



## Integration Joint Board 14th February 2022

**Subject:** **2021-22 – Month 9 Financial Performance**

**Purpose:** To provide an overview of the IJB's financial performance as at Month 9 (December) 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 2021-22 and the current overall projected year-end underspend of £1.283m;
- (b) notes the progress with delivery of agreed savings; and
- (c) notes the remaining financial risks for 2021-22, including the impact of remaining Covid-19 estimates and costs.

<b>Glossary of Terms</b>	
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

<b>1.</b>	<b>EXECUTIVE SUMMARY</b>
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 December period end, 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 is a year-end underspend of £1.283m (0.5%) for 2021-22 which is a favourable movement of £0.297m since Month 7.

1.3	From the core projections, overall, the main areas of pressure are learning disability care packages, residential placements for children and Unplanned Activities (UnPACs) within the lead partnership for mental health.
<b>2.</b>	<b>CURRENT POSITION</b>
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> <p>The Health element of the projected outturn is based on the information reported at month 7. The NHS finance team has been 'stood down' and redeployed to other service areas which meant they could not complete a month 9 projection.</p>
	<b>FINANCIAL PERFORMANCE – AT PERIOD 9</b>
2.2	<p>At period 9 against the full-year budget of £270.191m there is a projected year-end underspend of £1.283m (0.5%). 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 underspend of £0.194m in social care services and a projected underspend of £1.089m in health services.</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	<b>Health and Community Care Services</b>
	<p>Against the full-year budget of £79.815m there is a projected underspend of £1.039m (1.3%) and the main variances are:</p> <p>a) Care home placements including respite placements (net position after service user contributions and charging order income) are projected to underspend by £0.341m after applying £0.376m of covid funding which is an adverse movement of £0.016m. The budgeted number of permanent placements is 790 and at month 9 there are 765 placements. The projection assumes a net increase of 5 places per month until the end of the financial year taking the total to 790 placements. Within the projection there is an assumption that recent placements which do not have a completed financial assessment (often due to the pressure to discharge from hospital) are costed with 50% of the cases at the current average cost of a placement and 50% at the gross or interim funded rate. It is likely that there will still be some cases being gross or interim funded at the year end. Their actual cost will not be known until the FA1 financial assessment is completed.</p> <p>The level of income recovered from charging orders was under recovered during 2020-21 due to the impact the pandemic had on house sales and for 2021-22 it is</p>

assumed to be £0.300m under recovered; this will continue to be reviewed during the year. This is included in the overall projected underspend of £0.341m above.

- b) Care at home is projecting to be online after applying £1.445m of funding for additional capacity for Covid and Winter Planning. Bank staff are being offered contracts and additional staff are being recruited for the in-house service. Additionally, the capacity for care at home will continue to grow to meet the increase in demand for the service, this will be part of our longer-term ambition to shift the balance of care and funded through the recently announced Scottish Government funding (see para 2.8 below).
- c) Care at Home Charging Income is projected to under recover by £0.169m (adverse movement of £0.005m) due to the ongoing shift towards personal care which is non chargeable.
- d) Care at Home non-employee costs are projected to be online after applying £0.090m of the recently announced funding to enhance care at home capacity.
- e) Direct Payments are projected to be online after applying £0.170m of the recently announced funding to enhance care at home capacity.
- f) Residential Placements are projected to overspend by £0.235m which is a favourable movement of £0.083m. The overspend is due to placements transferring from adult to older people services, new packages and increases to existing packages.
- g) Adaptations are projected to overspend by £0.157m (adverse movement of £0.046m) based on spend to date. Spend to date is higher due to increasing demand combined with increased costs due to supply issues.
- h) Carers Act funding is projected to underspend by £0.861m (£0.200m favourable movement). This projected position assumes charges for respite are waived per the IJB 2021-22 budget paper recommendation and a contribution is made to the increased capacity for children's respite.
- i) Day Care for Older People is projected to underspend by £0.359m (£0.018m favourable movement) as vacancies have been held whilst the service has been closed due to Covid and the unachieved saving of £0.050m is assumed to be Covid funded.
- j) Anam Cara is projected to be online after applying £0.139m of the recently announced Scottish Government funding for interim care.
- k) District Nursing is projected to overspend by £0.130m due to an overspend on supplies.
- l) Rehab wards are projected to overspend by £0.097m (Redburn ward £0.187m overspent and Douglas Grant £0.090m underspent). The overspend at Redburn is due to cover costs for vacancies as well as supplementary staffing for patients who require one to one support.

2.4	<b>Mental Health Services</b>
	<p>Against the full-year budget of £83.206m there is a projected overspend of £0.476m (0.6%). The main variances are:</p> <p>a) Learning Disabilities are projected to overspend by £1.042m (£0.267m adverse movement). The main variances are:</p> <ul style="list-style-type: none"> <li>• Care Packages (inc residential and direct payments) - projected overspend of £0.625m in community care packages (£0.301m adverse movement), £0.335m in direct payments (£0.037m favourable movement) and £0.590m for residential placements (£0.079m adverse movement).</li> </ul> <p>Community Learning Disability Care packages are proving to be one of the most challenging areas to address overspends and to project spend. This is partly due to the impact of services still remobilising in the earlier part of the year and also the impact of the roll out of the CM2000 call monitoring system. The data from CM2000 will be reported back to the service to allow them to see where care has deviated from the planned level and focus reviews to those areas. The spend up to month 8 was reviewed against the planned care and this accounts for part of the adverse movement in the projection.</p> <ul style="list-style-type: none"> <li>• Purchased LD Day Care is projected to underspend by £0.120m (£0.036m adverse movement) as day care services have not fully remobilised.</li> <li>• In house day care is projected to underspend by £0.272m (adverse movement of £0.005m) as a result of reduced service provision due to Covid restrictions and the ongoing service redesign and staffing model changes.</li> <li>• Residential Respite is projected to overspend by £0.133m (no movement) which reflects funding the new facility to full capacity and security costs prior to the facility opening.</li> </ul> <p>b) Community Mental Health services are projected to underspend by £0.290m (adverse movement of £0.132m) and included within this are underspends of £0.241m in community packages (inc direct payments) and an overspend of £0.106m for residential placements. The flexible intervention service (FIS) is projected to underspend by £0.047m due to the service being brought in house and recruitment delays.</p> <p>c) Supported Accommodation - there are potentially additional costs in relation to the upcoming supported accommodation developments. This is in relation to security, energy costs, additional adaptation costs and void rent loss during the period between the builds being completed and the service users moving in. These costs are not fully quantified but will be met by non-recurring slippage from transition care packages.</p> <p>d) The Lead Partnership for Mental Health is projecting to be £0.254m underspent and the main variances are as follows:</p> <ul style="list-style-type: none"> <li>• A projected overspend in Adult Inpatients of £0.344m mainly due to staff in redeployment (no movement) following the closure of the Lochranza ward.</li> </ul>

There is also reduced bed sale income of £0.130m but this is included in the quarter 3 LMP return and will be covered by Covid-19 funding.

- UNPACS is projected to overspend by £0.683m (no movement) this is based on current number of placements. 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. This can necessitate an UNPlanned Activities (UNPACs) placement with a specialist provider which can be out-of-area. Applications to approve a placement are made to the Associate Medical Director for Mental Health who needs to be satisfied that the placement is appropriate and unavoidable prior to this being agreed.
- A projected underspend in MH Pharmacy of £0.160m (no movement) due to continued lower substitute prescribing costs.
- Learning Disability Services are projected to overspend by £0.479m (£0.050m adverse movement). 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.
- Daldorch charging income is projected to under recover by £0.156m (no movement). Previously income was received from other Health Boards for out of area Children/Young Persons attending Daldorch but the service has been redesigned and is no longer chargeable as it is not an education provider.
- 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 a projected over-recovery of the vacancy savings target of £1.492m in 2021-22, further information is included in the table below:

Vacancy Savings Target	(£0.400m)
Projected to March 2022	£1.892m
Over/(Under) Achievement	£1.492m

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 vacancy savings position are noted below:

- Adult Community Health services £0.090m
- Elderly Inpatients £0.407m
- CAMHS £0.503m
- Mental Health Admin £0.210m
- Psychiatry £0.340m
- Psychology £0.300m
- Associate Nurse Director £0.042m

2.5

### **Children & Justice Services**

Against the full-year budget of £36.890m there is a projected overspend of £1.273m (3.4%). The main variances are:

	<p>a) Care Experienced Children and Young People is projected to overspend by £1.491m (£0.209m adverse movement). The main areas within this are noted below:</p> <ul style="list-style-type: none"> <li>• Children's residential placements are projected to overspend by £2.131m (£0.059m adverse movement) prior to covid funding and projected to overspend by £1.340m after £0.783m of Covid funding. We started 21/22 with 17 placements which included 1 in Secure but this increased to 23 (including 2 secure) by month 9. Of these placements two are assumed to be discharged in February taking the placement numbers to 21 by the end of year.</li> <li>• Fostering placements are projected to underspend by £0.207m (£0.012m favourable movement) based on the budget for 131 places and 117 actual placements (of which 6 are Covid related and are funded through the Covid-19 mobilisation plan) since the start of the year. The recent focus session discussed the need to continue to recruit increased numbers of foster carers, both to limit the requirement for external foster placements and reduce pressures elsewhere on the service. Recruitment of foster carers is an active priority for the team. This is promoted through regular targeted recruitment campaigns, community awareness raising and daily presence on various social media platforms. Our active recruitment strategy is gaining some interest and we are actively pursuing a number of enquiries as a result.</li> <li>• Fostering Xtra placements are projected to be £0.160m underspent (£0.024m favourable movement) based on the budget for 33 placements and 26 actual placements since the start of the year.</li> <li>• Private Fostering placements are projected to be £0.159m overspent (£0.005m favourable movement) based on the budget for 10 placements and 13 actual placements since the start of the year.</li> <li>• Kinship placements are projected to overspend by £0.097m (£0.032m adverse movement) based on the budget for 353 places and 363 actual placements since the start of the year.</li> <li>• Adoption placements are projected to overspend by £0.099m (£0.005m adverse movement) based on the budget for 57 places and 69 actual placements since the start of the year.</li> </ul> <p>b) Children with disabilities – residential placements are projected to underspend by £0.146m (£0.082m adverse movement) based on 7 placements which are expected to continue until the end of the year.</p> <p>c) Residential respite – placements are projected to overspend by £0.387m (adverse movement of £0.141m) due to short-term placements continuing longer than previously projected. These short-term placements are used to prevent an admission to full residential care.</p> <p>d) Transport costs – projected underspend of £0.064m (£0.003m adverse movement) due to less mileage being incurred.</p>
2.6	<b>ALLIED HEALTH PROFESSIONALS (AHP)</b>
	AHP services are projected to underspend by £0.124m due to underspends in non-employee costs.



2.7

MANAGEMENT AND SUPPORT

Management and Support Services are projected to underspend by £1.434m (£0.546m favourable movement) of which £0.353m relates to funding set aside for unscheduled care. £0.277m of this funding is uncommitted and £0.076m relates to the enhanced hospital social work team only incurring part year costs. There is also a £0.200m projected over-recovery of payroll turnover for social care and £0.416m for health services as outlined in para 2.9 below. The favourable movement is due the inclusion of slippage in funding set aside for transition packages and the balance of funding from the living wage allocation.

2.8

ADDITIONAL SCOTTISH GOVERNMENT FUNDING

The Scottish Government confirmed on 5 October 2021 a range of measures and new investment that is being put in place to help protect health and social care services over the winter period, and to provide longer term improvement in service capacity across health and social care systems.

This funding is predicated on four key principles:

- Maximising Capacity.
- Ensuring Staff Wellbeing.
- Ensuring System Flow and
- Improving Outcomes.

On 4<sup>th</sup> November the Scottish Government announced additional funding to support this. It is expected that NHS Boards, Integration Authorities and Local Authorities will work collaboratively to ensure a whole system response.

Specifically it covers the areas below but the Scottish Government have confirmed that there will be flexibility across the funding streams:

	National Funding 21/22 £m	NAHSCP Share 21/22 £m	National Funding 22/23 £m
Interim care arrangements*	40	1.109	20
Enhanced care at home capacity	62	1.719	124
Increase hourly rate to £10.02 for adult social care staff employed by commissioned providers	48	0.866	144
Enhancing Multi-Disciplinary Teams (MDTs)	20	0.555	40
<b>TOTAL</b>	<b>170</b>	<b>4.249</b>	<b>328</b>

\*non-recurring beyond 2022/23.

£0.946m of this funding is included in the reported position at month 9 to offset spend in some areas.

Any underspend on these additional Scottish Government funds at the year-end will be earmarked and held in reserve for use in 2022/23.

2.9

Turnover/Vacancy Savings

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	*(2.014m)	(0.655m)
Projected to March 2022	2.214m	1.071m
Over/(Under) Achievement	0.200m	0.416m

(\*the target for social care services has been increased on a non-recurring basis for 2021-22 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 2022-23 onwards).

The position in the table above reflects the assumption in the current financial projections. For social care a total of £1.813m (90% of annual target) has been achieved to date. It is anticipated that the level of vacancies will continue at this rate to the financial year-end, the full annual target will over recover by £0.200m.

The health vacancy projection to the year-end is based on the month 7 position and is informed by the recruitment plans and confidence in recruitment to posts for the remainder of the year.

The 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, however, the main areas are:

- Management and Support £0.434m
- Care experience young people £0.297m
- Locality services £0.265m
- Intervention services £0.171m

There have been no intentional plans during the pandemic to pause or delay recruitment and services have actively continued to recruit, in some areas this has proven difficult to fill posts.

The turnover target for the North Lead Partnership for Mental Health services is detailed within the Lead Partnership information at section 2.4.

2.10

Savings Progress

a) The approved 2021-22 budget included £2.528m of savings.

BRAG Status	Position at Budget Approval £m	Position at Period 9 £m
Red	-	0.552
Amber	0.204	0.030
Green	2.324	0.670
Blue	-	1.276
TOTAL	2.528	2.528



	<p>b) The main areas to note are:</p> <ul style="list-style-type: none"> <li>i) Red savings of £0.450m relating to reducing children's residential placements, £0.066m adoption allowances and £0.036m external fostering placements, all of which are projected to overspend.</li> <li>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 savings in relation to day care for adults and older people. These savings of £0.138m are noted as blue as they will be achieved through vacancies rather than service design and are not included in the projected position as it is assumed they will be funded by Covid funding.</li> <li>iii) The confidence with some savings has reduced since the budget was set due to the ongoing impact of Covid-19, for example Care at Home related savings. These savings been superseded by the additional Scottish Government Funding.</li> </ul> <p>Appendix C (i) shows the full Transformation Plan for 2021/22 which has been agreed by the Transformation Board; the 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.</p> <p>Not all the service changes on the Transformation Plan have savings attached to them but there is an expectation that they will lead to service improvements. The Plan is critical to the ongoing sustainability and safety of service delivery and to supporting the delivery of financial balance in future.</p> <p>Appendix C (ii) provides an overview of those service changes which do have financial savings attached to them and the current BRAG status around the deliverability of each saving.</p> <p>The unachieved savings due to Covid-19 have been reflected in the overall projected outturn position as it is assumed the savings delays would be compensated with additional funding. The delays were included in the mobilisation plan return to the Scottish Government.</p>
2.11	<p><b>Budget Changes</b></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><b>Reductions Requiring Approval:</b></p> <ul style="list-style-type: none"> <li>1) Telephones – transfer of budget to corporate services - £0.053m.</li> <li>2) Recovery &amp; Renewal Funding - Eglinton Gardens transfer to Communities - £0.040m</li> </ul>

2.12	<b>NHS – Further Developments/Pan Ayrshire Services</b>
	<p><u>Lead Partnerships:</u></p> <p>The IJB outturn position is adjusted to reflect the impact of Lead Partnership services. During 2020-21 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 2021-22 pending further work 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 final outturn in relation to North Lead Partnership services would not be fully attributed to the North IJB as a share would be 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 9 the MH lead partnership is projected to underspend by £0.254m (£0.083m NRAC share for East and £0.078m for South).</p> <p><b>East HSCP</b> – projected underspend of £1.678m (£0.604m NRAC share for NA IJB - £0.047m favourable movement). The main areas of variance are:</p> <p>a) <u>Primary Care and Out of Hours Services</u></p> <p>There is a projected underspend of £1.352m on the Primary Care Lead Partnership budget. The projected underspend includes savings in Dental Services due to reduced service provision with an anticipated increase in staffing costs going forward. There are reduced projected costs in Ayrshire Urgent Care Services (AUCS) with work being undertaken to cross charge costs related to the Covid-19 pandemic against the Local Mobilisation Plan (Community Clinical Hub). The projected underspend on AUCS assumes a similar level of cross charging from August until December this year with further consideration of the Covid-19 position at that stage. The level of GP activity will continue to be closely monitored going forward. Savings in Primary Care contract administration are also contributing to the projected underspend. This projected underspend is the anticipated outturn position based on all available information at month 9. Activity continues to be extremely fluid and the delegated budget will continue to be closely monitored with movements highlighted in future reports to the three Ayrshire IJBs.</p> <p>It is anticipated that the Primary Care Improvement Fund will outturn on budget. The sum of £1.272m has been brought-forward as an earmarked balance within the IJB Reserve and will be used to meet initial East Ayrshire spending plans and priorities being taken forward to meet agreed outcomes. Sums of £0.935m and £0.732m have been brought-forward from 2020/21 by North and South Ayrshire IJBs respectively to meet their own priorities and outcomes.</p> <p><u>Prison and Police Healthcare (Lead Partnership)</u></p> <p>The £0.338m projected underspend is largely due to net staffing savings. In addition, the medical contracts at both Prison and Police have reduced and is contributing to the projected underspend.</p>

	<p><b>South HSCP</b> – projected overspend of £0.021m – no movement (£0.008m NRAC share for NAHSCP). The overspend is mainly due to an overspend in the community store and continence service offset by vacancies in the Family Nurse Partnership.</p> <p><b><u>Set Aside:</u></b></p> <p>The budget for set aside resources for 2021-22 is assumed to be in line with the amount for 2020/21 (£33.054m) inflated by the 2.8% baseline uplift. The 2020/21 value was based on 2019/20 activity as 2020/21 was not considered representative.</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 draft Q2 set aside update for 2021/22 has been issued to IJBs. A method of capturing up to date local activity and pricing it for set aside calculations is now in place, subject to IJB review and refinement.</p> <p>The annual budget for Acute Services is £378.5m. The directorate is overspent by £1.8m, caused by overspends on agency medical and nursing staff, as well as overtime and bank usage. These have been required due to the level of operational pressure being experienced, in common with many other areas in Scotland at present.</p> <p>There is a material underlying deficit caused by:</p> <ul style="list-style-type: none"> <li>• Unachieved efficiency savings</li> <li>• High expenditure on medical and nursing agency staff, high rates of absence and vacancy causing service pressure</li> <li>• High numbers of delayed discharges</li> </ul> <p>The IJBs and the Health Board have submitted Remobilisation Plan 4 outlining further measures to maintain service and improve performance. The £300m nationally announced investment will also be used to address service pressures in acute through increased investment in community.</p>
	<b>COVID-19 – FINANCE MOBILISATION PLAN IMPACT</b>
2.13	<b>Summary of position</b>
	<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 were submitted to the Scottish Government on a regular basis during 2020-21, on the premise that any additional costs aligned to mobilisation plans would be fully funded. This process has continued during 2021-22. 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, however, the most recent update from the Scottish Government is that the costs including reasonable unachieved savings will be fully funded.</p>

2.14

Mobilisation Plan

The initial 2021-22 mobilisation plan cost submission was submitted in February and estimated the costs to be £5.481m to March 2022. The quarter 3 return updated these costs to £8.850m. The costs remain estimates as the situation continually evolves and there will be a further update submitted after quarter 4.

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

Service Area	Initial 2021-22 Return £m	Quarter 1 Update £m	Quarter 2 Update £m	Quarter 3 Update £m	Change from Q2 £m
Payments to Providers	0.750	2.421	2.119	2.854	0.735
PPE	2.000	2.000	0.581	0.472	(0.109)
Additional Staff	1.459	1.901	3.704	3.309	(0.395)
Mental Health	1.172	1.172	0.000	0.000	0.000
Loss of Income	0.100	0.430	0.480	0.569	0.089
Unachieved Savings	-	0.138	0.138	0.138	0.000
Children & Families	-	-	0.949	0.914	(0.035)
Other Areas	-	0.217	0.396	0.594	0.198
<b>TOTAL</b>	<b>5.481</b>	<b>8.279</b>	<b>8.367</b>	<b>8.850</b>	<b>0.483</b>

The most recent changes to estimated costs are in relation to:

- Increased sustainability payments to providers to reflect recent claims including some backdated claims;
- Reduced PPE costs as more PPE is being sourced from the national hub at no cost; and
- Reduced staff costs to reflect that some costs can now be met from other sources.

2.15

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.

The Scottish Government are continuing to work with Health Boards and IJBs to review and further revise financial estimates. This will allow identification of the necessary additional support required with an expectation that an allocation to bring funding up to 100% will be provided. On this basis the overall financial risk to the IJB for 21-22 is minimised. The main risk remaining being if costs increase significantly by the year-end, this is being quantified as part of the quarter 3 return and will be closely monitored until the year end.

2.16

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. The Scottish Government ceased these payments at the end of October 2021. 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 backdated claims; 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 December.

PROVIDER SUMMARY	NCHC Care Homes	Other	Total
Total Number of Providers	17	49	66
Number contacting NAC	17	30	47
Providers Supported to date	17	20	37

OUTSTANDING CLAIMS	NCHC Care Homes	Other	Total
Total Number of Claims	26	6	32
Value of Claims	707,784	163,305	871,089

<b>SUPPORT PROVIDED</b>	<b>NCHC Care Homes</b>	<b>Other Services</b>	<b>TOTAL</b>
	<b>£</b>	<b>£</b>	<b>£</b>
Occupancy Payments up to October 2021	1,099,145	0	1,099,145
Staffing	503,894	92,510	596,405
PPE, Infection Control	294,020	88,500	382,520
Other	104,291	54,016	158,307
<b>TOTAL</b>	<b>2,001,350</b>	<b>235,026</b>	<b>2,236,376</b>

Arrangements for support have been agreed alongside guidance which sets out the criteria that need to be met for financial support, the approach for payment for care that cannot be delivered, the categories of additional costs which may be met, the approach to evidencing additional costs and key principles for requesting and making payments. The key principles of this ongoing support include:

- Understanding the reasons why care cannot be delivered, only Covid related impacts can be funded through sustainability payments;
- The 'planned care' approach of continuing to pay for undelivered care has been removed and providers and HSCPs will be required to explore opportunities for creatively delivering services in a different way, temporarily re-deploy staff into other HSCP services (voluntarily), where this is not possible providers will be required to access national supports in the first place, including the potential to furlough staff;
- Where payment for undelivered care is agreed as the only option this will be at a reduced level depending on the type of service, for example for care homes subject to the NCHC occupancy payments will be made at 80% of the rate for all vacancies, this is dependent on care homes continuing to admit new residents where it is clinically safe to do so;
- The Social Care Staff Support Fund will remain in place to ensure all staff receive their full pay during a Covid related absence; and
- Additional reasonable costs that are incurred as a result of Covid which cannot be covered from other funding sources will be reimbursed, including for example PPE, infection prevention control and additional staffing costs.

The current financial sustainability principles (excluding care home occupancy payments), guidance and criteria have now been extended until 31 March 2022. It is unclear at this stage if a further extension will be announced.

## 2.17 **RESERVES**

The IJB reserves position is outlined in the table below.

The 'free' general fund balance of £4.151m is held as a contingency balance, this equates to around 1.6% of the IJB budget for 2021-22 so remains short of the target of 2% but does demonstrate significant progress towards establishing a contingency reserve.



£1.486m is held by the Council to support a further repayment of debt in 21-22 and this is not reflected in the financial projection. This position will continue in future years until the debt is cleared.

	General Fund Reserves		Earmarked Reserves		Total
	Debt to NAC £m	Free GF £m	SG Funding £m	HSCP £m	£m
<b>Opening Balance - 1 April 2021</b>	<b>(3.807)</b>	<b>4.151</b>	<b>5.487</b>	<b>0.681</b>	<b>6.512</b>
Prior Year Adjustment	-	-	1.245	-	1.245
<b>Revised Opening Balance</b>	<b>(3.807)</b>	<b>4.151</b>	<b>6.732</b>	<b>0.681</b>	<b>7.757</b>
<b>Earmarked as follows:</b>					
: Primary Care Improvement Fund			0.935		
: Mental Health Action 15			0.224		
: Alcohol and Drugs Partnership			0.336		
: Community Living Change Fund			0.513		
: Covid Funding			4.724		
: Challenge Fund				0.500	
: 2021-22 Budget Gap				0.181	

### 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 2021-22 from within the available resource, thereby limiting the financial risk to the funding partners.

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 2021-22.

### 4. IMPLICATIONS

<b>Financial:</b>	The financial implications are as outlined in the report. Against the full-year budget of £270.191m there is a projected underspend of £1.283m (0.5%). The report outlines the main variances for individual services.
<b>Human Resources:</b>	The report highlights vacancy or turnover savings achieved to date. Services will review any staffing establishment plans

	and recruitment in line with normal practice when implementing service change and reviews as per agreement with the IJB, there is no intention to sustain this level of staffing capacity reduction on a recurring or planned basis.
<b>Legal:</b>	None
<b>Equality:</b>	None
<b>Children and Young People</b>	None
<b>Environmental &amp; Sustainability:</b>	None
<b>Key Priorities:</b>	None
<b>Risk Implications:</b>	Within the projected outturn there are various over and underspends including the non-achievement of savings.
<b>Community Benefits:</b>	None

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

<b>5.</b>	<b>CONSULTATION</b>
5.1	<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>
<b>6.</b>	<b>CONCLUSION</b>
6.1	<p>It is recommended that the IJB:</p> <p>(a) notes the overall integrated financial performance report for the financial year 2021-22, the overall projected year-end underspend of £1.283m;</p> <p>(b) notes the progress with delivery of agreed savings; and</p> <p>(c) note the remaining financial risks for 2021-22, including the impact of remaining Covid-19 estimates and costs.</p>

**For more information please contact:**

**Paul Doak, Head of Finance and Transformation at [pdoak@north-ayrshire.gov.uk](mailto:pdoak@north-ayrshire.gov.uk) or Eleanor Currie, Principal Manager – Finance at [eleanorcurrie@north-ayrshire.gov.uk](mailto:eleanorcurrie@north-ayrshire.gov.uk)**

2021-22 Budget Monitoring Report–Objective Summary as at 31<sup>ST</sup> December 2021

## Appendix A

Partnership Budget - Objective Summary	2021/22 Budget									Over/ (Under) Spend Variance at Period 7	Movement in projected variance from Period 7
	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	62,167	60,908	(1,259)	17,648	17,868	220	79,815	78,776	(1,039)	(666)	(373)
: Locality Services	25,718	25,611	(107)	5,249	5,399	150	30,967	31,010	43	203	(160)
: Community Care Service Delivery	30,334	29,784	(550)	0	0	0	30,334	29,784	(550)	(410)	(140)
: Rehabilitation and Reablement	1,764	1,949	185	1,471	1,451	(20)	3,235	3,400	165	115	50
: Long Term Conditions	2,322	1,588	(734)	8,734	8,991	257	11,056	10,579	(477)	(420)	(57)
: Integrated Island Services	2,029	1,976	(53)	2,194	2,027	(167)	4,223	4,003	(220)	(154)	(66)
MENTAL HEALTH SERVICES	25,687	26,497	810	57,519	57,185	(334)	83,206	83,682	476	75	401
: Learning Disabilities	19,714	20,756	1,042	474	474	0	20,188	21,230	1,042	775	267
: Community Mental Health	5,093	4,853	(240)	1,593	1,543	(50)	6,686	6,396	(290)	(422)	132
: Addictions	880	888	8	1,400	1,370	(30)	2,280	2,258	(22)	(24)	2
: Lead Partnership Mental Health NHS Area Wide	0	0	0	54,052	53,798	(254)	54,052	53,798	(254)	(254)	0
CHILDREN & JUSTICE SERVICES	32,916	34,189	1,273	3,974	3,974	0	36,890	38,163	1,273	1,052	221
: Irvine, Kilwinning and Three Towns	3,640	3,589	(51)	0	0	0	3,640	3,589	(51)	(80)	29
: Garnock Valley, North Coast and Arran	2,021	1,987	(34)	0	0	0	2,021	1,987	(34)	(64)	30
: Intervention Services	1,675	1,672	(3)	347	347	0	2,022	2,019	(3)	(4)	1
: Care Experienced Children & Young people	21,603	23,094	1,491	0	0	0	21,603	23,094	1,491	1,282	209
: Quality Improvement	1,295	1,163	(132)	0	0	0	1,295	1,163	(132)	(84)	(48)
: Public Protection	0	0	0	0	0	0	0	0	0	0	0
: Justice Services	2,429	2,429	0	0	0	0	2,429	2,429	0	0	0
: Universal Early Years	253	255	2	3,201	3,201	0	3,454	3,456	2	2	0
: Lead Partnership NHS Children's Services	0	0	0	426	426	0	426	426	0	0	0
PRIMARY CARE	0	0	0	49,510	49,510	0	49,510	49,510	0	0	0
ALLIED HEALTH PROFESSIONALS			0	6,923	6,799	(124)	6,923	6,799	(124)	(124)	0
COVID NHS	0	0	0	1,211	1,211	0	1,211	1,211	0	0	0
MANAGEMENT AND SUPPORT COSTS	5,565	4,547	(1,018)	7,071	6,655	(416)	12,636	11,202	(1,434)	(888)	(546)
OUTTURN ON A MANAGED BASIS	126,335	126,141	(194)	143,856	143,202	(654)	270,191	269,343	(848)	(551)	(297)
Return Hosted Over/Underspends East	0	0	0	0	83	83	0	83	83	83	0
Return Hosted Over/Underspends South	0	0	0	0	78	78	0	78	78	78	0
Receive Hosted Over/Underspends South	0	0	0	0	8	8	0	8	8	8	0
Receive Hosted Over/Underspends East	0	0	0	0	(604)	(604)	0	(604)	(604)	(604)	0
OUTTURN ON AN IJB BASIS	126,335	126,141	(194)	143,856	142,767	(1,089)	270,191	268,908	(1,283)	(986)	(297)

## Detailed Variance Analysis on a Managed Basis

## Appendix B

	Budget £000's	Outturn £000's	Over/ (Under) Spend Variance £000's	
<b>COMMUNITY CARE AND HEALTH</b>	<b>79,815</b>	<b>78,776</b>	<b>(1,039)</b>	
Locality Services	30,967	31,010	43	<p><b>Older People care homes inc respite and charging order income</b> - net underspend of £0.341m based on 765 permanent placements and a projection of a further 5 places each month to 31 March 22 with average cost applied to 50% of Gross &amp; Interim funded places &amp; full cost applied to the remainder. No current plans for return to use of Care Home Respite.</p> <p><b>Independent Living Services :</b></p> <p>* Residential Packages - overspend of £0.235m, a favourable movement of 0.083m from P7 based on 37 packages.</p> <p>* Community Packages (physical disability) - overspend of £0.073m an adverse movement of £0.044m from P7 based on 49 packages.</p> <p><b>District Nursing</b> - overspend of £0.130m largely due to additional supplies.</p>
Community Care Service Delivery	30,334	29,784	(550)	<p><b>Care at Home</b> (inhouse &amp; purchased ex Arran) - online following the application of Covid funding, Winter Pressures funding and the recently announced Scottish Govt funding.</p> <p><b>Day Care</b> - projected to underspend by £0.359m due to holding vacancies whilst the service has been closed.</p>
Rehabilitation and Reablement	3,235	3,400	165	<b>Adaptations</b> budget projected overspend of £0.157m, an adverse movement of £0.046m from P7 due to additional demand and increased costs.
Long Term Conditions	11,056	10,579	(477)	<p><b>Carers Centre</b> - underspend of £0.861m a favourable movement of £0.200m from P7.</p> <p><b>Anam Cara</b> - projected online after applying £0.139m of Scottish Govt funding for interim care.</p>
Integrated Island Services	4,223	4,003	(220)	<b>GP Services</b> - projected underspend of £0.167m due to a refunded charge made in March 2021 in error.
<b>MENTAL HEALTH SERVICES</b>	<b>83,206</b>	<b>83,682</b>	<b>476</b>	
Learning Disabilities	20,188	21,230	1,042	<p><b>Residential Packages</b>- overspend of £0.590m based on 36 current packages.</p> <p><b>Community Packages (inc direct payments)</b> - overspend of £0.625m based on 350 current packages.</p>
Community Mental Health	6,686	6,396	(290)	<b>Community Packages ( inc direct payments) and Residential Packages</b> - underspend of £0.241m based on 99 community packages, 11 Direct Payments and 28 residential placements.
Addictions	2,280	2,258	(22)	Outwith the threshold for reporting
Lead Partnership (MHS)	54,052	53,798	(254)	Net underspend on lead partnership activities.
<b>CHIDREN'S AND JUSTICE SERVICES</b>	<b>36,890</b>	<b>38,163</b>	<b>1,273</b>	
Irvine, Kilwinning and Three Towns	3,640	3,589	(51)	<p><b>Transport Costs</b> - Projected underspend £0.015m, no movement from P7</p> <p><b>Cornerstone Respite</b> - Projected underspend £0.035m, Adverse movement of £0.012m from P7</p>
Garnock Valley, North Coast and Arran	2,021	1,987	(34)	Outwith the threshold for reporting

	Budget £000's	Outturn £000's	Over/ (Under) Spend Variance £000's	
Intervention Services	2,022	2,019	(3)	Outwith the threshold for reporting
Care Experienced Children & Young People	21,603	23,094	1,491	<p><b>Looked After Children placements</b> - Overall Projecting online which is a £0.003m Adverse movement from P7 which is made up of the following:-</p> <p><b>Kinship</b> - Projected overspend of £0.097m, which is an adverse movement of £0.032m from P7 .Budget for 353 placements, actual no of placements is 363.</p> <p><b>Adoption</b> - Projected overspend of £0.099m, adverse movement of £0.004m from P7 Budget for 57 Placements, actual no of placements is 69.</p> <p><b>Fostering</b> - Projected underspend of £0.207m, which is a favourable movement of £0.012m from P7 Budget for 131 placements, actual no of placements is 117</p> <p><b>Fostering Xtra</b> - Projected underspend £0.160m, Favourable movement of £0.024m from P7 Budget for 33 placements, actual no of placements is 26.</p> <p><b>Fostering Respite</b> - Projected underspend of £0.017m, no movement since P7</p> <p><b>Private fostering</b> - Projected overspend of £0.159m, Favourable movement of £0.004m from P7 Budget for 10 placements, current no of placements is 13</p> <p><b>CDIS Community Packages</b> - Projected underspend of £0.040m, which is a favourable movement of £0.017m from P7, current no of packages is 90</p> <p><b>CDIS Direct Payments</b>- Projected underspend of £0.046m, which is a favourable movement of £0.007m from P7, current no of packages is 36</p> <p><b>Residential School placements</b> - Projecting overspend £2.131m, however 4 Placements costing £0.783m will be funded from COVID Monies resulting in a Projected overspend of £1.340m which is an Adverse movement of £0.059m from P7 Current no of placements is 23. (Which includes 2 Secure Placements)</p> <p><b>Children's Residential Respite</b> - Projected overspend of £0.387m, which is an adverse movement of £0.142m from P7</p> <p><b>Children's CDIS Residential Placements</b> - Projected underspend of £0.146m which is a Adverse movement of £0.082m from P7, current no of placements is 6</p>
Head of Service - Children & Families	1,295	1,163	(132)	<b>Third Party payments</b> - Projected underspend of £80k, which is a favourable movement of £0.010m from P7
Quality Improvement	0	0	0	Outwith the threshold for reporting
Justice Services	2,429	2,429	0	Outwith the threshold for reporting
Universal Early Years	3,454	3,456	2	Outwith the threshold for reporting
Lead Partnership NHS Children's Services	426	426	0	Outwith the threshold for reporting
PRIMARY CARE	49,510	49,510	0	Outwith the threshold for reporting
ALLIED HEALTH PROFESSIONALS	6,923	6,799	(124)	Underspend on non employee costs
MANAGEMENT AND SUPPORT	12,636	11,202	(1,434)	Underspend in relation to 1) unscheduled care funding, 2) an over recovery of payroll turnover and 3) slippage in transition funding and 4) living wage funding.
<b>TOTAL OUTTURN ON A MANAGED BASIS</b>	<b>268,980</b>	<b>268,132</b>	<b>(848)</b>	

Threshold for reporting is + or - £50,000

## 2021/22 Transformation Plan

North Ayrshire Health and Social Care Partnership

2021/22 Savings

## Appendix C(i)

Savings reference number	#	Description	Approved Saving 2021/22 £
<b>Children, Families and Justice Services</b>			
SP/HSCP/20/1	1	Children and Young People - External Residential Placements	450,000
SP/HSCP/20/4	2	Adoption Allowances	66,000
SP/HSCP/20/19	3	Fostering - reduce external placements.	36,000
SP/HSCP/20/5	4	Community Support - Children's Care Packages	8,000
TBC A	5	Locality Based teams	
TBC B	6	Childrens RosayIn House	
NACSTA4030	7	Fostering Short Breaks	
TBC C	8	Unaccompanied asylum children - to be confirmed	
TBC D	9	The Promise	
<b>Mental Health</b>			
TBC E	10	Integration of LD/MH Teams	50,000
SP-HSCP-20-9	11	Learning Disability Day Services	88,000
SP-HSCP-20-14	12	Mental Health - Flexible Intervention Service	8,000
TBC F	13	Rehab Model/ Stepdowm from woodland view	
TBC G	14	Perinatal Mental Health model	
TBC H	15	Unschedule Care hub	
TBC I	16	LD Adult Respite Delivery at Red Rose House	
TBC J	17	Community MDT Model	
TBC K	18	ACORN busines model	
NAC/4168	19	Self Harm Project	
NAC/4185	20	Peer Support	
NAC/4257	21	IPA (Employment)	
TBC L	22	Elderly Mental Health Phase 3	
<b>Health and Community Care</b>			
TBC M	23	Care Homes	500,000
TBC N	24	TEC Solutions	150,000
SP/HSCP/20/17	25	Care at Home - Reablement Investment	300,000
TBC O	26	Care at Home - Review	135,000
SP/HSCP/20/20	27	Day Centres - Older People	50,000
SP/HSCP/20/21	28	Charging Policy - Montrose House	50,000
TBC P	29	Community elderly MH Team Model	
TBC Q	30	NHS Beds Complex Care MH Beds	
TBC R	31	Pallative care and EOL business case	
TBC S	32	develop care at home minimum dataset	
TBC T	33	Occupational Therapy Review	
TBC U	34	Analogue to digital	
<b>Partnership Wide</b>			
TBC V	35	Supported acc models - NAC housing/ Sleepover/ outreach model	204,000
TBC W	36	Complex Care Model - Independent living change fund	
TBC X	37	Adult Complex care model - CM2000	
TBC Y	38	Payroll Turnover Inflation	57,000
TBC Z	39	Review of Admisinistrative Systems and Processes	150,000
SP/HSCP/20/22	40	Transport	50,000
TBC AA	41	Charging Policy - Inflationary Increase	50,000
TBC AB	42	North Payroll Turnover Inflation	10,000
TBC AC	43	North Elderly Mental Health inpatients (lead partnership)	116,000
TBC AD	44	HSCP Challenge Fund - invest to save	
TBC AE	45	Transitions	
TBC AF	46	Caring for Ayrshire prioritisation list	
TBC AG	47	SDS/ Carers Review	
TBC AH	48	Adult Review of Social Care	

**Total**

**2,528,000**



## 2021-22 Savings Tracker

## Appendix C (ii)

Savings ref number	Description	Deliverability Status at budget setting	Approved Saving 2021/22 £m	Deliverability Status Month 9	Saving Delivered @ Month 9 £m	Projected to Deliver during Year £m	Projected Shortfall £m	Comment
<b>Children, Families &amp; Criminal Justice</b>								
1	Children and Young People - External Residential Placements	Green	0.450	Red	-	-	0.450	Currently projecting an overspend. Further focus session arranged.
2	Adoption Allowances	Green	0.066	Red	-	-	0.066	Currently projecting an overspend.
3	Fostering - Reduce external placements	Green	0.036	Red	-	-	0.036	Currently projecting an overspend.
4	Community Support - Children's Care Packages	Green	0.008	Blue	0.008	-	-	Achieved
<b>Mental Health and LD Services</b>								
5	Integration of LD/ MH Teams	Green	0.050	Blue	0.050	-	-	Achieved
6	Learning Disability Day Services	Green	0.088	Blue	0.088	-	-	Delayed due to Covid-19 but will be achieved due to vacant posts
7	Mental Health - Flexible Intervention Service	Green	0.008	Blue	0.008	-	-	Achieved
<b>Health and Community Care</b>								
8	Care Homes	Green	0.500	Green	0.375	0.125	-	Small overspend projected - covid funding re delayed discharges.
9	TEC Solutions	Green	0.150	Blue	0.150	-	-	Ability to make savings in this area whilst responding to the pandemic are limited. The saving is shown as achieved as the overall overspend on care at home will be funded by the additional Scottish Government funding.
10	Care at Home - Reablement Investment	Green	0.300	Blue	0.300	-	-	
11	Care at Home - Review	Green	0.135	Blue	0.135	-	-	
12	Day Centres - Older People	Green	0.050	Blue	0.050	-	-	Delayed due to Covid-19 but will be achieved due to vacant posts
13	Charging Policy - Montrose House	Green	0.050	Green	0.038	0.012	-	Will be achieved.
<b>Whole System</b>								
14	Payroll Turnover Inflation	Green	0.057	Blue	0.057	-	-	Achieved
15	Business Support Review	Green	0.150	Amber	0.120	-	0.030	Small shortfall but work continuing to identify further savings.
16	Supported Accommodation	Amber	0.204	Blue	0.204	-	-	Not achieved but included in the projected outturn.
17	Transport	Green	0.050	Blue	0.050	-	-	Achieved
18	Charging Policy - Inflationary Increase	Green	0.050	Blue	0.050	-	-	Achieved
<b>TOTAL SOCIAL CARE SAVINGS</b>			<b>2.402</b>		<b>1.683</b>	<b>0.137</b>	<b>0.582</b>	

Savings ref number	Description	Deliverability Status at budget setting	Approved Saving 2021/22 £m	Deliverability Status Month 9	Saving Delivered @ Month 9 £m	Projected to Deliver during Year £m	Projected Shortfall £m	Comment
19	Payroll Turnover Inflation	Green	0.010	Blue	0.010	0	0	Achieved
20	Elderly Mental Health inpatients (lead partnership)	Green	0.116	Blue	0.116	0	0	Achieved
TOTAL HEALTH SAVINGS			0.126		0.126	0.000	0.000	
TOTAL NORTH HSCP SAVINGS			2.528		1.809	0.137	0.582	

## 2021-22 Budget Reconciliation

## Appendix D

COUNCIL	Period	Permanent or Temporary	£'m
Initial Approved Budget			100.065
Base budget adjustments	1		(0.053)
Resource Transfer	1	P	21.086
BSL Budget Correction	2	P	(0.005)
941 x CAH O365 Licences (6 months)	2	P	(0.017)
Summer Play Funding	4	T	0.042
Education Contribution - Roslin House	5	T	0.311
MH INVESTMENT - EM FUNDS	5	T	0.445
Computer Lines Budget Transfer WAN	6	P	(0.002)
£500 Payment reimburse other departments	6	T	(0.054)
Commercial Waste - Corporate Adjustment	7	T	0.020
Occupational Health Recharges	7	P	(0.121)
Commercial Waste - Corporate Adjustment	8	T	0.007
Wages Uplift Funding - £10.02	9	T	0.866
Fin Circ 9/2021 Living Wage £9.50	9	T	0.861
Fin Circ 9/2021 MH Recovery and Renewal	9	T	0.068
Fin Circ 9/2021 Care at Home Winter Plan	9	T	1.719
Fin Circ 9/2021 Interim Care	9	T	1.109
National Trauma Training	9	T	0.050
Scottish Disability Assistance	9	T	0.028
Telephones - Corporate	9	P	(0.053)
Recovery & Renewal Funding - Eglinton Gardens transfer to Community Gardens	9	T	(0.040)
Roundings	9	T	0.003
<b>Budget Reported at Month 9</b>			<b>126.335</b>
HEALTH	Period	Permanent or Temporary	£'m
<b>Initial Approved Budget</b>			<b>154.659</b>
Resource Transfer			(21.086)
Month 10-12 Adjustments			18.437
Adjust for Non recurring funding			(20.435)
Full Year effect of Part Year Reductions			(0.057)
RX Return to reserves			1.027
Additional 1.3% Uplift			1.324
RX Cres			(0.828)
<b>REVISED 21-21 BUDGET</b>			<b>133.041</b>
Anticipate Trauma Funding	3	P	0.375
Anticipate Vet 1st Point - North Hscp	3	T	0.105
Anticipate Nsais Funding	3	P	0.634
Podiatry Re-align	3	P	0.678
RX Uplift 21.22	3	P	0.756
RX Uplift 21.22 NR	3	P	0.396
DOAC REVERSAL DRUG-NORTH	3	P	0.100
Funding transfer to Acute (Medical Records)	3	P	(0.034)

HEALTH	Period	Permanent or Temporary	£'m
Specialist Pharmacist in Substance Misuse	3	P	0.012
Public Health Outcomes Bundle	3	P	0.242
Training Grade Funding	3	P	(0.044)
District Nursing Funding	3	P	0.119
Respiratory Rapid Response	3	P	(0.078)
Hd56 Action 15 Tranche 1	3	P	1.180
Hd69 Mat & Neo Psychol Interv	3	P	0.123
Hd70 Perinatal & Infant Mh	3	P	0.303
Hd7 Mh Recovery And Renewal	3	T	2.393
Hd8 Mh Support For Hosp Covid	3	T	0.103
North Hscp Covid Rmp3 M1-3	3	T	0.158
North Hscp Covid M1-3	3	T	0.034
Diabetes Prevention	4	T	0.040
Iona/Lewis Patient	4	T	(0.046)
North TEC contribution	4	T	(0.053)
ANP Allocation - MIN	4	T	0.020
Long Covid Funding	4	T	0.400
Covid-19 Service Funding North	4	T	0.283
Veterans 1st Point	4	T	0.028
Training Grade Funding	5	P	0.029
PCRS CRES	5	P	(0.044)
ADP Funding -Recurring	5	P	0.366
ADP Funding -Non-Recurring	5	T	0.744
Covid-19 Service Funding North	5	T	0.147
Training Grade Funding	6	P	0.001
Hd301-camhs Improve-ipc	6	P	0.122
Hd302-camhs Improve-ihtt	6	P	0.148
Hd303-camhs Improve-ld, F & S	6	P	0.052
Hd304-camhs Improve-ooH U/care	6	P	0.086
Hd305-camhs Improve-liaison	6	P	0.129
Hd306-camhs Improve-neuro	6	P	0.226
Non Fatal O'dose Fr East	6	T	0.053
Hd264-emerg Covid-eat Disorders	6	T	0.328
Community Store Funding To Sth	6	P	(0.017)
Covid-19 Service Funding North	6	T	0.082
Training Grade Funding	7	P	(0.021)
GMS Premises to East	7	P	(0.140)
Community Store Funding To Sth-corr	7	P	(0.001)
Covid-19 Service Funding North	7	T	0.108
Winter Funding Excl Covid-19	7	T	0.112
Pay Award - Band 8A+	7	P	0.080
Roundings	7	T	(0.002)
<b>Budget Reported at Month 9</b>			<b>143.856</b>
<b>COMBINED BUDGET MONTH 9</b>			<b>270.191</b>

## Mobilisation Submission – Quarter 3

Total Covid-19 Costs														
£000s		April	May	June	July	August	September	October	November	December	January	February	March	2021-22 Revenue Total
Additional PPE		167	167	167	0	0	0	(13)	(3)	(3)	(3)	(3)	(3)	472
Contact Tracing		0	0	0	0	0	0	0	0	0	0	0	0	0
Testing		0	0	0	0	0	0	0	0	0	0	0	0	0
Covid-19 Vaccination		0	0	0	0	0	0	0	0	0	0	0	0	0
Flu Vaccination		0	0	0	0	0	0	0	0	0	0	0	0	0
Scale up of Public Health Measures		0	0	0	0	0	0	0	0	0	0	0	0	0
Additional Community Hospital Bed Capacity		0	0	0	0	0	0	0	0	0	0	0	0	0
Community Hubs		0	0	0	0	0	0	0	0	0	0	0	0	0
Additional Care Home Placements		0	0	0	0	0	0	0	0	0	0	0	0	0
Additional Capacity in Community		81	81	139	182	149	149	144	141	140	140	140	140	1,626
Additional Infection Prevention and Control Costs		5	1	3	(0)	(9)	0	0	0	0	0	0	0	0
Additional Equipment and Maintenance		0	0	0	0	0	19	1	17	4	0	0	0	41
Additional Staff Costs		40	42	155	171	131	145	168	168	167	167	167	162	1,683
Staff Wellbeing		0	0	0	0	0	0	0	0	0	0	0	0	0
Additional FHS Prescribing		0	0	0	0	0	0	0	0	0	0	0	0	0
Additional FHS Contractor Costs		6	9	8	7	7	11	0	8	12	11	11	12	102
Social Care Provider Sustainability Payments		422	422	422	163	143	157	165	192	192	192	192	192	2,854
Social Care Support Fund Claims		0	0	0	0	0	0	0	0	0	0	0	0	0
Payments to Third Parties		0	0	0	0	0	0	0	0	0	0	0	0	0
Homelessness and Criminal Justice Services		0	0	0	0	0	0	0	0	0	0	0	0	0
Children and Family Services		18	18	18	18	18	18	445	72	72	72	72	72	914
Loss of Income		50	50	50	33	33	33	91	48	47	44	45	44	569
Other		0	0	0	25	7	50	(37)	6	6	6	6	6	75
<b>Total Covid-19 Costs</b>		<b>788</b>	<b>790</b>	<b>962</b>	<b>598</b>	<b>479</b>	<b>582</b>	<b>965</b>	<b>649</b>	<b>637</b>	<b>629</b>	<b>630</b>	<b>625</b>	<b>8,336</b>
Unachievable Savings		23	23	23	23	23	23	0	0	0	0	0	0	138
Offsetting Cost Reductions		0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Total Covid-19 Costs - HSCP - NHS</b>		<b>811</b>	<b>813</b>	<b>985</b>	<b>621</b>	<b>502</b>	<b>605</b>	<b>965</b>	<b>649</b>	<b>637</b>	<b>629</b>	<b>630</b>	<b>625</b>	<b>8,474</b>
		0	0	-	0	0	-	0	-	-	0	-	-	0
Total Remobilisation Costs														
£000s		April	May	June	July	August	September	October	November	December	January	February	March	2021-22 Revenue Total
Adult Social Care		0	0	0	0	0	0	0	0	0	0	0	0	0
Reducing Delayed Discharge		0	0	0	19	19	19	19	19	19	88	88	87	376
Digital & IT costs		0	0	0	0	0	0	0	0	0	0	0	0	0
Primary Care		0	0	0	0	0	0	0	0	0	0	0	0	0
Other		0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Total Remobilisation Costs</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>19</b>	<b>19</b>	<b>19</b>	<b>19</b>	<b>19</b>	<b>19</b>	<b>88</b>	<b>88</b>	<b>87</b>	<b>376</b>
		-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total HSCP Costs</b>		<b>811</b>	<b>813</b>	<b>985</b>	<b>640</b>	<b>521</b>	<b>624</b>	<b>984</b>	<b>668</b>	<b>656</b>	<b>717</b>	<b>718</b>	<b>712</b>	<b>8,850</b>