

REPORT

2022/23 Financial Plan

Edinburgh Integration Joint Board

22 March 2022

Executive Summary

This report presents the draft 2022/23 financial plan for the Integration Joint Board (IJB). The paper sets out the latest available information, including the budgets which will be delegated from our partners and compares these to projected costs based on the current forecast outturn, anticipated growth and assumptions around additional resources.

The modelling indicates that delivering financial balance by the end of the year is achievable but there remains some risk as not all the mitigations can be quantified at this point. These mitigations, including significant reserve balances, are presented in paragraph 31. This position has been the subject of tri partite talks with our partners. All involved in these discussions recognise and accept a number of complex inter related factors, namely: the ongoing improvements in performance; the likely negative impact on outcomes for people and performance more generally of any further savings initiatives; the ongoing uncertainty as we emerge from the Covid pandemic; and the IJB's structural deficit. In this context, partners are supportive of the proposed approach and committed to working with IJB officers to bridge the financial gap as the year progresses.

Recommendations

It is recommended that the Board:

1. Note the 2022/23 budget offers from the City of Edinburgh Council and NHS Lothian and the resultant draft financial plan based on the revised delegated budgets, expenditure forecasts and proposed savings and recovery programme;
2. Agree that officers continue tripartite efforts with colleagues in the City of Edinburgh Council and NHS Lothian to bridge the remaining anticipated in year shortfall;
3. Agree to receive an update on progress on a regular and appropriate basis throughout the year; and
4. Issue a direction to the City of Edinburgh Council for the uplifting of contracts in line with nationally agreed methodology.

Directions

Direction to City of Edinburgh Council, NHS Lothian or both organisations	No direction required	
	Issue a direction to City of Edinburgh Council	
	Issue a direction to NHS Lothian	
	Issue a direction to City of Edinburgh Council & NHS Lothian	✓

Report Circulation

1. This report has not been presented elsewhere but the content and issues raised in the paper have been explored and discussed through a series of IJB Budget Working Group sessions.

Main Report

Background

2. Immediately after the agreement of the IJB's 2021/22 financial plan, work started on the 2022/23 budget. The Chief Finance Officer liaised closely with senior colleagues in the finance teams of NHS Lothian and the City of Edinburgh Council (the Council) as the financial plans for the respective organisations were developed. Work also continued to develop the savings and recovery programme in accordance with the board's aim to align efficiency with strategic intent.
3. In setting an unbalanced budget for 2021/22, the IJB recognised the clear risk that agreeing stringent additional savings at a time of significant uncertainty could lead to unnecessary public concern as well as a material deterioration in performance. On this basis, the board agreed that officers would work collaboratively with partners to identify the means to address the gap as the year progressed. Whilst the final financial results for the year are not yet available, the Chief Finance Officer has given the board significant assurance of a break even position for the year, reflecting the success of this approach.
4. At this current time, the draft financial plan for 2022/23 is not balanced. The underpinning details and assumptions are set out in this paper, and it is recommended that there is sufficient flexibility in the system to agree a similar approach as for 2021/22. This recognises that, to address sustainability in the longer term and avoid the need to relentlessly develop savings programmes that lead to inefficient "salami slicing", we need to evolve our thinking and adopt a longer term, strategic approach. This work has started, with an initial focus on scoping and identifying key areas where we can work collaboratively to start to reshape and reimagine services. The paper also sets out the additional funding included in the budget settlement, reflecting the increasing recognition of the financial challenges faced by health and social care. It is proposed that, as far

as possible, this funding is ring fenced to support the transition to sustainable services. This could also cover investing in the resources required to deliver the significant level of transformation required for sustainability, the need for which has previously been recognised by the board.

Funding - IJB delegated budget 2022/23

5. On 9th December 2021, the Cabinet Secretary for Finance and the Economy presented a draft one-year Scottish Budget and Local Government Finance Settlement to the Scottish Parliament. The figures contained within the settlement remain provisional, pending the draft budget's Parliamentary passage. This is a key document which informs the budgets delegated to the IJB from its 2 partners, the Council and NHS Lothian. Details are discussed in paragraphs 6 to 15 below.
6. For **local authorities**, the Scottish Government (SG) budget provided an additional £553.9m to be transferred from the health portfolio for investment in adult social care and integration (see table 1 below). This additional funding was to support: delivery of the living wage; continued implementation of the carers act; the uprating of free personal care; investment in increased capacity; with the balance for local prioritisation. Local authorities were required to pass this additional funding on in full to integration authorities and the Council's budget has been set on this basis.

	Scotland £m	Edinburgh IJB £m
Carers Act	20.4	1.7
Living wage - uplift to £10.02 from 1/12/21	174.5	14.2
Free personal and nursing care	15.0	2.4
Winter funding - investment in increased capacity	124.0	11.0
Winter funding - interim care	20.0	1.8
Balance (including living wage uplift to £10.50)	200.0	16.3
Total	553.9	47.3

Table 1: Council delegated budget 2022/23

7. As can be seen from the table, Edinburgh's share of the £553.9m is £47.3m. Whilst elements of this will be matched by increased costs (Carers Act, living wage uplifts and free personal and nursing care) the balance is available for

prioritisation by the IJB. In addition to the budget settlement the Scottish Government has subsequently announced funding for additional social workers (£22m for Scotland, £1.9m for Edinburgh) and the mental health recovery programme. Further announcements on mental health monies are expected as we move into 2022/23 and £0.5m has been recognised in the IJB's budget at this point.

8. Beyond this, analysis of the settlement is on-going as additional details are received. Based on work undertaken by Council officials, the provisional level of funding is slightly more favourable than the "flat cash" position originally assumed.
9. The Council set its budget on 24th February 2022. As well as passing on the £47.3m in full, the Council has provided funding to cover the upcoming increase in employers' national insurance costs and the full year impact of the 2021/22 pay settlement. However, the non recurring contribution agreed in 2021/22 has not been reinstated. This was one of a range of investments allocated by the Council following the receipt of significant additional revenue funding last financial year.
10. These adjustments bring the total budget delegated by the **Council** to **£284.5m**, as summarised in table 2.
11. All **health boards** received a baseline uplift of 2% along with further support for increased employer national insurance costs arising from the UK Health and Social Care Levy. In terms of pay, initial funding has been allocated in line with the Scottish public sector pay policy for planning purposes. This will be used as an anchor point in the forthcoming agenda for change pay settlement and funding arrangements for boards will be revisited by the Scottish Government in line with the outcome of the pay negotiations.
12. In addition, those boards furthest from NRAC parity received a share of £30.2m, NHS Lothian's share of which was £3m. NRAC is the formula used to assess each board's fair share of the overall NHS Scotland resource.
13. The NHS Lothian Finance and Resource Committee considered their financial plan on 17th January 2022. At this point, a gap of £50m was projected and the Director of Finance provided the board with limited assurance that a balanced

outturn would be achieved in 2022/23. Work continues to refine the plan and the final iteration will be scrutinised by the committee on 21st March 2022. Assuming they endorse the plan, it will be presented to the NHS Lothian board for approval on 6th April. Following which it will be submitted to the SG.

14. Based on the January version of the plan, we have now received formal confirmation of the indicative budget offer to the IJB. In line with the other 3 Lothian IJBs this reflects a 2% uplift on the recurring baseline budget excluding general medical services, giving a delegated budget of **£465.0m** for 2022/23. Further changes may be made pending the final SG settlement which will only be confirmed after the pay uplift for 22/23 is confirmed.
15. The combination of both budget offers would give the IJB a **delegated budget of £749.5m** at the beginning of financial year 2022/23 as shown below in table 2 below:

	Council £m	NHS Lothian £m	Total £m
2021/22 delegated budget	236.2	457.7	693.9
<i>Less: non recurring element</i>	(2.8)		(2.8)
Local Authority settlement:	47.4		47.4
Allocation for additional social work staff	2.0		2.0
Mental health recovery	0.5		0.5
Funding for NI increase & pay adjustment	0.8		0.8
Council motion adaptations	0.5		0.5
NHS pass through of 2% uplift		7.3	7.3
Total delegated budget 2022/23	284.5	465.0	749.5

Table 2: Indicative delegated budget 2022/23

Expenditure - IJB projected costs for 2022/23

16. In conjunction with the City of Edinburgh Council and NHS Lothian finance teams, the estimated costs of delegated services for the coming financial year have been modelled. The following assumptions were used in completing this task:
 - Council pay costs will rise as per the assumptions set out in the council budget (3% plus the full year impact of the 2021/22 pay deal and a further 1.25% as a result of the increase in employers' NI contributions);

- The impact of demographic growth on Council purchasing costs has been assumed at a further £9m. This assumption is in line the increase experienced in recent years and this approach will continue to be refined in line with the development of the joint strategic needs assessment (JSNA);
- National care home inflation cost estimates have been provided by the Council finance and contracting teams and are based on an assumed outcome from the ongoing national negotiations;
- Other contractual inflation has been calculated in line with the methodology developed nationally and allows for the increase in the living wage to £10.50 from 1st April 2022. For the first time in some years, this increase has been fully funded and it is **recommended** that the IJB agrees this and instructs the Council, via a direction, to implement. This direction is attached as appendix 2;
- Pay award for NHS staff has been calculated in line with the Scottish public sector pay policy for planning purposes. Final confirmation on the 2022/23 pay award is expected at the beginning of the new financial year, with additional funding anticipated to meet any costs increase. Accordingly, our planning assumption is that NHS Lothian will reflect the relevant funding in the budget delegated to the IJB;
- Health boards have been allocated a nominal 0.5% budget uplift on the baseline to meet the additional cost of the NI increase, although the impact will vary across the system. Lothian has still to calculate the additional financial impact, but on the basis resources are sufficient, they have committed to ensuring all additional NI costs incurred within delegated health functions are fully funded;
- The second iteration of the financial plan assumes a cost growth on hospital drugs of 10% overall. This is split between underlying drug growth and the impact of new medicines approved through Scottish Medicines Consortium. Work is ongoing to refine these estimates;
- The Medicines Management Team have estimated prescribing growth of 3.3% overall next year; and

- Excluding the elements above, the expected growth in NHS Lothian's non-pay costs has been set at 2% in the plan for 22/23. This also excludes energy costs, which are based on actual estimated growth (and non-delegated).

17. The financial impact of Covid is not reflected in the plan at this stage. This is discussed in more detail in paragraphs 21 to 24.

18. The impact of these assumptions is that the cost of delivering delegated services will rise by £68.3m to £778.8m, a breakdown is shown below in table 3:

	Council £m	NHS Lothian £m	Total £m
Baseline spend	252.7	457.9	710.6
Projected increases in spend:			
<i>Pay inflation</i>	3.5	5.0	8.5
<i>Purchasing inflation</i>	29.0	0.0	29.0
<i>Non pay inflation</i>	0.0	0.7	0.7
<i>Prescribing and medicines growth</i>		6.1	6.1
<i>Demographic growth</i>	9.0	0.0	9.0
<i>Provisions</i>	11.0		11.0
<i>Other</i>	2.92	1.0	3.9
Total increases	55.4	12.9	68.3
Total projected spend	308.1	470.7	778.8

Table 3: projected delegated expenditure 2022/23

19. Comparing these budget offers from the Council and NHS Lothian with the projected costs for delegated services gives the IJB a £29.3m savings requirement going into 2022/23 as shown in table 4 below:

	£m
Baseline budget	691.1
Uplift	58.4
Total budget	749.5
Baseline expenditure	710.6
Cost increases	68.3
Total expenditure	778.8
Savings requirement	(29.3)

Table 4: projected IJB savings requirement 2022/23

20. This can be further analysed as a brought forward deficit of £19.4m which will increase by £9.9m during the year. See table 5 below:

	Council £m	NHS Lothian £m	Total £m
Brought forward deficit	(19.3)	(0.2)	(19.4)
Increase 22/23	(4.3)	(5.6)	(9.9)
Total projected budget gap 22/23	(23.6)	(5.7)	(29.3)

Table 5: projected IJB savings requirement 2022/23

Financial impact of COVID-19

21. In the previous 2 financial years (ie 19/20 and 20/21) Covid related costs have been met in full by the SG via the mobilisation planning process.
22. On 25th February 2022, the SG's Director of Health Finance and Governance wrote to IJB Chief Finance Officers and health board Directors of Finance with the final Covid allocation for the year. This letter also confirmed an additional tranche of funding *'being provided on a non-repayable basis and includes provision for under-delivery of savings.'* It went on to say *'The significant disruption to services has created a backlog of demand as well as increasing unmet need and frailty of service users. Investment is needed across day care services, care at home and to support unscheduled care, to keep people within the community, where possible and safe to do so, to avoid unplanned admissions and impacts on delayed discharges. Alongside this is the impact on mental health and services have been stepped up through, for example, mental health assessment units. This funding will also cover sustainability payments to social care providers and additional staff costs across health & social care'*.
23. Edinburgh's share of this funding is £70.3m, with any balance not required to meet the costs of the pandemic in 2021/22 being carried forward. Finance teams in both the Council and NHS Lothian are finalising the in year Covid costs and this exercise will confirm the extent of any carry forward to 2022/23 via the IJB's reserves. It is clear at this point though that this figure will be significant, in the region of £35m to £40m.

24. For next financial year (22/23) the potential financial impact of Covid was assessed as part of the financial planning process and is currently being refined in the light of recent national changes.

Savings and recovery programme

25. The savings and recovery programme is covered in a separate paper to this meeting. This is aligned to the IJB's aim to deliver change through transformation and in a way which has minimal impact on outcomes for people and general performance.
26. In setting an unbalanced budget for 2021/22 the board recognised the difficulty of delivering further savings without having a materially detrimental impact. This decision reflected the fact that immediate possibilities had been exhausted and that a longer term strategic approach was required.
27. The planned programme for 2022/23 is summarised in table 6:

	£m
1. Previously approved proposals	0.41
2. Operational grip & control proposals	3.03
3. Transformation projects	2.3
Total	5.7

Table 6: summary IJB savings and recovery programme 2022/23

Achieving financial balance

28. We continue to face unprecedented challenges to the sustainability of our health and care system; an ageing population; an increase in the number of people living with long term condition; a reduction in the working age population which compounds the challenge in workforce supply, and fundamentally resource availability cannot continue to match levels of demand. These challenges are longstanding and have been recognised on a UK and Scotland wide basis. Indeed, the recent Audit Scotland report 'NHS in Scotland in 2021' underscores the financial and other challenges facing health and social care services across the country.
29. In the case of Edinburgh this is evidenced by the structural deficit which the IJB inherited from partners (particularly for social care services). Since its inception

the IJB has routinely faced an underlying budget gap which we are unable to bridge on a sustainable basis.

30. Paragraphs 25 to 27 above described the savings and recovery programme which would deliver cost reductions of £5.7m in 2022/23. This is clearly insufficient to balance the plan so further mitigations will be needed in the absence of additional savings proposals. As far as possible, the savings and recovery programme presented at this meeting, has been developed to align to the strategic plan and transformation programme. However, the opportunities to deliver further efficiencies at the same time as maintain performance and improve outcomes for people have now been exhausted. Savings beyond the level currently built into the plan will have a significant negative impact on performance gains and, ultimately on outcomes for people.
31. During the development and refinement of the IJB's financial plan, the Chief Officer and Chief Finance Officer have been working closely with the Council's Head of Finance and NHS Lothian's Director of Finance. These tripartite discussions have been productive and reflect a shared intent. A key part of the discussions has been the impact of the additional measures which would be required to balance the plan. The shared view which has emerged from these tripartite discussions is that there is sufficient flexibility in the system to support the IJB to deliver financial balance by the end of the year. There are several specific areas which have been identified as contributing towards bridging the budget gap, only some of which can be quantified at this point. These areas of flexibility include:
 - As detailed above, the SG settlement included **funding** of £11.0m to support an **increase in capacity**. Included in the financial plan is an assumption about the cost of demographic growth and this therefore contributes to the budgetary gap. It is proposed that 50% of the available funding is used to offset this pressure, thereby reducing the deficit by £5.5m. This would leave the balance of £5.5m for prioritisation against the investments needed to ensure ongoing sustainability. Both these sums would be held in reserves pending the approval of business cases;
 - The Partnership is in the process of procuring a framework for providers who can deliver an **overnight responder** service to adults within their

own homes. Where appropriate, this is intended to provide support in circumstances where an overnight carer stay would have been required. The associated procurement plan estimates that the service could provide support for an additional 60 people each year, and the financial impact of providing an alternative service has been incorporated in the estimate of demographic growth built into the financial plan. Introducing an overnight responder service would offset projected costs, and thereby the deficit, by c£1.2m;

- Expenditure projections for the year assume that the majority of existing vacancies are filled from 1st April. Given the ongoing recruitment and retention challenges and the high levels of current staffing gaps, it would be reasonable to assume that some of these vacancies will be carried for at least part of the year. It is not possible to predict with any certainty where these vacancies will fall or to quantify the financial impact at this point. This will be closely monitored as the year progresses;
- Whilst the value of reserves carried into next financial year has yet to be quantified it is clear that these will be substantial. Funding announced in October 2021 and received in 2021/22 will not be spent in full. This will be supplemented by the additional Covid funding released by the SG and discussed at paragraph 22 above. Taking these together it is clear that there will be significant flexibility in the system next financial year. The application of these reserves will have to be agreed with the SG and an early meeting to explore the potential for this is being sought;
- Added to this, the IJB will have additional reserves to carry into 22/23. These would include the anticipated underspend for 21/22; and
- As described in the separate paper to this meeting, we have moved away from high level savings targets for individual projects. Nonetheless work continues to develop detailed plans (particularly for purchasing and community equipment projects). It is not possible to quantify at this point what these efforts will deliver but it is a reasonable expectation that this work will support a route towards break even. These workstreams will be reinforced with discrete plans and clearly defined and measurable

efficiency outcomes and savings targets, underpinned by robust communication, training, and learning and development initiatives.

32. Where possible, the financial impact of these actions has been quantified and would reduce the budget gap to £16.9m as outlined in table 7:

	£m
Savings requirement	(29.3)
Savings & recovery programme	5.7
Shortfall after savings and recovery	(23.6)
Demography offsets	
<i>Responder service</i>	1.2
<i>Winter funding (capacity)</i>	5.5
Remaining gap for 2022/23	(16.9)
Other mitigating actions	16.9
Projected net position	0.0

Table 7: Balancing the IJB's 2022/23 budget

33. It is the shared view of the senior officers from the 3 partners that, those areas which, given the prevailing uncertainty, are problematic to quantify with any accuracy at this point will be sufficient to deliver the balance of £16.9m. This means that we have agreed with our partners that the remaining budget gap is at a level where it is feasible to identify means to address as the year progresses. This will require the support and commitment of all 3 organisations and strong leadership to deliver. Such an approach clearly brings risk but, equally, a more aggressive savings and recovery programme will lead to reductions in services and have a detrimental impact on people.
34. Work will continue across a number of fronts to provide the IJB assurance as the year progresses. In further mitigation, the financial position of the delegated services will be closely monitored. It is **recommended** that progress towards financial balance by the end the year is formally considered by the board following the quarter 1 review with further updates will be provided via the regular finance report.
35. The draft budget is reflected in the initial allocation for all delegated services set out in the financial schedule which accompanies appendix 2, direction EIJB-22/03/2022-1.

Moving towards sustainability

36. The financial outlook facing the IJB is longstanding and Edinburgh is not in a unique position, with integration authorities across Scotland facing similar financial challenges. Throughout 2021/22 there has been ongoing dialogue about how to balance the current care, workforce and financial deficits whilst ensuring the sustainability of the Edinburgh health and social care system.
37. It is recognised that the opportunities for developing and effectively delivering significant savings proposals within a single financial year has become increasingly challenging and not without risk to performance and quality outcomes. As such, it is acknowledged that the delivery of further savings will depend on complex funding, workforce and service change and redesign initiatives, that extend past a single financial year.
38. As mentioned above, work to develop an alternative approach has started. The innovation and sustainability programme, aligned to and underpinned by the IJB's strategic plan, will see us work with our staff and the people of Edinburgh to reshape and reimagine services for the future, within the funding available to us. This will be a long-term programme, the complexities of which will require a phased approach that will span multiple financial years. A list of potential pipeline proposals for the innovation and sustainability programme have been identified. We will continue to engage key stakeholders in an iterative process to further refine and develop these, whilst also working to identify any further opportunities. An initial, dedicated resource is now in place to support the scoping and prioritisation of key areas, followed by an assessment of feasibility and the production of outline change proposals for priority projects for consideration by the IJB. The first of these is expected to be available for consideration by end of Q2 2022. As work progresses it will be necessary to ensure additional capacity is made available to ensure this work is driven forward. Further detail about the innovation and sustainability programme is set out in the separate paper to this meeting.

Implications for Edinburgh Integration Joint Board

Financial

39. Are outlined in the main body of this report.

Legal/risk implications

40. This report outlines how the budget for 2022/23 could be balanced, albeit recognising that elements of mitigation are difficult to quantify at this point. This clearly presents a risk for the IJB as delivery is not certain. However we have secured the commitment of our partners to work collaboratively to address this as the year progresses. Regular updates will be provided for the board with the quarter 1 review providing a key milestone for review.
41. Whilst every effort has been made to ensure all likely additional costs have been incorporated into the financial outlook at this time, there remain a number of inherent uncertainties and associated risks. The financial planning process is an ongoing and iterative cycle, and it is not possible to fully identify all financial risks facing individual service areas, or the wider organisation, at this stage.
42. A number of specific risks should be considered by the board, as noted below:
 - The impact Covid has on service delivery, new and emerging models of care and the financial support that will be required to manage this;
 - The impact of material changes to the cost base for next year, for example the financial impact of workforce shortages and rising energy costs. This is being closely monitored by partners;
 - Potential costs associated with the national move from analogue to digital telecommunications systems have not been included in the plan at this stage. These are currently being quantified, particularly as they impact on the ATEC 24 alarm service;
 - Continued management of the financial exposure facing NHS Lothian arising from the escalation of operational performance on elective, mental health and unscheduled care capacity pressures including delayed discharges;
 - Availability of SG funding for both nationally funded programmes & initiatives and services funded annually on a non recurring basis; and
 - Ongoing impact of uncertainty in global markets as a result of the Russian invasion of Ukraine.

Equality and integrated impact assessment

43. There are no specific implications arising from this report.

Environment and sustainability impacts

44. There are no specific implications arising from this report.

Quality of care

45. There are no specific implications arising from this report.

Consultation

46. This report has been prepared with the support of the finance teams in the City of Edinburgh Council and NHS Lothian.

Report Author

Judith Proctor

Chief Officer, Edinburgh Integration Joint Board

Contact for further information:

Name: Moira Pringle

Email: moira.pringle@nhslothian.scot.nhs.uk Telephone: 0131 469 3867

Appendices

Appendix 1	Direction to the City of Edinburgh Council – Contractual uplifts from 1 st April 2022
Appendix 2	Direction to the City of Edinburgh Council and NHS Lothian – 2022/23

DIRECTION FROM THE EDINBURGH INTEGRATION JOINT BOARD (EIJB)

Partner agencies are required to carry out this direction in accordance with statutory and regulatory obligations, ensuring adherence to relevant guidance, policies and procedures, in pursuit of the EIJB's strategic objectives.

Reference number	EIJB-22/03/2022-2		
Does this direction supersede, vary or revoke an existing direction? If yes, please provide reference number of existing direction	No		
Approval date	22 March 2022 (TBC)		
Services/functions covered	<ul style="list-style-type: none"> • All purchased services • All direct payments, individual service funds and payments to personal assistants 		
Full text of direction	Implement a contractual uplift to bring rates in line with a minimum hourly rate of £10.50 for front line social care staff. This uplift to be in line with the methodology agreed nationally by the Scottish Government and COSLA.		
Direction to	The City of Edinburgh Council		
Link to relevant EIJB report/reports	TBC		
Budget/finances allocated to carry out the direction.	State the financial resources allocated to enable NHS Lothian or the Council or both to implement the direction.	<i>NHS Lothian</i>	<i>City of Edinburgh Council</i>
	Year one funding (2022/23)		£23.8m
	Recurring funding		£23.8m
Performance measures	Uplift to be actioned		
Date direction will be reviewed	September 2022		

DIRECTION FROM THE EDINBURGH INTEGRATION JOINT BOARD (EIJB)

Partner agencies are required to carry out this direction in accordance with statutory and regulatory obligations, ensuring adherence to relevant guidance, policies and procedures, in pursuit of the EIJB's strategic objectives.

Reference number	EIJB-22/03/2022-1		
Does this direction supersede, vary or revoke an existing direction? If yes, please provide reference number of existing direction	Yes - this supersedes direction EIJB-22/10/2019-1		
Approval date	22 March 2022 (TBC)		
Services/functions covered	All		
Full text of direction	For those services that are not covered by a specific direction, the City of Edinburgh Council and NHS Lothian will continue to provide services within current budgets, and in accordance with statutory and regulatory obligations, policies and procedures, endeavouring to meet national and local targets and the strategic objectives laid out in the Strategic Plan.		
Direction to	NHS Lothian and The City of Edinburgh Council		
Link to relevant EIJB report/reports	TBC		
Budget/finances allocated to carry out the direction.	State the financial resources allocated to enable NHS Lothian or the Council or both to implement the direction.	<i>NHS Lothian</i>	<i>City of Edinburgh Council</i>
	2022/23	The financial schedule sets out financial allocations for all delegated services.	
Performance measures	Relevant national and local targets, through regular reporting mechanism via Performance and Delivery Committee and the annual performance report.		
Date direction will be reviewed	April 2023		

Therapy services	10,493
Other core services	791
Total delegated - core	282,749
Delegated - hosted	
Community equipment	1,874
Complex care	1,142
Hospices & palliative care	2,520
Learning disabilities	8,308
LUCS	6,408
Mental health	31,321
Oral health services	7,335
Other hosted services	1,654
Primary care services	3,028
Psychology services	4,018
Public health	1,072
Rehabilitation medicine	5,134
Sexual health	4,012
Substance misuse	1,660
Therapy services	8,027
UNPAC	3,768
Total delegated - hosted	91,282
Delegated - set aside	
Acute management	2,922
Cardiology	4,047
Diabetes & endocrinology	2,130
ED & minor injuries	9,039
Gastroenterology	6,821
General medicine	24,176
Geriatric medicine	16,822
Infectious disease	6,085
Junior medical	1,826
Other set aside	747
Rehabilitation medicine	1,740
Respiratory medicine	5,661
Therapy services	8,955
Total delegated set aside	90,971
Net delegated budget - NHS Lothian	465,002
Total Net Delegated Budget (Council + NHSL)	725,701