

	Integration Joint Board 20 June 2019
Subject:	2018-19 Year-end Financial Performance
Purpose:	To provide an overview of the IJB's financial performance for the year 2018-19 and the implications for the IJB's overall financial position.
Recommendation:	It is recommended that the IJB:
	 (a) notes the overall integrated financial performance report for the financial year 2018-19 and the overall reported year-end underspend of £0.945m; (b) approves the budget changes outlined at section 2.9; (c) approves the earmarking of £0.277m of reserves to reinstate specific ring-fenced Scottish Government funding and to allocate the remaining uncommitted surplus balance of £0.668m to commence repayment of the outstanding debt to North Ayrshire Council; and (d) notes the positive improvement in the IJB financial position and the plans to improve the financial projections for social care services.

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
CRES	Cash Releasing Efficiency Savings
NES	NHS Education Scotland – education and training body
NRAC	NHS Resource Allocation Committee
ADP	Alcohol and Drugs Partnership

1. EXECUTIVE SUMMARY

1.1 This report provides an overview of the financial position for the partnership and outlines the unaudited year-end outturn position for 2018-19. The outturn is an overall year-end underspend of £0.945m. This position includes the £1.486m budget being held on behalf of the IJB by the Council for debt repayment, as this required to be transferred back to the IJB at the financial year-end. Prior to this transfer overall the IJB would have been overspent.

1.2 The overall underspend of £0.945m is prior to earmarking £0.277m of ring-fenced funds for future use, these funds will be held in IJB reserves. This results in a remaining uncommitted surplus balance of £0.668m which can be used to commence repayment of the debt owed to North Ayrshire Council for prior year deficits. 1.3 Prior to the £1.486m set aside for debt repayment being reallocated to the partnership the IJB were working towards financial balance in-year which would have enabled the full amount to be allocated towards the debt at the year-end. The full repayment was not possible due to variations between financial projections and actual costs for social care services at the year-end. There are discrete areas of focus to improve financial projections in future years to ensure this situation does not re-occur, a summary of actions is included in this report with a more detailed plan being remitted to the Performance and Audit Committee. 1.4 Overall the main pressure areas continue to be care homes, looked after children, learning disability care packages, elderly and adult inpatients within the lead partnership and the unallocated NHS CRES savings. The approved balanced IJB budget for 2019-20 includes plans to address a number of areas of overspend and in some areas the work undertaken during 2018-19 to improve the financial position will have a greater impact on future years. 1.5 The final unaudited IJB outturn position is adjusted to reflect the impact of Lead Partnership services. During 2018-19 agreement was reached that the outturn for all Lead Partnership services would be shared across the 3 partnerships on an NRAC basis. Prior to any reallocation across the Lead Partnerships, on a managed basis the North Ayrshire HSCP delivered an overall underspend of £1.5m for the services the HSCP are operationally responsible for delivering. The underspend in relation to North Lead Partnership services is not be fully attributed to the North HSCP as a share has been allocated to East and South HSCPs, similarly the impact of the outturn on East and South led services has been shared with North. 1.6 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, significant progress has been made during 2018-19 to ensure the ongoing financial sustainability of the partnership. This work will continue and be built upon going into 2019-20. Key successes include: Repayment of the outstanding debt to the Council has commenced, although • less than the planned £1.5m there remains a substantial contribution to the outstanding debt; On an HSCP managed basis the partnership delivered an underspend of £1.5m, this reflects the impact of financial management arrangements and controls across all services directly managed by the HSCP; 2018-19 is the first year where the year-end IJB position has been accounted for in a truly integrated way with resource shifting from the NHS budget to offset Social Care pressures; Overall reported surplus allows for the earmarking and protection of ring-٠ fenced funding for Scottish Government priorities; Savings totalling £4m were delivered in-year, against an approved plan of £4.9m and delivering more against the red risk status savings than anticipated at the start of the year; Progress with reducing financial overspends in 2018-19 which will have an impact on the financial plans and sustainability for future years.

2018-19 UNAUDITED BUDGET OUTTURN POSITION
The report provides an overview of the financial position for the partnership and outlines the unaudited year-end outturn position for 2018-19.
The report includes the following:
 Explanations of main areas of variance; Movement in projected outturn position and plans to improve projections; Update on progress with savings delivery and the financial recovery plan; Budget changes requiring IJB approval; Impact of the outturn on IJB reserves position; Lead partnerships and the impact of risk sharing; and Updated information on the usage of set-aside resource.
FINANCIAL OUTTURN
Against the full-year budget of £237.795m there is a reported underspend of £0.945m (0.4%), consisting of a year-end underspend of £0.389m in social care services and an underspend of £0.556m in Health delivered services. The position for social care services includes the £1.486m being held on behalf of the IJB by the Council for debt repayment, as this required to be transferred back to the IJB at the financial year-end. Prior to this transfer overall the IJB would have been overspent, specifically social care services would have been £1.097m overspent. This reported position is also prior to the earmarking of funds for use in future years. 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, with
funding losing its identity once delegated to the partnership. The 2018-19 financial year-end is the first where the IJB have been in a position to treat the budget in a truly integrated way with a demonstrable shift of resources from the NHS budget to offset Social Care costs.
Appendix A provides the financial overview of the partnership position, this details the outturn on an HSCP managed basis, on an IJB delegated basis (following Lead Partnership recharge adjustments) and the final uncommitted surplus balance after accounting for new earmarked reserve balances.
The sections that follow outline the significant variances in service expenditure compared to the approved budgets with detailed analysis provided in Appendix B.
Health and Community Care Services – Overspend £0.052m
Against the full-year budget of £65.900m there is an overspend of £0.052m (0.1%). Although a very small overall variance there are significant variances across services, the main variances are:
a) Care home placements are overspent by £0.793m. This position significantly improved during 2018-19 when in period 3 a projected overspend of £1.4m was forecast. The recurring reduction in the number of places supported to align with the budget available will have a significant impact on the ongoing financial commitment for 2019-20.

	b)	Care home respite is within budget but this is after an allocation of one off funding from the uncommitted element of Carers Act funds. This is a non- recurring allocation so a reduction to the level of respite delivered or a plan to fund the current service provision will require to be in place for 2019-20 to ensure this can be delivered within budget.
	c)	Independent Living Services are overspent by £0.187m which is a favourable movement of £0.289m. The overspend and the favourable movement is mainly within physical disability care packages where in-year projections were made for services that had terminated.
	d)	Over-recovery of Charging Order income of £0.263m, an over recovery was projected during the year, it is difficult to project charging order income with accuracy, improving the basis of projections will be explored for future years.
	e)	Equipment and Adaptations are underspent by £0.208m in line with the mitigation action approved in period 4.
	f)	Packages of care overspent by £0.148m due to the use of supplementary staffing, this overspend position improved towards the year-end.
	g)	Care at home (purchased and in house) underspend of £0.291m. Within the service there are overspends on transport and admin which moving forward will be addressed by realigning the overall care at home budget to ensure the overall position does not move into an overspend.
	h)	Long Term Conditions (Ward 1), overspend of £0.387m which is mainly due to an overspend in employee costs to ensure staffing levels are at a safe level. This is a recurring pressure which will be met by considering the total resources for Ward 1 and the wards (Douglas Grant and Redburn) which are being transferred to the partnership from acute services. Operational management responsibility for these wards transferred to the IJB from 1 April 2019, confirmation will be sought from the Health Board re the plans to address overspends in these acute wards prior to the transfer of financial responsibility to the IJB.
	i)	District Nursing is underspent by £0.183m due to vacant posts.
	j)	Adaptations is underspent by £0.136m partly due to a backlog of OT assessments, the service has plans to address the delays.
2.4	Men	tal Health Services – Underspend £0.326m
		nst the full-year budget of £73.308m there is an underspend of £0.326m %). The main reasons for the underspend are:
	a)	Learning Disabilities is overspent by £1.647m (adverse movement of ± 0.790 m) of which £1.344m is in relation to care packages and ± 0.278 m for direct payments. This is an adverse movement of ± 0.694 m in the position at the financial year-end of which ± 0.430 m relates to historic invoices, ± 0.141 m relates to a service billed for the year end which was not included in the projections and unachieved savings of ± 0.148 m. These areas are specifically picked up in the action plan to improve financial projections.

	b)	Community Mental Health is underspent by £0.864m mainly due to vacancy savings and an underspend in care packages. The underspend in care packages includes funding that was set aside for patients expected to be discharged from hospital into the community during 2018-19, they are now planned for discharge in 2019-20.
	c)	Addictions is underspent by £0.192m of which £0.131m relates to the ADP and will be carried forward in earmarked reserves.
	d)	Lead Partnership – overall underspend of $\pounds 0.917m$, the main variances are noted below:
		Overspends:
		• Adult inpatients £0.633m mainly due to the delay in generating income from other areas in respect of forensic beds. All of the planned beds are now sold so this should not recur in 2019-20.
		• Psychiatry £0.077m primarily due to locum costs, an unfunded EMH liaison post and a reduction in funding for trainee psychiatrists. There is an increased use of locum staff in the absence of being able to recruit to permanent posts.
		• Elderly Inpatients £0.226m due to the use of supplementary staffing which has reduced substantially since month 7 and will continue to reduce as part of the plans to re-design Elderly Mental Health Inpatient services.
		 CRES £0.986m - lead partnership share of the unachieved CRES carried forward, this element of the historic CRES will remain aligned to the Mental Health lead partnership and will be addressed as part of the budget plans for 2019-20.
		Underspends:
		• UNPACS £0.211m due to the delay in the two new care packages assumed to commence in year. The underspend is also partly attributable to the availability and use of beds in ward 6 which have prevented more costly external placements.
		 Learning Disabilities £0.184m due to a delay in the transfer of an UnPACs patient, this transfer has now taken place.
		CAMHS £0.468m due to vacancies and delays with recruitment.
		 Psychology £0.697m due to vacancies and delays with recruitment.
		 Adult Community Mental Health £0.230m due to vacancies and the allocation of the Crisis Response Team to Action 15 funding.
2.5	Child	dren Services & Criminal Justice - Overspend £0.114m
	-	nst the full-year budget of £35.591m there is an overspend of £0.114m (0.3%). main reasons for the overspend are:

a) Residential Schools and Community Placements overspend of £1.152m of which £0.848m related to secure placements. There was an adverse movement in the position at the year-end due to increased costs for a care package and a placement no longer being jointly funded with Education. At month 12 there were 19 residential placements and 5 secure placements.
b) Looked After Children Placements – underspend of £0.449m due to the current demand for fostering, adoption and kinship payments. These budgets have been realigned for 2019-20.

c) Early Years underspent by £0.406m mainly due to the level of vacancies in heath visiting services.

2.6 **Projected Outturn Movement**

The projected outturn position has moved significantly through the year, the monthly movement is illustrated in the chart below:



The position has fluctuated over the year to partly due to the demand driven nature and high cost of some services. In addition some notable specific reasons are:

- August/September timing of IJB approval of Financial Recovery Plan and actions taken by services to bring the projected overspend position back into balance;
- December position reported on a managed basis until this point when agreement reached with other two Ayrshire partnerships on NRAC risk sharing for Lead Partnership services;
- March issues with financial projections in-year picked up at year-end which identified financial commitments which had been excluded from the position.

The main unexpected year-end movements relate to Learning Disability and Children's Services where due to invoicing delays there were historic financial commitments accounted for in 2018-19, and where the links between the front-line services and the social care finance team did not pick up all financial commitments.

The finance team and services have together agreed a detailed action plan to ensure the future accuracy of projections, this plan will be remitted to the IJB Performance and Audit Committee. The main themes are:

- more regular reporting and sharing of information;
- system improvements in relation to recording of services and reconciliations;
- strengthening relationships and communication with service providers;
- processing of recharges during the financial year;
- improve process for projecting vacancy savings.

The Social Care Finance Team moved across to the partnership during 2018-19 to facilitate improved communication and joint working with front line HSCP colleagues. This has provided the HSCP with an opportunity and full control to strengthen financial management arrangements, including the reliability and accuracy of financial projections and financial processes.

2.7 Primary Care and Prescribing

It is the responsibility for the Health Board to fund prescribing as under the terms of the Integration Scheme the Health Board underwrites the prescribing risk across all three Ayrshire IJBs. In the previous financial year NHS Ayrshire and Arran delegated additional funding (£2.5m across the three IJBs) to offset prescribing overspends. Prescribing is a volatile budget and the current agreed approach is to minimise the risk exposure to variation and fluctuation across years with the Health Board retaining responsibility for any under or overspends.

2.8 Savings Progress

 a) The 2018-19 budget included £4.003m of savings plus £2.557m of carried forward NHS CRES savings (total £6.560m). A further workforce saving of £0.055m was approved during the year making the total requirement £6.615m.

BRAG Status	Position at Budget Approval £m	Position at Period 12 £m
Red	3.148	2.572
Amber	0.519	0.000
Green	2.893	0.000
Blue	0.000	4.043
TOTAL	6.560	6.615

- b) The year-end outturn position reflects the overall progress with savings delivery during the year, the Red savings were not delivered as planned. These are:
 - i. Reduction in care home places £0.391m
 - ii. Challenge Fund physical disability care packages £0.200m
 - iii. Capping of respite £0.070m
 - iv. NHS CRES savings £1.723m
 - v. Reduction in mileage £0.040m
 - vi. MH Challenge Fund Projects £0.148m

Appendix C provides detail on the full programme of savings.

Progress with delivering on the carried forward NHS CRES is noted in the table below:

	Perm/Temp	£m
Opening CRES Saving (inc workforce saving)	Р	2.612
Arrol Park employee costs	Т	(0.250)
Payroll turnover target increase	Т	(0.215)
Addictions	Р	(0.364)
Children's services employee costs	Р	(0.060)
Closing Balance		1.723

The CRES balance of £2.188m is carried forward into 2019-20. This is the closing balance of £1.723m plus the temporary achieved CRES of £0.465m. The approved 2019-20 budget included savings to fully address this legacy CRES

The IJB approved a financial recovery plan in August 2018 and progress against this is provided in appendix D. The impact of the plan was to improve the financial position by £0.835m. Some actions were not fully delivered in 2018-19 but will deliver further financial benefits and support savings delivery in 2019-20 e.g. the implementation of the new charging policy and review of transition cases.

The HSCP Transformation Board is in place to provide oversight and governance to the programme of service change. A focus of the Board is to ensure plans are in place to deliver savings and service change, with a solutions focussed approach to bringing programmes back on track.

2.9 Budget Changes

The Integration Scheme states that "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".

Appendix E highlights the movement in the overall budget position for the partnership following the initial approved budget.

Reductions Requiring Approval:

The specific reductions that the IJB are required to approve are:

- Models of Care Workforce Turnover £0.085m temporary reduction as not all posts have been filled.
- Medical Training Grade adjustment £0.008m NES have reduced the number of posts being funded by 1.3 WTE throughout the year.
- Procurement Saving £0.004m in relation to leased car savings.
- Senior Manager Children's services and QI £0.012m contribution to a post that sits under the Director of Nursing.
- Enhanced GP Service at Arrol Park £0.007m transferred to Primary Care – LD Enhanced service provided by Alloway Place funding transferred non-recurring in 2017-18 but should have been recurring.
- Primary Care ABI £0.014m contribution from ADP funding
- West of Scotland CAMHS £0.035m allocation correction, funding and expenditure was transferred to NHS Lothian.

It is recommended that the IJB approve the budget reductions outlined above.

	Reserves				
		stablished as a Local Governr balances. Reserve balances	•		•
	b) As a o emero	working balance to help cushi contingency to manage the im gencies; and means of building up funds, of	pact of unex	pected events	s or
	,	et known or predicted liabilitie			
	has been a	in North IJB is unique in that v ccumulated from previous y ifset by a creditor on the IJB b re Council.	/ear overspe	ends, the neg	gative rese
	the debt to t	486m of resource set aside of he Council, at the financial ye th the remaining uncommitted ent.	ear-end this b	oudget was tra	ansferred b
	for investme the purpose	unds specifically provided by t nt and there is a requirement allocated, regardless of the ti e earmarked within IJB reserv	to ring-fence iming of expe	e these funds enditure. A to	to be used
	 Menta 	ol and Drugs Partnership - £0 al Health Action 15 - £0.116m ary Care Improvement Fund -			
services t		require to be earmarked fo IJBs have been allocated th to carry forward in respective	e appropriate	e share of un	
	outlined abor of the outsta	recommended to use the yea ve and to allocate the remaining nding debt to North Ayrshire ed in the table below:	ng £0.668m t	o commence	the repaym
				T	
	Opening	Reserve Balance	Transfer	Transfers	Closing
	Balance 1 April 2018	Reserve Balance	Transfer s Out	i ransfers In	Balance 31 Marcl 2019
	Balance 1 April	Reserve Balance			Balance 31 Marcl 2019
	Balance 1 April 2018	Reserve Balance Earmarked	s Out	In	Balance 31 March 2019 £n
	Balance 1 April 2018 £m		s Out	In £m	Closing Balance 31 March 2019 £m 0.277 (5.139

The £1.486m will continue to be set aside in future years to continue to support the debt repayment.

2.11	Lead Partnerships		
	The final unaudited IJB outturn position is adjusted to reflect the impact of Lead Partnership services. During 2018-19 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. The underspend in relation to North Lead Partnership services is not fully attributed to the North IJB as a share has been allocated to East and South partnerships, similarly the impact of the outturn on East and South led services has been shared with North.		
	North Ayrshire HSCP		
	Services managed under Lead Partnership arrangements by North Ayrshire Health and Social Care Partnership are underspent by £0.889m, this includes the lead partnership share of the unachieved CRES target carried forward. Full detail on the underspend is given in section 2.4 above and Appendix B.		
	South Ayrshire HSCP		
	Services led by the South Partnership were £0.072m underspent. The community Equipment Store overspent by £0.160m as a result of increase demand for the service. This was more than offset by underspends on other services including the Family Nurse Partnership, continence services and Technology Enabled Care.		
	The NRAC share of the underspend was returned to partner IJBs in East and North as part of the final accounts process.		
	East Ayrshire HSCP		
	East HSCP acts as the lead partner for Primary Care and Out of Hours Community Response Services. After excluding the Primary Care Improvement Fund (PCIF) unspent element, the net position is a marginal overspend of £0.270m. All three IJBs have been allocated an NRAC fair share of the additional costs in 2018-19. The overspend position is mainly due to GP Practices in difficulty which have handed back contracts and which are being run by the Health Board under 2c contracts. These additional costs have been partly offset by non-recurring recruitment savings in Dental and general staff turnover.		
2.12	Set Aside		
	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. The 2018-19 set aside budget for North HSCP was estimated to be £28.055m, based on expenditure in 2017-18. The acute directorate, which includes the areas covered by the set aside budget, overspent by £9.3m during 2018-19.		
	129 additional and unfunded beds were open at the 31st March 2018, these reduced materially in a phased manner throughout the year whilst ensuring continuation of service and patient safety. There are no unfunded beds at 1 st April 2019, although service pressure is building.		

During 2018-19 the North Partnership's use of the set aside resources was £30.114m against the NRAC 'fair share' of £28.994m which is £1.120m above the 'fair share'. The £30.114m is fully funded by NHS Ayrshire and Arran in line with the Integration Scheme. There is an expectation that the North Partnership will move towards its 'fair share'. The Models of Care programmes including the Intermediate Care and Rehab investment and the Palliative End of Life proposals being developed represent agreed or potential investment by NHS A&A to invest in community services with a view to reducing acute beds. This is in effect a mechanism to reduce the set aside resources.

There is an expectation by the Scottish Government, supported by the proposals contained within the national Review of Progress of Integration, that from 2019-20 the set aside arrangements are fit for purpose and enable an approach to planning across the whole unplanned care pathway. The Scottish Government will work with IJBs, Health Boards and Local Authorities to ensure the legislation and statutory guidance on hospital specialties delegated to Integration Authorities, particularly in relation to set aside budgets, is put into practice. This does not change the balance of risk, which remains shared between IJBs and Health Boards and can only be delivered in partnership, but it recognises the lead role of the IJB in planning for the unscheduled care pathway set out in the legislation.

Working with the Scottish Government, Ayrshire and Arran are acting as a test area for further work to be on Directions and Set Aside resources. The pan-Ayrshire work is being taken forward with Scottish Government support, this work has started and is at the early planning stages.

3. PROPOSALS

3.1 Anticipated Outcomes

The IJB require to closely monitor and manage the financial position to ensure the partnership can deliver services from within the available resource, thereby limiting the financial risk the funding partners, i.e. NAC and NHS AA. The IJB delegated budget is treated in an integrated way, with a view to achieving financial balance using the entirety of the resource available without consideration of the funding source.

Implementing the action plan should improve the accuracy of financial projections in the future, provide assurance to the IJB over the projected position and support better decision making on any corrective action where required.

The IJB will start making progress towards repayment of the debt to North Ayrshire Council, with a plan to continue progressing addressing the remaining balance from 2019-20 onwards. The delivery of financial balance and progress towards repaying and eliminating the debt to the Council will ensure the ongoing financial sustainability of the partnership.

3.2 Measuring Impact

The position reported is the unaudited year-end outturn position for 2018-19, further information will also be contained within the unaudited IJB annual accounts. Ongoing updates to the financial position will be reported to the IJB throughout 2019-20.

4.	IMPLICATION	S
Financ	ial:	The outturn is a year-end underspend of £0.945m prior to earmarking £0.277m of funds for future use. This results in an uncommitted surplus of £0.668m which can be used to commence repayment of the debt owed to North Ayrshire Council for prior year deficits.
Human	Resources:	None
Legal:		None
Equalit	t y:	None
Childre People	en and Young	None
_	nmental & nability:	None
Key Pr	iorities:	None
Risk Im	nplications:	Within the outturn there are various over and underspends including the non-achievement of savings which have been taken into consideration in financial planning for 2019-20.
Comm Benefit		None

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

4.	CONSULTATION
4.1	This report has been produced in consultation with relevant budget holders and the Partnership Senior Management Team. 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.
5.	CONCLUSION
5.1	It is recommended that the IJB: (a) notes the overall integrated financial performance report for the financial year 2018-19 and the overall reported year-end underspend of £0.945m; (b) approves the budget changes outlined at section 2.9; (c) approves the earmarking of £0.277m of reserves to reinstate specific ring-fenced Scottish Government funding and to allocate the remaining uncommitted surplus balance of £0.668m to commence repayment of the outstanding debt to North Ayrshire Council; and (d) notes the positive improvement in the IJB financial position and the plans to improve the financial projections for social care services.

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2018-19 Budget Monitoring Report–Objective Summary as at 31 March 2019

Appendix A	
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Partnership Budget - Objective Summary	-		-		2018/19 Bud					201	8/19
		Council			Health			TOTAL		Over/	Movement
	Budget	Outturn	Over/ (Under) Spend Variance	Budget	Outturn	Over/ <mark>(Under)</mark> Spend Variance	Budget	Outturn	Over/ (Under) Spend Variance	(Under) Spend Variance at Period 10	in budget variance
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
COMMUNITY CARE AND HEALTH	53,802	53,706	(96)	12,098	12,246	148	65,900	65,952			(384)
: Locality Services	25,275	25,690	415	4,231	4,228	(3)	29,506	29,918		781	(369)
: Community Care Service Delivery	25,847	25,554	(293)	0	0	0	20,0	25,554	(293)	(220)	(73)
: Rehabilitation and Reablement	1,151	912	(239)	1,794	1,658	(136)	2,945	2,570	· · · · ·	(297)	(78)
: Long Term Conditions	1,189	1,208	19	4,315	4,662	347	5,504	5,870	366	247	119
: Integrated Island Services	340	342	2	1,758	1,698	(60)	2,098	2,040	(58)	(75)	17
MENTAL HEALTH SERVICES	23,907	24,974	1,067	49,401	48,008	(1,393)	73,308	72,982	(326)	(414)	88
: Learning Disabilities	18,200	19,984	1,784	477	340	(137)	18,677	20,324	1,647	858	789
: Community Mental Health	4,290	3,705	(585)	1,631	1,352	(279)	5,921	5,057	(864)	(710)	(154)
: Addictions	1,417	1,285	(132)	1,209	1,149	(60)	2,626	2,434	(192)	(122)	(70)
: Lead Partnership Mental Health NHS Area Wide	0	0	0	46,084	45,167	(917)	46,084	45,167	(917)	(440)	(477)
CHIDREN'S AND JUSTICE SERVICES	31,946	32,313	367	3,645	3,392	(253)	35,591	35,705	114	(61)	175
: Intervention Services	3,827	3,674	(153)	303	330	27	4,130	4,004	(126)	(85)	(41)
: Looked After & Accomodated Children	16,264	17,045	781	0	0	0	16,264	17,045	781	667	114
: Fieldwork	4,616	4,550	(66)	0	0	0	4,616	4,550	(66)	0	(66)
: CCSF	304	235	(69)	0	0	0	304	235	(69)	(67)	(2)
: Justice Services	2,740	2,735	(5)	0	0	0	2,740	2,735	(5)	0	(5)
: Early Years	321	223	(98)	2,969	2,661	(308)	3,290	2,884	(406)	(468)	62
: Policy & Practice	3,874	3,851	(23)	0	0	0	3,874	3,851	(23)	(116)	93
: Lead Partnership NHS Children's Services Area Wide	0	0	0	373	401	28	373	401	28	8	20
PRIMARY CARE	0	0	0	48,916	48,839	(77)	48,916	48,839	(77)	(86)	9
ALLIED HEALTH PROFESSIONALS				4,636	4,588	(48)	4,636	4,588	(48)	(91)	43
MANAGEMENT AND SUPPORT COSTS	6,372	4,779	(1,593)	449	1,191	742	6,821	5,970	(851)	229	(1,080)
CHANGE PROGRAMME	1,400	1,266	(134)	1,223	1,024	(199)	2,623	2,290		(199)	(134)
OUTTURN ON A MANAGED BASIS	117,427	117,038	(389)	120,368	119,288	(1,080)	237,795	236,326	(1,469)	(186)	(1,283)
Return Hosted Over/Underspends East	0	0	0	0		50	0	50		200	
Return Hosted Over/Underspends North	0	0	0	0	291	291	0	291	291	273	18
Return Hosted Over/Underspends South	0	0	•	0	(26)	(26)	0	(26)	(26)	0	(26)
Allocation of PCIF from East	0	0	0	0	(30)	(30)	0	(30)	(30)	0	(30)
Allocate the Action 15 underspend to East and South	0	0	•	0	200	239	0	200			
OUTTURN ON AN IJB BASIS	117,427	117,038	(389)	120,368	119,812	(556)	237,795	236,850	(945)	343	(1,288)
Less Earmarking											
PCIF	0	0	0	0		30	0	30	30	0	
Action 15	0	0	0	0		116	0	116		0	
ADP	0	131	131	0	0	0		101	131	0	
FINAL OUTTURN POSITION	117,427	117,169	(258)	120,368	119,958	(410)	237,795	237,127	(668)	343	(1,011)

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	Budget £000's	Outturn £000's	Over/ (Under) Spend Variance £000's	
COMMUNITY CARE AND HEALTH	65,900	65,952	52	
Locality Services	29,506	29,918	412	Older People permanent care homes - overspend of £0.783m based on 797 placements (544 Nursing and 253 Residential) which is a reduction of 12 from month 10. Respite care is online after an allocation from the Carers Act funding of £0.415m. Independent Living Services : * Direct Payment packages underspend of £0.046m on 61 packages. * Indirect Payment packages underspend £0.056m as there was no spend in 2018/19. * Adult respite care is online after an allocation from the Carers Act funding pf £0.049m. * Residential Packages of £0.109m based on 37 packages. * Community Packages (physical disability) overspend of £0.180m based on 52 packages Equipment Budget - £0.088m underspend in line with approved mitigation. Employee costs - £0.180m underspend for £0.148m due to high use of supplementary staffing. District Nursing - underspend of £0.183m due to vacancies. Income from Charging Orders - over recovery of £0.263m as some additional income came in at the year end.
Community Care Service Delivery	25,847	25,554	(293)	 Care at home in house service - underspend of £0.248m. The cost of recruiting 30 staff in October and November was funded by a reduction in casual and overtime costs. Purchased Care at home - overspend of £0.043m. Direct Payments - underspend of £0.034m based on 29 package less 10% expected recovery from underspent balances. Transport costs - overspend of £0.091m due to increase in staff mileage within care at home and ferry charges. Admin costs - overspend of £0.087m mainly due to mobile phone equipment. Voluntary Organisations - overspend £0.088m mainly in relation to the Alzheimer service. Income - over recovery £0.058m mainly in relation to Community Alarm income.

	Budget £000's	Outturn £000's	Over/ (Under) Spend Variance £000's	
Rehabilitation and Reablement	2,945	2,570	(375)	Employee costs - underspend £0.167m due to vacancies. Adaptations Budget - £0.231m underspend which is higher than the approved mitigation.
Long Term Conditions	5,504	5,870	366	Ward 1 - overspend of £0.387m due to the use of supplementary staffing. Ward 2 - underspend of £0.009m, after £0.504m of nursing costs were transferred to East HSCP in relation to Kirklandside patients. Elderly CMHT - underspend of £0.066m due to vacancies.
Integrated Island Services	2,098	2,040	(58)	Patient Transport - underspend as the project commenced later than budgeted.
MENTAL HEALTH SERVICES	73,308	72,982	(326)	
Learning Disabilities	18,677	20,324	1,647	 Residential Packages- overspend of £0.241m based on 40 packages. Community Packages - overspend of £1.344m. This includes £0.430m of payments relating to 2016/17 and 2017/18, £0.141m of unprojected annual costs which were invoiced at the year end and £0.150m of unachieved savings. Direct Payments - overspend of £0.278m based on 39 packages. Employee costs - underspend £0.178m mainly due to vacant posts Income - under recovery of £0.075m based on receipts and no income from other local authorities for use of Taigh Mor respite service as this is being fully utilised to meet the respite needs of North service users.
Community Mental Health	5,921	5,057	(864)	Community Packages - u nderspend of £0.517m based on 107 packages. This underspend includes £0.238m for hospital discharges which have not yet taken place. Employee costs - underspend £0.262m mainly due to vacant posts
Addictions	2,626	2,434		Employee costs - underspend £0.050m due to vacant posts ADP - underspend of £0.131m which will be carried forward for use in 2019/20.

	Budget £000's	Outturn £000's	Over/ (Under) Spend Variance £000's	
Lead Partnership (MHS)	46,084	45,167	(917)	 Adult Community - underspend of £0.230m due to vacancies and the cost of the crisis team being met by Action 15 funding. Adult Inpatients- overspend of £0.633m due to a delay in bed sale income and use of supplementary staff. UNPACs - underspend of £0.211m which reflects the corrected charge for the Forensic Services SLA. LDS - underspend of £0.184m due to delay in UNPACs transfer. Elderly Inpatients - overspend of £0.226m due to use of supplementary staff which has reduced in recent months. CAMHS - underspend is £0.468m due to vacancies. MH Admin - underspend of £0.077m, primarily due to locums and a reduction in Dean funding. EMH Liaison posiremains unfunded. MH Pharmacy - underspend of £0.300m mainly within substitute prescribing of which £0.065m is from the overaccrual in 2017-18. Psychology- underspend of £0.986m in relation to savings still to be identified. These are addressed as part of the approved 2019/20 budget. Underspends in other areas - include Associate Nurse Director budgets £0.064m, slippage on mental health allocations of £0.070m and resource transfer reserve £0.015m.
CHIDREN'S SERVICES AND CRIMINAL JUSTICE	35,591	35,705	114	
Intervention Services	4,130	4,004	(126)	Employee costs - underspend of £0.217m mainly due to vacant posts. Supported Carers Scheme - overspend of £0.032m based on 5 carers supporting 6 children.

	Budget £000's	Outturn £000's	Over/ (Under) Spend Variance £000's	
Looked After & Accom Children	16,264	17,045	781	 Looked After Children placements - underspend of £0.449m based on the following:- Kinship - overspend of £0.200m. Budget for 302 placements, currently 321 placements. Adoption - underspend of £0.040m. Budget for 78 placements, currently 68 placements. Fostering - underspend of £0.352m. Budget for 140 placements, currently 115 placements. Fostering Xtra - underspend of £0.105m. Budget for 32 placements, currently 25 placements. Private fostering - underspend of £0.002m. IMPACCT carers - underspend of £0.002m. IMPACCT carers - underspend of £0.052m due to external agency fees and 2 placements from other Councils. Residential School placements including community packages - overspend of £1.152m. At the end of the year there are 19 residential and 5 secure placements. All remand placements had ended. Employee Costs - underspend of £0.027m due to vacancies.
Fieldwork	4,616	4,550	(66)	Employee costs - underspend of £0.080m due to vacancies.
CCSF	304	235	(69)	Employee costs - underspend of £0.029m due to vacancies.
Criminal Justice	2,740	2,735	(5)	Outwith the threshold for reporting
Early Years	3,290	2,884	(406)	Employee costs - underspend of £0.364m due to vacancies. CAMHS budget - underspend of £0.056m
Policy & Practice	3,874	3,851	(23)	Outwith the threshold for reporting
Lead Partnership (CS & CJ)	373	401	28	Outwith the threshold for reporting

	Budget £000's	Outturn £000's	Over/ (Under) Spend Variance £000's	
PRIMARY CARE	48,916	48,839	(77)	Prescribing - underspend of £0.077m.
ALLIED HEALTH PROFESSIONALS	4,636	4,588	(48)	Outwith the threshold for reporting
MANAGEMENT AND SUPPORT	6,821	5,970	(951)	Debt Repayment - additional budget of £1.486m is held in Management and Support to support the repayment of historic debt. CRES savings - overspend of £0.682m re CRES savings still to be identified and £0.055m in relation to workforce savings.
CHANGE PROGRAMME & CHALLENGE FUND	2,623	2,290	(333)	ICF - slippage on some projects.
TOTAL	237,795	236,326	(1,469)	

Threshold for reporting is + or - £50,000

North Ayrshire Health and Social Care Partnership 2018/19 Savings

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 Achieved at Period 12 £000's	Shortfall
Children & Criminal Justice	Children & Criminal Justice Challenge Fund Projects - Investment in Universal Early Years	Green	Blue	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	Blue	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	Blue	536	340	340	-
Children & Criminal Justice	Children & Criminal Justice Challenge Fund Projects - Expansion of the Multi Agency Assessment and Screening Hub (MAASH)	Green	Blue	37	26	26	-
Children & Criminal Justice	Reallocation of Partnership Forum budget with associated savings	Green	Blue	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	Blue	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	Blue	228	181	181	-
Community Care & Health	Reduction in staff from the Arran social work team	Amber	Blue	13	13	13	-
Community Care & Health	Withdrawl of funding to Crossroads, Largs	Green	Blue	14	14	14	-
Community Care & Health	Additional projected income	Green	Blue	155	155	155	-
Community Care & Health	WRVS saving	Green	Blue	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	-

Service	Description	RAG Status at budget setting	Updated Rag Status	Gross Saving 2018/19 £000's	Net Saving 2018/19 £000's	Net Saving Achieved at Period 12 £000's	Shortfall
Mental Health	Mental Health - Challenge Fund Projects	Green	Blue / Red	226	226	78	148
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	Blue	48	48	48	-
Mental Health	Reduction in staff at Hazeldene Day service	Amber	Blue	35	35	35	-
Management & Support	Review all support secondments/posts which could be provided by parent organisations to the HSCP.	Amber	Blue	50	50	50	_
Management & Support	Operational savings generated by the business support review.	Amber	Blue	150	150	150	-
Management & Support	Planning and Performance Team - reduction in staffing	Green	Blue	37	37	37	-
Cross Service	Pilot Sickness Absence Taskforce within the HSCP	Green	Blue	100	75	75	-
Cross Service	Staff Mileage - 10% reduction across the partnership	Green	Red	40	40	-	40
Cross Service	Bring forward phase 2 Challenge Fund savings from 2019/20 to 2018/19	Green	Blue	250	250	250	-
Cross Service	Cap respite across all services to 35 days	Green	Blue / Red	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	2,464	849

NHS 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 Achieved at Period 12 £000's	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	Blue	7	7	7	-
Community Care & Health	Reduction in staffing - Arran	Green	Blue	30	30	30	-
Cross Service	Supplies	Green	Blue	80	80	80	-
Cross Service	Transport	Green	Blue	5	5	5	-
Cross Service	Savings carried forward from 2017/18	Red	Red	2,557	2,557	889	1,668
Cross Service	Workforce saving allocation	Red	Red	55	55	-	55
		TOTAL		3,302	3,302	1,579	1,723

GRAND TOTAL

7,041 6,615 4,043 2,572

Ref	Service Area	Recovery Action Proposed	Estimated Benefit £ 000's	Achieved £ 000's	Shortfall £ 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	200	-	Stephen Brown
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	70	30	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	-	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	25	50	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	-	150	Thelma Bowers
6	Cross Service	Audit of compliance with the charging policy to ensure consistency of application across services.	50	-	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	300	-	Stephen Brown
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	100	-	Stephen Brown
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	100	-	Stephen Brown
10	MH Inpatients	Current plans assume 4 bed sales to support service costs, actively market a 5th bed.	40	-	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	40	-	Thelma Bowers
		TOTAL	1,255	835	420	

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 there will be an impact in 2019-20.	Thelma Bowers
7	Commissioned services	Review all outstanding contractual uplifts	Caroline Whyte

2018/19 Budget Reconciliation

		Permanent or	
COUNCIL	Period	Temporary	£
Initial Approved Budget	2		92,353
Resource Transfer	2	Р	22,257
ICF Procurement Posts - Transfer to Procurement	2	Т	(89)
Additional Pension Costs	4	Р	(7)
Reduction in CJ Settlement for 18/19	4	Р	(244)
Budget from Education - Activity Agreements (Rosemount)	6	Т	29
Transfer of Finance staff from Corporate to HSCP (part year budget)	9	Р	309
Increase in Commercial Refuse Collection (corrected in period 10)	9	Т	21
Challenge Fund	12	Т	738
1.5% Pay Award	12	Р	352
Insurance Premium	12	Т	99
Debt Repayment Funds	12	Т	1,486
Criminal Justice	12	Р	79
Bad Debt Provision	12	Т	30
Increase in Property and Liability Insurance Excess	12	т	14
Period 12 reported budget		•	117,427

		Permanent or	
HEALTH	Period	Temporary	£
Initial Approved Budget (includes estimated pay award)	2		137,143
Resource Transfer	2	Р	(22,257)
Girfec-HV S-Bar	3	Р	46
Specialist Pharmacist Upgrade	4	Т	12
Pay Award	4	Р	1,462
MH Admin – transfer to East and South	5	Р	(1,198)
NES junior doctor funding	5	Р	(80)
HD424 - NMAHP Clinical Lead	5	Р	16
Allocation of the AHP budget	6	Р	4,570
Mental Health Strategy - Action 15	6	Р	571
ADP	6	Р	463
Medical Pay Award	6	Р	204
Medical Training Grade Adjustment	6	Р	49
Band 3 Admin funding transferred from East	6	Р	14
Breast Feeding Programme - Health Visitor	6	Р	9
Mental Health Admin Split to South/East(Supplies)	6	Р	(71)
Prescribing Reduction	6	Р	(567)
Veterans Funding – reallocation from East	6	Р	150
Biggart Ward Closure 2017 - North Split	7	Р	10
Medical Pay Award Correction	7	Р	(64)
Ailsa Hairdressing transferred to South	7	Р	(11)

Medical Training Grade Adjustment	7	Р	(9)
Workforce saving allocation	7	Р	(55)
Models of Care Funding	8	Р	316
Split out of AHP Vacancies and Salaries	8	Р	99
Health & Wellbeing Post and Veterans First to North	8	Р	29
V1P Allocation Split East	8	Р	27
Redistribution of AHP workforce saving allocation	8	Р	(33)
Medical Training Grade Adjustment	9	Р	15
Models of Care - Turnover Adjustment	9	Т	(13)
Medical Training Grade Adjustment	10	Р	36
Winter Plan 18/19	10	Т	40
Models of Care - Turnover Adjustment	10	Т	(15)
Prescribing Reduction	10	Р	(478)
Medical Training Grade Adjustment	11	Р	(7)
Models of Care - Turnover Adj	11	Т	(30)
Procurement Saving	11	Р	(4)
Senior Manager-Children's Services and Quality Improvement Upgrade	11	Р	(12)
Prescribing Adjustment	12	Р	86
Return Public Health Development Post to ADP	12	Т	15
Medical Training Grade Adjustment	12	Р	(1)
Enhanced GP Service Arrol Park transfer to Primary Care	12	Р	(7)
PC ABI Contribution from ADP funding	12	Т	(14)
WOS CAMHS Allocation correction	12	Т	(35)
Models of Care - Turnover Adj	12	Т	(55)
Roundings			2
Period 12 reported budget			120,368

GRAND TOTAL

237,795