

# **REPORT**

Finance update
Edinburgh Integration Joint Board
26th October 2021

# Executive Summary

The purpose of this report is to provide the Edinburgh Integration Joint Board (IJB) with an update on the financial performance of delegated services for the first 5 months of the year.

## Recommendations

It is recommended that the board note:

- a. the financial position for delegated services to 31<sup>st</sup>
   August 2021; and
- the ongoing tripartite discussions, led by the Chief
   Officer, to deliver financial balance.

#### **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. The information contained within this report was scrutinised by the Performance and Delivery Committee (P&D) on 13<sup>th</sup> October 2021.

#### **Main Report**

#### Background

- 2. In March 2021, the IJB agreed the 2021/22 financial plan and associated savings and recovery programme. Recognising that the additional measures required to balance the plan would have a significant negative impact on performance gains and, ultimately on outcomes for people, the board made the difficult decision to support a budget which did not deliver financial balance. At this point the plan had a deficit of £9.3m which has subsequently been reduced to £6.8m. The Chief Office and Chief Finance Officer are continuing tripartite efforts with colleagues in the City of Edinburgh Council (the Council), NHS Lothian and the Scottish Government to bridge this remaining shortfall.
- 3. As members are aware, the IJB "directs" budgets back to our partner organisations, the Council and NHS Lothian, who in turn provide the associated services. The majority of these services are delivered through the Partnership, with the balance being managed by NHS Lothian under the strategic direction of the IJB. Management of financial performance is undertaken through the governance arrangements in the 2 partner organisations and the Partnership.
- 4. Financial reporting throughout 2020/21 highlighted the challenges inherent in providing meaningful, consistent and relevant financial information in the context of prevailing uncertainty arising from the Covid pandemic. Whilst much work has been undertaken, this remains an issue for 2021/22 due to the ongoing uncertainty around Covid including mobilisation plans, timelines to continue Covid services, Covid exit planning and the fact that identifying Covid specific costs is not straightforward. Current service pressures and associated deteriorating performance will also increasingly impact the financial position, compounding these challenges.

#### Overview of financial position

5. The information in this report is based on the period 5 (August 2021) monitoring reports from the Council and NHS Lothian and the NHS Lothian quarter 1 review. These show an overall **projected deficit of £16.3m** (£6.3m for the first 5 months) as summarised in table 1 below. The main drivers of this position are slippage in the delivery of the purchasing related savings and the year to date impact of the budget deficit discussed above. Further detail is included in appendices 1 (NHS Lothian) and 2 (the Council), with narrative explanations in paragraphs 6 to 10.

NHS services
Core
Hosted
Set aside
Sub total NHS services
CEC services
Total

Annual Budget £k
297,078
98,237
99,760
495,075
239,197
734,273

To August 2021							
Budget £k	Actual £k	Variance £k					
101,381	100,879	501					
39,133	38,948	185					
38,555	39,342	(788)					
179,068	179,169	(101)					
99,666	105,893	(6,228)					
278,734	285,063	(6,329)					

Table 1: financial position for delegated services to August 2021

#### **NHS Lothian**

- 6. NHS Lothian has now completed its first financial forecast for the year, the quarter 1 review. Delegated health services are reporting a small overspend of £0.1m for the 5 months to August 2021. This rises to a projection of £1.3m by the end of the financial year.
- 7. As for last financial year, interpretation is complicated by the impact of Covid costs, offsets and funding. Given the low risk to receiving additional funding from the SG, NHS Lothian has allocated budgets against Covid costs incurred to date. This has allowed improved reporting of core pressures and easier budget management across services.
- 8. Key variances remain largely as previously reported and include:
  - Vacancies continue to drive the projected year end underspends in a number of services, including community hospitals (£0.8m), mental health

- (£1.2m), therapies (£0.4m) and rehabilitation (£0.4m). Given the impact of this level of vacancy on service delivery, operational staff continue to prioritise recruitment. In some areas, for example district nursing, new staffing models have been developed and the forecast assumes posts will be filled in line with this.
- Prescribing (£0.4m over) volumes are higher than predicted with a 1.4% increase over the average for the last 6 month of 2020/21. Prices have remained high but are due to reduce from July, the impact of this can be seen in the improvement in the outturn when compared to the current year to date position. Work to unpick the impact of Covid on this year's prescribing patterns is ongoing and an element of associated funding has been assumed in the outturn variance but no funding yet released in the current position.
- Hosted services (£0.4m over by year end) increased issues of community equipment, potentially linked to Covid, continues to be a material pressure. This service is hosted by the Edinburgh Partnership and is the subject of an ongoing review, supported by the sustainability and value team from NHS Lothian. Also driving the financial position for hosted services are overspends in adult mental health services where additional beds have been opened in response to activity pressures and medical staffing costs have increased. These are offset by underspends across a number of services, including therapies, rehabilitation and sexual health. These areaa are impacted by staff vacancies (see above) and the influences of Covid on the needs and delivery of these services.
- Set aside services (£3.0m over)- continues to be the main financial issue facing NHS delegated services. Key drivers include staffing (mainly at the acute hospital's front doors and in therapies) and drugs (in gastrointestinal and cystic fibrosis services). Other areas of pressure include adult insulin pumps within diabetes & endocrinology, and within therapy services at the Royal Infirmary of Edinburgh (both occupational therapy and physiotherapy. There continues to be pressures in relation to set aside junior medical costs also.

#### **City of Edinburgh Council**

- 9. Council delegated services are reporting an overspend for the year to date of £6.2m, equating to a projected year end outturn of £14.9m. This is after assuming funding to offset Covid related costs. As happened in 2020/21, where possible Covid costs have been captured separately and reported on the appropriate expenditure lines. Beyond this, funding has been recognised in line with the quarter 1 local mobilisation plan (LMP) submission. The one exception to this are any projected undelivered savings as the Scottish Government (SG) has not yet confirmed their position on this.
- 10. As with the NHS Lothian position, interpretation is complicated by the impact of Covid costs, offsets and funding. Nonetheless, the headline issues are in line with those reported throughout last year, namely:
  - External services (net projected overspend of £10.6m) also referred to as 'purchasing'. Progress continues to be made in purchasing savings plans totalling £11.2m, however it is unlikely that the required level of savings will be achieved in 2021/22. The impact of COVID on savings plans cannot be understated, with continuity of care and the safety of people using our services taking priority. Significant pressures over winter are anticipated, across both NHS and community services. These pressures could lead to a further deterioration in the reported financial position if additional community capacity is required.
  - Internal services (forecast net underspend of £3.1m) can mainly be attributed to employee costs across the services, but mostly in homecare and residential services. Continuing difficulty in recruiting to the sector in addition to care homes with low occupancy rates are the main contributing factors. Building based day services remain closed to service users, with some outreach taking place, therefore variable costs are down leading to a favourable budget position. However it is likely that there will be a link between the consequent reduction in capacity in internally run services and increases in purchasing costs.
  - Budget deficit (£6.8m over) reflecting the fact that the budget remains unbalanced.

#### Funding for the financial impact of Covid-19

- 11. In 2020/21 Covid related costs were met in full by the SG via the local mobilisation planning (LMP) process, with funding released by the Government at various points during the year. Reflecting the fact that pandemic related costs will span financial years, elements of funding received last year were held in reserve by integration authorities and carried forward to 21/22. For this financial year, the SG will release additional funds when these reserves, which for Edinburgh total £11.6m, are exhausted.
- 12. Quarter 1 LMP returns were submitted to the SG at the end of July, in anticipation of this the SG allocated an initial tranche of funding to NHS Boards to support current and ongoing Covid costs. This allocation also covered test and protect and vaccination expenditure. NHS Lothian received £12.6m for general pandemic costs.
- 13. Funding for Integration Authority is currently being assessed by the SG, taking into account amounts carried forward in reserves. Whilst this position is being considered, no further funding was allocated in advance of the quarter one review. However SG officials have reiterated that any specific areas where funding pressures are impacting on service delivery should be flagged at the earliest opportunity to Health Finance for consideration.
- 14. The SG's approach to supporting financial balance considers the 'core' and 'covid' positions separately. They continue to provide assurance that sufficient funding will be available to meet the associated costs in full. However, at this point, unachieved savings are being classed as core overspends and funding is not confirmed at this point. This is a national issue and Health Boards and Integration Authorities continue to press for a treatment consistent with 20/21 when slippage on delivery was recognised in the LMPs.
- 15. On behalf of the IJB and, in the context of the unbalanced financial plan, the Chief Officer and Chief Finance Officer are actively seeking to influence partners to maximise flexibility in the application of these monies in the current financial year.

#### **Savings and Recovery Programme**

- 16. Delivery of the IJB's Savings and Recovery Programme is overseen by the Savings Governance Board (SGB), chaired by the Chief Officer. This group meets monthly with all project leads submitting progress reports which inform the overall dashboard prepared by the Programme Manager. As part of this process all reports are signed off by finance colleagues to ensure accurate and appropriate reporting.
- 17. At their meeting on the 13<sup>th</sup> October 2021 the P&D Committee considered the routine quarterly update. Appendix 3 details the validated and reported progress status and associated RAG evaluation for all approved projects within the 21/22 programme up until the end of August 2021. Financial RAG evaluation for each project has been provided up until the end of July and lags one month behind the project progress status to allow time for the data to be confirmed with the NHS Lothian and Council finance teams. A high-level summary, outlining the current status and agreed actions, has been provided against each project.

# Implications for Edinburgh Integration Joint Board

#### **Financial**

18. Outlined elsewhere in this report

#### Legal/risk implications

**19.** Like any year end projection, the IJB's relies on a number of assumptions and estimates each of which introduces a degree of risk. The most material issues remain the unbalanced financial plan and the delivery of the agreed savings and recovery programme.

#### **Equality and integrated impact assessment**

20. There is no direct additional impact of the report's contents.

#### **Environment and sustainability impacts**

21. There is no direct additional impact of the report's contents.

#### **Quality of care**

22. There is no direct additional impact of the report's contents.

## Consultation

23. There is no direct additional impact of the report's contents.

# **Report Author**

# **Moira Pringle**

## **Chief Finance Officer, Edinburgh Integration Joint Board**

moira.pringle@nhslothian.scot.nhs.uk

# **Appendices**

Appendix 1	Financial outturn for NHS delegated services to August 2021
Appendix 2	Financial outturn for Council delegated services to August 2021
Appendix 3	21/22 savings and recovery programme - project status including progress and financial rag evaluation
Appendix 4	Glossary of terms

# FINANCIAL POSITION FOR NHS DELEGATED SERVICES TO AUGUST 2021

	Annual To August 2021				Year	
	Budget	Budget	Actual	Variance	%	end forecast
	£k	£k	£k	£k	70	£k
Core services						
Community Hospitals	13,595	5,556	5,150	406	3%	763
District Nursing	12,724	5,302	5,005	297	2%	47
Geriatric Medicine	3,058	1,167	1,162	5	0%	3
GMS	85,417	35,723	35,635	88	0%	(343)
Learning Disabilities	1,246	520	456	64	5%	142
Mental Health	8,624	3,602	3,068	534	6%	1,219
PC Services	11,682	974	991	(17)	0%	187
Prescribing	77,945	31,223	32,166	(943)	-1%	(355)
Resource transfer and reserves	66,128	12,102	12,213	(111)	0%	(121)
Substance Misuse	4,604	1,925	1,894	31	1%	(22)
Therapy Services	11,270	3,023	2,918	105	1%	350
Other	784	265	221	44	6%	187
Sub total core	297,078	101,381	100,879	501	0%	2,058
Hosted services						
Community Equipment	1,862	776	1,415	(639)	-34%	(1,310)
Complex Care	1,156	375	376	(1)	0%	13
Hospices & Palliative Care	2,505	1,044	1,052	(8)	0%	(5)
Learning Disabilities	8,433	3,028	2,995	33	0%	(44)
LUCS	7,367	2,832	2,918	(86)	-1%	(86)
Mental Health	31,908	12,360	12,420	(60)	0%	(517)
Oral Health Services	10,439	4,244	4,154	89	1%	(21)
Pharmacy	1,181	1,653	1,653	0	0%	0
Primary Care Services	2,994	1,261	1,229	32	1%	86
Psychology Services	5,163	1,979	1,883	96	2%	31
Public Health	1,069	310	257	53	5%	58
Rehabilitation Medicine	5,364	2,107	1,909	199	4%	369
Sexual Health	3,957	1,547	1,486	61	2%	184
Substance Misuse	2,180	849	829	20	1%	1
Therapy Services	8,393	3,452	3,163	289	3%	559
UNPAC	3,746	1,019	912	106	3%	342
Other	520	297	297	1	0%	(11)
Sub total hosted	98,237	39,133	38,948	185	0%	(351)
Set aside services	0.404	4.005	4.000	(40)	00/	40
Acute management	3,434	1,385	1,398	(13)	0%	19
Cardiology	4,120	1,688	1,690	(2)	0%	152
Diabetes & endocrinology	2,184	975	985	(11)	0%	(308)
ED & minor injuries	10,777	4,345	4,328	18	0%	91
Gastroenterology	10,480	4,761	5,075	(314)	-3%	(1,048)
General medicine	26,913	11,091	11,303	(212)	-1% 0%	(441)
Geriatric medicine	17,140	7,105	7,109	(5)		(228)
Infectious disease	3,367	(850)	(1,019)	169	5%	297
Junior medical	3,667	1,532	1,627	(95)	-3%	(201)
Other  Rehabilitation modising	644	220	195	25	4%	142
Rehabilitation medicine	1,728	720	757	(37)	-2% -4%	(77)
Respiratory medicine	5,998	1,835	2,071	(236)		(986)
Therapy services Sub total set aside	9,309	3,748	3,824	(76)	-1%	(456)
Sub total set aside	99,760	38,555	39,342	(788)	-1%	(3,042)
Net position	495,075	179,068	179,169	(101)	0%	(1,335)
Net position	499,079	173,000	179,109	<del>- (101)</del>	U /0	(1,333)

Year

# 21-22 SAVINGS AND RECOVERY PROGRAMME - PROJECT STATUS INCLUDING PROGRESS AND FINANCIAL RAG EVALUATION

External
Assessment and care management
Care and support
Care at home
Day services
Direct payments/individual service funds
Other/generic/universal services
Residential services
Transport services
Total external services
Internal
Assessment and care management
Care and support
Care at home
Day services
Equipment services
Management
Other operating costs
Other services
Residential services
Strategy/contract/support services
Therapy services
Pension costs
Total internal services
Total service wide COVID costs
Total costs
Income and funding
Government grants
Funding and cost recovery
Customer and client receipts
COVID LMP funding
Total income and funding
Budget gap
Net position

Annual Budget
£k
440
410
59,114
33,411
12,600
39,576 14,067
69,708 904
229,789
1/ 601
14,681 7,276
26,090
10,632
8,551
2,436
1,688
5,983
27,490 3,859
3,656
439
112,779
342,569
-0-1 <u>-</u> ,000
805
75,295
19,999
0
96,098
- 50,050
(7 273)
-(1,E10)
239,197

To August 2021								
Budget	Actual	Variance	%					
£k	£k	£k	/0					
171	171	0	0%					
24,631	25,864	(1,233)	-5%					
13,921	15,570	(1,649)	-12%					
5,250	5,178	72	1%					
16,490	17,910	(1,420)	-9%					
5,861	5,774	88	1%					
29,045	29,393	(348)	-1%					
377	294	82	22%					
95,746	100,153	(4,408)	-2%					
6,117	5,855	262	4%					
3,032	3,118	(86)	-3%					
10,871	10,299	571	5%					
4,430	3,738	692	16%					
3,563	4,464	(901)	-25%					
1,015	967	48	5%					
703	852	(148)	-21%					
2,493	2,271	221	9%					
11,454	10,700	754	7%					
1,608	1,720	(112)	-7%					
1,523	1,520	4	0%					
183	183	0	0%					
46,991	45,685	1,306	1%					
	0.700	(0.700)	NI/A					
	9,786	(9,786)	N/A					
142,737	155 625	(42 000)	-4%					
142,737	155,625	(12,888)	-4 70					
335	329	(6)	-2%					
31,373	31,283	(90)	0%					
8,333	. , ,		0%					
0,333	9,786	9,786	N/A					
40,041			10%					
10,011	10,101	-0,000	1070					
(3,030)	0	(3,030)	100%					
99,666	105,893	(6,228)	-3%					

(7,273)

(14,947)

#### 21/22 SAVINGS AND RECOVERY PROGRAMME - PROJECT STATUS INCLUDING PROGRESS AND FINANCIAL RAG EVALUATION

Project Number	Project Name	Phase	Target Saving	Progress RAG as of End AUGUST 21	Savings RAG as of End JULY 21	Progress update as of 31st August 2021
9	The Works	2	£30,000.00	1	1	SRO has recommended the planned service review be completed by an independent body. An action for the SRO to bring a proposal to next meeting detailing the planned activities required to achieve the agreed project benefits has been documented.
						Despite a delayed start, there remains enough time within the programme to complete a service review and implement an agreed service change that delivers savings.
						Work has been ongoing to implement changes across the purchasing project that support grip and control and improve practice, despite increased demand and reduced capacity due to the impact of COVID-19.
7	Purchasing	1	£7,190,000.00	4	2	A detailed project plan to address training issues and realign service provision following the pandemic has been developed, agreed and baselined. Data processing and quality issues continue to impact financial reporting against this project due to SWIFT issues. Mitigations to address the issues have been incorporated in the plan to realign the service. A significant dependency on the Policy Development project has been documented for this project.
	Community Equipment		£250,000.00	4	2	Covid pressures continue to change the demand for equipment at pace. As a result of this, the project has completed a rescoping exercise. Eight (8) project goals have been identified
n n		1				Work to quantify project goals, confirm project duration and prioritise work is expected to complete in the next 2 weeks. A revised project brief will be completed to determine if a formal change request is required for the project.
11	Substance Misuse	2	£150,000.00	4	2	In June 2021, a spike in Edinburgh drug related deaths raised a significant risk with the financial savings against the approved project. A new project plan, which is focused on an operational review to determine savings, is currently being scoped. The revised proposal is expected to be agreed and approved within the next 2 months. A change request will be completed and documented as part of this process.
17	Policy Development	4 £4,000	£4,000,000.00	4	2	A detailed gap analysis of current policies and procedures has been completed and a dependency on resources within the Office of the Chief Social Worker has been identified to complete the work.
			,			A single shared database of 115 policies and procedures has been identified as required to be reviewed or are a new document. The list has been agreed and shared with stakeholders, prioritisation has been completed based on recommendations from Audit and

## 21/22 SAVINGS AND RECOVERY PROGRAMME - PROJECT STATUS INCLUDING PROGRESS AND FINANCIAL RAG EVALUATION

Project Number	Project Name	Phase	Target Saving	Progress RAG as of End AUGUST 21	Savings RAG as of End JULY 21	Progress update as of 31st August 2021
						work is underway to identify resource gaps and determine the total effort required.
						Concerns have been raised regarding the process to complete a procedure review across different directorates within the CEC. A plan to address this issue is being undertaken with the Office of the Chief Social Worker.
14a	Medical Day Hospitals	3	£200,000.00	5	5	Work has progressed to refine an integrated community model. Financial modelling of the option is required to be completed to assess the impact on the Savings programme and provide assurance. This is expected to complete in October 2021. It is expected that this project will correct in both progress and financial RAG within the next quarter.
14b	Bed Based Review	3	£1,610,000.00	5	5	Slippage in the project has meant that full savings is unlikely to be realised. This is expected to be mitigated through in year savings as result of low occupancy rates in residential care.
5	Sexual Health Service Review	1	£110,000.00	5	5	Remobilisation of services has progressed concurrent to identifying areas for improvement. Service user engagement activities have been planned and a shared vision for the delivery of LSRHS across Lothian is expected to be agreed in October.  There is currently enough time to implement agreed service changes and deliver the project savings target. A service review is underway, and it is expected that this project will correct in both progress and financial RAG within the next quarter.
16	LD Overnight Services	4	£75,000.00	5	5	Four providers have been engaged and confirmed for a contract reduction that will deliver the project saving in full. It is expected that this project will correct in both progress and financial RAG within the next report period.
13	Hosted Service & Set aside	1	£2,160,000.00	6	6	Hosted services progress remains on track. It is expected that the progress and financial RAG will continue to improve over the next quarter.
4	Review Rehabilitation Services	1	£140,000.00	6	6	Opportunities for savings through vacancies and non-pay budgets have been identified. Further work to understand the impact of these on the model of care is expected to complete in the next 3 months. Current YTD underspend puts this project at minimal risk. It is expected that this project will correct in both progress and financial RAG within the next quarter.
10	Prescribing 21-11	2	£2,200,000.00	6	6	While good progress has been reported against this project, the impact of Covid continues to be of concern. Remedial actions have been put in place and it is expected that this project

Appendix 3

#### 21/22 SAVINGS AND RECOVERY PROGRAMME - PROJECT STATUS INCLUDING PROGRESS AND FINANCIAL RAG EVALUATION

Project Number	Project Name	Phase	Target Saving	Progress RAG as of End AUGUST 21	Savings RAG as of End JULY 21	Progress update as of 31st August 2021
						will correct in both progress and financial RAG within the next report period.
12	OP Day Opportunity	2	£163,000.00	6	8	Expenditure reduced at the expected level and the contract value in the General Ledger has been confirmed as reduced to deliver the savings. While a delay in occupancy of Canalside has slowed the progress of the project, CEC Finance have confirmed a delay in occupancy will not put the overall budget at risk.  It is expected that this project will correct in both progress and financial RAG within the next report period.
1	Ex Housing Support - Older People	1	£500,000.00	9	9	This project is progressing as planned and will be closed within the next reporting cycle with a full realisation of savings.
2	Day Centres & BeAble	1	£130,000.00	9	9	This project is progressing as planned and will be closed within the next reporting cycle with a full realisation of savings.
15	BBV Service Review	4	£45,000.00	5	10	Full savings have been confirmed. Project has been closed under CLR-04. Despite a full saving confirmed the project did not progress as expected. Lessons learnt have been logged in alignment with programme governance.
3	Learning Disabilities	1	£200,000.00	10	10	Full savings has been realised. Project activity has completed as planned. The project has been closed under CLR-01
8	Positive Steps	2	£30,000.00	10	10	Full savings has been realised. Project activity has completed as planned. The project has been closed under CLR-02

# **GLOSSARY OF TERMS**

TERM	EXPLANATION
ASSESSMENT AND CARE MANAGEMENT	Predominantly social work, mental health and substance misuse teams
CARE AT HOME	Services provided to over 65s in their homes.
CARE AND SUPPORT	Services provided to under 65s in their homes.
DAY SERVICES	Services provided to clients in buildings owned by the Council or a third party.
DIRECT PAYMENTS	Option 1 of self directed support where the client has chosen to be responsible for organising their care.
GMS	General medical services – largely the costs of reimbursing GPs who, in the main, are independent contractors carrying out work on behalf of the NHS as opposed to being employees.
HOSTED SERVICES	Services which are operationally managed on a pan Lothian basis either through one of the 4 Health and Social Care Partnerships or Royal Edinburgh and Associated Services (REAS).
INDIVIDUAL SERVICE FUNDS (ISF)	Option 2 of self directed support where the client has chosen for a 3rd party (not the Council) to organise their care.
LUCS	Lothian Unscheduled Care Service – provides out of hours GP services
RESIDENTIAL SERVICES	Services provided to clients in care homes.
SET ASIDE SERVICES	Acute hospital based services managed on a pan Lothian basis by NHS Lothian
THERAPY SERVICES	Mainly occupational therapy teams.