

**AGENDA ITEM NO: 9** 

Report To:	Inverclyde Integration Joint Board	Date:	20 March 2023
Report By:	Kate Rocks Chief Officer Inverclyde Health & Social Care Partnership	Report No:	IJB/19/2023/CG
Contact Officer:	Craig Given	Contact No:	01475 715381
Subject:	Inverclyde IJB Budget 2023/24		

## 1.0 PURPOSE AND SUMMARY

- 1.1 ⊠For Decision □For Information/Noting
- 1.2 The purpose of this report is to agree the budget for the Inverclyde Integration Joint Board (IJB) for 2023/24 in line with the Strategic Plan. The IJB Scheme of Delegation (3.2) requires that the IJB approves and annual budget. The Inverclyde IJB Integration Scheme (4.1) requires that the IJB allocate and manage an annual budget.
- 1.3 Inverclyde Council set their 2023/24 budget on 2 March and then confirmed a proposed funding allocation for this IJB for the year. Greater Glasgow & Clyde Health Board are still to confirm their final allocation but have given the IJB indicative allocations on 9 March 2023.
- 1.4 As part of its 2023/24 settlement Scottish Government announced a 2% funding uplift for Health, with a stipulation that the same level of uplift should be passed to IJBs Inverclyde's share of this is anticipated to be £1.396m. Also included in Health funding assumptions is a 2% increase in set aside budget. This is anticipated to be £0.694m.

As part of its 2022/23 settlement the Deputy First Minister wrote to all Council Leaders on 15 December outlining the details of his Draft Budget announcement earlier that day. Within the letter he advised that, "Local Authority budgets for allocation to Integration Authorities must be at least £95million greater than the 2022-23 recurring Budgets". The proposed 2023/24 contribution to the IJB as being £68.156million which is a £2.634million (4%) increase from the recurring contribution agreed on 24 February, 2022.

1.5 There are cost pressures within both the Social Care and Health services which are detailed in this report. Anticipated cost pressures and funding changes for 2023/24 currently total £6.827m (£4.969m social care, £1.858m health including set aside uplift). The paper proposes savings/ Budget adjustments which together reduce the expected funding gap to £0.603m. This paper also proposes the closing of this funding gap with the use of reserves while a further savings exercise is carried out to find the shortfall on a recurring basis.

- 1.6 This budget assumes that there will be no ongoing covid related costs on the basis that the Scottish Government has now removed any funding for this area.
- 1.7 Mental Health Inpatients Medical Agency, Children's External Placements and Prescribing represent ongoing areas of financial risk area within the IJB budget. These will be monitored closely throughout the year. The IJB have a number of smoothing reserves in place to help offset the impacts of any potential pressures in these
- 1.8 The proposed Set Aside budget for 2023/24 has been uplifted by 2% and is now £35.398m.
- 1.9 Any in year over/underspends will be funded from/carried forward into IJB reserves.

## 2.0 RECOMMENDATIONS

- 2.1 It is recommended that the Integration Joint Board:
  - 1. Notes the contents of this report;
  - 2. Notes the anticipated funding of £68.156m from Inverclyde Council.
  - 3. Notes the anticipated funding of £132.579m from Greater Glasgow & Clyde (GG&C) Health Board, which includes £35.398m for Set Aside;
  - 4. Authorise the Chief Officer delegated authority to accept the formal funding offers from the Council and Health Board;
  - 5. Agrees indicative net revenue budgets of £87.131m, to Inverclyde Council and £113.604m, including the "set aside" budget, to NHS Greater Glasgow and Clyde and direct that this funding is spent in line with the Strategic Plan. These figures reflect the £18.975m of Resource Transfer from Health within Social Care.
  - 6. Approves the savings adjustments detailed at 4.6
  - Approve the transfer of £1.24m of Core Pay Budget to East Dunbartonshire HSCP as part of the Specialist Children's Hosted Service as detailed in the Specialist Children's Paper and at 5.7
  - 8. Approve the Reserve proposals identified in Section 6.2
  - 9. Authorises officers to issue related Directions to the Health Board and Council;
  - 10. Approves the updated financial plan contained within proposed 5 year plan in Appendix 6.

Kate Rocks Chief Officer Inverclyde Health and Social Care Partnership

## 3.0 BACKGROUND AND CONTEXT

- 3.1 From 1 April 2016 the Health Board and Council delegated functions and are making allocations to the IJB in respect of those functions as set out in the Integration Scheme. The Health Board also "set aside" an amount in respect of large hospital functions covered by the Integration Scheme.
- 3.2 The IJB makes decisions on integrated services based on the Strategic Plan and the budget delegated to it. Now that the resources to be delegated have been proposed the IJB can set a 2023/24 budget, give directions and allocate budget where relevant to the Health Board and Local Authority for delivery of the services in line with the Strategic Plan.
- 3.3 This budget does not include any covid related costs. Scottish Government have stated that there will be no further funding in this area for 2023/24 and as such the IJB does not expect any further costs in 2023/24.

## 4.0 PROPOSALS

### 4.1 REVENUE FUNDING ALLOCATION FROM INVERCLYDE COUNCIL AND PROPOSED SAVINGS FOR SOCIAL CARE FOR 2023/24

- 4.2 The draft Local Government Finance Settlement was announced 15 December 2022. The condition set out by the Scottish Government for 2023/24 regarding the level of funding from Councils to the IJB was that the funding level provided by Councils must be greater than the 2022/23 contribution to the IJB plus the Council's share of the additional £95m. This additional funding is intended to cover the payment of the Living Wage. The IJB will also receive its allocations for Free Personal Nursing Care, removal of the interim care funding, Whole Family Wellbeing funding and additional payroll funding. The value of additional funding for Inverclyde is £2.634m. It should be noted that the IJB have received payroll recurring funding from Inverclyde Council of £0.600m. This is net of a £0.500m saving that Inverclyde Council approved as part of their budget process. It should be noted to the additional payroll funding that was allocated to Inverclyde Council was not included in the 2022/23 baseline budget and as such the Council were under no legal obligation to pass this funding to the IJB in 2023/24. It should be noted that Inverclyde Council passed the full IJB allocation of this in 2022/23.
- 4.3 On 2 March, the Council agreed its budget for 2023/24. Included within this, the Council will agree £68.156m to be designated as the Council's recurrent contribution to the IJB in line with the Integration Scheme.
- 4.4 There are a number of cost pressures in Social Care which require to be funded from the new 2023/24 monies and agreed savings. A full breakdown of Social Care pressures for 2023/24 are detailed below:

Social Care Estimated Inflationary Pressures		
Pay award (2022/23 shortfall and uplifts for 2023/24)		
Living wage uplift, National Care Home Contract Uplift and inflationary pressures on contracts		
Total Inflationary Pressures		
Social Care Estimated Other Cost Pressures		
Utilities & fuel	147	
Free Personal and Nursing Care uplifts		

Homelessness Support		
Whole Family Wellbeing Fund		
Scottish Disability Administration Funding		
Total Other Cost Pressures	843	

Budget reductions		
Management restructure		
Removal of interim funded care home beds 22/23 only		
Total Budget Reductions	(332)	
TOTAL PRESSURES (NET OF BUDGET REDUCTIONS)	4,969	

4.5 The pressures outlined above are to be funded through a combination of new funding prior year agreed savings and new service efficiency proposals. These are detailed as follows:

Funded by		
Share of £95m Social care funding		
Free Personal and Nursing Care funding	218	
Settlement adjustments/Management Restructure £3k reduction		
Reduction for temporary Interim Care Beds Funding 22/23		
Additional Payroll Funding from Council		
Contribution from pay contingency		
Contribution from general reserves		
Total Funding		
Gap to be funded by savings		

4.6 As per the table this leaves a remaining funding gap in Social care of £1.533m which needs to be addressed.

Over the last number of months, the SMT and the IJB Budget Working group have met on a number of occasions and have developed the following budget savings / adjustments:

Social Care Proposed Savings			
Social care management system reduced maintenance			
costs	(130)		
Reduction in Long Term care beds	(245)		
Additional Payroll Management target	(500)		
Review of sleepovers - Learning Disability	(126)		
Learning Disability - Day Services transport	(50)		
Review of long term vacancies	(100)		
Total proposed savings			
Remaining gap	382		

4.7 All of these savings / adjustments can be implemented with minimal service disruption, no loss of existing posts and no increase in charges to users.

It is proposed that due to the level of savings that have already been put forward as part of this paper that the current funding gap of £0.603m is closed from the use of reserves for 2023/24. This will enable officer's time to develop more savings initiatives to bring forward to a future IJB for consideration and approval.

The IJB recognises that there are existing core funding pressures in Children and Families of over £1m. This is currently the subject of an overall review of Children & Families services. For 2023/24 this pressure will be funded through the use of the Children and families specified Earmarked Reserve if required will be dealt with going forward as part of the 2024/25 budget process.

The proposed recurring budget for Social Care services based on the above is £68.156m. The net budget direction to the Council may be updated during the year.

### 5.0 REVENUE FUNDING ALLOCATION FROM GREATER GLASGOW & CLYDE (GG&C) HEALTH BOARD AND PROPOSED SAVINGS FOR HEALTH FOR 2023/24

5.1 The Health Board has provided an indicative budget. The Inverclyde funding for 2023/24 for recurring budgets is indicatively confirmed to be £132.579m, including £35.398m for Set Aside and £18.975m Resource Transferred to social care. Health funding was uplifted by 2% for all recurring budgets. This uplift has helped reduce the overall anticipated budget pressure on health. At present the funding allocation does not include the recurring element of the 2022/23 pay award. The Health Board are still working on the allocation but this budget assumes we will receive full funding

Health Estimated Inflationary Pressures			
Pay award	534		
Hospice additional funding	30		
Inflationary increase - Set aside budget	694		
Total Inflationary Pressures	1,258		
Health Estimated Other Cost Pressures			
Prescribing	400		
MH Clinical Governance Facilitator - currently			
Ren/Inverclyde	19		
STAD & Triptorelin - share of funding	4		
Share of MH Assessment Unit			
Potential District Nursing Upgrade			
Total Other Cost Pressures			
TOTAL PRESSURES			

5.2 Health anticipated cost pressures and funding changes are detailed below:

Funded by	£000s
Additional Health Funding allocation 2023/24	1,396
Inflationary increase - Set aside budget	694
Total Funding	2,090

Health Proposed Savings		
Implement Payroll Management Target		
Total proposed savings		
Remaining funding available		

5.3 The estimated increase linked to Pay Award assumes a similar uplift to the 2% uplift the IJB is being allocated from the Health Board. If the final pay award is more than 2% we are expecting this to be funded from the Health Board.

The proposed Savings in the Health side of the budget is expected to have minimal impacts on service delivery.

- 5.4 The notional "set aside" budget for large hospital services is indicatively confirmed as £35.398m for 2023/24. This figure represents the estimated actual usage of in scope Acute services.
- 5.5 The IJB has historically taken a very prudent approach to Prescribing budgets to allow for the high volume and cost pressures within the local area. For 2023/24 in line with 2022/23 the IJB expects this to be an area of risk. Recent drug pricing issues are likely to continue in 2023/24 mainly due to issues such as short supply, hyperinflation, and supply issues caused by the Ukrainian conflict. In 2023/24 it is proposed to increase the Prescribing budget by £0.400m in line with the overall uplift received. In the event the budget isn't sufficient to cover in year pressures the IJB has smoothing reserves in place to cover any short term cost fluctuations and ongoing issues around prices relating to short supply.
- 5.6 Prescribing is a very volatile budget area due to cost fluctuations in year which are out with IJB control. Since this area presents a significant risk to all IJBs it requires careful in year monitoring.

The proposed budget for Health services based on the above is  $\pounds$ 132.579m. The net budget direction to the Health Board may be updated during the year. As mentioned above we expect this to increase once the IJB is given its recurring allocation for the 22/23 pay award.

5.7 The IJB will also be aware that East Dunbartonshire will be hosting the Specialist Children Service from 2023/24 onwards. It is anticipated that this will see the transfer of £1.240m core staffing budget. This represent 35 WTE Staff. A full paper on this item is also to be presented at this IJB. Discussions are still ongoing around the transfer of some of the non-pay budgets, reserves and pay uplift. This will come to a future IJB. This funding is currently included in the overall Health budget allocation.

5.8 The summary position for the IJB is as follows:

Summary Position			
Council Funding Gap	382		
Health Available Funding Remaining			
NET BUDGET GAP			

5.9 Our integration Schemes state the following around the budget process "The Integration Joint Board will direct the resources it receives from the Parties in line with the Strategic Plan, and in doing so will seek to ensure that the planned activity can reasonably be met from the available resources viewed as a whole, and achieve a year-end break-even position". As such officers feel the above proposals meet this requirement.

## 6.0 **RESERVES**

- 6.1 As per the Financial Monitoring reports issued throughout the year any over/under spends in the final 2022/23 outturn will be offset against or added to reserves. An updated reserves position will be included in the IJB Revenue Monitoring reports issued throughout the year. Appendix 5 details the proposed carry forward of £16.368m to earmarked reserves based on the period 9 forecast information provided by the Council and Health Board.
- 6.2 Officers of the IJB have carried out a review of the current Reserves and would like to propose the following redistribution of existing reserves:

1. Anticipated underspends of  $\pounds$ 1.3m at P9 in the 2022/23 IJB budget are allocated to General Reserve  $\pounds$ 0.499m, Pay Contingency  $\pounds$ 0.501m, Children & Families smoothing reserve  $\pounds$ 0.200m and  $\pounds$ 0.100m Learning and development fund.

2. The existing unused £0.200m Fixed Term Staffing EMR and the unused £0.068m CAHMS post funding is redistributed to £0.175m Children & Families smoothing reserve and £0.093m Prescribing smoothing reserve

These movement and redistributions are aimed at the IJB's highest risk areas for 2023/24.

The IJB are asked to approve these Reserve recommendations.

# 7.0 INDICATIVE 5 YEAR PLAN

7.1 Appendix 6 contains the indicative 5 year financial plan for the IJB. This shows the proposed 2023/24 budget and indicative budgets for the next 4 years. The indicative future year budgets are based on the 2023/24 budget adjusted for known variations and the same core assumptions and scenario planning that was used in developing the Medium Term Financial Plan to 2023/24 which was agreed by the IJB in March 2019 and the updated plan to 2024/25 which was agreed by the IJB in March 2019 and the updated plan to 2024/25 which was agreed by the IJB in March 2020. It should be noted that this statement excludes the potential National Care Service from the financial assumptions at present until further financial and operational information is available. The statement at present excludes demographic pressures for the 5 years, this will be updated for in a new 5 year financial plan to be completed and presented to the June IJB.

7.2 The statement indicates that based on current projections there is a potential budget gap of £6.435m by 2027/28. Work is ongoing to mitigate any financial risks and develop sustainable operational and budget plans for the future. The IJB should note that an extensive savings exercise will commence early 2023/24 to look to close this overall long term funding gap.

## 8.0 IMPLICATIONS

8.1 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

SUBJECT	YES	NO	N/A
Financial	Х		
Legal/Risk			Х
Human Resources	X		
Strategic Plan Priorities	X		
Equalities			Х
Clinical or Care Governance			Х
National Wellbeing Outcomes			Х
Children & Young People's Rights & Wellbeing			Х
Environmental & Sustainability			Х
Data Protection			Х

## 8.2 Finance

One off Costs

The IJB is being asked to set an indicative 2022/23 budget at this stage in line with the recommendations above.

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report	Virement From	Other Comments

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact	Virement From (If Applicable)	Other Comments

## 8.3 Legal/Risk

There are no specific legal implications arising from this report.

### 8.4 Human Resources

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

### 8.5 Strategic Plan Priorities

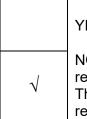
There are no specific Strategic Plan priorities implications arising from this report.

### 8.6 Equalities

### (a) Equalities

There are no Equalities Outcomes implications within this report.

This report has been considered under the Corporate Equalities Impact Assessment (EqIA) process with the following outcome:



YES – Assessed as relevant and an EqIA is required.

NO – This report does not introduce a new policy, function or strategy or recommend a substantive change to an existing policy, function or strategy. Therefore, assessed as not relevant and no EqIA is required. Provide any other relevant reasons why an EqIA is not necessary/screening statement.

### (b) Equality Outcomes

How does this report address our Equality Outcomes?

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

### 8.7 Clinical or Care Governance

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

## 8.8 National Wellbeing Outcomes

There are no National Wellbeing Outcomes implications within this report.

How does this report support delivery of the National Wellbeing Outcomes?

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	None
People, including those with disabilities or long term 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	None
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.	Development of a robust budget and effective budget management can ensure that resources are used effectively

## 8.9 Children and Young People

Has a Children's Rights and Wellbeing Impact Assessment been carried out?

	YES – Assessed as relevant and a CRWIA is required.
x	NO – Assessed as not relevant as this report does not involve a new policy, function or strategy or recommends a substantive change to an existing policy, function or strategy which will have an impact on children's rights.

# 8.10 Environmental/Sustainability

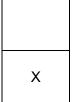
Summarise any environmental / climate change impacts which relate to this report.

Has a Strategic Environmental Assessment been carried out?

	YES – assessed as relevant and a Strategic Environmental Assessment is required.
x	NO – This report does not propose or seek approval for a plan, policy, programme, strategy or document which is like to have significant environmental effects, if implemented.

## 8.11 Data Protection

Has a Data Protection Impact Assessment been carried out?



YES – This report involves data processing which may result in a high risk to the rights and freedoms of individuals.

NO – Assessed as not relevant as this report does not involve data processing which may result in a high risk to the rights and freedoms of individuals.

## 9.0 DIRECTIONS

9.1		Direction to:	
	Direction Required		
	to Council, Health	2. Inverclyde Council	
	Board or Both	3. NHS Greater Glasgow & Clyde (GG&C)	
		4. Inverclyde Council and NHS GG&C	Х

## **10.0 CONSULTATION**

10.1 This report has been prepared by the IJB Chief Financial Officer. The Chief Officer, the Council's Chief Financial Officer and Director of Finance NHSGGC have been consulted.

## 11.0 BACKGROUND PAPERS

11.1 None.

# IJB BUDGET 2023/24

# FINANCIAL APPENDICES

- 1 Summary Budget
- 2 Social Care Budget
- 3 Health Budget
- 4 Directions
- 5 Reserves
- 6 5 Year Plan

#### INVERCLYDE HSCP

#### REVENUE BUDGET 2023/24

SUBJECTIVE ANALYSIS	Base Budget 2023/24 £000	Other Budget Movements/ Pressures £000	Savings £000	Transfers to/from NHS/Council/C ontribution from Reserves	Budget 2023/24 £000
Employee Costs	59,677	4,194	(750)	0	63,121
Property Costs	1,030	,	0	0	1,133
Supplies & Services, Transport, Admin & PTOB	58,188	1,407	(551)	0	59,045
Family Health Services (net)	27,402	0	0	0	27,402
Prescribing (net)	19,381	400	0	0	19,781
Resource Transfer (Health)	18,593	0	0	382	18,975
Income	(22,935)	0	0	(382)	(23,317)
Notional Set Aside Expenditure	34,704	694	0	0	35,398
Contribution from pay contingency				(199)	(199)
Contribution from General reserves	0	0	0	(603)	(603)
	196,040	6,798	(1,301)	(802)	200,735

OBJECTIVE ANALYSIS	Base Budget 2023/24 £000	Other Budget Movements/ Pressures £000	Savings £000	Transfers to/from NHS/Council/C ontribution from Reserves	Budget 2023/24 £000
Strategy & Support Services	7,291	1	(255)	(382)	6,052
Older Persons	36,008	1	(327)	0	38,376
Learning Disabilities	9,699		(231)	0	10,239
Mental Health - Communities	4,573		(26)	0	4,952
Mental Health - Inpatient Services	10,122		0	0	10,328
Children & Families	15,590	1,289	(122)	0	16,758
Physical & Sensory	2,712	210	(20)	0	2,902
Alcohol & Drug Recovery Service	2,753	159	(24)	0	2,888
Assessment & Care Management / Health & Community	2,641	273	(101)	0	2,814
Support / Management / Admin	1,991	38	0	0	2,029
Criminal Justice / Prison Service	118	125	(24)	0	219
Homelessness	1,044	133	(21)	0	1,156
Family Health Services	27,402	0	0	0	27,402
Financial Planning	1,232	0	(150)	0	1,082
Prescribing	19,568	400	0	0	19,968
Resource Transfer	18,593	0	0	382	18,975
Contribution from pay contingency				(199)	(199)
Contribution from General reserves				(603)	(603)
HSCP NET EXPENDITURE (DIRECT SPEND)	161,336	6,104	(1,301)	(802)	165,337
Notional Set Aside Expenditure	34,704	694	0		35,398
HSCP NET EXPENDITURE	196,040	6,798	(1,301)	(802)	200,735

PARTNERSHIP FUNDING/SPEND ANALYSIS	Base Budget 2023/24 £000	Other Budget Movements/ Pressures £000	Savings £000	Transfers to/from NHS/Council/C ontribution from Reserves	Budget 2023/24 £000
NHS Contribution to the IJB	130,518	1,829	(150)	382	132,579
Council Contribution to the IJB	65,522	4,969	(1,151)	(1,184)	68,156
HSCP NET INCOME	196,040	6,798	(1,301)	(802)	200,735
NHS Expenditure on behalf of the IJB	130,518	1,829	(150)	382	132,579
Council Expenditure on behalf of the IJB	65,522	4,969	(1,151)	(1,184)	68,156
HSCP NET EXPENDITURE	196,040	6,798	(1,301)	(802)	200,735
HSCP SURPLUS/(DEFICIT)	0	0	(0)	0	(0)

### APPENDIX 2

#### SOCIAL WORK

#### **REVENUE BUDGET 2023/24**

SUBJECTIVE ANALYSIS	Base Budget 2023/24 £000	Other Budget Movements/ Pressures £000	Savings £000	Transfer from NHS /Contribution from Reserves £000	Budget 2023/24 £000
SOCIAL WORK					
Employee Costs	34,319	3,588	(600)		37,307
Property costs	1,024	103	0	0	1,127
Supplies and Services	1,286	0	(130)	0	1,156
Transport and Plant	397	8	(50)	0	355
Administration Costs	756	0	0	0	756
Payments to Other Bodies	50,676	1,270	(371)		51,575
Income	(22,935)	0	0	(382)	(23,317)
Contribution from pay contingency				(199)	(199)
Contribution from General reserves				(603)	(603)
SOCIAL WORK NET EXPENDITURE	65,522	4,969	(1,151)	(1,184)	68,156

OBJECTIVE ANALYSIS	Base Budget 2023/24 £000	Other Budget Movements/ Pressures £000	Savings £000	Transfer from NHS /Contribution from Reserves £000	Budget 2023/24 £000
SOCIAL WORK					
Children & Families	11,764	1,211	(122)	0	12,854
Criminal Justice	118	125	(24)	0	219
Older Persons	29,230	2,496	(327)	0	31,399
Learning Disabilities	9,131	760	(231)	0	9,659
Physical & Sensory	2,712	210	(20)	0	2,902
Assessment & Care Management	2,641	273	(101)	0	2,814
Mental Health	1,322	252	(26)	0	1,548
Alcohol & Drugs Recovery Service	915	122	(24)	0	1,013
Homelessness	1,044	133	(21)	0	1,156
Planning, Health Improvement & Commissioning	1,968	137	(161)	0	1,944
Corporate directorate (incl business support)	4,677	(751)	(94)	(382)	3,451
Contribution from pay contingency				(199)	(199)
Contribution from General reserves				(603)	(603)
SOCIAL WORK NET EXPENDITURE	65,522	4,969	(1,151)	(1,184)	68,156

COUNCIL CONTRIBUTION TO THE IJB	Base Budget 2023/24 £000	Other Budget Movements/ Pressures £000	Savings £000	Transfer from NHS /Contribution from Reserves £000	Budget 2023/24 £000
Council Contribution to the IJB	65,522	4,969	(1,151)	(1,184)	68,156
Surplus/(Funding Gap)					0

# **APPENDIX 3**

# <u>HEALTH</u>

# **REVENUE BUDGET 2023/24**

SUBJECTIVE ANALYSIS	Base Budget 2023/24 £000	Other Budget Movements/ Pressures £000	Savings £000	Resource Transfer to Social Care £000	Recurring Budget 2023/24 £000
HEALTH					
Employee Costs	25,359	606	(150)		25,815
Property	6				6
Supplies & Services	5,074				5,074
Family Health Services (net)	27,402	129			27,531
Prescribing (net)	19,381	400			19,781
Resource Transfer	18,593			382	18,975
Income	(0)				(0)
HEALTH DIRECT NET EXPENDITURE	95,814	1,135	(150)	382	97,181
Notional Set Aside Expenditure *	34,704	694			35,398
HEALTH NET EXPENDITURE	130,518	1,829	(150)	382	132,579

OBJECTIVE ANALYSIS	Base Budget 2023/24 £000	Other Budget Movements/ Pressures £000	Savings £000	Resource Transfer to Social Care £000	Recurring Budget 2023/24 £000
HEALTH					
Children & Families	3,826	78			3,904
Health & Community Care	6,778	199			6,977
Management & Admin	1,991	38			2,029
Learning Disabilities	568	12			580
Alcohol & Drug Recovery Service	1,838	37			1,875
Mental Health - Communities	3,251	153			3,404
Mental Health - Inpatient Services	10,122	206			10,328
Strategy & Support Services	645	12			657
Family Health Services	27,402				27,402
Prescribing	19,568	400			19,968
Resource Transfer	18,593			382	18,975
Financial Planning	1,232		(150)		1,082
HEALTH DIRECT NET EXPENDITURE	95,814	1,135	(150)	382	97,181
Notional Set Aside Expenditure *	34,704	694			35,398
HEALTH NET EXPENDITURE	130,518	1,829	(150)	382	132,579

HEALTH CONTRIBUTION TO THE IJB	Base Budget 2023/24 £000	Other Budget Movements/ Pressures £000	Savings £000	Resource Transfer to Social Care £000	Recurring Budget 2023/24 £000
NHS Contribution for Direct Services	95,814	1,135	(150)	382	97,181
Notional Set Aside Expenditure *	34,704	694	0		35,398
Total NHS Contribution to the IJB	130,518	1,829	(150)	382	132,579
Surplus/(Funding Gap)	0				0



# INVERCLYDE INTEGRATION JOINT BOARD

# DIRECTION

# ISSUED UNDER S26-28 OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

**THE INVERCLYDE COUNCIL** is hereby directed to deliver for the Inverciyde Integration Joint Board (the IJB), the services noted below in pursuance of the functions noted below and within the associated budget noted below.

Services will be provided in line with the IJB's Strategic Plan and existing operational arrangements pending future directions from the IJB. All services must be procured and delivered in line with Best Value principles.

- Services: All services listed in Annex 2, Part 2 of the Inverclyde Health and Social Care Partnership Integration Scheme.
- Functions: All functions listed in Annex 2, Part 1 of the Inverclyde Health and Social Care Partnership Integration Scheme.

Associated Budget:

SUBJECTIVE ANALYSIS	Budget 2023/24 £000
SOCIAL WORK	
Employee Costs	37,108
Property costs	1,127
Supplies and Services	1,156
Transport and Plant	355
Administration Costs	756
Payments to Other Bodies	50,972
Income (incl Resource Transfer)	(23,317)
SOCIAL WORK NET EXPENDITURE	68,156

	Budget
OBJECTIVE ANALYSIS	2023/24
	£000
SOCIAL WORK	
Children & Families	12,854
Criminal Justice	219
Older Persons	31,399
Learning Disabilities	9,659
Physical & Sensory	2,902
Assessment & Care Management	2,814
Mental Health	1,548
Alcohol & Drugs Recovery Service	1,013
Homelessness	1,156
Planning, Health Improvement &	1,944
Corporate directorate (incl business support)	3,451
Contribution from pay contingency	(199)
Contribution from General reserves	(603)
SOCIAL WORK NET EXPENDITURE	68,156



# INVERCLYDE INTEGRATION JOINT BOARD

# DIRECTION

# ISSUED UNDER S26-28 OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

**GREATER GLASGOW & CLYDE NHS HEALTH BOARD** is hereby directed to deliver for the Inverclyde Integration Joint Board (the IJB), the services noted below in pursuance of the functions noted below and within the associated budget noted below.

Services will be provided in line with the IJB's Strategic Plan and existing operational arrangements pending future directions from the IJB. All services must be procured and delivered in line with Best Value principles.

- Services: All services listed in Annex 1, Part 2 of the Inverclyde Health and Social Care Partnership Integration Scheme.
- Functions: All functions listed in Annex 1, Part 1 of the Inverclyde Health and Social Care Partnership Integration Scheme.

SUBJECTIVE ANALYSIS	Budget 2023/24 £000
HEALTH	
Employee Costs	25,815
Property costs	6
Supplies and Services	5,074
Transport and Plant	27,531
Administration Costs	19,781
Payments to Other Bodies	18,975
Income	(0)
HEALTH DIRECT NET EXPENDITURE	97,181
Set Aside	35,398
HEALTH NET EXPENDITURE	132,579

OBJECTIVE ANALYSIS	Budget 2023/24 £000
HEALTH	
Children & Families	3,904
Health & Community Care	6,977
Management & Admin	2,029
Learning Disabilities	580
Alcohol & Drug Recovery Service	1,875
Mental Health - Communities	3,404
Mental Health - Inpatient Services	10,328
Strategy & Support Services	657
Family Health Services	27,402
Prescribing	19,968
Resource Transfer	18,975
Financial Planning	1,082
HEALTH DIRECT NET EXPENDITURE	97,181
Notional Set Aside Expenditure *	35,398
HEALTH DIRECT NET EXPENDITURE	132,579

Associated Budget:

### EARMARKED RESERVES BALANCE AS AT 1 APRIL 2023

(Assuming approval of proposed adjustments and draws)

	Opening
	balance 1
EMR type/source	April 2023
SCOTTISH GOVERNMENT FUNDING - SPECIFIC FUNDS	
Community Living Change Fund	240
Winter planning - Health Care Support Worker	206
Winter pressures - Care at Home	444
Care home oversight	60
MH Recovery & Renewal	522
Continuation of Interim Care Beds	92
Sub-total	1,564
EXISTING PROJECTS/COMMITMENTS	
Integrated Care Fund	83
Delayed Discharge	74
Welfare	257
Primary Care Support	296
SWIFT Replacement Project	360
Rapid Rehousing Transition Plan (RRTP)	136
LD Estates	480
Refugee Scheme	1,755
Tier 2 Counselling	270
CAMHS Tier 2	100
Whole Family Wellbeing	64
Contribution to Partner Capital Projects	966
Staff Learning & Development Fund	275
Continuous Care	425
Homelessness	350
ADRS non recurring posts	109
HSCP temporary posts	320
Sub-total	6,320
TRANSFORMATION PROJECTS	
Transformation Fund	1,745
Addictions Review	250
Mental Health Transformation	615
IJB Digital Strategy	376
Sub-total	2,986
BUDGET SMOOTHING	
Adoption/Fostering/Residential Childcare	1,175
Prescribing	891
Residential & Nursing Placements	1,003
LD Client Commitments	600
Client commitments continuing spend	200
Care at home 23/24	270
Pay contingency	501
Sub-total	4,640
Total Earmarked	15,510
GENERAL RESERVES	
General	858
TOTAL Reserves	16,368

### **APPENDIX 6**

# INVERCLYDE HSCP

# 5 year financial plan 2023/24 to 2024/25

I IP nosition	2023/24	2024/25	2025/26	2026/27	2027/28
IJB position	£000s	£000s	£000s	£000s	£000s
Indicative Base Budget	161,598	162,399	164,289	165,686	167,198
Pressures					
Payroll uplift 2%	2,599	1,278	1,303	1,329	1,356
Inflationary uplifts	2,570	2,580	2,712	2,851	2,998
Prescribing	400	405	413	421	429
Demographic pressures					
Settlement adjustments	364	0	0	0	0
Additional one-off pressures	200	0	0	0	0
23/24 amount funded from reserves		603			
Efficiencies	(1,301)	0	0	0	0
Total budget requirement	4,832	4,865	4,428	4,602	4,783
Funding available/assumed	(4,030)	(2,975)	(3,032)	(3,089)	(3,147)
Budget gap	802	1,890	1,396	1,513	1,636
Cumulative budget gap		1,890	3,286	4,799	6,435