

<b>Subject:</b>	<b>Budget Monitoring – Month 10 (January 2019)</b>
<b>Purpose:</b>	To provide an update on the projected financial outturn for the financial year as at January 2019.
<b>Recommendation:</b>	<p>It is recommended that the IJB:</p> <ul style="list-style-type: none"> <li>a) Note the projected year-end overspend of £0.332m;</li> <li>b) Approve the changes in funding as detailed in section 2.11 and Appendix E;</li> <li>c) Note the impact of the financial recovery plan and the progress being made in delivering financial balance; and</li> <li>d) Note the potential impact of the Lead Partnerships.</li> </ul>

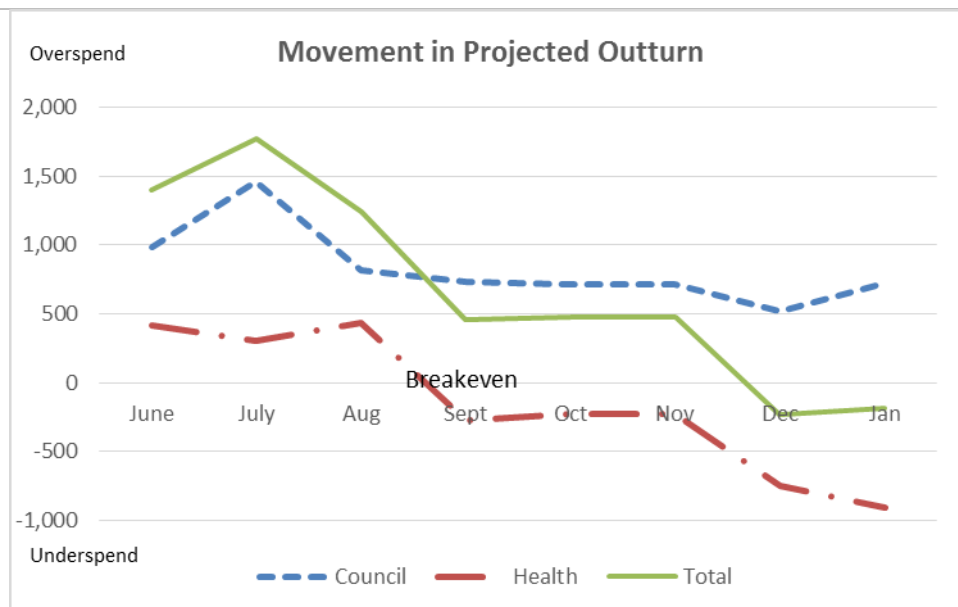
<b>Glossary of Terms</b>	
NHS AA	NHS Ayrshire and Arran
HSCP	Health and Social Care Partnership
MH	Mental Health
CAMHS	Child & Adolescent Mental Health Services
BRAG	Blue, Red, Amber, Green
UNPACS	UNPACS, (UNPlanned Activities) – Extra Contractual Referrals
CRES	Cash Releasing Efficiency Savings
NES	NHS Education Scotland – education and training body
NRAC	NHS Resource Allocation Committee

<b>1.</b>	<b>EXECUTIVE SUMMARY</b>
1.1	The report provides an overview of the financial position for the partnership and outlines the projected year-end outturn position informed by the projected expenditure and income commitments, these have been prepared in conjunction with relevant budget holders and services. It should be noted that although this report refers to the position at the January 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 £0.332m for 2018-19, taking account a number of mitigating actions outlined in the report and the improvement from implementation of the financial recovery plan. 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. This risk reduces as we approach the end of the financial year. The projection has been adjusted to reflect the potential impact of Lead Partnership services. The projected underspend of £0.434m in relation to North Lead Partnership services will not be fully attributed to the North HSCP as a share will need to be allocated to East and South HSCPs. North will also be liable for a share of the projected overspend on East Lead Partnership services. Further clarity

	is required on the impact of this, for the purpose of reporting at period 10 an NRAC share of the projected position has been assumed as this would be in line with the allocation in previous years.
1.3	The position as at December (month 9) was a projected overspend of £0.227m therefore an adverse movement in the position is now reported. There are further actions on the financial recovery plan which will potentially further improve the position and services will continue to deploy tight financial management controls.
1.4	<p>Overall the main areas of pressure continue to be care homes, 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 9 are in relation to care homes. The main favourable movement was in relation to the lead partnership for mental health.</p>
1.5	It is essential that the IJB operates within the delegated budget and commissions services from the Council and Health Board on this basis as financial balance has not been delivered in previous years. More is being done to ensure the financial sustainability of the partnership and to deliver financial balance for the current year and significant progress is being made to work towards this. The service transformation programme and the delivery of the those service changes will 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.
<b>2.</b>	<b>CURRENT POSITION</b>
2.1	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 progress with delivery of the recovery plan.
	<b>FINANCIAL PERFORMANCE</b>
2.2	<p>Against the full-year budget of £234.918 there is a projected overspend of £0.332m (0.15%). An integrated view of the financial position should be taken, however it is useful to note that this overall position consists of a projected overspend of £0.721m in social care services offset by a projected underspend of £0.389m in health services.</p> <p>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.</p> <p>Appendix A provides the financial overview of the partnership position. The sections that follow outline the significant variances in service expenditure compared to the approved budgets with detailed analysis provided in Appendix B.</p>
2.3	<b>Health and Community Care Services</b>
	<p>Against the full-year budget of £65.582m there is a projected overspend of £0.436m (0.7%). The main reasons for the projected overspend are:</p> <ul style="list-style-type: none"> <li>a) Care home placements including respite placements – projected to overspend by £0.836m. This is an adverse movement of £0.118m from period 9 mainly due to an increase in the number of permanent placements and the impact of requests for funding assistance.</li> </ul>

	<p>b) Independent Living Services are projected to overspend by £0.376m which is a favourable movement of £0.014m. This is mainly due to an overspend on physical disability care packages.</p> <p>c) Over-recovery of Charging Order income of £0.100m which is an adverse movement of £0.100m based on income received to date.</p> <p>d) Equipment and Adaptations are projected to underspend by £0.200m in line with the mitigation approved in period 4.</p> <p>e) Packages of care are projected to overspend by £0.163m due to the use of supplementary staffing. The overspend has reduced by £0.055m due to a delay on a new package which was planned from early 2019 onwards.</p> <p>f) Care at home (purchased and in house) projected underspend of £0.360m. The projected underspend has reduced by £0.040m due to increased demand for purchased care. There are also overspends on transport and admin within care at home which moving forward will be addressed by realigning the overall care at home budget.</p> <p>g) Long Term Conditions (Ward 1), projected 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 for which funding requires to be identified, this will be addressed as part of the 2019-20 budget process.</p> <p>h) District Nursing is projected to underspend by £0.214m due to vacant posts.</p>
2.4	<p><b>Mental Health Services</b></p>
	<p>Against the full-year budget of £73.018m there is a projected underspend of £0.415m (0.6%). The main reasons for the projected underspend are:</p> <p>a) Learning Disabilities – projected overspend of £0.857m (favourable movement of £0.036m) of which £0.658m is in relation to care packages and £0.270m for direct payments. These overspends are partially offset by vacant posts.</p> <p>b) Community Mental Health – is projected to underspend by £0.710m mainly due to vacancy savings and an underspend in care packages. The projected underspend for care packages includes funding that was set aside for patients expected to be discharged from hospital into the community in 2018/19 but they will now be discharged in 2019/20.</p> <p>c) Lead Partnership – overall projected underspend of £0.441m which consists of: <i>Overspends:</i></p> <ul style="list-style-type: none"> <li>• Adult inpatients £0.591m - 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 February 2019. The recovery plan assumes a fifth bed will be sold prior to the end of the financial year. This is dependent on ensuring delayed discharges in ward 6 are discharged to the community. This is a risk as some of the delayed discharges are South partnership patients and would require SAHSCP to provide funding to facilitate the discharge.</li> </ul>

	<ul style="list-style-type: none"> <li>• Psychiatry £0.092m - 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 permanent posts.</li> <li>• Elderly Inpatients £0.225m – due to the use of supplementary staffing which has reduced substantially since month 7.</li> <li>• 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 planning for 2019-20.</li> </ul> <p><i>Underspends:</i></p> <ul style="list-style-type: none"> <li>• UNPACS £0.304m – due to the delay in the two new care packages assumed in year. The underspend is partially attributable to the availability and use of beds in ward 6 which have prevented more costly external placements.</li> <li>• Learning Disabilities £0.209m - due to a delay in the transfer of an UnPACs patient, this transfer has now taken place.</li> <li>• CAMHS £0.394m – due to vacancies and delays with recruitment.</li> <li>• Psychology £0.594m – due to vacancies.</li> <li>• Adult Community Mental Health £0.290m due to vacancies and the allocation of the Crisis Response Team to Action 15 funding.</li> </ul>
2.5	<b>Children Services &amp; Criminal Justice</b>
	<p>Against the full-year budget of £35.260m there is a projected underspend of £0.062m (0.2%). The main reasons for the projected underspend are:</p> <ul style="list-style-type: none"> <li>a) Residential Schools and Community Placements – projected overspend of £0.967m. The projection is based on the current number of placements and estimated discharge dates for each placement based on the support from the Challenge Fund investment. The overspend has increased by £0.155m due to a delay in the planned discharge dates, the delivery of further planned discharges continues to be a risk to the projected outturn position.</li> <li>b) Looked After Children Placements – projected underspend of £0.419m due to the current demand for fostering, adoption and kinship payments.</li> <li>c) Early Years – are projected to underspend by £0.468m mainly due to the level of vacancies in health visiting.</li> <li>d) Care Leavers – are projected to overspend by £0.054m based on the current number of people being supported.</li> </ul>
2.6	<b>Projected Outturn Movement</b>
	The movement in the projected outturn position is illustrated in the chart below:



The position has fluctuated over the year to date which is reflective of the demand driven nature and high cost of some services. The position has significantly improved and become more stable period 5 mainly because the adverse movements caused by demand increases have been offset by favourable variances across the service. The position will continue to be closely monitored.

The 18/19 impact of high risk low volume high costs services is receding as we reach the end of the financial year.

## 2.7 Primary Care and Prescribing

Prescribing is the responsibility for the Health Board to fund and under the terms of the Integration Scheme and it underwrites the prescribing risk across all three Ayrshire IJBs. In the previous financial year, NHS Ayrshire & Arran delegated additional funding (£2.500m across all three IJBs) to offset the prescribing overspend. Prescribing is a volatile budget and the approach is to minimise risk across years with the Health Board retaining responsibility for any under or overspends. NHS Ayrshire & Arran has advised of its intention to reduce the amount delegated to the IJB by £0.478m in relation to prescribing.

## 2.8 CRES update

	Permanent or Temporary	£ 000's
CRES Saving brought forward		2.557
Additional Workforce savings	P	0.055
<b>TOTAL</b>		<b>2.612</b>
Arrol Park employee costs	T	(0.250)
Payroll turnover target increase	T	(0.215)
Addictions	P	(0.364)
Children's services employee costs	P	(0.060)
<b>Balance still to be achieved in 2018-19</b>		<b>1.723</b>

Of the £1.723m still to be achieved £0.986m is allocated to the Lead Partnership for Mental Health and the balance of £0.737m remains to be allocated across other services and is reported against Management and Support costs.

Given that overall there is a projected underspend in the Health element of the budget the unidentified CRES savings are being offset on a non-recurring basis for 2018-19. There is a requirement to formally identify these savings as part of the 2019-20 budget process.

The £0.986m aligned to the Lead Partnership against Mental Health services should remain aligned to those services. The service are developing plans to re-design Elderly Mental Health beds, this will deliver significant savings to contribute to this target.

## 2.9 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 in period 6 taking the total to £6.615m.

<b>BRAG Status</b>	<b>Position at Budget Approval £m</b>	<b>Position at Period 9 £m</b>
Red	3.148	2.424
Amber	0.519	0.649
Green	2.893	0.226
Blue	0.000	3.316
<b>TOTAL</b>	<b>6.560</b>	<b>6.615</b>

- b) The projected year-end outturn position assumes that the Red savings will not be delivered as planned and this is reflected in the overall projected outturn position, these are:
- Reduction in care home places £0.391m
  - Challenge Fund – physical disability care packages £0.200m
  - Capping of respite £0.070m
  - NHS CRES savings £1.723m
  - Reduction in mileage - £0.040m

If progress is made to deliver the savings this would improve the overall outturn position. It is encouraging that the level of savings with red status has reduced since the budget was approved, recognising a greater level of confidence of delivery and the progress made so far with identifying savings against the CRES target.

The projected financial position assumes that all remaining savings on the plan will be delivered. Progress with savings delivery 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.

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

## 2.10 Financial Recovery Plan

The IJB approved the recovery plan in August and progress against this is provided in appendix D. The impact of the plan so far has been to improve the financial position by £0.765m.

	<p>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 in 2018/19 and moving forward into 2019/20.</p>
2.11	<p><b>Budget Changes</b></p> <p>The Integration Scheme states that <i>“either party may increase it’s in year payment to the Integration Joint Board. Neither party may reduce the payment in-year to the Integration Joint Board nor Services managed on a Lead Partnership basis.....without the express consent of the Integration Joint Board”</i>.</p> <p>Appendix E highlights the movement in the overall budget position for the partnership following the initial approved budget.</p> <p><b><i>Reductions Requiring Approval:</i></b></p> <p>The specific reductions that the IJB are required to approve are:</p> <ul style="list-style-type: none"> <li>• Models of Care Workforce Turnover £0.015m – temporary reduction as not all posts have been filled.</li> <li>• Prescribing £0.478m – as outlined in para 2.7 NHS Ayrshire &amp; Arran has advised of its intention to reduce the amount delegated to the IJB by £0.478m in relation to prescribing. Prescribing is forecast to break even subsequent to this reduction. This break even projection takes account of a “windfall” gain from a general drug price reduction in 2018/19</li> </ul> <p>It is recommended that the IJB approve the budget reductions outlined above.</p> <p><b><i>Future Planned Changes:</i></b></p> <p>Further areas which are outstanding and will be included in future reports include:</p> <ul style="list-style-type: none"> <li>• The disaggregation of some mental health wards from the lead partnership arrangement.</li> </ul>
2.12	<p><b>Lead Partnerships</b></p> <p><b><i>North Ayrshire HSCP</i></b>  Services managed under Lead Partnership arrangements by North Ayrshire Health and Social Care Partnership are projected to be £0.434m underspent, this includes the allocation of the unachieved CRES target carried forward. Full detail on the underspend is given in section 2.4 above.</p> <p><b><i>South Ayrshire HSCP</i></b>  Services hosted and/or led by the South Partnership are forecast to be online as there was further investment in the Community Equipment Store.</p> <p>The month 10 position for service led or hosted by South HSCP is given below:</p>

	Annual Budget	YTD Budget	YTD Actual	YTD Variance
Cost Centre Name	£000	£000	£000	£000
Community Equip Store	202	151	151	0
Continence Team	313	235	198	37
Family Nse Pship Programme	829	469	461	8
Incontinence Advisors	117	88	107	(19)
Mpower	0	28	28	(0)
Tec	157	114	111	2
Tec - Diabetes	0	0	2	(2)
Tec Regional Htn	0	0	0	0
<b>South Hosted Services</b>	<b>1,618</b>	<b>1,085</b>	<b>1,059</b>	<b>25</b>

### ***East Ayrshire HSCP***

The information for East HSCP has not changed since period 9 as this was their last reporting period for 2018/19.

Services managed under Lead Partnership arrangements by East Ayrshire Health and Social Care Partnership are projected to overspend by £0.697m.

The overall Primary Care Lead Partnership projected overspend is £0.758m and this variance mainly relates to additional payments (£1m to date, £1.2m projected to year end) within Primary Medical Services to GP practices currently experiencing difficulty.

It is worthwhile noting that the highest proportion of costs in the current year have been incurred on GP practices located in North Ayrshire however costs have been incurred on practices across all three Partnership areas.

This pressure was offset in the previous financial year by non-recurring slippage on the Primary Care Transformation Fund, as well as non-recurring Dental Services savings. A non-recurring allocation of funding for Out of Hours services £0.305m which has been applied to Ayrshire Urgent Care Services (AUCS) has assisted in reducing the projected overspend. The overspend for AUCS is £0.165m which has improved due to a redesign of appointment allocation and better control of rates through positive management action.

Dental Services is projected to underspend by £0.451m however it should be noted that recruitment is ongoing for specialist posts which may impact in the final quarter of the current financial year.

Prison and Police Healthcare is projected to underspend by £0.053m predominately as a result of staffing savings which have resulted from vacancies within the service.

The following table provides a summary of services managed by East Ayrshire Health and Social Care Partnership under Lead Partnership arrangements:

	East Annual Budget £m
Community Prescribing	1.790
Dental	4.447
Family Health Services	45.279
PMS	12.065
Primary Care Development Director	12.551



	<table> <tr> <td><b>Sub total: Primary Care</b></td><td><b>76.132</b></td></tr> <tr> <td>Guardianship patients – AWI</td><td>0.200</td></tr> <tr> <td>Standby Services</td><td>0.238</td></tr> <tr> <td>Prison and Police Healthcare</td><td>3.069</td></tr> <tr> <td>Marie Curie Cancer Care</td><td>0.088</td></tr> <tr> <td>War Pensioner</td><td>1.424</td></tr> <tr> <td><b>Sub total: East hosted</b></td><td><b>5.019</b></td></tr> <tr> <td><b>Total</b></td><td><b>81.151</b></td></tr> </table>	<b>Sub total: Primary Care</b>	<b>76.132</b>	Guardianship patients – AWI	0.200	Standby Services	0.238	Prison and Police Healthcare	3.069	Marie Curie Cancer Care	0.088	War Pensioner	1.424	<b>Sub total: East hosted</b>	<b>5.019</b>	<b>Total</b>	<b>81.151</b>
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	<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> <p>At month 10 the impact of the Lead Partnerships has been calculated based on the average NRAC share which is the method that was used in previous years and has been agreed by the Ayrshire Finance Leads.</p> <p>The NRAC shares are: North 36.8%, South 30.6% and East 32.6%</p>																
2.13	<p><b>Set Aside</b></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 projected to overspend of circa £9.0m.</p> <p>129 additional and unfunded beds were open at the 31st March 2018. This had reduced to 58 by the 31<sup>st</sup> January 2019. 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'. 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&amp;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.</p> <p>A draft 2018-19 calculation has been completed which shows we use £30.094m against the NRAC 'fair share' of £28.967m which is £1.127m above the 'fair share'. This will be reworked at the financial year end.</p>																
<b>3.</b>	<b>PROPOSALS</b>																
<b>3.1</b>	<b><u>Anticipated Outcomes</u></b>																
	Continuing to closely monitor the financial position will allow the IJB to take corrective action where required to ensure the partnership can deliver services in 2018-19 from																

	<p>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>
3.2	<b><u>Measuring Impact</u></b>
	This is the final 18/19 report to the IJB prior to the year-end report and annual accounts. Updates to the financial position will be reported to the IJB throughout 2019-20.
4.	<b>IMPLICATIONS</b>

<b>Financial:</b>	<p>The financial implications are as outlined in the report.</p> <p>Against the full-year budget of £234.918m there is a projected overspend of £0.332m (0.15%). The report outlines the action being taken and proposed action to reduce the projected overspend.</p> <p>The recovery plan totals £1.255m with £0.765m delivered to date. There are a number of other actions are being progressed to reduce the overspend further.</p> <p>The main areas of financial risk which may impact on this position are highlighted in the report.</p>
<b>Human Resources:</b>	None
<b>Legal:</b>	None
<b>Equality:</b>	None
<b>Children and Young People</b>	None
<b>Environmental &amp; Sustainability:</b>	None
<b>Key Priorities:</b>	None
<b>Risk Implications:</b>	Within the projected outturn there are various over and underspends including the non-achievement of savings which need to be addressed moving into 2019-20.
<b>Community Benefits:</b>	None

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

4.	<b>CONSULTATION</b>
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4.1	<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>
<b>5.</b>	<b>CONCLUSION</b>
5.1	<p>It is recommended that the IJB:</p> <ul style="list-style-type: none"> <li>a) Note the projected year-end overspend of £0.332m;</li> <li>b) Approve the changes in funding as detailed in section 2.11 and Appendix E;</li> <li>c) Note the impact of the financial recovery plan and the progress being made in delivering financial balance; and</li> <li>d) Note the potential impact of the Lead Partnerships</li> </ul>

**For more information please contact:**

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

## Appendix A

Partnership Budget - Objective Summary	2018/19 Budget									2018/19	
	Council			Health			TOTAL			Over/ (Under) Spend Variance at Period 9	Movement in projected budget variance from Period 9
	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
<b>COMMUNITY CARE AND HEALTH</b>	<b>53,596</b>	<b>53,968</b>	<b>372</b>	<b>11,986</b>	<b>12,050</b>	<b>64</b>	<b>65,582</b>	<b>66,018</b>	<b>436</b>	<b>308</b>	<b>128</b>
: Locality Services	24,679	25,478	799	4,178	4,160	(18)	28,857	29,638	781	780	1
: Community Care Service Delivery	25,796	25,576	(220)	0	0	0	25,796	25,576	(220)	(355)	135
: Rehabilitation and Reablement	1,046	930	(116)	1,735	1,554	(181)	2,781	2,484	(297)	(279)	(18)
: Long Term Conditions	1,737	1,641	(96)	4,315	4,658	343	6,052	6,299	247	236	11
: Integrated Island Services	338	343	5	1,758	1,678	(80)	2,096	2,021	(75)	(74)	(1)
<b>MENTAL HEALTH SERVICES</b>	<b>23,549</b>	<b>24,087</b>	<b>538</b>	<b>49,469</b>	<b>48,516</b>	<b>(953)</b>	<b>73,018</b>	<b>72,603</b>	<b>(415)</b>	<b>(207)</b>	<b>(208)</b>
: Learning Disabilities	18,037	19,031	994	477	340	(137)	18,514	19,371	857	893	(36)
: Community Mental Health	4,131	3,711	(420)	1,631	1,341	(290)	5,762	5,052	(710)	(676)	(34)
: Addictions	1,381	1,345	(36)	1,226	1,141	(85)	2,607	2,486	(121)	(83)	(38)
: Lead Partnership Mental Health NHS Area Wide	0	0	0	46,135	45,694	(441)	46,135	45,694	(441)	(341)	(100)
<b>CHIDREN'S AND JUSTICE SERVICES</b>	<b>31,737</b>	<b>32,012</b>	<b>275</b>	<b>3,523</b>	<b>3,186</b>	<b>(337)</b>	<b>35,260</b>	<b>35,198</b>	<b>(62)</b>	<b>(151)</b>	<b>89</b>
: Intervention Services	3,803	3,699	(104)	303	322	19	4,106	4,021	(85)	(102)	17
: Looked After & Accomodated Children	16,236	16,903	667	0	0	0	16,236	16,903	667	570	97
: Fieldwork	4,588	4,588	0	0	0	0	4,588	4,588	0	9	(9)
: CCSF	302	235	(67)	0	0	0	302	235	(67)	(48)	(19)
: Justice Services	2,661	2,661	0	0	0	0	2,661	2,661	0	0	0
: Early Years	321	216	(105)	2,847	2,484	(363)	3,168	2,700	(468)	(462)	(6)
: Policy & Practice	3,826	3,710	(116)	0	0	0	3,826	3,710	(116)	(124)	8
: Lead Partnership NHS Children's Services Area Wide	0	0	0	373	380	7	373	380	7	6	1
<b>PRIMARY CARE</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>48,830</b>	<b>48,744</b>	<b>(86)</b>	<b>48,830</b>	<b>48,744</b>	<b>(86)</b>	<b>(86)</b>	<b>0</b>
<b>ALLIED HEALTH PROFESSIONALS</b>				<b>4,637</b>	<b>4,546</b>	<b>(91)</b>	<b>4,637</b>	<b>4,546</b>	<b>(91)</b>	<b>(126)</b>	<b>35</b>
<b>MANAGEMENT AND SUPPORT COSTS</b>	<b>5,149</b>	<b>4,769</b>	<b>(380)</b>	<b>500</b>	<b>1,109</b>	<b>609</b>	<b>5,649</b>	<b>5,878</b>	<b>229</b>	<b>228</b>	<b>1</b>
<b>CHANGE PROGRAMME</b>	<b>658</b>	<b>574</b>	<b>(84)</b>	<b>1,284</b>	<b>1,169</b>	<b>(115)</b>	<b>1,942</b>	<b>1,743</b>	<b>(199)</b>	<b>(199)</b>	<b>0</b>
<b>TOTAL</b>	<b>114,689</b>	<b>115,410</b>	<b>721</b>	<b>120,229</b>	<b>119,320</b>	<b>(909)</b>	<b>234,918</b>	<b>234,730</b>	<b>(188)</b>	<b>(233)</b>	<b>45</b>
Remove the East (32.6%) and South (30.6%) Element of the North Lead Partnership Services	0	0	0			264			264	204	60
Add the North (36.8%) element of the East Lead Partnership Services	0	0	0			256			256	256	0
<b>REVISED POSITION</b>	<b>114,689</b>	<b>115,410</b>	<b>721</b>	<b>120,229</b>	<b>119,320</b>	<b>(389)</b>	<b>234,918</b>	<b>234,730</b>	<b>332</b>	<b>227</b>	<b>105</b>

# 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	
<b>COMMUNITY CARE AND HEALTH</b>	<b>65,582</b>	<b>66,018</b>	<b>436</b>	
Locality Services	28,857	29,638	781	<p><b>Older People permanent care homes</b> - permanent placements are projected overspend of £0.8292m based on 809 placements (555 Nursing and 254 Residential) and an assumption that placements are on a one in one basis to the end of the year. This is an increase of 3 places from month 9. Respite care projected overspend of £0.007m based on the spend to date. This also reflects the £0.300m of agreed funding from the Carers allocation which was agreed as part of the recovery plan in period 4.</p> <p><b>Independent Living Services :</b></p> <ul style="list-style-type: none"> <li>* Direct Payment packages projected underspend of £0.094m on 60 current packages.</li> <li>* Indirect Payment packages no charges to date, projected underspend £0.045m based on prior year spend.</li> <li>* Adult respite care projected overspend £0.030m based on current spend to date.</li> <li>* Residential Packages projected overspend of £0.064m based on 40 current packages and no further packages in year.</li> <li>* Community Packages (physical disability) overspend of £0.421m based on 63 current packages, and an expected decrease of 1 package.</li> </ul> <p><b>Equipment Budget</b> - £0.318m budget for equipment- projected £0.100m underspend in line with approved mitigation.</p> <p><b>Employee costs</b> - projected £0.217m underspend: Money Matters structure approved resulting in part year vacancies.</p> <p><b>NHS Packages of Care</b> - projected overspend of £0.163m due to high use of supplementary staffing.</p> <p><b>District Nursing</b> - projected underspend of £0.214m assuming Band 6 vacancies are filled.</p> <p><b>Income from Charging Orders</b> - over recovery of £0.100m expected per income received to date and projected income receivable.</p>
Community Care Service Delivery	25,796	25,576	(220)	<p><b>Care at home</b></p> <ul style="list-style-type: none"> <li>- in house service - projected underspend of £0.328m based on current costs. The cost of recruiting 30 staff in October and November is funded by a reduction in casual and overtime costs.</li> <li>- Purchased Care at home - projected underspend of £0.032m based on current level of spend continuing to end of year. This follows a review of the projection and use of more accurate data from the business unit.</li> </ul> <p><b>Direct Payments</b> - projected underspend of £0.063m based on 31 current package less 10% expected recovery from underspent balances.</p> <p><b>Transport costs</b> - projected overspend of £0.081m due to increase in staff mileage within care at home and ferry charges.</p> <p><b>Admin costs</b> - projected overspend of £0.105m mainly due to mobile phone equipment.</p> <p><b>Voluntary Organisations</b> - projected overspend £0.075m (CLASP HOPE £0.020m and Alzheimer £0.062m).</p> <p><b>Income</b> - projected over recovery £0.053m based on current receipts and an increase in Community Alarm income.</p>

	Budget £000's	Projected Outturn £000's	Projected Over/ (Under) Spend Variance £000's	
Rehabilitation and Reablement	2,781	2,484	(297)	<b>Employee costs</b> - projected underspend £0.184m due to vacancies. Adaptations Budget - £0.487m - projected £0.100m underspend in line with approved mitigation.
Long Term Conditions	6,052	6,299	247	<b>Carers Centres</b> - projected £0.100m underspend based on additional funding for the Carers Strategy. <b>Ward 1</b> - projected overspend of £0.387m assuming current staffing levels continue. <b>Ward 2</b> - projected underspend of £0.007m, assuming funding from East HSCP for Kirklandside Ward. <b>Elderly CMHT</b> - projected underspend of £0.069m assuming current staffing levels continue.
Integrated Island Services	2,096	2,021	(75)	<b>Patient Transport</b> - is projected to underspend as the project commenced later than budgeted.
<b>MENTAL HEALTH SERVICES</b>	<b>73,018</b>	<b>72,603</b>	<b>(415)</b>	
Learning Disabilities	18,514	19,371	857	<b>Residential Packages</b> - projected overspend of £0.035m based on current 39 packages £2.472m less 2% invoice variances. Adverse movement due to one new package which was not previously projected  <b>Community Packages</b> - projected overspend of £0.658m based on current 338 packages less 9.75% invoice variances and a net movement in year of 3 new packages. Challenge Fund savings of £0.256m (£0.144m achieved to date, £0.112m still to be achieved).  <b>Direct Payments</b> - projected overspend of £0.270m based on 41 current packages less 10% underspent balances and an expected increase of 1 package in year.  <b>Employee costs</b> - projected underspend £0.201m mainly due to vacant posts  <b>Income</b> - projected under recovery of £0.080m based on current 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	5,762	5,052	(710)	<b>Community Packages</b> - projected underspend of £0.424m based on 98 packages less assumed invoice differences between planned and actual service delivered plus a net increased of 4 packages. This underspend includes £0.150m in relation to additional funding projected for hospital discharges and £0.150m held for discharges which have not yet taken place. <b>Employee costs</b> - projected underspend £0.290m mainly due to vacant posts
Addictions	2,607	2,486	(121)	<b>Employee costs</b> - projected underspend £0.121m due to vacant posts

	Budget £000's	Projected Outturn £000's	Projected Over/ (Under) Spend Variance £000's	
Lead Partnership (MHS)	46,135	45,694	(441)	<p><b>Adult Community</b> - projected underspend of £0.239m due to vacancies and the cost of the crisis team being met by Action 15 funding.</p> <p><b>Adult Inpatients</b>- projected overspend of £0.591m due to a delay in bed sale income and use of supplementary staff. The projection assumes all of the beds will be sold by the end of February.</p> <p><b>UNPACs</b> - projected to underspend by £0.304m. Assumption that there will be no change to NHS GG&amp;C charge and there will be 2 new care packages in-year.</p> <p><b>LDS</b> - projected to underspend by £0.209m due to delay in UNPACs transfer.</p> <p><b>Elderly Inpatients</b> - projected to overspend by £0.225m due to use of supplementary staff which has reduced in recent months.</p> <p><b>CAMHS</b> - projected underspend is £0.394m based on projected staffing levels.</p> <p><b>MH Admin</b> - projected underspend of £0.140m. This is after the transfer of services to East and South.</p> <p><b>Psychiatry</b> - projected to overspend by £0.092m, primarily due to locums and a reduction in Dean funding. EMH Liaison post remains unfunded.</p> <p><b>MH Pharmacy</b> - projected to underspend by £0.151m mainly within substitute prescribing due to the benefit on over-accrual in 2017-18.</p> <p><b>Psychology</b>- projected to underspend by £0.594m based on projected staffing levels.</p> <p><b>CRES target</b> - projected overspend of £0.986m in relation to savings still to be identified.</p> <p><b>Projected underspends in other areas</b> - include Associate Nurse Director budgets £0.068m, slippage on mental health allocations of £0.070m and resource transfer reserve £0.015m.</p>
<b>CHILDREN'S SERVICES AND CRIMINAL JUSTICE</b>	<b>35,260</b>	<b>35,198</b>	<b>(62)</b>	
Intervention Services	4,106	4,021	(85)	<p><b>Employee costs</b> - projected underspend £0.193m mainly due to vacant posts.</p> <p><b>Care Leavers</b> - projected overspend Of £0.054m based on current number of service users.</p> <p>Supported Carers Scheme - projected overspend of £0.032m based on the current number of services users.</p>

	Budget £000's	Projected Outturn £000's	Projected Over/ (Under) Spend Variance £000's	
Looked After & Accom Children	16,236	16,903	667	<p><b><u>Looked After Children placements - projected underspend of £0.419m based on the following:-</u></b></p> <p><b>Kinship</b> - projected overspend of £0.193m. Budget for 302 placements, currently 320 placements and projecting 325 by the year end.</p> <p><b>Adoption</b> - projected underspend of £0.034m. Budget for 78 placements, currently 68 placements and projecting 70 by the year end.</p> <p><b>Fostering</b> - projected underspend of £0.334m. Budget for 140 placements, currently 116 placements and projecting 123 placements by the year end.</p> <p><b>Fostering Xtra</b> - projected underspend of £0.144m. Budget for 32 placements, currently 26 placements and projecting 26 by the year end.</p> <p><b>Private fostering</b> - projected underspend of £0.082m. Budget for 16 placements, currently 11 placements and projecting 11 by the year end.</p> <p><b>Fostering respite</b>- projected overspend of £0.016m.</p> <p><b>IMPACCT carers</b> - projected underspend of £0.010m based on 3 carers providing support for full year.</p> <p><b>Adoption Fees</b> - projected overspend of £0.070m due to external agency fees and 2 placements from other Councils.</p> <p><b>Residential School placements including community packages</b> - projecting an overspend of £0.967m. Projection based on 2 secure placements projected to March. 21 residential and community placements projected to March 2019.</p> <p>Remand budget- projected oversepnd of £0.060m based on 2 placements remaining to March.</p> <p><b>Employee Costs</b> - projected underspend of £0.066m due to vacancies.</p>
Fieldwork	4,588	4,588	0	<b>Outwith the threshold for reporting</b>
CCSF	302	235	(67)	<b>Employee costs</b> - projected underspend of £0.032m due to vacancies.
Criminal Justice	2,661	2,661	0	<b>Assumed to come in line with budget</b>
Early Years	3,168	2,700	(468)	<p><b>Employee costs</b> - projected underspend of £0.413m due to vacancies.</p> <p><b>CAMHS budget</b> - projected underspend of £0.056m</p>
Policy & Practice	3,826	3,710	(116)	<b>Children with a disability care packages</b> - projected underspend of £0.150m based on current placements.
Lead Partnership (CS & CJ)	373	380	7	<b>Outwith the threshold for reporting</b>



	Budget £000's	Projected Outturn £000's	Projected Over/ (Under) Spend Variance £000's	
PRIMARY CARE	48,830	48,744	(86)	Prescribing - projected underspend of £0.086m based on activity to date.
ALLIED HEALTH PROFESSIONALS	4,637	4,546	(91)	Employee costs - projected underspend due to vacancies.
Management & Support Services	5,649	5,878	229	CRES savings - projected overspend of £0.682m relating to CRES savings still to be identified and £0.055m in relation to workforce savings. This is partially offset by an underspend in contract inflation of £0.150m.
CHANGE PROGRAMME and challenge Fund	1,942	1,743	(199)	ICF - slippage on some projects.
TOTAL	234,918	234,730	(188)	

*Threshold for reporting is + or - £50,000*

**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 9 £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	Amber	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	Amber	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	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	Withdrawal 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 Projected to be Achieved at Period 9 £000's	Projected Shortfall
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	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	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	-
<b>TOTAL</b>				<b>3,739</b>	<b>3,313</b>	<b>2,612</b>	<b>701</b>

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 7 £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	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
<b>TOTAL</b>				<b>3,302</b>	<b>3,302</b>	<b>1,579</b>	<b>1,723</b>
<b>GRAND TOTAL</b>				<b>7,041</b>	<b>6,615</b>	<b>4,191</b>	<b>2,424</b>

## Financial Recovery Plan (IJB approved Sept 2018)

## Appendix D

Ref	Service Area	Recovery Action Proposed	Status: Complete In Progress Delayed	Estimated Benefit £ 000's	Achieved (included in the projected outturn) £ 000's	Remaining Balance £ 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.	Complete	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.	In Progress	100	-	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.	In Progress	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.	In Progress	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).	In Progress	150	-	150	Thelma Bowers
6	Cross Service	Audit of compliance with the charging policy to ensure consistency of application across services.	In Progress	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.	Complete	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.	Complete	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.	Complete	100	100	-	Stephen Brown
10	MH Inpatients	Current plans assume 4 bed sales to support service costs, actively market a 5th bed.	In Progress	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.	Complete	40	40	-	Thelma Bowers
<b>TOTAL</b>				<b>1,255</b>	<b>765</b>	<b>490</b>	

### 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 E

<b>COUNCIL</b>	<b>Period</b>	<b>Permanent or Temporary</b>	<b>£</b>
Initial Approved Budget	2		92,353
Resource Transfer	2	P	22,317
ICF Procurement Posts - Transfer to Procurement	2	T	(89)
Additional Pension Costs	4	P	(9)
Reduction in CJ Settlement for 1819	4	P	(243)
Budget from Education - Activity Agreements (Rosemount)	6	T	29
Transfer of Finance staff from Corporate to HSCP (part year budget)	9	P	308
Increase in Commercial Refuse Collection (corrected in period 10)	9	T	23
<b>Period 10 reported budget</b>			<b>114,689</b>

<b>HEALTH</b>	<b>Period</b>	<b>Permanent or Temporary</b>	<b>£</b>
Initial Approved Budget (includes estimated pay award)	2		137,142
Resource Transfer	2	P	(22,317)
Girfec-HV S-Bar	3	P	47
Specialist Pharmacist Upgrade	4	T	11
Pay Award	4	P	1,462
MH Admin – transfer to East and South	5	P	(1,198)
NES junior doctor funding	5	P	(80)
HD424 - NMAHP Clinical Lead	5	P	16
Allocation of the AHP budget	6	P	4,570
Mental Health Strategy - Action 15	6	P	571
ADP	6	P	462
Medical Pay Award	6	P	204
Medical Training Grade Adjustment	6	P	49

Band 3 Admin funding transferred from East	6	P	14
Breast Feeding Programme - Health Visitor	6	P	9
Mental Health Admin Split to South/East(Supplies)	6	P	(72)
Prescribing Reduction	6	P	(567)
Biggart Ward Closure 2017 - North Split	7	P	10
Medical Pay Award Correction	7	P	(64)
Ailsa Hairdressing transferred to South	7	P	(11)
Medical Training Grade Adjustment	7	P	(9)
Workforce saving allocation	7	P	(55)
Models of Care Funding	8	P	316
Split out of AHP Vacancies and Salaries	8	P	99
Health & Wellbeing Post and Veterans First to North	8	P	29
V1P Allocation Split East	8	P	27
Redistribution of AHP workforce saving allocation	8	P	(33)
Medical Training Grade Adjustment	9	P	15
Models of Care - Turnover Adjustment	9	T	(13)
Integrated Care Fund	9	P	12
Medical Training Grade Adjustment	10	P	36
Winter Plan 18/19	10	T	40
Models of Care - Turnover Adjustment	10	T	(15)
Prescribing Reduction	10	P	(478)
<b>Period 10 reported budget</b>			<b>120,229</b>

<b>GRAND TOTAL</b>	<b>234,918</b>
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