

**AGENDA ITEM NO: 4** 

Report To: Inverclyde Integration Joint Board Date: 12 May 2020

Report By: Louise Long Report No: IJB/38/2020/LA

Corporate Director (Chief Officer)
Inverclyde Health & Social Care

**Partnership** 

Contact Officer: Lesley Aird Contact No: 01475 715381

Subject: COVID-19 MOBILISATION PLAN

## 1.0 PURPOSE

1.1 The purpose of this report is to seek Integration Joint Board (IJB) approval of the Covid-19 mobilisation plan which outlines the measures and associated costs being put in place locally to address the emerging impacts of the Covid-19 pandemic.

### 2.0 SUMMARY

- 2.1 Across GG&C the 6 IJBs together with the Health Board have been working together to agree a consistent basis for estimating and reporting the anticipate costs to the Health Board and IJBs relating to the Covid pandemic. Mobilisation plans have been developed and costed for the period from March 2020 to the end of March 2021. These plans are reviewed and updated and submitted weekly through the Health Board to the Scottish Government
- 2.2 On 9<sup>th</sup> April the Cabinet Secretary confirmed approval in principle of the mobilisation plans already submitted by HSCPs across Scotland.

## 3.0 RECOMMENDATIONS

- 3.1 It is recommended that the Integration Joint Board:
  - 1) notes the process for development, review and weekly submission of mobilisation plans;
  - 2) notes the Cabinet Secretary's approval in principle of the submission so far;
  - 3) approves the actions as outlined in the mobilisation plan on the basis that the £0.450m of 2019/20 and £8.404m of 2020/21 Covid-19 costs are expected to be funded through Scottish Government Covid-19 funding, and
  - 4) authorises the Chief Officer to issue directions to the Chief Executives of the Health Board and Inverciyde Council to implement the enclosed mobilisation plan.

Louise Long Chief Officer Lesley Aird Chief Financial Officer

## 4.0 MOBILISATION PLAN

- 4.1 HSCPs across Scotland have drafted mobilisation plans to set out local approaches to tackling the spread of and other impacts on services and service users of Covid-19. Part of this planning includes an overarching estimate of the additional cost implications of tackling this. Inverclyde has worked closely with the other GG&C IJBs to develop its plan and feed into the GG&C wide plan. The anticipated financial aspects are submitted through the Health Board to the Scottish Government on a weekly basis. The 6 Chief Financial Officers (CFOs) are working closely with Finance colleagues to ensure consistency in approach and robust reporting arrangements.
- 4.2 In addition to normal financial controls, additional controls and monitoring have been brought in to control and monitor Covid-19 related spend as follows:
  - All Covid-19 related costs are being separately recorded.
  - All Covid-19 related spend requires Head of Service authorisation in addition to normal sign-off arrangements and regular reports come to the CFO and Senior Management Team. It has been agreed that this will be through the Head of Health and Community Care who is, together with the Chief Officer, coordinating the HSCPs Covid-19 response efforts.
  - Weekly submissions of anticipated costs up to March 2021 are made through submission of mobilisation plans through NHSGG&C to the Scottish Government, including a reconciliation of any significant changes.
  - A financial impact analysis paper relating to the Covid-19 outbreak has been drafted for the May IJB for noting.
- 4.3 The Inverclyde mobilisation plan makes allowances for the following key areas:
  - Multi-agency response. The HSCP is working with a range of partners to deliver an
    effective response to the current situation. These include: other Council services,
    Acute services, Police and Fire Brigade, CVS Inverclyde, River Clyde Homes,
    Your Voice, care homes, care at home providers, Ardgowan Hospice and many
    more.
  - Purchase of additional care home beds. During the current crisis it is vital that Inverclyde's delayed discharge performance is maintained to ensure that acute beds are freed up as quickly as possible. Inverclyde has successfully maintained its Delayed Discharge performance to date.

Linked to this, provision was put in place from the start of the pandemic for an additional 50 care home beds within Inverclyde. The beds were costed for a full year with no tapering in line with advice received from the Scottish Government.

Initial plans included an option for a further 20 additional care home beds. As things have developed the additional 20 beds are no longer expected to be required and have been removed from the latest forecasts. Officers are reviewing the overall bed numbers required.

- Additional prescribing costs there was a significant 30% spike in prescribing volumes across the country in March.
- Additional staffing estimated costs of additional health and social staffing across Scotland to cover absence and service demand increases as more service users self isolate and require care at home and other services. Initial guidance was to estimate this as 10% of staffing. The estimates will be refined as actual costs being to come through. It is anticipated that these may be lower than the initial forecast.
- Additional equipment requirements, including a sharp increase in the levels of Personal Protective Equipment (PPE) staff require. Inverclyde was quick off the mark in relation to this and as a result got a good pipeline and reordering process

in place early on to ensure that staff locally within the HSCP and our other care providers have the equipment they need. Alongside this there has been a significant increase in I.T. required to support agile/home working and some additional medical equipment now required.

- Assessment and Testing Centres these have been opened in Inverclyde as part of the NHS Greater Glasgow & Clyde response to Covid-19.
- Homeless Accommodation Inverclyde carried out a review of the homelessness strategy in light of Covid-19. Following consultation with colleagues in Public Health and with support from Registered Social Landlord (RSL) partners the HSCP secured a number of temporary tenancies. This has enabled a significant reduction in the population of individuals living within the Homelessness centre. The number of homelessness presentations are increasing and the HSCP is currently developing its processes further to respond in the event of further early releases from the prison population.
- External providers teams are working closely with all external service providers to ensure they have the support they require to continue to deliver their services. Letters have been sent to providers confirming funding continuity during the current time. Daily updates are being received from providers regarding their staffing levels and impact on services. Initial guidance was to estimate this as 25% of external provision budgets. The estimates will be refined as actual costs being to come through. It is anticipated that these may be lower than the initial forecasts.
- Volunteering CVS is leading on setting up volunteering services to help combat loneliness, food poverty, mental health and wellbeing for the people of Inverclyde.
   A huge number of people and local businesses have come forward to support these efforts. Testament to what a kind and compassionate place Inverclyde is.

## 5.0 CURRENT COST ESTIMATES

- 5.1 Cost estimates have been collated over the following headings:
  - Purchase of additional care home beds we have provision in place for an additional 50 beds. Costs for these will be incurred as they are used. Latest Scottish Govt advice on these estimates has confirmed that care bed projections should be assumed for 12-18 months with no tapering
  - Additional prescribing costs significant 30% spike in prescribing volumes across
    the country in March. Scottish Government has advised that they believe the spike
    is a timing issue and volumes will come down accordingly over the next couple of
    months. Prescribing costs and volumes are being closely monitored and the HSCP
    anticipates an ongoing 1% increase over the six months over and above the March
    spike.
  - Additional staffing estimated cost of additional health and social staffing to cover absence and service demand increases as more service users self isolate and require care at home and other services, Scottish Government guidance is to assume 10% additional costs per month tapered over the year
  - Additional equipment costs, including Personal Protective Equipment (PPE).
     Increase in IT to support agile/home working. Additional medical equipment now required and significant increase in PPE requirements
  - Anticipated loss of income this includes the anticipated loss of day centre income for the next 6 months
  - Assessment Centres anticipated costs of the assessment and testing centres
    opening up across the country. Inverclyde is now running an assessment centre in
    Greenock and a testing centre in Port Glasgow. Additional costs relate to: staffing,
    GP services, equipment, buildings, marquee hire, supplies etc to set up and run
    these centres.
  - Homeless Accommodation increased demand within the homelessness service and a requirement to move more service users from the Inverciyde Centre into

rented accommodation to maintain social distancing. At present 23 service users have been moved from the centre into temporary accommodation which is a combination of rented flats and B&Bs. The service is also incurring additional security costs for the centre to support reduced staffing levels and maintain social distancing

- Impact of agreed 20/21 IJB savings which are not expected to be deliverable due
  to the outbreak the impact of this is not expected to be high for Inverclyde, most
  agreed savings should still be deliverable. This will be kept under review over the
  coming months
- Other costs a catch all for any costs not captured elsewhere in the return
- 5.2 Generic cost estimate tapering over the 12 months has been agreed for GG&C to be used as appropriate. Some cost lines such as purchase of care home beds and homelessness will not be tapered and will instead be based on more detailed estimates. The agreed tapering for other forecasts is as follows:
  - 100% for April to June 2020
  - 75% for July and August 2020
  - 50% September and October 2020
  - 25% for November and December 2020
  - 10% January and February 2021
  - 0% for March 2021
- 5.3 At the end of March all Health Boards submitted initial mobilisation plan estimates to the Scottish Government. GG&C initially submitted costs for the first 6 months only. Inverclyde HSCP's element of that was £5.011m. The Scottish Government came back and requested that the GG&C figures be submitted for the full year 2020/21 with cost tapering in place across the year as appropriate. Guidance on high level assumptions was issued at that time and the 6 IJB CFOs within GG&C agreed a common basis for their submissions with Health Board Finance. Since then the 6 CFOs have been making detailed weekly submissions on the agreed template, updating figures as information becomes available and decisions are taken.
- 5.4 On 9<sup>th</sup> April the Cabinet Secretary wrote to all Chief Officers to confirm her approval in principle of the mobilisation plans submitted the previous week for the activities identified. Scottish Government officials have been asked to follow up with partnerships to fully understand the additional expenditure already incurred and the anticipated future expenditure to allow appropriate funding to be allocated. The letter also noted the Cabinet Secretary's thanks "for the significant work to reduce delayed discharge numbers".
- 5.5 The table below shows a summary of the latest Inverclyde cost estimates as at the time of submitting this report, 27 April 2020. The full mobilisation plan submission for Inverclyde is enclosed at appendix 1.

		As At 27/04/2020							
	Revenue	Capital		Capital					
H&SCP Costs	2019/20	Capital 2019/20 2020/21 2020/21 2020/2  1,975,200  1,975,200  21,300  - 21,300  - 1,422,900  - 2,339,650  - 97,200  - 1,727,320  - 212,400  - 134,500  - 215,940  - 215,940  - 8,354,010  Subtotal 8,804,2  - 50,000  - 8,404,010	2020/21						
Delayed Discharge Reduction- Additional Care Home Beds	82,300	-	1,975,200	-					
Personal protection equipment	8,650	-	207,600	-					
Deep cleans	-	-	21,300	-					
Additional temporary staff spend	-	-	1,422,900	-					
Additional costs for externally provided services	174,900	-	2,339,650	-					
Additional FHS Prescribing	320,000	-	97,200	-					
Community Hubs	72,650	-	1,727,320	-					
Loss ofincome	-	-	212,400	-					
Other- Revenue Equipment and Supplies	5,000	-	134,500	-					
Other-Homelessness and Criminal Justice	106,700	-	215,940	-					
Offsetting savings - HSCP	(320,000)	-	-	-					
Total	450,200	-	8,354,010	-					
			Subtotal	8,804,210					
Expected underachievement of savings (HSCP)	-	-	al Capital 20 2020/21 2020/21 - 1,975,200 207,600 21,300 1,422,900 2,339,650 97,200 1,727,320 134,500 134,500 215,940 8,354,010 8,354,010 50,000 8,404,010 -	-					
Total	450,200	chue         Capital         Capital           /20         2019/20         2020/21         2020/21           ,300         -         1,975,200         -           ,650         -         207,600         -           -         -         21,300         -           -         -         1,422,900         -           ,900         -         2,339,650         -           ,000         -         97,200         -           ,650         -         1,727,320         -           -         -         212,400         -           ,000         -         134,500         -           ,700         -         215,940         -           ,000)         -         -         -           ,200         -         8,354,010         -           -         50,000         -           -         50,000         -           -         8,404,010         -	-						
			Total	8,854,210					

5.6 The updated mobilisation plan template now includes a decisions log which lists all decisions made as part of the mobilisation planning process.

## 6.0 DIRECTIONS

6.1 Direction Required to Council, Health

**Board or Both** 

Dire	ection to:
1.	No Direction Required
2.	Inverclyde Council
3.	NHS Greater Glasgow & Clyde (GG&C)

4. Inverclyde Council and NHS GG&C

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## 7.0 IMPLICATIONS

## **FINANCE**

7.1 As outlined in this report

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

Annually Recurring Costs / (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From	Other Comments
N/A					

## **LEGAL**

7.2 There are no specific legal implications arising from this report.

## **HUMAN RESOURCES**

7.3 There are no specific human resources implications arising from this report.

## **EQUALITIES**

- 7.4 There are no equality issues within this report.
- 7.4.1 Has an Equality Impact Assessment been carried out?

	YES (see attached appendix)
1	NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

# 7.4.2 How does this report address our Equality Outcomes

There are no Equalities Outcomes implications within this report.

Equalities Outcome	Implications
People, including individuals from the above	None
protected characteristic groups, can access HSCP	
services.	
Discrimination faced by people covered by the	None
protected characteristics across HSCP services is	
reduced if not eliminated.	
People with protected characteristics feel safe within	None
their communities.	
People with protected characteristics feel included in	None
the planning and developing of services.	
HSCP staff understand the needs of people with	None
different protected characteristic and promote	
diversity in the work that they do.	
Opportunities to support Learning Disability service	None
users experiencing gender based violence are	
maximised.	
Positive attitudes towards the resettled refugee	None
community in Inverclyde are promoted.	

# 7.5 CLINICAL OR CARE GOVERNANCE IMPLICATIONS

There are no clinical or care governance issues within this report.

# 7.6 NATIONAL WELLBEING OUTCOMES

How does this report support delivery of the National Wellbeing Outcomes

There are no National Wellbeing Outcomes implications within this report.

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for	None
longer.	
People, including those with disabilities or long term	None
conditions or who are frail are able to live, as far as reasonably practicable, independently and at home	
or in a homely setting in their community	

People who use health and social care services have positive experiences of those services, and have their dignity respected.	None
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	None
Health and social care services contribute to reducing health inequalities.	None
People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.	None
People using health and social care services are safe from harm.	None
People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	None
Resources are used effectively in the provision of health and social care services.	Robust planning, control and reporting of costs relating to the Covid-19 outbreak will ensure the IJB maintains effective governance and that robust budgetary control and management remains in place to ensure that resources are used effectively

# 8.0 CONSULTATION

8.1 This report has been prepared by the IJB Chief Financial Officer based on information developed in conjunction with NHSCCG and Inverclyde Council finance officer.

# 9.0 BACKGROUND PAPERS

9.1 None.

#### COVID-19 Local Mobilisation Plan- Financial Plan- H&SCP

Name of Body	Inverclyde H&SCP
Finance Contact:	Lesley Aird
Date of last update	27/04/2020

#### Key Assumptions

#### Additional Hospital Beds

Please complete tab 'Bed Model (HSCP)'

Staff absence rates assumption (%)	Mar-20		Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
, , , , ,		J												
Delayed Discharge Reduction- Assumptions	Number	Average Unit Cost (£)	Supporting Narrative											
Delayed Discharge Reduction- Additional Care Home Beds	50	760	50 bed block purchase @£760 pw from mid March to March 21											
Delayed Discharge Reduction- Additional Care at Home Packages														
Delayed Discharge Reduction- other measures														

	Revenue	Capital						Revenue							Capital		
H&SCP Costs	2019/20	2019/20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	2020/21	Body incurring cost (NHS or LA)	Supporting Narrative
Additional Hospital Bed Capacity/Costs																	
Delayed Discharge Reduction- Additional Care Home Beds	82,300		164,600	164,600	164,600	164,600	164,600	164,600	164,600	164,600	164,600	164,600	164,600	164,600		IJB	Block purchase of 50 additional beds from mid March 2020 to end March 2021
Delayed Discharge Reduction- Additional Care at Home Packages																	
Delayed Discharge Reduction- other measures																	
Delayed Discharge Reduction- other measures																	
Delayed Discharge Reduction- other measures																	
Delayed Discharge Reduction- other measures																	
Personal protection equipment	8,650		17,300	17,300	17,300	17,300	17,300	17,300	17,300	17,300	17,300	17,300	17,300	17,300		IJB	Estimated at £4k per week. Some of the PPE is provided through National route free of charge
Deep cleans			3,500	3,500	3,500	2,600	2,600	1,700	1,700	800	800	300	300	-			Based on £350 per deep clean x 10 cleans per month tapered
Estates & Facilities cost																	
Additional staff overtime																	
Additional temporary staff spend			207.100	276,500	276,500	155,300	155,300	103,600	103.600	51,700	51,700	20.800	20.800	-		IJВ	Additional staffing costs est at 10% in line with SG guidance. Figures tapered over the year
Additional cost from Contract Rate Uplift													.,,,,,,,				
Additional costs for externally provided services	174,900		363,900	366,550	366,550	279,150	279,150	191,450	191,450	98,850	98,850	46,250	46,250	11,250		IJB	Additional provider costs est at 25% in line with SG guidance. Plus 3.3% uplift for all social care providers announced by Scc Govt and additional security costs for methodone delivery for service users self isolating
Cost to 3rd Parties to Protect Services (where services are currently stopped)																	
Additional costs to support carers																	
Mental Health Services																	
Additional FHS Payments- General Opthalmic Services																	
Additional FHS Payments- GP Practices																	
Additional FHS Prescribing	320,000		16,200	16,200	16,200	16,200	16.200	16,200			-	-		-			Additional GP prescribing costs - based on figures provided by Prescribing Team following national dialogue
Community Hubs	72,650		278,600	278,600	278,600	208.950	208.950	139,300	139.300	69,650	69,650	27.860	27.860	-		LIB	Additional staffing and other costs for local assessment and testing centres
Other Community Care	,,,,,				.,,,,,,								,,,,,				
Staff Accommodation Costs																	
Additional Travel Costs																	
Loss of income			35,400	35,400	35,400	35.400	35.400	35,400	-	-			-			LIB	Anticipated loss of day centre income for 6 months
Other- Costs incurred by Council on behalf of HSCP			00,100	55,155	00,100		00,100									N.D	
Other - social care																	
Other - alternatives to day care																	
Other- Revenue Equipment and Supplies	5,000		21,700	21,700	21,700	16,300	16,300	10,800	10,800	5,400	5,400	2,200	2,200				Estimated at £5k per week - for additional IT, phones, licences etc
Other- Revenue Equipment and Supplies Other- Homelessness and Criminal Justice	106,700		26,600	24,500	26,600	24,500	24,500	26,600	12,230	12,230	13,230	12,230	6,110	6,610		LIB	Additional accommodation and security costs to ensure social distancing and provide interim alternative accommodation for 2 former residents of our homelessness centre
Other- Minor																	
Other - support to vulnerable service users - food																	
Other - Children and Families																	
Other - IT Costs																	
Offsetting savings - HSCP	(320,000)																Per SG advice the 19/20 prescribing costs are considered an timing issue and are therefore shown as an in and an out in 19.
Total	450,200	-	1,134,900	1,204,850	1,206,950	920,300	920,300	706,950	640,980	420,530	421,530	291,540	285,420	199,760			
														Subtotal	8.804.210	1	
Expected underachievement of savings (HSCP)			£4,200	£4,200	£4,200	£4,200	£4,200	£4,200	£4,200	£4,200	£4,200	£4,200	£4,000		2,22.,210		The IJB agreed £1m of savings for 20/21. Of these only £50k relating to increased charging income is expected to be irrecoverable
Total	450,200	-	1,139,100	1,209,050			924,500	711,150			425,730	295,740	289,420	203,760			
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### COVID-19 General Bed Modelling (for HSCP)

### COMPLETE ALL CELLS IN YELLOW

### SECTION A - BED NUMBERS

Number of Beds	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21		
Designated Covid Beds															
General	23	50	50	50	50	50	50	50	50	50	50	50	50		
Offsetting Releases															
General															
Total (Net change - All Beds)			•												
# Total	23	50	50	50	50	50	50	50	50	50	50	50	50		
SECTION B - EXPENDITURE	Normal Rate			Bed Cost	Staff	Linen	Catering	Equipment	Drugs	Oxygen	Cleaning	Other			Chec
	(NR)	Rate (PR)		Breakdown					g	,g	5.5am.ng	£3,292			
Cost of a General non-Covid bed per month (£)	£3,292			(NR)									in line with NC		
Cost of a General Covid bed per month (£)	£3,292											£3,292	in line with NC	HC rate	
Selection of Rate	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21		
Rate used - Designated Covid Beds	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR		
Rate used - Offsetting Releases	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR		
	•					•						•			
Forecast Expenditure (£000s)	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Total	
Designated Covid Beds															
General Covid	76,547	164,600	164,600	164,600	164,600	164,600	164,600	164,600	164,600	164,600	164,600	164,600	164,600	2,051,747	
Forecast Cost Reductions (£000s)	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Total	
Offsetting Releases															
General non-Covid	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Total Forecast Costs (£000s)	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Total	
Net Costs	76,547	164,600	164,600	164,600	164,600	164,600	164,600	164,600	164,600	164,600	164,600	164,600	164,600	2,051,747	

### Decision/Approval Tracker

Internal Reference Number	Decision Request Logged Date	Body (e.g. NHS H&SCP)	, Category of spend	Proposal Title	Proposal Description	Impact on Capacity (e.g. additional beds in acute, social care)	Risk Rating: (High, Medium, Low)	Status of proposal (e.g. in progress, commissioning , planning)	NHS/IJB/LA Contact- Name and Phone Number	Description of financial impact	Total Cost (£000s)	Is the total cost above the agreed financial threshold?	If below threshold, approved internally?	If over threshold, decision outcome?	SG Approver	Final Decision Date	Date Effective from	Duration of cost	Total Costs Incurred to Date (£000s)	Further Costs to be incurred in 2020/21 (£000s)	Offsetting budgets/ savings in 2020/21 (£000s)
INV001	23-Mar	HSCP	Delayed Discharge Reduction- Additional Care Home Beds	50 Additional Care Home Beds	Contract for 50 additional care home beds to ensure delayed discharge performance is maintained	Free up acute beds - cost to social care budget	Low	Additional beds have been commissioned	A Mailey	Cost of up to 50 additional care home beds. Once service users go into these care homes for a period of time it is difficult to safely return them home. Costs have been assumed for the full year without tapering	2,058	yes		Considered internally, approved by Cab Sec 09/04	J Freeman	09-Apr	23-Mar	12-18 mths	tbc	2,058	0
INV002	25-Mar	HSCP	Other- Homelessness and Criminal Justice	Rehoming 23 Homeless Centre residents	Arranging to rehome 23 Inverchyde Centre residents and costs of additional security cover for the centre to help ereforce social distancing and reduce risk to staff and Homeless Centre residents	Impact on Social Care and RSL housing to help reduce potential infection levels in a group that tends to be at higher risk	Low	23 service users have been transferred to external accommodation - flats & B&Bs. Additional security staffing have been contracted	A Hunter	Cost of 23 additional flats/B&Bs, additional security costs. Tapered after 6 months	323	yes		Considered internally, approved by Cab Sec 09/04	J Freeman	09-Арг	25-Mar	12 mths	4.8	318	0
INV003	25-Mar	HSCP	Delayed Discharge Reduction- Additional Care Home Beds	21 Additional Care Home Beds	Discussions with external care home provider Blackwood to secure 21 additional beds if required - following further review this will not be progressed further at this stage see INV016	Free up acute beds - cost to social care budget	Low	In progress but not required yet	A Mailey	No costs incurred to date - estimate based on full costs for 12 months from mid April	997	yes		Considered internally, approved by Cab Sec 09/04	J Freeman	09-Apr	23-Mar	12-18 mths	0	997	0
INV004	25-Mar	HSCP/NHS	Community Hubs	Assessment Centre Greenock	Assessment Centre set up in Greenock Health Centre	Help to reduce spread of the disease and support/treat infected patients	Low	Centre up and running	F Houlihan	Cost of additional HSCP staffing, equipment and supplies and cost of additional GP staffing too	900	yes		Considered internally, approved by Cab Sec 09/04	J Freeman	09-Apr	25-Mar	6 mths	8	892	0
INV005	30-Mar	HSCP/NHS	Community Hubs	Testing Centre Port Glasgow	Test Centre set up at Port Glasgow Health Centre	Initial testing for HSCP staff to help increase workforce availability. Centre will also help to reduce spread of the disease and support/treat infected patients	Low	Centre up and ready to go	E Cummings	Cost of additional HSCP staffing, equipment, marquee hire and supplies and cost of additional GP staffing too	900	yes		Considered internally, approved by Cab Sec 09/04	J Freeman	09-Apr	07-Apr	6 mths	tbc	900	0
INV006	30-Mar	HSCP	Additional temporary staff spend	Increase staffing capacity	Increase staffing capacity within HSCP to cover higher than normal absence levels and increased levels of service demand frouting a combination of a additional approximation of a additional hours' overtime for staff recurrence and additional approximation and Health staff - Intime additional temp staff continued and the staff of the staff of the staff part of the staff	Support care at home activity, support local people to self isolate, food parel deliveries, wellbeing support a lot help support social distancing and self isolation to slow the spread of the virus and minimise impact on acute services	Medium	Significant work already underway - still a work in progress		Cost of additional staff, overtime, volunteer expenses etc	1,423	yes		Considered internally, approved by Cab Sec 09/04	J Freeman	09-Apr	30-Mar	12 mths tapered	19.6	1,403	0
INV007	02-Apr	HSCP	Additional FHS Prescribing	Additional Prescribing cost	Spike in prescribing volumes in March 30% - advised to assume 1% additional cost over and above this in 20/21. Figures provided by NHSGG&C prescribing team - reduced linked to anticipated timing issue see INV017 below		Low	Ongoing	G Wallace	Additional cost of heightened GP prescribing	417	yes		Considered internally, approved by Cab Sec 09/04	J Freeman	09-Apr	23-Mar	12 mths tapered	320	97	0
INV008	02-Apr	HSCP	Personal protection equipment	Additional PPE	Anticipated increase in PPE spend	Ensuring staff are able to safely carry out their duties and keep people safe	Medium	Ongoing	E Cummings	Additional costs of additional PPE	216.2	no	yes - spend will be incurred as required		J Freeman	09-Apr		12 mths tapered	46.1	170	0
INV009	02-Apr	HSCP	Other- Revenue Equipment and Supplies	Additional Equipment	Anticipated increase in spend on other equipment, primarily IT and telephony equipment and associated licences	Supporting mobile working and ensuring staff are kept safe	Low	Ongoing	A Stevenson	Additional costs of additional IT and telephony	139.5	no	yes - spend will be incurred as required		J Freeman	09-Apr		12 mths tapered	3.6	136	0
INV010	02-Apr	HSCP	Loss of income	Loss of Income	Loss of Day care income for 6 months due to requirement to close day centres to ensure social distancing	Day centres closed but support services still being offered by phone/video calls	Low	Ongoing	A Brown	Loss of anticipated income	212.4	no	yes - spend will be incurred as required		J Freeman	09-Apr		6 mths	tbc	212	0
INV011	02-Apr	HSCP	Additional costs for externally provided services	Third Party Provider costs	Anticipated 25% increase in provider costs during the pandemic	Supporting providers protects local service users and minimises potential pressure on Acute beds and DD	Low	Ongoing	A Mailey	Anticipated increase in provider costs	2,380	yes		Considered internally, approved by Cab Sec 09/04	J Freeman	09-Apr		12 mths tapered	tbc	2,380	0
INV012	08-Apr	HSCP	Deep cleans	Deep Cleans	Anticipated costs based on 10 cleans per month at £350 per clean - costs tapered over year	Ensures buildings are available and safe for staff to access	Low	Ongoing	A Stevenson	Additional cost incurred	21	no	yes - spend will be incurred as required					12 mths tapered	0.6	21	0
INV013	08-Apr	HSCP	Expected underachievement t of savings (HSCP)	Savings undeliverable	The majority of the HSCP 20/21 savings are still deliverable but these relate to anticiated growth in some income lines that is unlikely to materialise due to covid	No impact on capacity - loss of income	Low	Ongoing	L Aird	Savings no longer deliverable due to virus	50	no	n/a					12 mths tapered	tbc	50	0
INV014	08-Apr	HSCP	Additional costs for externally provided services	Delivery of ORT to service users self isolating	Additional staffing/security to facilitate home deliveries of opiate replacement therapies to Addictions service clients who are required to self isolate	Supporting these service users to stay at home will help slow the spread of the virus and protect them	Medium	Commissioning	S Crawford	Additional costs incurred	0		awaiting CMT approval					6 mths	tbc	0	0
INV015	09-Apr	HSCP	Additional costs for externally provided services	3.3% uplift for social care workers	Scot Govt announcement of 3.3% uplift to all social care wokers	Supports providers to continue to deliver services	Low	Complete	n/a	Additional costs incurred	135	no	n/a		J Freeman	09-Apr	01-Apr	12 mths	tbc	135	0
INV016	24-Apr	HSCP	Delayed Discharge Reduction- Additional Care Home Beds	21 Additional Care Home Beds	21 additional beds - following further review this will not be progressed further at this stage	Free up acute beds - cost to social care budget	Low	Not being progressed	n/a	Reversal of previous decision INV003	-997	no	n/a			24-Apr	24-Apr	n/a	0	-997	0
INV017	09-Apr	HSCP	Additional FHS Prescribing	Additional Prescribing cost	Link to INV007 above - costs for 19/20 removed based or SG advice that the spike is expected to be a timing issue rather than additional cost		Low	Ongoing	n/a	Reduced additional cost of heightened GP prescribing	-320		n/a			24-Apr	24-Apr	n/a	-320	0	0