

CÙRAM IS SLÀINTE NAN EILEAN SIAR

WESTERN ISLES HEALTH AND SOCIAL CARE PARTNERSHIP

Integrated Joint Board - Report for the 9 months to 31st December 2022

1. Key Figures and Comments

	Year To Date Month 9			Full Year Projection		
	Budget	Actual	Variance	Budget	Projection	Variance
	Under/(over)			Un	der/(over)	
	£'000	£'000	£'000	£'000	£'000	£'000
NHS	32,393	34,160	(1,767)	45,174	47,553	(2,378)
CnES	19,322	22,262	(2,940)	25,763	26,069	(305)
Transfer of Reserves assumed in Projection	0	2,800	2,800	-	-	-
Specific NHS Reserves inc. Covid	-	-	-	-	(2,026)	2,026
General Reserves	-	-	-	-	(657)	657
Total Integrated Board	51,715	59,222	(1,907)	70,937	70,939	(0)

<u>Headlines</u>

- 1.1 At 31st December 2022 the Board is showing an overspend of £1,907k and a projected breakeven position once budgeted reserves including Covid monies have been applied and residential and other income accruals have been adjusted.
- 1.2 There are a number of assumptions that have had to be made when producing the month 9 accounts. These are as follows:
 - NHS Pay award will be fully funded and passed on to IJB
 - Local Authority will receive part funding for the pay award which Social Care will receive their share, confirmed
 - For this financial year any shortfall relating to the LA pay award will come from general reserves,
 - Health and Social Care Partnership will be fully funded for Covid up to the agreed level of reserves.
 - All recurring allocations due to NHS Western Isles relating to Health and Social Care Partnership will be received in full, still awaiting key allocations as of 16 February 2023
 - Assumption about winter inflations including electricity, gas and fuel oil will remain high
- 1.3 The IJB continue to require funding for Covid-19 costs. There is carry forward funding available for Covid-19 from reserves and this will be adequate for the IJB needs for this financial year. Previously NHS Western Isles has received Covid-19 Funding for prescribing which they will not this year, but it is likely that for this year only there will be enough Covid-19 reserves to cover other increased cost, However, this funding is not recurring. The funds will be allocated to areas of Covid spend in February/March once adjusted allocations are received from Scottish Government

Month 9 high level variances

1.4 There are a number of high-level variances which are summarised below and detailed in the sections 2 to 10:

- CnES Residential Care There is a projected overspend of £353k. The overspend can be broken down and the main reasons as follows: to £260k estimated pay award, , increase relief and sickness £250k, utility costs £130k (of this £86k is fuel oil) less £350k Covid Funding. There has been a reduction in overspend of £260k from month 6 as Goathill will not be operative until the new financial year.
- Homecare There is a projected underspend of £392k. The overspend can be broken
 down and the main reasons as follows: to £1,266k underspend on pay award less
 cost of agency £874k.
- Psychiatric Consultants NHS Western Isles has a vacant post plus problems filling an on-call rota without calling on agency staff. The cost of using agency staff not only for the 40 hours day rota but for the 24/7 rota have been crippling with rates of pay upwards of £140 per hour plus VAT. This is unsustainable and the Board is looking at ways of reducing costs and whether we need consultants to provide 24/7 cover. The projected overspend is £710k.
- GP OOH There is an identified pressure of £534k in the Boards OOH service for both managing the community hospital in Barra and for the GP OOH service in Barra and the Uist and a smaller overspend in Lewis and Harris. This is due to the use of GP locums to ensure no detriment to services in Barra and Uist. The GP practice at Barra is now Health Board run as of September 2022 and NHS Western Isles are looking forward to 23/24 to employ substantive GP with Advanced Nurse Practitioners to manage all GP led services on Barra.
- Community Hospitals There is a projected overspend of £253k at the Uist and Barra Hospital due to the use of agency staff and bank to cover vacancies, sickness and Covid related absences. Covid monies will be transferred at year end.
- Medical Consultants It has been necessary to cover vacant posts and annual leave with high-cost agency staff both in Medical Consultants and specialist Doctors. There is an assumption that use of agency will drop in the 2nd half of the year, but this service is a risk of further overspending. Current yearend projection is £546k overspend.
- Prescribing Prescribing is overspent £420k, in the last 2 years previously the majority
 of overspend was offset by Covid funding, specifically for the replacement drug for
 Warfarin. There has been less Covid funding available this year though some adjustments
 may be made once funding is confirmed.

2. Income and Expenditure Summary

Sections 2-9 of this report provide further detail on the operational position

	Year to Date			Full Year Projection		
Income & Expenditure at Month 9	Budget £'000	Actual	Variance under/ (over) £'000	Budget £'000	Actual £'000	Variance under/ (over) £'000
Expenditure						
Chief Officer - Management	865	3,700	(2,835)	3,152	3,298	(146)
Adult Social Services	19,203	19,122	81	25,604	25,673	(69)
Allied Health Professionals	2,010	2,034	(25)	2,705	2,492	214
Community Nursing and Hospital	5,231	5,258	(27)	7,002	7,096	(94)
Community Care	1,402	1,402	0	1,869	1,869	0
Head of Dental Services	2,417	2,344	73	2,887	2,832	55
Head of Mental Health Services	2,241	2,839	(598)	2,974	3,719	(745)
Associate Medical Director	12,479	13,172	(693)	16,664	17,624	(960)
Alcohol and Drugs Partnership	370	355	15	589	589	0
Acute Set Aside	5,498	6,196	(698)	7,492	8,430	(938)
Transfer of Reserves assumed in Projection	0	2,800	2,800	0	0	C
Specific NHS Reserves inc. Covid	0	0	0	0	(2,026)	2,026
General Reserves	0	0	0	0	(657)	657
Total Net Cost	51,715	59,222	(1,908)	70,937	70,939	(0)

2.1 The above table shows the IJB's overall spending position at the end of Month 9 analysed by Service. Subsequent sections give more detail on each of the lines shown above.

3. Chief Officer Management

	Year to Date			Full Year Projection		
Chief Officer - Management at Month 9	Budget	Actual	Variance under/ (over)	Budget	Actual	Variance under/ (over)
	£'000	£'000	£'000	£'000	£'000	£'000
Community Management	690	496	194	1,028	942	86
Community Admin	55	64	(9)	73	69	4
Integration Funds	0	0	0	1,891	1,891	0
CnES Management and Admin	(110)	2,911	(3,020)	(146)	90	(236)
Housing Services	230	230	0	306	306	0
Surplus/ (Deficit)	865	3,700	(2,835)	3,152	3,298	(146)

- 3.1 The above table shows the spending position on the Chief Officer's management budgets.
- 3.2 The in-year position for CnES Management and Admin has been adjusted below the line for drawn down of reserves for the NHS partner's budget. Further adjustments will be required

by year end. The overspend of £236k at year end on CnES Management and Admin is due to unfunded element of the Local Authority pay award which will be funded by reserves this year.

4. Adult Social Services

	Year to Date			Full Year Projection			
Adult Social Care	Budget	Actual	Variance	Budget	Actual	Variance	
at Month 9			under/			under/	
			(over)			(over)	
	£'000	£'000	£'000	£'000	£'000	£'000	
Adult Care and Support Services	2,643	3,110	(467)	3,524	3,613	(88)	
Adult Care Transport	130	99	31	173	180	(6)	
Assessment and Care Services	1,084	1,391	(307)	1,445	1,442	4	
Care and Repair	230	230	0	306	306	0	
CnES Home Care	4,910	4,173	736	6,546	6,155	392	
CnES Residential Care	4,294	5,224	(930)	5,725	6,078	(353)	
Commissioning and Partnership Services	2,235	1,652	583	2,980	3,047	(68)	
Criminal Justice	218	171	48	291	241	50	
Independent Care Homes	1,511	1,802	(292)	2,014	2,014	0	
Mainland Placements	1,949	1,271	678	2,598	2,598	1	
Surplus/ (Deficit)	19,203	19,122	81	25,604	25,673	(69)	

- 4.1 The above table shows the spending position of Adult Social Care. There is an in-year underspend of £81k and a projected overspend of £69k.
- 4.2 CnES Residential Care There is a projected overspend of £353k. The overspend can be broken down and the main reasons as follows: to £260k estimated pay award, increase relief and sickness £250k, utility costs £130k (of this £86k is fuel oil) less £350k Covid Funding. There has been a reduction in overspend of £260k from month 6 as Goathill will not be operative until the new financial year.
- 4.3 Homecare There is a projected underspend of £392k. The overspend can be broken down and the main reasons as follows: to £1,266k underspend on pay award less cost of agency £874k.

5. Allied Health Professionals

	Ye	Year to Date			Full Year Projection		
Allied Health Professionals at Month 9	Budget	Actual	Variance under/ (over)	Budget	Actual	Variance under/ (over)	
	£'000	£'000	£'000	£'000	£'000	£'000	
Podiatry	391	330	61	520	461	59	
Dietetics	333	308	25	470	470	0	
Occupational Therapy	548	721	(174)	731	665	67	
Physiotherapy	738	675	63	984	896	88	
Surplus/ (Deficit)	2,010	2,034	(25)	2,705	2,492	214	

The above table shows the spending position on the Allied Health Professionals budgets. There is a £25k projected overspend in year (will be adjusted by expected income at year end) and a projected £214k underspend at the year end. The underspends are due to hard to fill posts.

6. Community Nursing including Community Hospitals

	Year to Date			Full Year Projection		
Community Nursing and Hospital at Month 9	Budget	Actual	Variance under/ (over)	Budget	Actual	Variance under/ (over)
	£'000	£'000	£'000	£'000	£'000	£'000
Community Nursing	3,419	3,270	149	4,586	4,427	159
Community Hospitals	1,812	1,988	(176)	2,416	2,669	(253)
Surplus/ (Deficit)	5,231	5,258	(27)	7,002	7,096	(94)

6.1 There is a projected overspend of £253k at the Uist and Barra Hospital due to the use of agency staff and bank to cover vacancies and sickness and Covid related absences.

7. Community Care

	Ye	ear to Da	te	Full Year Projection		
Community Care at Month 9	Budget	Actual	Variance under/	Budget	Actual	Variance under/
			(over)			(over)
	£'000	£'000	£'000	£'000	£'000	£'000
Community Care	1,402	1,402	0	1,869	1,869	0
Surplus/ (Deficit)	1402	1,402	0	1,869	1,869	0

7.1 The above table shows the spending position on the Community Care budget. There are no major variances projected at the year end.

8. Head of Dental Services

	Year to Date			Full Year Projection		
Head of Dental Services at Month 9	Budget	Actual	Variance under/ (over)	Budget	Actual	Variance under/ (over)
	£'000	£'000	£'000	£'000	£'000	£'000
Community Dental inc. Oral Health	357	325	32	141	136	5
General Dental Services	2,060	2,019	41	2,746	2,696	50
Surplus/ (Deficit)	2,417	2,344	73	2,887	2,832	55

8.1 The above table shows the spending position on the Dental Budget. There are no major variances projected at the year end.

9. Head of Mental Health Services

	Year to Date			Full Year Projection			
Head of Mental Health Services at Month 9	Budget	Actual	Variance under/ (over)	Budget	Actual	Variance under/ (over)	
	£'000	£'000	£'000	£'000	£'000	£'000	
Mental Health Management	466	486	(20)	608	613	(5)	
Mental Health Consultants	399	943	(544)	531	1,241	(710)	
Mental Health Nursing	1,376	1,410	(34)	1,835	1,865	(30)	
Surplus/ (Deficit)	2,241	2,839	(598)	2,974	3,719	(745)	

- 9.1 The above table shows the spending position on the Head of Mental Health budgets.
- 9.2 Psychiatric Consultants NHS Western Isles has a vacant post, some sickness plus problems filling an on-call rota without calling on agency staff. The cost of using agency staff not only for the 40 hours day rota but for the 24/7 rota have been crippling. The projected overspend has increased by £300k to £710k between Month 6 to month 9 with an employment of a 3rd Psychiatric consultant through agency to cover on call shifts. The Board is looking at various ways of mitigating the spend (more for 23/24) which involves reducing on-call, working collaboratively with the other Island Boards and making the roles more desirable that we will be able to appoint substantive post holders (due to reduced on call arrangements).

10. Associate Medical Director

	Year to Date			Full Year Projection			
Associate Medical Director at Month 9	Budget	Actual	Variance under/ (over)	Budget	Actual	Variance under/ (over)	
	£'000	£'000	£'000	£'000	£'000	£'000	
Community Medical	155	155	0	206	206	0	
GMS	5,557	5,557	0	7,668	7,666	2	
GPS - Prescribing	4,265	4,595	(330)	5,687	6,107	(420)	
FHS	1,753	1,782	(29)	2,104	2,104	0	
Out of Hours	749	1,063	(314)	999	1,533	(534)	
Surplus/ (Deficit)	12,479	13,152	(673)	16,664	17,616	(952)	

- 10.1 The above table shows the spending position on the Associate Medical Director budget.
- 10.2 Previously NHS Western Isles has received Covid-19 Funding for prescribing but indications are that we will not be able to use Covid reserves for prescribing. The Board will not lose the reserves but will need to allocate these funds appropriately to another service, this will be undertaken once the Covid figures are confirmed.
- 10.3. GP OOH There is an identified pressure of £534k in the Boards OOH service for both managing the community hospital in Barra and for the GP OOH service in Barra and the Uist and a smaller overspend in Lewis and Harris. This is due to the use of GP locums to ensure no detriment to services in Barra and Uist. The GP practice at Barra is now Health Board run as of September 2022 and NHS Western Isles are looking forward to 23/24 to employ substantive GP with Advanced Nurse Practitioners to manage all GP led services on Barra.

11. Alcohol and Drugs Partnership

	Year to Date			Full Year Projection			
Alcohol & Drugs Partnership at Month 9	Budget	Actual	Variance under/ (over)	Budget	Actual	Variance under/ (over)	
	£'000	£'000	£'000	£'000	£'000	£'000	
Alcohol and Drugs Partnership	370	355	15	589	589	0	
Surplus/ (Deficit)	370	355	15	589	589	0	

11.1 The above table shows the spending position on the Alcohol and Drugs Partnership budget. There are no major variances projected at the year end.

12. NHS Set Aside

	Year to Date			Full Year Projection		
Set Aside at Month 9	Budget	Actual	Variance under/ (over)	Budget	Actual	Variance under/ (over)
	£'000	£'000	£'000	£'000	£'000	£'000
Acute Nursing	3,190	3,376	(186)	4,413	4,687	(274)
SLA - General Medicine	463	463	0	617	617	0
General Medical Consultants	999	1,537	(538)	1,334	1,880	(546)
Pharmacy	337	494	(157)	449	659	(210)
ECR - Adult Mental Health	509	326	183	679	587	92
Surplus/ (Deficit)	5,498	6,196	(698)	7,492	8,430	(938)

- 12.1 The above table shows the spending position on the NHS Set Aside budget. The set aside budget is showing an in year overspend of £698k and a projected overspend of £938k.
- 12.2 There are emerging pressures on the Acute Nursing budget with high bank covering contingency beds in the medical wards, for covid related costs there will be an adjustment made towards year end but not for covering delayed discharges.
- 12.3 Medical Consultants It has been necessary to cover vacant posts and annual leave with high-cost agency staff both in Medical Consultants and specialist Doctors. There is an assumption that use of agency will drop in the 2nd half of the year, but this service is a risk of further overspending. Current yearend projection is £546k overspend.

13. Financial Efficiency Plan

13.1 To balance the IJB budget and afford Goathill not only did the Partners have to make savings but previous earmarked reserves and the full cost of the old care units were included to bridge the gap. The table below shows the savings excluding use of reserves.

Summary	Plan £'000	M9 Target £'000	Actual £'000	Projection £'000	Variance £'000	Risk
NHS Vacancies	476	357	357	476	-	L
IJB NHS Staff Travel	26	20	20	26	-	L
Dental Efficiences	70	53	53	70	-	L
Financial Flexibilities	256	192	256	256	-	L
CNES Vacancies	500	375	375	500	-	L
Care Units	281	211	211	281	-	L
Total	1,609	1,207	1,271	1,609	-	

3. Risks

3.1 There are a number of financial risks that could affect the projection as follow:

- Increased use of high-cost agency within the consultant and GP cohort **High £150k**
- High use of prescription drugs over the winter period **Medium £200k**
- Pressures due to Covid Outbreaks both in Care homes and Hospitals cannot be contained within the funding envelope Medium £250k
- High levels of Flu together with respiratory illnesses and delayed discharges could result in increased bank which can not be charged to Covid. High £200k