p> <ul style="list-style-type: none"> • Children's residential placements are projected to overspend by £0.662m (adverse movement of £0.119m), as at period 6 there are 16 placements with plans to reduce this by 3 by the end of the financial year and an assumption that there will be no further placements during the year. Budget plans for 2020-21 were based on starting the year with 18, reducing to 14 by the end of Q1 and to 10 places by the end of Q2 and for the remainder of the year. Progress with plans to move children from residential placements have been impacted by Covid-19 as there has been an impact on Children's Hearings and this has limited the availability of tenancies. Children's services are working towards further improving the position as we move through the year as starting the 2021-22 financial year with 13 placements will impact on the savings planned for next year. • Fostering placements are projected to overspend by £0.095m (£0.032m favourable movement) based on the budget for 129 places and 126 actual placements since the start of the year. This is a reduction of 7 placements from month 5. The fostering service is an area we are trying to grow, and a recruitment campaign was undertaken early in the new year to attract more in-house foster carers to limit the ongoing requirement for external foster placements. There are a number of additional fostering placements attributed to Covid-19 which are out with these numbers as the costs have been included on the Covid-19 mobilisation plan. Respite foster placements is projected to underspend by £0.060m as placements have not taken place due to Covid-19 restrictions. • Kinship placements are projected to underspend by £0.149m (adverse movement of £0.012m) based on the budget for 370 places and 344 actual placements since the start of the year. <p>b) Children with disabilities – residential placements are projected to underspend by £0.196m (no movement). Community packages (inc direct payments) are projected to underspend by £0.125m based on current placements and an assumed increase in direct payment cases.</p> <p>c) Respite is projected to underspend by £0.107m due to respite not taking place due to COVID.</p> <p>d) Transport costs – projected underspend of £0.081m (favourable movement of £0.035m) due to reduced mileage costs.</p>
2.6	Turnover/Vacancy Savings

The payroll turnover target has been centralised for 2020-21. The turnover target for the North Lead Partnership for Mental Health services is detailed within the Lead Partnership information at section 2.4.

The turnover targets and projected achievement for the financial year for Health and Social Care services out with the Lead Partnership is noted below:

	Social Care	Health Services
Vacancy Savings Target	*(£1.957m)	(0.645m)
Projected to March 2021	£1.957m	1.044m
Over/(Under) Achievement	0	0.399m

(*the target for social care services has been increased on a non-recurring basis for 2020-21 only by £0.110m to offset the saving for the roll out of Multi-Disciplinary Teams, as no permanent reductions to the structure can be identified at this time but will be by the service from 2021-22 onwards)

The position in the table above reflects the assumption in the current financial projections. For social care there have been significant vacancy savings to period 6 due to delays with recruitment and a total of £1.156m has been achieved to date. It is not anticipated that the level of vacancies will continue at this rate to the financial year-end, the full annual target is expected to be achieved on the basis that there will vacancies sustained at around 69% of that level. We may potentially exceed the target, as was the case in previous years, but the likelihood of this will not be known with confidence until services and recruitment re-starts fully over the coming months.

The Health vacancy projection to the year-end is informed by the recruitment plans and confidence in recruitment to posts for the remainder of the year.

The main areas contributing to the health and social care vacancy savings are spread across a wide range of services with vacancy savings being achieved in most areas, the most notable in terms of value being social worker posts (across all services), the Community Mental Health Teams and Allied Health Professionals.

2.7 Savings Progress

a) The approved 2020-21 budget included £3.861m of savings.

RAG Status	Position at Budget Approval £m	Position at Period 6 £m
Red	-	0.274
Amber	2.801	1.801
Green	1.060	1.786
TOTAL	3.861	3.861

b) The main areas to note are:

i) Red savings of £0.274m relating to reducing LD sleepovers and the review of Adoption Allowances, both of which have been impacted by

	<p>Covid-19, the delays in these savings have been included in the overall projected outturn position;</p> <p>ii) Whilst all savings remain on the plan to be delivered there are delays with some savings with delays in implementation due to Covid-19, for example the implementation of the Adult Community Support Framework as the introduction of the CM2000 system is delayed as providers were focussing on COVID related service and staffing issues and further internal implementation work is required;</p> <p>iii) The confidence with some savings has increased since the budget was set due to the progress made towards the end of 2019-20, for example with freeing up additional capacity for Care at Home services by reducing care home placements.</p> <p>Appendix C provides an overview of the savings plan, this highlights that during 2020-21 it is anticipated that a total of £2.483m of savings will be delivered in-year, with £1.378m of savings potentially delayed or reduced. The delays are due to Covid-19 and have been included in the mobilisation plan return to the Scottish Government, but at this stage they have also been reflected in the overall projected outturn position as there is less confidence that the impact of savings delays will be compensated with additional funding.</p> <p>The Transformation Board is in place to provide oversight and governance to the programme of service change. A focus of the Board is to ensure plans are in place to deliver savings and service change, with a solution focussed approach to bringing programmes back on track. Whilst some of our plans were put on hold due to Covid, the transformation plans will be re-mobilised at pace to ensure we taken any opportunities to join up the re-design services as they come back online. The Transformation Board re-started in July and there will be a concerted effort to ensure the maximum savings delivery can be achieved in-year, to assist with the current year position and to ensure there is no recurring impact moving into 2021-22.</p>
2.8	<p>Budget Changes</p> <p>The Integration Scheme states that <i>“either party may increase it’s in year payment to the Integration Joint Board. Neither party may reduce the payment in-year to the Integration Joint Board nor Services managed on a Lead Partnership basis....without the express consent of the Integration Joint Board”</i>.</p> <p>Appendix D highlights the movement in the overall budget position for the partnership following the initial approved budget.</p> <p>Reductions Requiring Approval:</p> <p>The specific reductions the IJB are required to approve are:</p> <ul style="list-style-type: none"> • Transfer of posts to NAC corporate procurement £0.076m • Transfer of Parkinson nurse to South £0.109m • Arrol Park resource transfer to South £0.024m <p>It is recommended that the IJB approve the budget reductions outlined above.</p> <p>Future Planned Changes:</p> <p>An area due to be transferred in the future are the Douglas Grant and Redburn rehab wards from acute services to the North HSCP. The operational management of these wards has already transferred to the partnership, but the due diligence undertaken on</p>

	<p>the budget has highlighted a funding shortfall. It has been agreed with NHS Ayrshire and Arran that the financial responsibility will not transfer until balance is found. In the meantime, we are managing services and plans are well progressed to reduce the projected overspend prior to any transfer.</p>
2.9	<p>NHS – Further Developments/Pan Ayrshire Services</p> <p><u>Lead Partnerships:</u></p> <p>The IJB outturn position is adjusted to reflect the impact of Lead Partnership services. During 2019-20 agreement was reached with the other two Ayrshire partnerships that in the absence of any service activity information and alternative agreed risk sharing arrangements that the outturn for all Lead Partnership services would be shared across the 3 partnerships on an NRAC basis. This position is currently the default for 2020-21 as the further work taken forward to develop a framework to report the financial position and risk sharing across the 3 partnerships in relation to hosted or lead service arrangements has been delayed by the requirement to focus efforts on the Covid response.</p> <p>The underspend in relation to North Lead Partnership services is not fully attributed to the North IJB as a share has been allocated to East and South partnerships, similarly the impact of the outturn on East and South led services will require to be shared with North. At month 6 the impact on NA IJB is a £0.338m underspend (£0.353m underspend for East and £0.015m overspend for South).</p> <p>East HSCP – projected underspend of £0.981m (£0.353m NRAC share for NA IJB). The main areas of variance are:</p> <ul style="list-style-type: none"> a) Primary Care and Out of Hours Services (Lead Partnership) - there is a projected underspend of £0.741m (favourable movement of £0.656m). This reflects detailed work undertaken to analyse year-to-date costs and anticipated activity over the remainder of the financial year. This includes reduced projected costs on Dental Services where there have been a number of services cancelled for the year-to-date. These services are expected to restart in the final quarter of the 2020 calendar year, with an anticipated increase in staffing costs going forward. In addition, work has been undertaken to update cross charging against for Ayrshire Urgent Care Services (AUCS) costs related to the Covid-19 pandemic. It is anticipated that the current level of Covid-related GP activity will continue until the end of December at this stage. In addition, increased staff turnover savings are projected for AUCS, with posts to be recruited to in the final quarter of the financial year. It is anticipated at this stage that the Primary Care Improvement Fund will outturn on budget. The Primary Care budget has increased from £79m at month 4 to £86m at month 6 and is due to confirmation of funding allocations from the Scottish Government, including Primary Care Transformation Funding, Family Health Services Covid-19 funding, Dental funding and an increase to the global sum. b) Prison and Police Healthcare (Lead Partnership) - £0.233m projected underspend (favourable movement of £0.279m). This relates to drugs costs which were previously charged to the prison have correctly now been charged against Covid-19 and additional staffing savings. <p>South HSCP – projected overspend of £0.041m (£0.015m NRAC share for NAHSCP). The overspend is mainly due to an overspend in the community store.</p>

	<p><u>Set Aside:</u></p> <p>The budget for set aside resources for 2020-21 is assumed to be in line with the amount for 2019-20 (£30.094m) inflated by the 3% baseline uplift, this value was used in the absence of any updated information on the share of resources and is £30.997m.</p> <p>At the time of setting the IJB budget it was noted that this may require to be updated following the further work being undertaken by the Ayrshire Finance Leads to establish the baseline resources for each partnership and how this compares to the Fair Share of resources. It was anticipated that 2020-21 would be used as a shadow year for these arrangements, however this work has been delayed due to the Covid-19 response. A further update will be provided to IJBs as this work progresses.</p> <p>The annual budget for Acute Services is £351.2 million. The directorate is underspent by £5.3 million following allocation of the COVID-19 funds received from Scottish Government.</p> <p>The year to date underspend of £5.3 million is a result of:</p> <ul style="list-style-type: none"> • £7.4 million of “offset savings”. These are the underspends resulting from low outpatient and elective activity in the year to date. • £2.1 million of unachieved savings. <p>The IJBs and the Health Board have submitted a remobilisation plan outlining how activity will return to normal as far as is possible and are working together to ensure patients are looked after in the most suitable environment.</p>
	<p>COVID-19 – FINANCE MOBILISATION PLAN IMPACT</p>
2.10	<p>Summary of position</p>
	<p>From the outset of the pandemic the HSCP acted very swiftly to respond and developed a mobilisation plan detailing the additional activities to support our response, alongside the estimated financial impact. Financial returns have been submitted to the Scottish Government on a regular basis, on the premise that any additional costs aligned to mobilisation plans would be fully funded. There is a risk that if the full cost of the Covid-19 response is not funded that the IJB may require to recover any overspend in-year.</p> <p>The IJB were updated in October outlining the cost estimates, the financial year-end projections and any potential funding gap based on scenarios re Covid-19 funding. The IJB also need to consider any action required to recover the financial position in-year.</p>
2.11	<p>Mobilisation Plan Costs</p>
	<p>The most recent mobilisation plan cost submission submitted in October estimates the costs to be £7.656m to March 2021. The financial returns have moved to a quarterly submission alongside the Health Board financial returns to the Scottish Government. The costs remain estimates as the situation continually evolves and there have been several iterations of the financial plan.</p> <p>The majority of the additional costs for the HSCP relate to the provision of social care services and the most significant areas are PPE, additional staff costs for staff absence and student nurses, loss of income due to closed services, additional care home</p>

placements, payments to commissioned care providers to ensure future sustainability and the impact on our approved savings programme.

The local finance mobilisation plan submission is included as Appendix E. The main areas of cost together are summarised below:

Service Area	August Return £m	October Return £m	Variance
Payments to Providers	1.655	1.683	0.028
Personal Protective Equipment (PPE)	2.052	1.693	(0.359)
Savings Delays	1.115	1.132	0.017
Nursing – Students and Bank Staff	0.733	0.685	(0.048)
Care at Home Capacity	0.416	0.416	0.000
Loss of Income	0.442	0.531	0.089
Staff Cover	0.425	0.401	(0.024)
Care Home Beds – Delayed Discharges	0.396	0.396	0.000
Fostering Placements	0.196	0.196	0.000
Delayed Discharges - Other Measures	0.000	0.087	0.087
Other staff costs	0.000	0.615	0.615
Winter Planning	0.000	0.118	0.118
Other costs	0.311	0.233	(0.078)
Offsetting cost reductions	(0.530)	(0.530)	0.000
TOTAL	7.211	7.656	0.445

Further information on the elements of the plan are included in previous IJB reports. The main changes to estimated costs are the reduction in PPE estimates based on an expectation of more supply being delivered from the NSS hub, the level of stocks we have in place and the stabilisation of costs for PPE items. The other significant movement is in the other staff costs, this has increased significantly due to NHS finance identifying additional staff costs for wards which were not appropriately allocated to Covid, therefore this reflects a more accurate estimate of the costs rather than an expected increase in the requirement.

2.12 Covid-19 Funding Position

At the outset of the pandemic there was an assurance that subject to any additional expenditure being fully aligned to local mobilisation plans, including the IJB responses, reasonable funding requirements will be supported. This was on the basis that a process would be developed for these to be accurately and immediately recorded and shared with the Scottish Government. The basis of this reporting was drawn up and agreed with COSLA and Health and Social Care Partnerships.

Previous finance reports to IJB have outlined the chronology of funding through the year and the period 5 finance report outlined that £5.183m of funding was agreed at that time to be allocated for North Ayrshire delegated services. This funding allocation has subsequently been increased to £5.491m. This reflects further discussions at Finance Leads re the distribution of funding for lead partnership services and to reflect a fairer approach following the submission of updated Covid cost estimates in October.

The revised funding allocations are noted below:

	North £000	East £000	South £000	TOTAL £000
Q1 Allocation	3,010	2,400	2,018	7,429
Q2-Q4 Allocation	2,481	3,904	2,611	8,996
TOTAL ALLOCATION	5,491	6,304	4,629	16,424
Funding Already Received (£83m)	3,509	2,464	1,835	7,808
NET NEW FUNDING ALLOCATION	1,982	3,840	2,794	8,616

The funding allocations to date have been based on the following approach:

- allocation based on actual costs incurred in Quarter 1 and funding agreed for Q2-Q4 in line with agreed parameters (70% of funding for Q2-Q4, exception of 50% of funding for social care payments to providers, DD reduction);
- action is taken to mitigate additional financial pressure as far as possible and to make best use of resources across the system. HBs and IJBs are asked to reassess options for savings that can be delivered, therefore no provision at this time for savings delays, similarly the offsets identified by some areas have not been included at this stage;
- funding allocated in line with actual expenditure where spend disproportionately impacts on specific IJBs and where there is a significant uneven distribution, includes PPE and social care;
- funding allocated up to an NRAC share to cover spend that is incurred across all HB/IJBs where there is a higher level of consistency between Board areas, this includes staffing costs and overtime, equipment, investment in digital, additional beds, and community hubs;
- expectation in principle that funding is split between HBs and IJBs in line with SG funding letter/allocation, however HBs and IJBs may agree to allocate funding flexibly between categories to better recognise local pressures and priorities;
- further funding may be required to meet costs that have been in excess of formula shares, and SG will review reasonable requests for further financial support to meet pressures.

Given the level of uncertainty currently reflected in financial assumptions full funding has not been allocated at this stage, the Scottish Government will work with Health Boards and IJBs over the coming months to review and further revise financial assessments and intend to make a further substantive funding allocation in January. This will allow identification of the necessary additional support required, and realignment of funding in line with actual spend incurred. For social care further work is progressing with COSLA to identify financial implications, including sustainability payments to providers. Given uncertainty reflected in estimates across Scotland the funding allocation for social care is based on actuals for Q1 and 50% of forecast spend for Q2-Q4. The Scottish Government will revisit social care allocations in November and this will include part of the funding announced in the recent winter plan.

IJB CFOs have highlighted some challenges posed by the NRAC share approach for some service areas and Scottish Government Health Finance colleagues have agreed to a further allocation later in November specifically for primary care and mental health services, which will be based on the actual cost estimates without an NRAC cap and with the two service areas as individual allocations.

2.13	Covid – Financial Risk										
	<p>Overall at this time the financial risk to the IJB has been reduced significantly by the recent funding announcement and subsequent allocation.</p> <p>The table below summarises the overall estimated Covid-19 costs for the North HSCP alongside the funding received to highlight the potential gap:</p> <table data-bbox="338 371 1137 642"> <tr> <th></th><th>Latest October £m</th></tr> <tr> <td>Mobilisation Plan Costs</td><td>7.656</td></tr> <tr> <td>FUNDING TOTAL</td><td>(5.491)</td></tr> <tr> <td>Shortfall</td><td>2.165</td></tr> <tr> <td>Shortfall (excluding savings)</td><td>1.033</td></tr> </table> <p>The estimated additional costs to March 2021 compared to the funding received to date leaves an estimated balance of £1.033m for which funding has not yet been received or allocated.</p> <p>In terms of the estimated elements of the plan not yet funded:</p> <ul style="list-style-type: none"> • we have assumed through our core budget monitoring projections that the delays in savings will not be funded and these are included in financial projections, as noted in this report we are projecting breakeven on that basis; • the offsets of £0.530m have not been included in the overall funding allocation and also have not been factored into the HSCP financial projections, therefore at this stage these would potentially remain available for North to re-direct to any funding shortfall; • there will be a potential further funding allocation for Social Care (November) and Health (January) when the costs will be revisited, we would expect on that basis that a further funding allocation would be released to compensate for actual costs. <p>There are a number of financial risks related to the Covid-19 response for North Ayrshire IJB, risks include:</p> <ul style="list-style-type: none"> • Scottish Government funding is not sufficient to fully fund the response and there is a shortfall in funding when allocated; • Risk that financial position cannot be recovered in-year and the IJB overspend and add to the debt owed to North Ayrshire Council; • If insufficient funding is provided an exercise will be required at a later stage to re-allocate costs and funding to the 3 IJB areas for Lead Partnership services, this could lead to greater costs being aligned to the North IJB particularly for any shortfall in funding for Primary Care including Covid Assessment Hubs; • Further uncertainty of funding for pressures which may continue beyond 2020-21, including for example PPE; • Currently provider Sustainability Payment Principles have been agreed to remain in place for the year with tapering down of support for some elements over the next few months, there is an ongoing responsibility for HSCPs to ensure the sustainability of the social care sector and the sustainability principles will remain under review by the Scottish Government and COSLA; • Financial position from 2021-22 onwards and the impact on public sector funding and the future funding of Health and Social Care services. 		Latest October £m	Mobilisation Plan Costs	7.656	FUNDING TOTAL	(5.491)	Shortfall	2.165	Shortfall (excluding savings)	1.033
	Latest October £m										
Mobilisation Plan Costs	7.656										
FUNDING TOTAL	(5.491)										
Shortfall	2.165										
Shortfall (excluding savings)	1.033										

The below illustrates the ways in which this financial risk can be mitigated:



Given the scale of the financial risk at this stage in the year it is not recommended that the IJB consider a formal financial recovery plan at this time.

This recommendation is on the basis that:

- There is increasing confidence that additional costs will be funded based on the recently received and future expected funding allocations;
- Offsetting reductions of £0.530m have not been included in the overall funding allocation and also have not been factored into the HSCP financial projections, therefore at this stage these would potentially remain available for North to re-direct to any funding shortfall;
- The current estimated costs for which funding has not yet been allocated is around £1m, this is a level that can potentially be recovered through management actions later in the financial year;
- The most significant area of additional Covid cost is the purchase of PPE for social care, the extension of the current MOU for the PPE Hubs includes an assurance that PPE costs will be reimbursed in full, this is also in line with the recent allocation for PPE being on an actuals basis;
- The period 6 position projects an underspend position (excluding Covid) and this does not include any assumption re the £1.5m held by the Council towards the IJB debt, this position assumes the debt repayment is made as planned, this position also incorporates estimated delays with savings delivery.

The financial position will continue to be reported to the IJB at each meeting, these reports will outline the monthly financial projections and the updated position in relation to estimates for Covid costs. This will include the ongoing consideration of whether a Financial Recovery Plan may be required in the future.

A budget outlook report for 2021-22 will be presented to the IJB in December and this will include estimates of recurring Covid pressures.

2.14

Provider Sustainability Payments and Care Home Occupancy Payments

COSLA Leaders and Scottish Government have agreed an approach to supporting the social care sector to ensure that reasonable additional costs will be met.

We have been making payments to commissioned social care providers in line with the agreed National principles for sustainability and remobilisation payments to social care providers during COVID 19.

Care Home Occupancy Payments - we have engaged with older people's care homes in relation to care home occupancy payments and make regular monthly payments to care home providers with emergency faster payments being made if required. Meetings are being held with each care home to discuss ongoing sustainability and to provide support.

Sustainability payments - providers are responsible for submitting a claim for additional support to the Partnership for sustainability payments and this is assessed as to what support is required on a case by case basis based on the supporting evidence provided. Each case is assessed by the same group to ensure equity and consistency across providers.

In general, all payment terms have been reduced and once any payment is agreed it is being paid quicker to assist the cash flow position of providers. The assessment of some claims has been difficult due to delays with additional information and supporting evidence being submitted to support claims, hence there are a number of claims that are in process.

The sustainability payments are estimated to be a significant cost in our mobilisation plan and the timely submission and assessment of claims is key to ensuring we can accurately estimate the financial cost and ensure the costs are reclaimed from the Scottish Government.

Providers in North Ayrshire are not all strictly adhering to these timescales and we are still receiving claims dating back to the start of the pandemic, the commissioning team are working with providers to support them to submit claims.

The tables below show the support provided to date and the outstanding claims as at the end of September:

PROVIDER SUMMARY	NCHC Care Homes	Other	Total
Total Number of Providers	17	48	65
Number in contact for support	16	27	43
Providers Supported to date	11	21	32

OUTSTANDING CLAIMS	NCHC Care Homes	Other	Total
Total Number of Claims	5	6	11
Value of Claims	£477,887	£95,853	£573,740

SUPPORT PROVIDED	NCHC Care Homes	Other Services	TOTAL
	£	£	£

Occupancy Payments *	£1,082,882	n/a	£1,082,882
Staffing	£61,769	£50,621	£112,390
PPE, Infection Control	£92,795	£31,390	£124,185
Other	£11,600	£273	£11,873
TOTAL	£1,249,046	£82,284	£1,331,330

** payments to end of September*

A significant level of financial support has been provided to our commissioned providers, in particular older people's care homes. The sustainability payments for some elements of support are tapering down between September and November (occupancy payments), other elements will continue to be in place beyond November and this includes the Social Care Staff Support Fund and support with PPE, infection prevention control and some additional staffing costs.

Due to concerns re the sustainability of the social care sector the Scottish Government agreed to sustain the levels of support in November at the same level as October, i.e. for care homes paying for 50% of vacancies during the month and to continue with a planned care approach. This was agreed on the basis that a review of transitional arrangements is required to provide more targeted support to the sector, focussed discussions are currently taking place so that new arrangements can be agreed by Scottish Government and COSLA and in place from the beginning of December.

3. PROPOSALS

3.1 Anticipated Outcomes

Continuing to closely monitor the financial position will allow the IJB to take corrective action where required to ensure the partnership can deliver services in 2020-21 from within the available resource, thereby limiting the financial risk the funding partners, i.e. NAC and NHS AA.

The estimated costs and funding in relation to the Covid-19 response also require to be closely monitored to ensure that the IJB can plan for the impact of this and to ensure that the IJB is in the position to re-claim funding to compensate for the additional costs.

3.2 Measuring Impact

Ongoing updates to the financial position will be reported to the IJB throughout 2020-21.

4. IMPLICATIONS

Financial:

The financial implications are as outlined in the report.

Against the full-year budget of £254.257m there is a projected underspend of £0.377m (0.15%). The report outlines the main variances for individual services.

There are a number of assumptions underpinning the projections which could change as we progress through the year. We will continue to work with services to ensure the most accurate and reliable position is reported.

	One of the main areas of risk is the additional costs related to the Covid-19 response and these are detailed in the report together with an updated position in relation to funding.
Human Resources:	None
Legal:	None
Equality:	None
Children and Young People	None
Environmental & Sustainability:	None
Key Priorities:	None
Risk Implications:	Within the projected outturn there are various over and underspends including the non-achievement of savings. The greatest financial risk for 2020-21 is the additional costs in relation to Covid-19.
Community Benefits:	None

Direction Required to Council, Health Board or Both	Direction to: -	
	1. No Direction Required	
	2. North Ayrshire Council	
	3. NHS Ayrshire & Arran	
	4. North Ayrshire Council and NHS Ayrshire & Arran	√

4.	CONSULTATION
4.1	<p>This report has been produced in consultation with relevant budget holders and the Partnership Senior Management Team.</p> <p>The IJB financial monitoring report is shared with the NHS Ayrshire and Arran Director of Finance and North Ayrshire Council's Head of Finance after the report has been finalised for the IJB.</p>
5.	CONCLUSION
5.1	<p>It is recommended that the IJB:</p> <p>(a) notes the overall integrated financial performance report for the financial year 2020-21 and the overall projected year-end underspend of £0.377m at period 6;</p> <p>(b) notes the estimated costs of the Covid mobilisation plan of £7.656, including savings delays, and the associated funding received to date;</p> <p>(c) note the financial risks for 2020-21, including the impact of Covid 19, and that there is no recommendation at this time to implement a formal Financial Recovery Plan for the IJB;</p> <p>(d) approve the budget changes outlined at section 2.8.</p>

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Partnership Budget - Objective Summary	2020/21 Budget									Over/ (Under) Spend Variance at Period 5 £'000	Movement in projected variance from Period 5 £'000
	Council			Health			TOTAL				
	Budget	Outturn	Over/ (Under) Spend Variance	Budget	Outturn	Over/ (Under) Spend Variance	Budget	Outturn	Over/ (Under) Spend Variance		
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000		
COMMUNITY CARE AND HEALTH	55,938	54,821	(1,117)	13,342	13,486	144	69,280	68,307	(973)	(1,097)	124
: Locality Services	23,280	22,900	(380)	4,720	4,790	70	28,000	27,690	(310)	(507)	197
: Community Care Service Delivery	28,570	28,475	(95)	0	0	0	28,570	28,475	(95)	47	(142)
: Rehabilitation and Reablement	1,966	1,727	(239)	1,550	1,533	(17)	3,516	3,260	(256)	(305)	49
: Long Term Conditions	1,767	1,352	(415)	4,969	5,060	91	6,736	6,412	(324)	(343)	19
: Integrated Island Services	355	367	12	2,103	2,103	0	2,458	2,470	12	11	1
MENTAL HEALTH SERVICES	24,806	26,941	2,135	52,302	50,911	(1,391)	77,108	77,852	744	513	231
: Learning Disabilities	18,642	20,960	2,318	446	448	2	19,088	21,408	2,320	2,192	128
: Community Mental Health	4,699	4,505	(194)	1,681	1,636	(45)	6,380	6,141	(239)	(234)	(5)
: Addictions	1,465	1,476	11	1,351	1,351	0	2,816	2,827	11	0	11
: Lead Partnership Mental Health NHS Area Wide	0	0	0	48,824	47,476	(1,348)	48,824	47,476	(1,348)	(1,445)	97
CHILDREN & JUSTICE SERVICES	32,100	32,019	(81)	3,825	3,825	0	35,925	35,844	(81)	41	(122)
: Irvine, Kilwinning and Three Towns	3,185	3,028	(157)	0	0	0	3,185	3,028	(157)	(86)	(71)
: Garnock Valley, North Coast and Arran	1,263	1,147	(116)	0	0	0	1,263	1,147	(116)	(101)	(15)
: Intervention Services	2,042	2,023	(19)	315	315	0	2,357	2,338	(19)	(12)	(7)
: Looked After and Accommodated Children	17,735	18,192	457	0	0	0	17,735	18,192	457	442	15
: Quality Improvement	4,287	4,050	(237)	0	0	0	4,287	4,050	(237)	(203)	(34)
: Public Protection	628	622	(6)	0	0	0	628	622	(6)	1	(7)
: Justice Services	2,506	2,506	0	0	0	0	2,506	2,506	0	0	0
: Universal Early Years	454	451	(3)	3,120	3,120	0	3,574	3,571	(3)	0	(3)
: Lead Partnership NHS Children's Services	0	0	0	390	390	0	390	390	0	0	0
PRIMARY CARE	0	0	0	51,024	51,024	0	51,024	51,024	0	0	0
ALLIED HEALTH PROFESSIONALS			0	5,577	5,502	(75)	5,577	5,502	(75)	0	(75)
MANAGEMENT AND SUPPORT COSTS	8,166	8,142	(24)	6,165	5,681	(484)	14,331	13,823	(508)	(389)	(119)
CHANGE PROGRAMME	1	1	0	1,011	1,011	0	1,012	1,012	0	0	0
OUTTURN ON A MANAGED BASIS	121,011	121,924	913	133,246	131,440	(1,806)	254,257	253,364	(893)	(932)	39
Return Hosted Over/Underspends East	0	0	0	0	442	442	0	442	442	468	(26)
Return Hosted Over/Underspends South	0	0	0	0	412	412	0	412	412	445	(33)
Receive Hosted Over/Underspends South	0	0	0	0	15	15	0	15	15	81	(66)
Receive Hosted Over/Underspends East	0	0	0	0	(353)	(353)	0	(353)	(353)	(53)	(300)
OUTTURN ON AN IJB BASIS	121,011	121,924	913	133,246	131,956	(1,290)	254,257	253,880	(377)	9	(386)

	Budget £000's	Outturn £000's	Over/ (Under) Spend Variance £000's	
COMMUNITY CARE AND HEALTH	69,280	68,307	(973)	
Locality Services	28,000	27,690	(310)	Older People care homes inc respite - underspend of £0.649m based on 716 placements and including an under recovery of income from Charging Orders. Independent Living Services : * Direct Payment packages- overspend of £0.100m on 62 packages , increase due to review of clawback calculation * Residential Packages - underspend of £0.026m based on 34 packages. * Community Packages (physical disability) - overspend of £0.146m based on 49 packages .
Community Care Service Delivery	28,570	28,475	(95)	Care at Home (inhouse & purchased) - was projected to overspend by £0.287m due to increased demand which has been funded by an allocation of Covid funding. Employee Costs - overspend £0.056m due to use of casual staff within Montrose House. Direct Payments - underspend £0.176m to year end on 30 packages, review of clawback adding to the underspend.
Rehabilitation and Reablement	3,516	3,260	(256)	Aids and Adaptations - underspend of £0.255m related to the reduced number of OT assessments taking place during COVID 19 - adverse from prior period as spend expected to pick up towards year end.
Long Term Conditions	6,736	6,412	(324)	Carers Centre - projected underspend of £0.443m Anam Cara - projected overspend in employee costs of £0.026m due to pilot of temporary post with a view to longer term savings in bank & casual hours.
Integrated Island Services	2,458	2,470	12	Outwith the threshold for reporting

	Budget £000's	Outturn £000's	Over/ (Under) Spend Variance £000's	
MENTAL HEALTH SERVICES	77,108	77,852	744	
Learning Disabilities	19,088	21,408	2,320	Residential Packages- overspend of £0.556m based on 41 current packages. Community Packages (inc direct payments) - overspend of £1.320m based on 344 current packages.
Community Mental Health	6,380	6,141	(239)	Community Packages (inc direct payments) and Residential Packages - underspend of £0.239m based on 93 community packages, 12 Direct Payments and 29 residential placements.
Addictions	2,816	2,827	11	Outwith the threshold for reporting
Lead Partnership (MHS)	48,824	47,476	(1,348)	Adult Community - underspend of £0.143m due to vacancies. Adult Inpatients- overspend of £0.583m due to a delay in closing the Lochranza wards, revised assumptions on redeployed staff and an under recovery of bed sale income. UNPACs - underspend of £0.040m based on current placements and assumed service level agreement costs. Elderly Inpatients - underspend of £0.200m which includes the £0.934m of unallocated funding following the elderly MH review. CAMHS - underspend of £0.305m due to vacancies. MH Admin - underspend of £0.390m due to vacancies. Psychiatry - underspend of £0.490m due to vacancies. MH Pharmacy - underspend of £0.220m mainly within substitute prescribing. Psychology- underspend of £0.450m due to vacancies.

	Budget £000's	Outturn £000's	Over/ (Under) Spend Variance £000's	
CHILDREN'S AND JUSTICE SERVICES	35,925	35,844	(81)	
Irvine, Kilwinning and Three Towns	3,185	3,028	(157)	<p>Transports costs - Projected underspend of £0.040m due a reduction in spend in Staff Mileage costs</p> <p>Cornerstone Respite - Projected underspend of £0.072m due to respite services not taking place due to COVID</p>
Garnock Valley, North Coast and Arran	1,263	1,147	(116)	<p>Employee Costs - Projecting £0.059m underspend due to a substantive post being vacant . This will be offsetting an overspend in employee Costs within Quality Improvement.</p> <p>Transports costs - Projected underspend of 0.017m due a reduction in spend in Staff Mileage costs.</p> <p>Cornerstone Respite - Projected underspend of £0.035m due to respite services not taking place due to COVID.</p>
Intervention Services	2,357	2,338	(19)	Outwith the threshold for reporting
Looked After and Accommodated Children	17,735	18,192	457	<p>Looked After Children placements - Projected underspend of £0.122m, favourable movement of £0.50m which is made up of the following:-</p> <p>Kinship - projected underspend of £0.149m. Budget for 370 placements, currently 344 placement but projecting 349 placements by the year end.</p> <p>Adoption - projected overspend of £0.035m. Budget for 69 placements, currently 73 placements.</p> <p>Fostering - projected overspend of £0.095m. Budget for 129 placements, currently 132 placements and projecting 135 placements by the year end. -</p> <p>Fostering Xtra - projected overspend of £0.009m. Budget for 32 placements, currently 29 placements but projecting 28 placements by the year end.</p> <p>Fostering Respite - Projected underspend of £0.060m which is due to respite services not taking place due to COVID</p> <p>Private fostering - projected underspend of £0.018m. Budget for 10 placements, currently 10 placements.</p> <p>IMPACCT carers - projected online Budget for 2 placements, currently 2 placements.</p> <p>Residential School placements - Projected overspend £0.662m, current number of placements is 16, assumption that 1 will end in October, 1 in November and 1 ending in January and no further new admissions resulting in 13 placements at the year end. No secure</p>
Quality Improvement	4,287	4,050	(237)	<p>Employee Costs - Projected Overspend £0.114m of which £0.070m relates to employee acting up to Senior Manager which will being offset with her vacant post within the Irvine Locality.</p> <p>Transports costs - Projected underspend of £0.034m due a reduction in spend in Staff Mileage costs, now basing mileage projection on actual spend this year.</p> <p>Community Packages - Projected underspend of £0.086m, favourable movement £0.011m due to delay in packages starting due to COVID 108 Community Packages on establishment list.</p> <p>Direct Payments - Projected Underspend £0.039m, adverse movement of £0.009m which is due to reduction in % clawback. Current number of packages in place is 42 and projecting an increase of further 3 packages until end of the year.</p> <p>Children's Residential Placements - Projected underspend of £0.0196m. Currently 10 Residential Placements</p>
Public Protection	628	622	(6)	Outwith the threshold for reporting
Justice Services	2,506	2,506	0	Outwith the threshold for reporting
Universal Early Years	3,574	3,571	(3)	Outwith the threshold for reporting
: Lead Partnership NHS Children's Services	390	390	0	Outwith the threshold for reporting
PRIMARY CARE	51,024	51,024	0	Outwith the threshold for reporting
ALLIED HEALTH PROFESSIONALS	5,577	5,502	(75)	Projected underspend in supplies.
MANAGEMENT AND SUPPORT	14,331	13,823	(508)	Over recovery of payroll turnover on health services.
CHANGE PROGRAMME & CHALLENGE FUND	1,012	1,012	0	Outwith the threshold for reporting
TOTAL	254,257	253,364	(893)	

Threshold for reporting is + or - £50,000

2020-21 Savings Tracker

Appendix C

Savings reference number	Description	Deliverability Status at budget setting	Approved Saving 2020/21 £m	Deliverability Status Month 6	Saving Delivered @ Month 6 £m	Projected to Deliver during Year £m	Projected Shortfall £m	Comment
Children, Families & Criminal Justice								
1	Children and Young People - External Residential Placements	Amber	0.583	Amber	-	0.297	0.286	Currently projecting an overspend. Some plans to move children have been impacted by COVID. Expect to have 13 places at the year-end when the original plan was to have 10 places, will impact on savings for 2021-22.
2	Adoption Allowances	Amber	0.074	Red	-	-	0.074	Current projected overspend but outcome of the adoption review still to be implemented
3	Children's Services - Early Intervention and Prevention	Amber	0.050	Green	0.050	-	-	Fully achieved, met through efficiencies across Children's services
4	Fostering - Reduce external placements	Green	0.036	Green	0.036	-	-	An underspend is projected at month 6.
5	Community Support - Children's Care Packages	Amber	0.008	Green	0.008	-	-	Tender delayed, saving can be met through budget underspend for 2020-21. Tender due to be implemented February 2022.
Mental Health and LD Services								
6	LD - Reduction to Sleepover Provision	Amber	0.200	Red	-	-	0.200	Cluster sleepover models centred around core supported accommodation are being considered but will be delayed. The supported accommodation build timescales have slipped due to COVID.
7	Learning Disability Day Services	Amber	0.279	Amber	-	0.050	0.229	The provision of day care is being reviewed to ensure it can be delivered safely. This will include a review of the staffing, a new staffing structure has been planned which will deliver the full year saving in future years but will be delayed until January 2021.
8	Trindlemoss	Green	0.150	Amber	0.150	-	-	Fully achieved but two tenancies still to take up their place and the final tenancy has to be decided.
9	Mental Health - Flexible Intervention Service	Green	0.008	Green	0.008	-	-	Fully achieved, slightly over-delivered (£10k)
Health and Community Care								
10	Roll out of multidisciplinary teams - Community Care and Health	Amber	0.110	Green	-	0.110	-	For 2020-21 only this saving has been added to the vacancy savings target to be met non-recurringly. There are a number of vacancies across Community Care and Health but at this stage the service can not identify posts to be removed on a permanent basis, will be formalised and removed from establishment from 2021-22.
11	Carers Act Funding - Respite in Care Homes	Green	0.273	Green	0.273	-	-	Fully achieved
12	Care at Home - Reablement Investment	Amber	0.300	Green	-	0.300	-	Expect to fully achieve but there is a projected overspend due to additional TUPE costs and an increased level of service.
13	Care at Home - Efficiency and Capacity Improvement	Amber	0.135	Green	-	0.135	-	Expect to fully achieve but there is a projected overspend due to additional TUPE costs and an increased level of service.
14	Day Centres - Older People	Amber	0.038	Amber	-	-	0.038	Day centres are currently closed and staff have been re-deployed, will look for opportunities to release savings when the services re-open.
15	Charging Policy - Montrose House	Amber	0.050	Green	0.025	0.025	-	New charging policy in place and additional income projected to be achieved.
Whole System								
16	Adults - New Supported Accommodation Models	Amber	0.063	Amber	-	0.025	0.038	Project has slipped. Expected completion date is early 2021. Saving was based on 5mths, Assume only 2mths are achieved
17	Adult Community Support - Commissioning of Services	Amber	0.638	Amber	-	0.150	0.488	Implementation of CM2000 was delayed due to Covid, expect to bring system on line for Adult providers from mid February 2021.
18	Charging Policy - Inflationary Increase	Green	0.050	Amber	-	0.025	0.025	Charging has been suspended during COVID 19, with the exception of care homes and community alarms, expect to bring back on line in October.
TOTAL SOCIAL CARE SAVINGS			3.045		0.550	1.117	1.378	

Health:

Savings reference number	Description	Deliverability Status at budget setting	Approved Saving 2020/21 £m	Deliverability Status Month 6	Saving Delivered @ Month 6 £m	Projected to Deliver during Year £m	Projected Shortfall £m	Comment
19	Trindlemoss	Green	0.120	Green	0.120	-	-	Fully achieved
20	Packages of care	Green	0.100	Green	0.100	-	-	Fully achieved
21	Elderly Mental Health inpatients (lead partnership)	Green	0.216	Green	0.216	-	-	Fully achieved
22	MH Payroll Turnover (lead partnership)	Green	0.100	Green	0.100	-	-	Fully achieved
23	North Payroll Turnover	Green	0.280	Green	0.280	-	-	Fully achieved

TOTAL HEALTH SAVINGS	0.816	0.816	0.000	0
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TOTAL NORTH HSCP SAVINGS	3.861	1.366	1.117	1.378
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2020-21 Budget Reconciliation

Appendix D

COUNCIL	Period	Permanent or Temporary	£
Initial Approved Budget			96,963
Rounding error			4
Error in budget			1,299
Resource Transfer			22,769
WAN Circuits Budget Transfer - Kyle Road - New data Connection (Store Costs)	1	P	(1)
British Sign Language funding transferred to Democratic Services	3	P	(5)
Child Abuse Enquiry costs - Budget from Corporate	5	T	58
Corporate Procurement Posts 313490 & 313106	6	P	(76)
Budget Reported at Month 6			121,011
HEALTH	Period	Permanent or Temporary	£
Initial Approved Budget			149,830
Resource Transfer			(22,769)
Adjustment to base budget	1	P	(90)
2019/20 Month 10-12 budget adjustments	1	P	3,999
Non recurring Funding 19/20	3	T	(298)
Full Year effect of Part Year Reductions	3	P	(54)
Additional COVID funding	3	T	1,339
Additional living wage funding	3	P	186
V1P Funding 20/21	3	T	105
Primary Care Prescribing - Uplift	3	P	2,060
Primary Care Prescribing - CRES	3	P	(756)
Outcomes Framework - Breast Feeding	3	T	33
South HSCP V1P contribution	3	T	20
ANP Allocation - MIN	3	T	20
Training Grade Funding	3	P	49
Funding transfer to Acute (Medical Records)	3	T	(33)
Public Health Outcomes Bundle	3	T	235
Specialist Pharmacist in Substance Misuse	3	T	12
Prescribing Reduction - COVID	3	T	(540)
Lochranza Discharges to South HSCP	3	P	(170)
Prescribing Reduction	4	P	(1,497)
Training Grade Funding	4	T	36
TEC Contribution	4	T	(53)
Admin posts from South HSCP	4	P	54
Uplift Adjustment	4	P	21
Additional COVID funding	5	T	2,170
Training Grade Funding	5	P	6
Lochranza Discharges to South/East HSCP	5	P	(232)
Arrol Park Discharges to South HSCP	5	P	(107)
Trindlemoss resource transfer adjustment	5	P	(248)
Training Grade Funding	6	P	9
Diabetes Prevention Psychologist Post NR	6	T	11
Re-parent Parkinson Nurse Nth to Sth	6	P	(109)
Arrol Park Discharges to South HSCP	6	P	(24)
Medical Pay Award - Junior Doctors	6	P	31
Budget Reported at Month 6			133,246
COMBINED BUDGET			254,257

	Revenue													Revenue
Consolidated HSCP costs	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	2020/21	
Additional Hospital Bed Capacity/Costs - Maintaining Surge Capacity	-	-	-	-	-	-	-	-	-	-	-	-	-	
Delayed Discharge Reduction- Additional Care Home Beds	82,102	78,564	78,564	78,564	78,564	-	-	-	-	-	-	-	396,358	
Delayed Discharge Reduction- Additional Care at Home Packages	-	-	-	-	-	-	-	-	-	-	-	-	-	
Delayed Discharge Reduction- Other measures	65,604	4,362	4,362	4,362	4,362	4,362	-	-	-	-	-	-	87,414	
Personal protective equipment	185,330	185,330	199,650	173,716	204,565	188,626	92,665	92,665	92,665	92,665	92,665	92,665	1,693,208	
Deep cleans	-	-	-	-	-	-	-	-	-	-	-	-	-	
COVID-19 screening and testing for virus	-	-	-	-	-	-	-	-	-	-	-	-	-	
Estates & Facilities cost including impact of physical distancing measures	-	-	8,339	391	132	392	-	-	-	-	-	-	9,253	
Additional staff Overtime and Enhancements	70,596	43,682	47,882	19,489	57,510	34,153	28,269	28,269	28,269	14,135	14,135	14,135	400,523	
Additional temporary staff spend - Student Nurses & AHP	-	-	369,226	101,111	139,650	74,733	-	-	-	-	-	-	684,719	
Additional temporary staff spend - Health and Support Care Workers	-	-	-	-	-	-	-	-	-	-	-	-	-	
Additional temporary staff spend - All Other	-	-	41,206	45,673	253,332	35,198	40,000	40,000	40,000	40,000	40,000	40,000	615,410	
Social Care Provider Sustainability Payments	-	-	265,244	223,944	314,525	313,608	288,857	96,650	45,000	45,000	45,000	45,000	1,682,828	
Social Care Support Fund- Costs for Children & Families Services (where delegated to HSCP)	-	-	-	-	-	-	-	-	-	-	-	-	-	
Other external provider costs	-	-	-	-	-	-	-	-	-	-	-	-	-	
Additional costs to support carers	-	-	-	-	-	-	-	-	-	-	-	-	-	
Mental Health Services	-	-	-	-	-	-	-	-	-	-	-	-	-	
Additional payments to FHS contractors	-	-	-	28,370	4,820	-	5,000	5,000	5,000	5,000	5,000	5,000	63,190	
Additional FHS Prescribing	-	-	-	-	-	-	-	-	-	-	-	-	-	
Community Hubs	-	-	-	-	-	-	-	-	-	-	-	-	-	
Other community care costs	-	-	-	-	-	-	-	-	-	-	-	-	-	
Loss of income	88,500	88,500	88,500	88,500	88,500	88,500	-	-	-	-	-	-	531,000	
Staff Accommodation Costs	-	-	-	-	-	-	-	-	-	-	-	-	-	
Additional Travel Costs	-	-	5,857	1,755	1,567	1,028	-	-	-	-	-	-	10,206	
Digital, IT & Telephony Costs	-	-	937	(877)	16,810	6	-	-	-	-	-	-	16,876	
Communications	-	-	-	-	-	-	-	-	-	-	-	-	-	
Equipment & Sundries	-	59,055	16,479	22,141	(10,294)	1,033	-	-	-	-	-	-	88,414	
Homelessness and Criminal Justice Services	-	-	-	-	-	-	-	-	-	-	-	-	-	
Children and Family Services	6,952	12,166	20,856	34,760	34,760	34,760	17,380	17,380	17,380	-	-	-	196,394	
Prison Healthcare Costs	-	-	-	-	-	-	-	-	-	-	-	-	-	
Hospice - Loss of income	-	-	-	-	-	-	-	-	-	-	-	-	-	
Staffing support, including training & staff wellbeing	-	-	-	-	-	-	-	-	-	-	-	-	-	
Resumption & redesign of primary care/contractor services to support access to urgent care in hours and OOH	-	-	-	-	-	-	-	-	-	-	-	-	-	
Costs associated with new ways of working- collaborative	-	-	-	-	-	-	-	-	-	-	-	-	-	
Winter Planning	-	-	-	-	-	-	-	-	39,444	39,444	39,444	-	118,332	
Other - Please update narrative	38,845	38,845	38,845	38,845	38,845	31,649	31,649	31,649	31,649	31,649	31,649	31,649	415,768	
Other - Please update narrative	-	13,555	7,673	7,673	7,673	7,673	-	-	-	-	-	-	44,247	
Other - Please update narrative	-	-	-	-	-	-	-	-	-	-	-	-	-	
Other - Please update narrative	-	-	-	-	-	-	-	-	-	-	-	-	-	
Other - Please update narrative	-	-	-	-	-	-	-	-	-	-	-	-	-	
Other - Please update narrative	-	-	-	-	-	-	-	-	-	-	-	-	-	
Other - Please update narrative	-	-	-	-	-	-	-	-	-	-	-	-	-	
Other - Please update narrative	-	-	-	-	-	-	-	-	-	-	-	-	-	
Other - Please update narrative	-	-	-	-	-	-	-	-	-	-	-	-	-	
Offsetting cost reductions - HSCP	(108,007)	(108,007)	(108,007)	(68,583)	(68,583)	(68,583)	-	-	-	-	-	-	(529,770)	
Total	429,922	416,052	1,085,613	799,832	1,166,738	747,138	503,820	311,613	299,407	267,893	267,893	228,449	6,524,370	
												Subtotal		
Expected underachievement of savings (HSCP)	141,500	141,500	141,500	141,500	141,500	141,500	47,167	47,167	47,167	47,167	47,167	47,167	1,132,000	
Total	571,422	557,552	1,227,113	941,332	1,308,238	888,638	550,987	358,780	346,574	315,059	315,059	275,615	7,656,370	
												Total		