
NORTH AYRSHIRE COUNCIL

25 September 2018

Audit and Scrutiny Committee

Title: **HSCP Financial Performance**

Purpose: To provide an update on the financial performance of the HSCP for 2018-19 and to provide a partnership response to the points raised at Cabinet on 4 September 2018

Recommendation: To note the financial position of the HSCP and the actions being taken by the Partnership to secure financial balance.

1. Executive Summary

- 1.1 The budget monitoring report as at July 2018 notes a forecast year-end overspend of £1.770m for the North Ayrshire HSCP, of this £0.306m relates to Health Services and £1.464m relates to Social Care Services. The Integration Scheme requires the IJB to approve and implement a financial recovery plan to address any forecast overspend. The report approved by the IJB on 13 September includes the required plan to address the projected overspend.
- 1.2 The Council's Executive Director of Finance & Corporate Support reported the financial position of the partnership to Cabinet on 4 September, this outlined the position for the first quarter and highlighted to Cabinet a number of areas where assurance should be sought from the partnership to minimise or mitigate the financial risk exposure to the Council.

2. Background

- 2.1 This report follows on from the report to Cabinet in relation to the HSCP financial position for 2018-19 (Cabinet 4 September) and the further update on the financial position provided to the IJB on 13 September. The report includes an overview of the financial position and a partnership response to the points raised to Cabinet.
- 2.2 Included in Appendix 1 is the HSCP Budget Monitoring report at July 2018-19, the report includes detail of variances, progress with savings and plans to mitigate the projected overspend. The most notable points are:
- A forecast year-end overspend of £1.770m for the North Ayrshire HSCP, of this £0.306m relates to Health Services and £1.464m relates to Social Care Services;
 - An estimated shortfall of £2.678m of savings delivered compared to the requirement, £1.632m of which relates to legacy NHS CRES targets;
 - The Integration Scheme requirement for the IJB to implement a financial recovery plan to address any forecast overspend, the report includes this plan as required;

- Further work required on a pan-Ayrshire basis to develop a framework to report the financial position and risk sharing arrangements in relation to hosted Health services;
- The plan agreed by Cabinet to address the deficit from previous years of £5.807m over the next four years.

2.3 The IJB will receive monthly financial monitoring reports and the impact of the financial recovery plan will be monitored as part of this to identify if there is a requirement for further action to be taken to address any projected overspend and ultimately to mitigate against the risk of overspend on the IJB funding partners.

2.4 The report to Cabinet on 4 September submitted by the Executive Director (Finance and Corporate Support) titled Revenue Budget 2018-19, Financial Performance to 30 June 2018 included the IJB financial monitoring report as at June 2018 as an appendix. Cabinet approved a number of actions in relation to the HSCP, these are noted below:

1. Seek assurance that the issues identified in the budget management audit have been addressed fully and that budget holders are clear about their responsibility to deliver services within their delegated budget.
2. Request that the IJB reaffirms its ability to secure financial balance in 2018/19 by delivering committed savings and through the mitigating action outlined in the report or through an alternative plan if the former is not achieved.
3. Request the IJB to submit its medium term financial plan and if required recovery plan.
4. Approve application of the £1.497m recurring element of 2017/18 challenge fund monies to support the financial sustainability of the HSCP by repaying its debt to the Council.

2.5 These actions were agreed by Cabinet, the partnership response to each point is noted below:

1. A progress update in relation to the review of operational budget management within the HSCP was provided to the Audit and Scrutiny Committee on 29 May 2018. This report outlined that all actions were complete with the exception of the action in relation to the further development of the Challenge Fund investment. This included completed actions in relation to training for budget holders, approval restrictions, guidance for budget holders and communication in relation to budget decisions. A plan for investment of the remaining challenge fund resource is under development and is expected to be finalised in the coming months.
2. The financial monitoring report outlines the financial position and the financial recovery plan actions required to bring this position back into balance.
3. The IJB approved the financial recovery plan on 13 September, progress against the plan will be monitored as part of the ongoing financial monitoring and further actions will be identified where necessary. A budget outlook report will be presented to the IJB to outline the estimated budget gap from 2019-20 to 2021-22, thereafter the updated Medium Term Financial Plan will be presented to the IJB for approval, this updated plan will include the service change required to plan for a balanced budget.

4. The impact of the £1.497m is noted in the IJB report and will allow the IJB to repay the historic debt to the Council over a four year period.

3. Proposals

- 3.1 That the Committee notes the financial position of the partnership, the plans in place to address the projected overspend and notes the responses to the points raised at Cabinet.

4. Implications

Financial:	The HSCP are currently forecasting a projected overspend for 2018-19, the IJB approved a financial recovery plan to address this position and this will be kept under review. There is a financial risk for funding partners (Council and Health Board) if the partnership are not able to deliver financial balance and the partnership will continue to work towards mitigating this risk.
Human Resources:	None
Legal:	None
Equality:	None
Children and Young People:	
Environmental & Sustainability:	None
Key Priorities:	Effective financial management and governance arrangements by the HSCP will mitigate the financial risk to funding partners and support the delivery of services from within the available resources.
Community Benefits:	None

5. Consultation

- 5.1 This report has been discussed with the Executive Director of Finance and Corporate Support for North Ayrshire Council.



Stephen Brown
Executive Director (HSCP)

For further information please contact Caroline Whyte on 01294 324954.

Background Papers

Revenue Budget 2018/19: Financial Performance to 30 June 2018 (Cabinet, 4 September 2018)

Operational Budget Management in the Health and Social Care Partnership (Audit and Scrutiny Committee, 29 May 2018)

Integration Joint Board 13 September 2018

Subject: **Budget Monitoring – Month 4 (July 2018)**

Purpose: To provide an update on the projected financial outturn for the financial year as at July 2018.

Recommendation: It is recommended that the IJB:

- a) Notes the projected year-end overspend of £1.770m;
- b) Notes the remaining unidentified savings balance;
- c) Approves the mainstreaming of services funded from the Integrated Care Fund;
- d) Approves the financial recovery plan; and
- e) Notes the financial position will continue to be closely monitored with a further update to the IJB in October.

Glossary of Terms	
NHS AA	NHS Ayrshire and Arran
HSCP	Health and Social Care Partnership
MH	Mental Health
CAMHS	Child & Adolescent Mental Health Services
BRAG	Blue, Red, Amber, Green
UNPACS	UNPACS, (UNPlanned Activities) – Extra Contractual Referrals
ARG	Allocation of Resources Group
CRES	Cash Releasing Efficiency Savings

1.	EXECUTIVE SUMMARY
1.1	This report reflects the position as at 31 July 2018. The report provides an overview of the financial position 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 by the IJB that although this report refers to the position at the July 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 is a year-end overspend of £1.770m for 2018-19, taking account a number of mitigating actions outlined in the report. It remains to be relatively early in the financial year therefore there is scope for this position to fluctuate due to in-year cost and demand pressures and assumptions in relation to funding and the achievement of savings. The position as at June was a projected overspend of £1.4m and it was noted at that time if there was no improvement that a financial recovery plan would be developed and presented to the IJB for approval. This is required by the Integration Scheme and a financial recovery plan is included in this report.

1.3	<p>The main areas of pressure continue to be care homes including respite placements, looked after children, Learning Disability care packages, elderly and adult in-patients within the lead partnership and the unallocated NHS CRES savings.</p> <p>The main adverse movements from period 3 are in relation to care homes (respite), care at home and physical disability care packages. The main favourable movements are in relation to care homes (permanent placements), LD care packages and income from charging orders.</p>
1.4	<p>The projected financial position assumes that the remaining balance of unallocated CRES for 2018-19 (£1.632m) will not be met in 2018-19. Work is ongoing with NHS AA to identify appropriate savings against this target. The Health Board indicated that this will be taken forward on a corporate basis, however the budget has been delegated to the IJB and on that basis this is being taken forward by the HSCP and will be co-ordinated by the Transformation Board with any decisions being referred to the IJB.</p>
1.5	<p>It is essential that the IJB operates within the delegated budget and commissions services from the Council and Health Board on this basis. Financial balance has not been delivered in previous years and in the new financial year there is a projected overspend position. More needs to be done to ensure the financial sustainability of the partnership and to deliver financial balance for the current year. The service transformation programme and the delivery of the those service changes will require to be at the forefront as this will have the greatest impact on the delivery of financial balance and the ongoing sustainability and safety of services</p> <p>The current arrangements are in the process of being reviewed to ensure that the HSCP can operate effectively in a way to positively support delivery and the IJB will be kept up to date on progress with this work.</p>
2.	BACKGROUND
2.1	<p>The report follows on from the approval of the budget to monitoring the delivery against those plans. 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, actions required to work towards financial balance and a recovery plan.</p>
3.	FINANCIAL PERFORMANCE
3.1	<p>Against the full-year budget of £230.917m there is a projected overspend of £1.770m (0.8%).</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>

3.2	Health and Community Care Services
	<p>Against the full-year budget of £65.427m there is a projected overspend of £1.042m (1.6%). The main reasons for the projected overspend are:</p> <ul style="list-style-type: none"> a) Care home placements including respite placements – projected to overspend by £1.693m. This is an adverse movement of £0.097m from period 3 due to increased use of respite placement (£0.326m adverse movement) offset by a reduction in the projected spend for permanent placements (favourable movement £0.229m). b) Independent Living Services are projected to overspend by £0.305m. c) Over-recovery of Charging Order income of £0.290m. d) Packages of care are projected to overspend by £0.236m due to the high use of supplementary staffing. e) Care at home (purchased and in house) projected underspend of £0.513m. The underspend has reduced due to recruitment of staff, which will provide capacity in community services. The projection currently assumes that £0.228m of Challenge Fund savings will not be made but work is ongoing to achieve this saving. f) Long Term Conditions – projected overspend of £0.132m which is mainly due to an overspend in employee costs of £0.345m in Ward 1 to ensure staffing levels are at a safe level. This is a recurring pressure for which funding requires to be identified.
3.3	Mental Health Services
	<p>Against the full-year budget of £72.290m there is a projected overspend of £0.173m (0.2%). The main reasons for the projected overspend are:</p> <ul style="list-style-type: none"> a) Learning Disabilities – projected overspend £0.501m which is mainly due to care packages. b) Community Mental Health – is projected to underspend by £0.316m mainly due to vacancy savings an underspend in care packages. c) Lead Partnership – projected overspend of £0.148m which consists of: <ul style="list-style-type: none"> i. Adult inpatients – projected overspend of £0.312m which is mainly due to the delay in generating income from other areas in respect of forensic beds. All of the beds are expected to be sold and in use by the end of 2018. ii. UNPACS – is projected to underspend by £0.230m on the assumption that there will be two new care packages in year and the charge for the three year service level agreement for Rowanbank. The underspend is partially attributable to the availability and use of beds in ward 6 which have prevented more costly external placements.

	<div>iii. Elderly Inpatients – is projected overspend by £0.200m, accounting for an anticipated reduction in the use of supplementary staffing.</div> <div>iv. Learning Disabilities – is projected to underspend by £0.231m due to a delay in the transfer of an UnPACs patient.</div> <div>v. Psychiatry – is projected to overspend by £0.207m primarily due to locum costs and an unfunded EMH liaison post. There is an increased use of locum staff in the absence of being able to recruit permanent posts.</div>																					
3.4	Children’s Services and Criminal Justice																					
	<p>Against the full-year budget of £35.191m there is a projected underspend of £0.217m (0.6%). The main reasons for the projected underspend are:</p> <div><div>a) Residential Schools and Community Placements – projected overspend of £0.345m. The projection is based on the current number of placements and estimated discharge dates for each placement based on targeting the support from the Challenge Fund investment. There is a risk that the overspend will increase if the discharge dates are delayed.</div><div>b) Looked After Children Placements – projected underspend of £0.280m due to the current demand for fostering, adoption and kinship payments.</div><div>c) Early Years – are projected to underspend by £0.142m mainly due to the level of vacancies with health visiting and the assumed level of recruitment.</div></div>																					
3.5	<p>There are a number of areas across all services which have been reported as variances for a period of time. A review of the budget allocations across services is being progressed to ensure budgets are aligned to current and future spending plans and to ensure that the financial reporting is enabling those operationally managing budgets, Heads of Service and ultimately the IJB are focussed on the main issues.</p>																					
3.6	Primary Care - Prescribing <p>Against a full year budget of £49.875m primary care prescribing and general medical services are projected to be on-line. The GP prescribing uplift is an interim figure based on NRAC and will change once the detailed practice level budgets have been calculated.</p>																					
3.7	CRES update <table><tr><td></td><td>Permanent or Temporary</td><td>£ 000’s</td></tr><tr><td>CRES Saving brought forward</td><td></td><td>2.557</td></tr><tr><td>Arrol Park employee costs</td><td>T</td><td>(0.250)</td></tr><tr><td>Payroll turnover target increase</td><td>T</td><td>(0.215)</td></tr><tr><td>Addictions</td><td>P</td><td>(0.400)</td></tr><tr><td>Children’s services employee costs</td><td>P</td><td>(0.060)</td></tr><tr><td>Balance still to be achieved in 2018-19</td><td></td><td>1.632</td></tr></table>		Permanent or Temporary	£ 000’s	CRES Saving brought forward		2.557	Arrol Park employee costs	T	(0.250)	Payroll turnover target increase	T	(0.215)	Addictions	P	(0.400)	Children’s services employee costs	P	(0.060)	Balance still to be achieved in 2018-19		1.632
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Balance still to be achieved in 2018-19		1.632																				

	<p>Of the £1.632m still to be achieved £0.986m is allocated to the Lead Partnership for Mental Health and the balance of £0.646m is aligned across all other services and is reported against Management and Support costs.</p> <p>The financial projections currently assume that these savings will not be identified, however work is underway to identify opportunities for both recurring and non-recurring savings to offset the remaining target. Any further savings identified would reduce the overall partnership projected overspend.</p> <p>Delivery of the recovery plan outlined in appendix E will partly offset the balance still to be achieved, where there are opportunities to convert financial recovery actions to recurring savings.</p>
3.8	Integrated Care Fund
	<p>The Integrated Care Fund was additional funding allocated to IJBs through Health Boards from 2015-16 onwards, this funding was to be directed to projects and initiatives to support the delivery of the service change required to achieve the Strategic Plan priorities and outcomes. The funding was intended to be non-recurring investment and therefore was directed at a number of initiatives and tests of change and the financial allocations were tracked and managed separately to mainstream budgets.</p>
	<p>A process has been in place to assess the priority of projects and the impact to ensure the best use of the resource, a number of projects have been delivered over an extended period of time and are delivering good outcomes. The Scottish Government previously baselined the funding through the NHS budget, and therefore to IJBs. A report was presented to the IJB in December 2017 which outlined the outcome of a review of a number of projects where recommendations were made on the continuation of funding and a number of initiatives were baselined at that time.</p>
	<p>A summary of the services being supported by the funding is provided in Appendix D. It has become apparent that many of the services are no longer initiatives or projects and are now part of business as usual for the partnership. Services have a number of similar service delivery arrangements in place as part of core business which are not subject to the same separate reporting arrangements.</p>
	<p>It is recommended that the IJB approve that as the ICF funding is no longer ring fenced that it is treated as part of the mainstream budget and the reporting and monitoring of expenditure and outcomes will be monitored as part of the normal course of business. The services will be monitored and managed in the same way as other services, i.e. through the commissioning process or as part of overall service re-design and change programme. Affording services the flexibility to manage as part of mainstream service delivery will allow services to give partner organisations clarity in relation to future funding allocations and will provide assurance to a number of staff employed on fixed term contracts.</p>
3.9	Lead Partnerships
	<p><i>North Ayrshire HSCP</i></p> <p>Services managed under Lead Partnership arrangements by North Ayrshire Health and Social Care Partnership are projected to be £0.051m underspent, this includes the allocation of the unachieved CRES target carried forward.</p>

	<p>South Ayrshire HSCP</p> <p>Services managed under Lead Partnership arrangements by South Ayrshire Health and Social Care Partnership are projected to be on-line. The Allied Health Professions budget will be managed differently from 2018-19 with the budget delegated back to the three Partnerships. The split of the AHP budget (approximately £20.0m) has still to be finalised and a report on this will be presented to all three IJBs in due course.</p>
	<p>East Ayrshire HSCP</p> <p>Services managed under Lead Partnership arrangements by East Ayrshire Health and Social Care Partnership are projected to overspend by £1.108m.</p> <p>The overall Primary Care Lead Partnership projected overspend is £1.211m and this mainly relates to additional payments within Primary Medical Services to GP practices currently experiencing difficulty. This pressure was offset in the previous financial year by non-recurring savings.</p>
	<p>Further work is being taken forward to develop a framework to report the financial position and impact of risk sharing arrangements across the 3 partnerships in relation to hosted or lead service arrangements. This is to ensure the IJB are fully sighted on the impact for the North Ayrshire partnership. The IJB will be kept informed of progress with this work which is being progressed by the Ayrshire Partnership Finance Leads.</p>
3.10	<p>Set Aside</p> <p>The Integration Scheme makes provision for the Set Aside Budget to be managed in-year by the Health Board with any recurring over or under spend being considered as part of the annual budget setting process.</p> <p>The 2018-19 set aside budget for North HSCP is £28.055m, based on expenditure in 2017-18. The acute directorate, which includes the areas covered by the set aside budget, is overspent by £4.7m after 4 months. The projected year-end position information has not been made available.</p> <p>129 additional and unfunded beds were open at the 31st March 2018. This had reduced to 35 by the 31st July 2018. There are clear plans in place to reduce these in a phased manner ensuring continuation of service and patient safety.</p> <p>During 2017-18 the North Partnerships use of the set aside resources was £28.055m against the NRAC 'fair share' of £26.563m which is £1.492m above the 'fair share'. There is an expectation that the North Partnership will move towards its 'fair share'. Further work is required to ensure that the Set Aside budget is operating in line with Scottish Government expectations and is operating in the way required to ensure the IJB can have the desired impact on the whole pathway of care.</p>

3.11 Savings Progress

- a) The 2018-19 budget included £4.003m of savings plus £2.557m of carried forward NHS CRES savings.

BRAG Status	Position at Budget Approval £m	Position at Period 4 £m
Red	3.148	2.928
Amber	0.519	0.419
Green	2.893	1.097
Blue	0.000	2.116
TOTAL	6.560	6.560

- b) The projected year-end outturn position assumes that the following savings will not be delivered as planned and this is reflected in the overall projected outturn position.
- i. Reduction in care home places £0.391m
 - ii. Challenge Fund – physical disability care packages £0.200m
 - iii. Challenge Fund – reablement £0.181m
 - iv. Business Support Review, seconded posts and planning and development team £0.144m
 - v. Capping of respite £0.070m
 - vi. NHS CRES savings carried forward £1.692m
- TOTAL £2.678m**

If progress is made to deliver the savings this would improve the overall outturn position.

A Transformation Board has been established to provide oversight and governance to the programme of service change. A focus of the Board will be to ensure services and plans in place to deliver savings and service change, with a solutions focussed approach to bringing programmes back on track.

The projected position at July 2018 assumes that all remaining savings on the plan will be delivered. The progress with savings requires to be closely monitored to ensure the impact on the financial position can be assessed and corrective action taken where necessary. Appendix C provides full detail on the savings.

3.12 Financial Recovery Plan

The projected outturn at June was an estimated year-end overspend of £1.4m, when reported to the IJB it was noted that a financial recovery plan would require to be implemented if there was no improvement to that position. Given that the forecast year-end overspend has increased a recovery plan has been prepared for approval by the IJB.

The Integration Scheme requires the preparation of a recovery plan if an overspend position is being projected to plan to bring overall service delivery back into line with the available resource.

	<p>The financial recovery plan is included in Appendix E. This includes specific targeted actions with a focus on addressing pressure areas, for these actions there is an estimated financial impact or benefit of £1.2m. The plan as it currently stands would not impact on front line service delivery in terms of any policy changes and can be implemented as part of day to day management of services. There are a number of additional actions noted on the plan for which the financial impact cannot be quantified at this stage but these actions are expected to contribute positively to the financial position.</p> <p>The plan will be an iterative document to remain under review. Progress with the financial recovery plan will be monitored against to ensure it has the required impact and this will feature in future reporting to the IJB. There is a risk that if the planned impact is not achieved that further actions will require to be added to the plan and these may include actions that would impact on the quality and performance of front line services.</p>
3.13	<p>The IJB are aware of the deficit from previous years totalling £5.807m which has been carried forward into 2018-19. This amount represents cumulative overspends from previous years which have not been funded by North Ayrshire Council. This amount is effectively a debt to the Council which requires to be repaid. An approach to this repayment is essential to ensure the ongoing financial sustainability of the partnership.</p> <p>As part of the budget process for 2017-18 a challenge fund totalling £4m was created in partnership with the Council for investment to assist with delivery of service change. Of this £1.497m represented investment by the partnership on a recurring basis, funded through the delivery of savings.</p> <p>This resource remains available to the HSCP and will be applied to effectively repay the debt. Repayment will commence in 2018-19, and assuming financial balance is delivered by the partnership, this will mean the debt will be fully repaid over the next 4 years. This will remove the requirement to include additional savings in the budget outlook for future years to accommodate the repayment and provides some assurance re the financial sustainability of the partnership.</p>
3.14	<p>Partnership Wide Actions</p> <p>A number of immediate actions/priorities are being taken forward to manage the financial position, including:</p> <ul style="list-style-type: none"> • continuing to work with services in relation to unidentified funding; • the medium term financial strategy will be refreshed and presented to the IJB; • the action plan from the budget management audit is being rolled out to ensure operational budget management arrangements are tightened to improve financial performance; • scrutiny and assurance over the projected outturn position for 2018-19, ensuring the reliability of financial projections and that all management action is identified and implemented to improve the position where possible; • implement the financial recovery plan and monitor progress against this; • establishing the Transformation Board; • prioritise and align programme management support from the change team on areas with the greatest financial impact / benefit; • reviewing finance support to services;

	<ul style="list-style-type: none"> • develop effective reporting of progress with service change programmes, with clear timescales and targets; and • commencement of planning for the 2019-200 budget.
4.	<u>Anticipated Outcomes</u>
4.1	<p>Continuing to closely monitor the financial position will allow the IJB to take correction action where required to ensure the partnership can deliver services in 2018-19 from within the available resource, thereby limiting the financial risk the funding partners, i.e. NAC and NHS AA.</p> <p>The transformational change programme will have the greatest impact on the financial sustainability of the partnership, the IJB require to have a clear understanding of progress with plans and any actions that can be taken to bring the change programme into line.</p>
5.	<u>Measuring Impact</u>
5.1	Updates to the financial position will be reported to the IJB throughout 2018-19.
6.	IMPLICATIONS

Financial :	<p>The financial implications are as outlined in the report.</p> <p>Against the full-year budget of £230.917m there is a projected overspend of £1.770m (0.8%).</p> <p>The report outlines the action being taken and proposed action to reduce the projected overspend.</p> <p>The recovery plan totals £1.255m and a number of other actions are being progressed to reduce the overspend further.</p> <p>There is a financial risk to the IJB in relation to Lead Partnerships managed by East and South but this is unclear at this stage.</p>
Human Resources :	None
Legal :	None
Equality :	None
Environmental & Sustainability :	None
Key Priorities :	None
Risk Implications :	If the financial recovery plan does not deliver the required improvement to the financial position there is a risk that further actions will require to be identified and service quality and performance may be compromised to achieve financial balance.
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	X

7.	CONSULTATION
7.1	<p>This report has been produced in consultation with relevant budget holders and the Partnership Senior Management Team.</p> <p>The report is shared with the Director of Finance for NHS Ayrshire and Arran and the Executive Director Finance and Corporate Support for North Ayrshire Council.</p>
8.	CONCLUSION
8.1	<p>It is recommended that the IJB:</p> <ul style="list-style-type: none"> a) Notes the projected year-end overspend of £1.770m; b) Notes the remaining unidentified savings balance; c) Approves the mainstreaming of services funded from the Integrated Care Fund; d) Approves the financial recovery plan; and e) Notes the financial position will continue to be closely monitored with a further update to the IJB in October.

For more information please contact:

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2018-19 Budget Monitoring Report – Objective Summary as at 31 July

Appendix A

Partnership Budget - Objective Summary	2018/19 Budget									2018/19	
	Council			Health			TOTAL			Over/ (Under) Spend Variance at Period 3	Movement in projected budget variance from Period 3
	Budget	Projected Outturn	Projected Over/ (Under) Spend Variance	Budget	Projected Outturn	Projected Over/ (Under) Spend Variance	Budget	Projected Outturn	Projected Over/ (Under) Spend Variance		
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
COMMUNITY CARE AND HEALTH	53,740	54,560	820	11,687	11,909	222	65,427	66,469	1,042	245	797
: Locality Services	24,756	26,297	1,541	4,178	4,266	88	28,934	30,563	1,629	1,237	392
: Community Care Service Delivery	25,793	25,239	(554)	0	0	0	25,793	25,239	(554)	(989)	435
: Rehabilitation and Reablement	1,150	1,119	(31)	1,435	1,335	(100)	2,585	2,454	(131)	(140)	9
: Long Term Conditions	1,736	1,603	(133)	4,316	4,581	265	6,052	6,184	132	174	(42)
: Integrated Island Services	305	302	(3)	1,758	1,727	(31)	2,063	2,029	(34)	(37)	3
MENTAL HEALTH SERVICES	23,342	23,865	523	49,948	49,598	(350)	73,290	73,463	173	494	(321)
: Learning Disabilities	18,000	18,620	620	477	358	(119)	18,477	18,978	501	701	(200)
: Community Mental Health	4,057	3,995	(62)	1,925	1,671	(254)	5,982	5,666	(316)	(267)	(49)
: Addictions	1,285	1,250	(35)	1,226	1,173	(53)	2,511	2,423	(88)	(88)	0
: Lead Partnership Mental Health NHS Area Wide	0	0	0	46,320	46,396	76	46,320	46,396	76	148	(72)
CHIDREN'S AND JUSTICE SERVICES	31,677	31,609	(68)	3,514	3,365	(149)	35,191	34,974	(217)	(103)	(114)
: Intervention Services	3,743	3,751	8	303	322	19	4,046	4,073	27	(145)	172
: Looked After & Accomodated Children	15,980	16,050	70	0	0	0	15,980	16,050	70	178	(108)
: Fieldwork	4,588	4,493	(95)	0	0	0	4,588	4,493	(95)	24	(119)
: CCSF	319	291	(28)	0	0	0	319	291	(28)	(18)	(10)
: Justice Services	2,898	2,898	0	0	0	0	2,898	2,898	0	0	0
: Early Years	321	306	(15)	2,838	2,711	(127)	3,159	3,017	(142)	(128)	(14)
: Policy & Practice	3,828	3,820	(8)	0	0	0	3,828	3,820	(8)	27	(35)
: Lead Partnership NHS Children's Services Area Wide	0	0	0	373	332	(41)	373	332	(41)	(41)	0
PRIMARY CARE	0	0	0	49,875	49,875	0	49,875	49,875	0	0	0
MANAGEMENT AND SUPPORT COSTS	5,057	5,243	186	145	654	509	5,202	5,897	695	689	6
CHANGE PROGRAMME	658	661	3	1,274	1,348	74	1,932	2,009	77	75	2
TOTAL	114,474	115,938	1,464	116,443	116,749	306	230,917	232,687	1,770	1,400	370

2018-19 Budget Monitoring Report – Detailed Variance Analysis per service

Appendix B

	Budget £000's	Projected Outturn £000's	Projected Over/ (Under) Spend Variance £000's	
COMMUNITY CARE AND HEALTH	65,427	66,469	1,042	
Locality Services	28,934	30,563	1,629	<p>Older People permanent care homes - permanent placements are projected overspend of £1.181m based on 849 placements (587 Nursing and 262 Residential) and an assumption that placements are on a one in one basis to the end of the year. Favourable movement of £0.229m, reduction of 15 places from prior month. Respite care projected overspend of £0.512m, adverse movement of £0.326m based on the spend to date and £0.130m expected reduction from reducing days.</p> <p>Independent Living Services :</p> <ul style="list-style-type: none"> * Direct Payment packages projected underspend of £0.074m on 63 current packages. * Indirect Payment packages no charges to date, projected underspend £0.045m based on prior year spend. * Adult respite care projected overspend £0.067m based on current spend to date. * Residential Packages projected underspend of £0.093m based on 32 current packages and an expected net decrease in packages of 1. * Community Packages (physical disability) overspend of £0.450m based on 64 current packages, and an increase of £0.022m expected in year from new packages. <p>Equipment Budget - £0.318m for equipment- projected online.</p> <p>Employee costs - projected £0.199m underspend: Money Matters structure approved resulting in part year vacancies.</p> <p>NHS Packages of Care - projected overspend of £0.236m due to high use of supplementary staffing.</p> <p>District Nursing - projected underspend of £0.112m assuming Band 6 vacancies are filled.</p> <p>Income from Charging Orders - over recovery of £0.290m expected as per previous 3 years trends.</p>
Community Care Service Delivery	25,793	25,239	(554)	<p>Care at home</p> <ul style="list-style-type: none"> - in house service - projected underspend of £0.329m based on current average costs continuing to the end of the year due to £0.227m of reablement savings removed and an increase in weekly hours of 534 from June. The prior projection assumed no increase in staff levels as per service . - Purchased Care at home - projected underspend of £0.184m based on current level of spend continuing to end of year. <p>Direct Payments - projected underspend of £0.050m based on 31 current packages plus a projected increase of placements in year of £0.008m less 10% expected recovery from underspent balances.</p> <p>Transport costs - projected overspend of £0.040m due to increase in staff mileage within care at home and ferry charges.</p> <p>Supplies & Services - projected overspend of £0.044m mainly due to CM2000 charges</p> <p>Admin costs - projected overspend of £0.070m mainly due to mobile phone equipment.</p> <p>Voluntary Organisations - projected overspend £0.064m (CLASP HOPE project £0.020m overspend and Alzheimer costs £0.044m overspend).</p> <p>Income - projected over recovery £0.135m based on current receipts increase in Community Alarm income.</p> <p>Other Employees - projected underspend of £0.046m</p>

	Budget £000's	Projected Outturn £000's	Projected Over/ (Under) Spend Variance £000's	
Rehabilitation and Reablement	2,585	2,454	(131)	Employee costs - projected underspend £0.106m due to vacancies
Long Term Conditions	6,052	6,184	132	Carers Centres - projected £0.107m underspend based on additional funding of £0.532m for Carers Strategy and no spend to date resulting in a projected underspend of 0.100m. Ward 1 - projected overspend of £0.345m assuming slight reduction in staffing levels continue. Ward 2 - projected underspend of £0.020m, assuming funding from East HSCP for Kirklandside Ward. Elderly CMHT - projected underspend of £0.058m assuming £0.020m of recruitment.
Integrated Island Services	2,063	2,029	(34)	Various minor over and underspends
MENTAL HEALTH SERVICES	73,290	73,463	173	
Learning Disabilities	18,477	18,978	501	Residential Packages - projected underspend of £0.126m based on current 37 packages £2.348m less 2% invoice variances. Community Packages - projected overspend of £0.526m based on current 336 packages less 9.75% invoice variances and a net movement in year of 10 new packages. Savings of £0.256m expected to be achieved. Direct Payments - projected overspend of £0.215m based on 41 current packages less 10% underspent balances and an expected increase of 7 packages in year. Employee costs - projected underspend £0.193m mainly due to vacant posts Income - projected under recovery of £0.100m based on current receipts and no income from Other LA's for use of Taigh Mor respite service.
Community Mental Health	5,982	5,666	(316)	Community Packages - projected underspend of £0.108m based on 100 packages less invoice differences plus a net increased of 1 package. Employee costs - projected underspend £0.254m mainly due to vacant posts Income - projected over recovery of £0.090m of charges to users, based on current YTD charges.

	Budget £000's	Projected Outturn £000's	Projected Over/ (Under) Spend Variance £000's	
Addictions	2,511	2,423	(88)	Addictions Team - projected underspend of £0.088m due to in year vacancies
Lead Partnership (MHS)	46,320	46,396	76	<p>Adult Community - projected underspend of £0.078m due to vacancies in the crisis team.</p> <p>Adult Inpatients- projected overspend of £0.312m assumes one bed sale from September, two from October and a further bed from January.</p> <p>UNPACs - projected to underspend by £0.230m. Assumption that there will be no change to NHS GG&C charge and there will be 2 new care packages in-year.</p> <p>LDS - projected to underspend by £0.231m due to delay in UNPACs transfer.</p> <p>Elderly Inpatients - projected to overspend by £0.200m. Projection assumes improvement from current position of £0.213m due to bed closures resulting in decrease in supplementary staffing spend.</p> <p>CAMHS - projected underspend is £0.209m, and assumes £0.050m of recruitment in-year.</p> <p>MH Admin - projected underspend of £0.94m. This figure may decrease with transfer of services to East and South.</p> <p>Psychiatry - projected to overspend by £0.207m, primarily due to locums. EMH Liaison post remains unfunded.</p> <p>MH Pharmacy - projected to underspend by £0.098m mainly within substitute prescribing due to the benefit on over-accrual in 2017-18.</p> <p>Psychology- projected to underspend by £0.380m, assuming £0.100m recruitment in-year.</p> <p>CRES target - projected overspend of £0.986m in relation to savings still to be identified.</p> <p>Projected underspends in other areas - include Associate Nurse Director budgets £0.042m, slippage on mental health allocations of £0.070m and resource transfer reserve £0.098m.</p>
CHILDREN'S SERVICES AND CRIMINAL JUSTICE	35,191	34,974	(217)	
Intervention Services	4,046	4,073	27	<p>Employee costs - projected underspend of £0.100m due part year vacancies,</p> <p>Careleavers - projected overspend of £0.048m based on supporting 9 leavers for rent payments and 25 for weekly payments..</p> <p>Supported Carers Scheme - projected overspend of £0.035m based on 5 carers supporting 6 children.</p> <p>Supplies and Services - £0.055m projected underspend based on prior year spend</p> <p>Third party payments - projected overspend £0.067m including Children 1st advocacy and Functional Family Therapy costs.</p>

	Budget £000's	Projected Outturn £000's	Projected Over/ (Under) Spend Variance £000's	
Looked After & Accom Children	15,980	16,050	70	<p>Looked After Children placements - projected underspend of £0.280m based on the following:-</p> <p>Kinship - projected overspend of £0.166m. Budget for 302 placements, currently 310 placements and projecting 330 by the year end.</p> <p>Adoption - projected underspend of £0.047m. Budget for 75 placements, currently 69 placements and projecting 71 by the year end.</p> <p>Fostering - projected underspend of £0.111m. Budget for 140 placements, currently 128 placements and projecting 140 placements by the year end.</p> <p>Fostering Xtra - projected underspend of £0.153m. Budget for 32 placements, currently 29 placements and projecting 32 by the year end.</p> <p>Private fostering - projected underspend of £0.113m. Budget for 16 placements, currently 10 placements and projecting to remain at 10 for the year.</p> <p>Fostering respite - projected underspend of £0.011m due to lower than anticipated respite.</p> <p>IMPACCT carers - projected underspend of £0.007m based on 3 carers providing support for full year.</p> <p>Adoption Fees - projected overspend of £0.070m due to external agency fees and 2 placements from other Councils.</p> <p>Residential School placements including community packages - projecting an overspend of £0.0345m. Projection based 2 current secure placements, one projected to November, one projected to December. 23 residential and community placements projected to leave, 1 in August, 1 in September, 5 in October, 4 in December, 4 in January with 8 placements to March 19.</p> <p>Remand budget of £100k, at present projection assumes this will be spent</p> <p>Employee Costs - projected underspend of £0.076m due to vacancies.</p>
Fieldwork	4,588	4,493	(95)	<p>Employee costs - projected underspend of £0.038m due to vacancies.</p> <p>Staff training - projected £0.028m underspend based on prior year spend.</p> <p>Family Respite Services - projected underspend of £0.127m based on current usage.</p> <p>Standby Service - projecting a £60k overspend, as per prior year spend.</p>
CCSF	319	291	(28)	Various minor over and underspends
Criminal Justice	2,898	2,898	0	Expected to come in line with budget
Early Years	3,159	3,017	(142)	Employee costs - projected underspend of £0.143m due to vacancies.
Policy & Practice	3,828	3,820	(8)	<p>Children with Disabilities community packages - projecting an underspend of £0.100m pending a review of the projections.</p> <p>Private Foster placements - projected overspend of £0.056m.</p> <p>Direct Payment packages - projecting overspend of £0.020m based on 40 packages and a 10% recovery of underspent balances.</p>
Lead Partnership (CS & CJ)	373	332	(41)	Immunisation - projected underspend of £0.041m which assumes unavailability of staff to undertake the schools flu programme this winter.

	Budget £000's	Projected Outturn £000's	Projected Over/ (Under) Spend Variance £000's	
PRIMARY CARE	49,875	49,875	0	No expenditure information available for 2018-19 so assumption is break-even until later in the year.
Management & Support Services	5,202	5,897	695	CRES savings - projected overspend of £0.646m relating to CRES savings still to be identified.
CHANGE PROGRAMME and challenge Fund	1,932	2,009	77	Projected overspend of £0.077m due to redeployed staff
TOTAL	230,917	232,687	1,770	

North Ayrshire Health and Social Care Partnership 2018/19 Savings

Appendix C

Council Commissioned Services

Service	Description	RAG Status at budget setting	Updated Rag Status	Gross Saving 2018/19 £000's	Net Saving 2018/19 £000's	Net Saving Projected to be Achieved at Period 4 £000's	Projected Shortfall
Children & Criminal Justice	Children & Criminal Justice Challenge Fund Projects - Investment in Universal Early Years	Green	Amber	100	47	47	-
Children & Criminal Justice	Children & Criminal Justice Challenge Fund Projects - School-based Approach to Reducing Looked After (LAC)/Looked After and Accommodated Numbers(LAAC)	Green	Green	200	106	106	-
Children & Criminal Justice	Children & Criminal Justice Challenge Fund Projects - Reduction in Needs for Residential School placements enhancing our community supports with a new team.	Green	Green	536	340	340	-
Children & Criminal Justice	Children & Criminal Justice Challenge Fund Projects - Expansion of the Multi Agency Assessment and Screening Hub (MAASH)	Green	Amber	37	26	26	-
Children & Criminal Justice	Reallocation of Partnership Forum budget with associated savings	Green	Green	40	40	40	-
Children & Criminal Justice	To reduce the Learning and Development team	Amber	Blue	75	75	75	-
Children & Criminal Justice	Reduction in Staffing	Green	Blue	25	25	25	-
Children & Criminal Justice	To discontinue the mentoring project for young people	Green	Green	25	25	25	-
Community Care & Health	Community Care & Health Challenge Fund Projects - Physical Disabiliites	Green	Red	200	200	-	200
Community Care & Health	Community Care & Health Challenge Fund Projects - Reablement	Green	Red	228	181	-	181
Community Care & Health	Reduction in staff from the Arran social work team	Amber	Blue	13	13	13	-
Community Care & Health	Withdrawal of funding to Crossroads, Largs	Green	Blue	14	14	14	-
Community Care & Health	Additional projected income	Green	Green	155	155	155	-
Community Care & Health	Harbour Centre Day Service, Alzheimers - closure of weekend service	Green	Amber	8	8	8	-
Community Care & Health	Reduction in Care Home Placements - proposal to reduce 25 placements.	Red	Red	391	391	-	391
Community Care & Health	Reduction in Care at Home	Red	Blue	200	200	200	-
Mental Health	Mental Health - Challenge Fund Projects	Green	Green	226	226	226	-
Mental Health	Redesign and recommission a mental health support service at a reduced cost.	Amber	Blue	30	30	30	-
Mental Health	Reduction in Caley Court Learning Disability Team.	Amber	Green	48	48	48	-

Service	Description	RAG Status at budget setting	Updated Rag Status	Gross Saving 2018/19 £000's	Net Saving 2018/19 £000's	Net Saving Projected to be Achieved at Period 4	Projected Shortfall
Mental Health	Reduction in staff at Hazeldene Day service	Amber	Green	35	35	35	-
Management & Support	Review all support secondments/posts which could be provided by parent organisations to the HSCP.	Amber	Red	50	50	-	50
Management & Support	Operational savings generated by the business support review.	Amber	Amber	150	150	93	57
Management & Support	Planning and Performance Team - reduction in staffing	Green	Red	37	37	-	37
Cross Service	Pilot Sickness Absence Taskforce within the HSCP	Green	Amber	100	75	75	-
Cross Service	Staff Mileage - 10% reduction across the partnership	Green	Amber	40	40	40	-
Cross Service	Bring forward phase 2 Challenge Fund savings from 2019/20 to 2018/19	Green	Red	250	250	250	-
Cross Service	Cap respite across all services to 35 days	Green	Amber	200	200	130	70
Change and Improvement	Change Team Restructure	Green	Blue	108	108	108	-
Change and Improvement	Integrated Care Fund - reduction in spend and discontinued projects	Green	Blue	218	218	218	-
TOTAL				3,739	3,313	2,327	986

NHS Commissioned Services

Appendix C

Service	Description	RAG Status at budget setting	Updated Rag Status	Gross Saving 2018/19 £000's	Net Saving 2018/19 £000's	Net Saving Projected to be Achieved at Period 4 £000's	Projected Shortfall
Change and Improvement	Integrated Care Fund - reduction in spend and discontinued projects	Green	Blue	242	242	242	-
Planning and Performance	Change Team Restructure	Green	Blue	108	108	108	-
Mental Health	Review of Psychology Services - Phase 2	Green	Blue	47	47	47	-
Mental Health	Prescribing - Secondary 1%	Amber	Blue	7	7	7	-
Mental Health	Add UNPACS 1%	Amber	Blue	23	23	23	-
Mental Health	Psychiatry 1%	Amber	Blue	55	55	55	-
Mental Health	Addictions 1%	Amber	Blue	13	13	13	-
Community Care & Health	Arran	Amber	Blue	20	20	20	-
Community Care & Health	Delayed Discharge Funding	Green	Blue	53	53	53	-
Community Care & Health	District Nursing Supplies	Green	Green	7	7	7	-
Community Care & Health	Reduction in staffing - Arran	Green	Green	30	30	30	-
Cross Service	Supplies	Green	Green	80	80	80	-
Cross Service	Transport	Green	Green	5	5	5	-
Cross Service	Savings carried forward from 2017/18	Red	Red	2,557	2,557	865	1,692
TOTAL				3,247	3,247	1,555	1,692
GRAND TOTAL				6,986	6,560	3,882	2,678

**INTEGRATED CARE FUNDING
2018/19 ALLOCATION**

APPENDIX D

Service	Budget Allocation	Update
British Red Cross - Home from Hospital	93,848	Previously mainstreamed.
TSI Capacity	36,000	Proposed to mainstream.
Independent Sector Development	21,000	Proposed to mainstream.
TSI Community Development	60,000	Proposed to mainstream.
Recovery Café	7,500	This work has been incorporated into the ADP programme.
Community Connectors	189,000	Mainstream 6 NAC Community Connector.
Community Connectors	31,500	Mainstream TSI Community Connector.
Early Intervention from Custody	22,500	Provision of part time rather than full time post, mainstream funding.
Hepatitis C Support	41,000	Now incorporated into the Alcohol and Drug Partnership Programme using peer worker support, award winners at HSCP awards.
Medication for Carers	15,774	Previously mainstreamed.
Post Diagnostic Support - Dementia	61,532	Previously mainstreamed.
Rehab Health and Wellbeing (HARP)	151,000	Enhance range of preventative approaches, including HARP, GP exercise referral, Falls Prevention, Social Hub exercise and Mind and Be Active.
Mind and be Active (KA Leisure)	121,220	Amalgamate into a single Health and Wellbeing Programme. This will provide support to additional diabetes patients, multimorbidity referrals, HARP classes
Dementia Training	39,189	Mainstream post as high demand for training to meet Dementia Strategy. East and South also fund similar role.
Falls Co-ordinator	10,866	Mainstream NHS Pan Ayrshire post
Falls trainer	14,000	Previously mainstreamed.
Medication for ICES	20,076	Previously mainstreamed.

Service	Budget Allocation	Update
LOTS Resource Workers	104,000	Administrative support play a key role in both the Local Operational Teams at locality level and the new Multidisciplinary Team development, roles are to be mainstreamed.
Telecare Technician	26,000	Mainstream post as continued growth in number of users of telecare technology and a speedier response being provided which is reducing risk.
Heart Failure Nurse (One third)	17,814	Pan Ayrshire role continues to deliver telecare for people affected by heart failure as a preventative and early intervention approach, role to be mainstreamed.
Engagement (Primary Care) / GP	8,000	Previously mainstreamed.
Locality Forums	35,000	Previously mainstreamed.
Participatory Budgeting	30,000	Previously mainstreamed.
Design Costs	10,000	Previously mainstreamed.
Advanced Nurse Practitioners x 2	95,112	Mainstream Ward 1 ANP and Rehabilitation ANP to support new model of care.
Services to Redburn	12,000	Work exclusively with traveller women and children who find accessing mainstream services challenging, proposed to mainstream.
Pan Ayrshire Sensory Impairment Service	15,800	Work with people experiencing complex sensory issues in their local communities rather than a hospital site. East and South also support this approach. Proposed to mainstream.
Arran District Nurse	30,000	Previously mainstreamed.
Community Phlebotomy Service	68,432	Proposed to mainstream.
Buckreddan Care Centre - GP sessions	33,000	Evaluation report demonstrates significant impact, mainstream and continue to work with the Primary Care team in East Ayrshire to explore as a Pan Ayrshire approach.
Joint Store - Project Manager	2,000	Funding ceased June 2018.
Hearing Aid Service	8,400	Proposed to mainstream.
Chest, Heart and Stroke	17,000	Proposed to mainstream.
See and Treat service	82,838	Propose mainstream 2 Mental Health Practitioners (1 three towns and 1 Kilwinning). The role out of ANP capacity is now part of the implementation plan for new GP contract.
Townhead / Fullarton / Eglinton Patient Transfer Support	34,000	Previously mainstreamed.
Change Team	607,707	Previously reduced, proposed to mainstream.
PCMH MDT pilot	8,411	New for 18-19 - to fund a team test site which integrates allocation and referral processes.
TOTAL	2,181,519	

Financial Recovery Plan (IJB Sept 2018)

Appendix E

Ref	Service Area	Recovery Action Proposed	£ 000's	Responsible Officer
1	Care Homes	Phased reduction in care home numbers as more people will be supported at home. This would focus on a reduction in residential care placements by utilising the capacity in community services (eg care at home, district nursing) to support people to remain supported in their own homes.	200	Donna McKee (David Rowland)
2	Learning Disability	From September there will be a full time care manager seconded to a dedicated learning disability review team. This will assist in achieving the planned Challenge Fund savings and contribute to the financial recovery plan.	100	Thelma Bowers
3	Learning Disability	Sleepovers - the current sleepovers are being reviewed to assess which could be provided using the existing out of hours responder service. There is not currently a savings target aligned to sleepover services.	100	Thelma Bowers
4	Learning Disability	Review of all 2:1 supports for clients, from reviews already undertaken a reduction has been delivered, plan to review remaining supports.	75	Thelma Bowers
5	Cross Service	Review of all transition cases (e.g. LD adults aged 65+) to ensure the appropriate care is provided (saving is estimate net of alternative care provision).	150	Thelma Bowers
6	Cross Service	Audit of compliance with the charging policy to ensure consistency of application across services.	50	Caroline Whyte
7	Carers	Increased demand for Respite services, contributing to overall overspend, use element of Carers Act funding for support for respite. Non recurring basis for 2018-19, reviewed as part of 2019-20 budget in line with plan for Carer's Act funding and implementation.	300	Donna McKee (David Rowland)
8	Equipment	Temporary reduction (2018-19 only) in the equipment budget due to the Challenge Fund investment being used to clear the waiting list. This will be kept under review together with any waiting lists and impact on delivery of community based services.	100	Donna McKee (David Rowland)
9	Adaptations	Temporary reduction (2018-19 only) in the adaptations budget. This will be kept under review together with any waiting lists and impact on delivery of community based services.	100	Donna McKee (David Rowland)
10	MH Inpatients	Current plans assume 4 bed sales to support service costs, actively market a 5th bed.	40	Thelma Bowers
11	Learning Disability	Cease payment of Resource Transfer for a historic arrangement in relation to one patient moving outwith NHS A&A.	40	Thelma Bowers
TOTAL			1,255	

Other actions being taken:

Ref	Service Area	Action	Responsible Officer
1	Learning Disability	Extension of CM2000 to adult services which will enable payment to care providers based on actual service delivered. Greatest potential impact will be from 2019-20.	Thelma Bowers
2	Learning Disability	Developing alternative approaches to personal assistant provision to accompany service users to social events	Thelma Bowers
3	Learning Disability	Developing alternative approaches to transport for service users to social events.	Thelma Bowers
4	Cross Service	The partnership vacancy scrutiny group continues to review all vacant posts which leads to non-recurring savings. This has been added to by the NHS also undertaking a workforce management review group.	Stephen Brown
5	Cross Service	The absence pilot approved by the IJB in August may lead to reduced sickness rates and associated reduced absence related costs.	Julie Davis
6	Mental Health	A review and redesign of Elderly Mental Health wards is being undertaken. There will be no savings in 2018-19 but outcome may reduce the projected overspend.	Thelma Bowers
7	Commissioned services	Review all outstanding contractual uplifts	Caroline Whyte

2018/19 Budget Reconciliation

Appendix F

COUNCIL	Period	Permanent or Temporary	Budget £000's
Initial Approved Budget	2		92,353
Resource Transfer	2	P	22,219
ICF Procurement Posts - Transfer to Procurement	2	T	(89)
Additional Pension Costs	4	P	(9)
Period 4 reported budget			114,474

HEALTH	Period		Budget £000's
Initial Approved Budget (including estimated pay award funding)	2		138,638
Resource Transfer	2	P	(22,219)
GIRFEC – Health Visitors	3	P	47
Remove estimated pay award			(1,496)
Actual pay award			1,462
Specialist Pharmacist upgrade			11
Period 4 reported budget			116,443

GRAND TOTAL	230,917
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