Item: 7.1.1

**REPORT** M8 Narrative - IJB

DATE 14/01/2025

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## 1. Financial Summary

- 1.1 This report reflects the spend to date and explains any recurring cost pressures and non-recurring cost pressures variances which have arisen in the first 8 months of the year which are likely to have an impact on our year end outturn.
- 1.2 As of 30 November 2024, the IJB is showing an in-year overspend of £2.314m and at year end the Board is showing a projected overspend position of £4.060m excluding reserves. Financial Flexibilities including unallocated NHS pay awards and Reserves held for both partners means a reported break-even position for the Integrated Joint Board by year end.

	Year to Date			Full Year Projection		
Income & Expenditure at Month 8	Budget	Actual	Variance under/ (over)	Budget	Actual	Variance under/ (over)
	£'000	£'000	£'000	£'000	£'000	£'000
Expenditure						
Chief Officer - Management	(2,378)	1,218	(3,596)	(197)	3,157	(3,353)
Adult Social Services	21,772	18,893	2,878	30,454	28,873	1,581
Allied Health Professionals	2,068	1,943	125	3,096	2,956	140
Community Nursing and Hospital	5,835	5,868	(33)	8,966	9,043	(77)
Community Care	1,246	1,273	(27)	1,869	1,785	84
Head of Dental Services	2,431	2, <del>4</del> 65	(34)	3,482	3, <del>4</del> 96	(14)
Head of Mental Health Services	2,457	2,767	(310)	3,757	4,270	(513)
Associate Medical Director	11,290	12,248	(958)	17,503	18,766	(1,263)
Alcohol and Drugs Partnership	597	615	(18)	715	716	(1)
Acute Set Aside	5,746	6,087	(341)	8,811	9,455	(644)
General Reserves	0	0	0	0	(4,060)	4,060
Total Net Cost	51,064	53,378	(2,314)	78,456	78,457	-

- 1.3 The biggest financial risk to Health and Social Care is the change in demographics and population. Using GP Lists in the last 17 years, there has been a large decline in the young, workforce population, women between 24-44 and an increase in the over 65 of nearly 27%. This has resulted in a £10m increase in costs over and above the inflationary uplifts which can be attributed to demographic changes over the last 13 years.
- 1.4 There are a number of areas of which have been difficult to project year end spend, specifically around GP Prescribing, locums in General Medicine, new 2C practices and

Mental Health but uncertainty around recruitment in the first 8 months results in a sizable overspend which may reduce slightly by year end. The meetings to discuss individual service pressures started at the end of September and will continue at monthly intervals.

1.5 There has been no uplift in baseline funding, and in a situation where some areas are seeing inflationary uplifts of between 5-10% on average, this is resulting in an estimated £1m + gap, specifically in Pharmaceuticals.

## 2. Income and Expenditure Summary

2.1 **Adult Social Services** – summary table is shown below:

	Year to Date			Full Year Projection			
Adult Social Care at Month 8	Budget	Actual	Variance under/ (over)	Budget	Actual	Variance under/ (over)	
	£'000	£'000	£'000	£'000	£'000	£'000	
Adult Care and Support Services	3,550	3,270	279	5,323	4,227	1,096	
Assessment and Care Services	1,084	785	299	1,626	1,273	353	
CnES Home Care	4,933	4,289	644	7,398	7,275	124	
CnES Residential Care	5,002	4,780	222	6,755	7,474	(718)	
Commissioning and Partnership Services	5,191	3,510	1,681	6,335	5,830	506	
Community Care	39	(3)	42	58	38	20	
Criminal Justice	256	142	114	384	183	201	
CnES Management and Admin	(3,619)	(56)	(3,562)	(3,024)	321	(3,345)	
Housing Services	204	230	(25)	306	306	0	
Independent Care Homes	1,716	2,120	(403)	2,574	2,574	0	
Surplus/ (Deficit)	18,357	19,067	(710)	27,736	29,500	(1,764)	

- 2.3 There is a £3,345k overspend in CnES and Management and Admin, this is due to unidentified savings being offset by budgeted specific and general reserves and high levels of vacancies.
- 2.4 The Home Care Service forecast underspend is £124k. This is mainly due to the level of vacancies within this service. This saving will be mostly offset by agency staffing costs, which were assigned to ensure continuity of care.
- 2.5 Combined Comhairle Residential Care and Adult Care and Support Services are forecast to be underspent by £378k. The new Goathill Campus is yet to be fully occupied and staffed resulting in vacancy savings but also a corresponding shortfall in expected income from service users.
- 2.6 The Criminal Justice section is forecasting a significant underspend due to staffing vacancies and absences plus the receipt of additional unbudgeted Scottish Government funding targeted at specific service outcomes.

- 2.7 Assessment and Care Services are forecasting an underspend of £353k due to vacancies within the Community Care Team including new posts created from additional Scottish Government funding and a reduction in spend on Self-Directed Support service recipients
- 2.8 Independent Care Homes are forecast to break even. This currently assumes the budgeted uplift will apply to the providers, however negotiations on the 2024/25 perbed price are currently on-going.
- 2.9 Commissioning and Partnership Services is forecast to be underspent by £506k. This is largely due to vacancies in new posts created from further Scottish Government monies for improving care in the community (START team).
- 2.10 **Allied Health Professionals** There are a number of underspends due to unfilled posts.

	Year to Date			Full Y	Full Year Projection		
Allied Health Professionals at Month 8	Budget	Actual	Variance under/	Budget	Actual	Variance under/	
			(over)			(over)	
	£'000	£'000	£'000	£'000	£'000	£'000	
Podiatry	411	354	57	613	552	61	
Dietetics	326	309	17	498	459	39	
Occupational Therapy	633	601	32	885	878	7	
Physiotherapy	698	679	19	1,100	1,067	33	
Surplus/ (Deficit)	2,068	1,943	125	3,096	2,956	140	

2.11 Community Nursing - There is a projected overspend of £170k due to the use of bank and excess hours to cover vacancies and sickness. The overspend is reducing after senior nurse review

	Year to Date			Full Year Projection			
Community Nursing and Hospital at Month 8	Budget	Actual	Variance under/ (over)	Budget	Actual	Variance under/ (over)	
	£'000	£'000	£'000	£'000	£'000	£'000	
Community Nursing	3,917	3,863	54	6,088	5,995	93	
Community Hospitals	1,918	2,005	(87)	2,878	3,048	(170)	
Surplus/ (Deficit)	5,835	5,868	(33)	8,966	9,043	(77)	

2.12 **Mental Health -** There is an overspend relating to the employment of high-cost psychiatrists working a one in two rota. Although very high, the projection is slightly lower than 2023/2024 due to the lower hourly rate of on call, however projection increasing as recruitment for a less costly locum has not happened as previously expected.

However, the psychiatrists are on the whole agency workers although the Board has tried on numerous occasions to recruit Direct Engagement consultants or substantive posts or NHS Locums, including this financial year.

2.13 There is an overspend in Mental Health Nursing where agency staff have been brought in to provide 1 to 1 observation. This will reduce but the overspend will and has transferred to several off-island placements.

	Year to Date			Full Year Projection			
Head of Mental Health Services at Month 8	Budget	Actual	Variance under/ (over)	Budget	Actual	Variance under/ (over)	
	£'000	£'000	£'000	£'000	£'000	£'000	
Mental Health Management	540	499	41	871	828	43	
Mental Health Consultants	469	781	(312)	704	1,230	(526)	
Mental Health Nursing	1,448	1, <del>4</del> 87	(39)	2,182	2,212	(30)	
Surplus/ (Deficit)	2,457	2,767	(310)	3,757	4,270	(513)	

- 2.14 **Associate Medical Director** There is an identified pressure of £610k due to the transfer of 2c practices (both practices manage Out of Hours and provide medical leadership for the two community hospitals). The increase in prescribing costs is due to the Board not being able to claim back VAT and the need to use locum cover whilst recruitment is taking place. There are also increase costs due to accommodation and travel required for locums. A successful recruitment campaign has taken place for Benbecula Medical Practice, but we anticipate another 3 months of some locum cover. A full review is taking place to ascertain whether having substantive post holders will significantly reduce overspend to bring back the 2c practices to a break-even position in 25/26.
- 2.15 High inflationary uplifts and aging population is resulting in high GP prescribing. Significate work is underway to try to reduce the overspend but high prices and aging population together with independent prescribing practices makes any efficiencies difficult to achieve.

	Year to Date			Full Year Projection			
Associate Medical Director at Month 8	Budget	Actual	Variance under/ (over)	Budget	Actual	Variance under/ (over)	
	£'000	£'000	£'000	£'000	£'000	£'000	
2 C Practices	162	549	(387)	207	817	(610)	
GMS	5,384	5,436	(52)	8,160	8,249	(89)	
GPS - Prescribing	3,692	4,222	(530)	5,962	6,537	(575)	
FHS	1,664	1,664	0	2,571	2,571	0	
Out of Hours	388	377	11	603	592	11	
Surplus/ (Deficit)	11,290	12,248	(958)	17,503	18,766	(1,263)	

- 2.16 Set Aside There are emerging pressures on the Acute Nursing budget with the need for high bank hours covering contingency beds required for delayed discharges. With reduced care home places of approx. 13% (staff vacancies due to poor demographics) and vacancies within homecare staffing the overspend is likely to continue. The overspend is masked by underspends in the respiratory ward and A&E
- 2.17 The General Medical Consultant cohort has been projected to overspend at year end by £213k with issues with recruitment and staff rotas set to cause continued overspends.
- 2.18 Pharmacy is overspending as it was in 2023/2024 and although budget has been increased to cover increases in volumes of drugs, pharmacy is still seeing pressures and are projecting a £193k overspend. An Audit has been undertaken on stock control, medicine policies etc. Actions from this report and the 15-box grid actions are underway and we are expecting to see some reductions in costs this year and an improvement in next. However, there is high inflationary costs on drugs. Work will also be undertaken on looking at whether NHS Western Isles are seeing the correct rebates from other Boards prescribing charges.

	Year to Date			Full Year Projection		
Set Aside	Budget	Actual	Variance	Budget	Actual	Variance
at Month 8			under/			under/
			(over)			(over)
	£'000	£'000	£'000	£'000	£'000	£'000
Acute Nursing	3,545	3 <b>,4</b> 85	60	5,334	5,397	(63)
SLA - General Medicine	309	309	0	617	617	0
General Medical Consultants	1,167	1,311	(144)	1,773	1,986	(213)
Pharmacy	347	475	(128)	520	713	(193)
ECR - Adult Mental Health	378	507	(129)	567	742	(175)
Surplus/ (Deficit)	5,746	6,087	(341)	8,811	9,455	(644)

## 3. Key Financial Risks

- 3.1 There are a number of financial risks associated with the Board achieving financial stability including the ability to break even in 24/25 and beyond.
  - It is anticipated that there maybe be further delayed discharges during the winter months which will result in further bank staff required to open contingency beds. The financial risk is £250k and is high.
  - Prescribing figures are estimated and based on last year's overspend, costs are likely to increase as the month's progress, specifically due to the increase in the +65 demographics. The Financial risk is £250k and is high.
  - Increase in Flu outbreaks in care homes, hospital and across the workforce may result in increased bank and relief staff. The financial risk is £100k and is medium.