

AGENDA ITEM NO: 6

Report To: Inverclyde Integration Joint

Board

Date: 7 November 2017

Report No: IJB//57/2017/LA

Report By: Louise Long

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Officer)

Inverclyde Health & Social Care

Partnership

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Subject: 2018-2020 BUDGET SETTING TIMELINE

1.0 PURPOSE AND SUMMARY

1.1 The purpose of this report is to provide the Integration Joint Board (IJB) with an indicative timeline for the development and setting of its 2018-2020 revenue budget.

2.0 SUMMARY

- 2.1 The IJB is required to set a balanced revenue budget each year. Timelines for funding from our two partners, the Health Board and Council, are not aligned. The Council is legally required to set its budget by March each year. The Health Board has no such requirement and has in recent years not set its budget until June. The Council is already well advanced in its 2018 to 2020 budget considerations and plans to give a formal funding offer to the IJB in February/March 2018. The Health Board is expected to provide an indicative funding offer within that timeline with the final offer expected around June 2018.
- 2.2 This paper outlines the proposed budget setting process and timelines.

3.0 RECOMMENDATIONS

3.1 It is recommended that the Integration Joint Board discusses and agrees the proposed process and timeline for IJB budget setting.

Louise Long, Chief Officer

Lesley Aird, Chief Financial Officer

4.0 BACKGROUND

4.1 The IJB is required to set a balanced revenue budget each year. Timelines for funding from our two partners the Health Board and Council are not aligned. The Council is already well advanced in its 2018 to 2020 budget considerations and plans to give a formal funding offer to the IJB in February/March 2018. The Health Board is expected to provide an indicative funding offer within that timeline with the final offer expected around June 2018, once the Health Board budget has been set.

5.0 PROPOSED TIMELINE AND PROCESS

- 5.1 Preparation of the budget involves estimation of the funding offers coming from each partner and estimations of cost pressures to identify an overall starting position. Current expectations are that this position will be a significant funding gap which will need to be addressed through a package of savings options for the IJB to consider.
- 5.2 The following timeline and process is proposed in order to deliver a final indicative budget for IJB approval later this financial year:

Social Care Savings Proposals identified	20/09/2017	Complete
Anticipated Health Funding Gap identified	31/10/2017	CFO
Initial indicative Health savings proposals to be developed	30/11/2017	SMT/Mgmt Team
Scottish Government to issue indicative settlements	14/12/2017	-
Agree final saving proposals for 2018	Jan 2018	SMT/Mgmt Team
IJB Development session to discuss Health proposals in detail	Feb 2018	СО
Council to confirm 2018-20 IJB funding offer	Mar 2018	Inv Council
SMT to finalise proposed re overall budget based on confirmed Council funding and indicative Health Funding with estimated budget pressures	Mar 2018	SMT
Presentation and supporting paper to IJB to be finalised for consideration of an indicative 2018/19 budget	23/02/2017	CFO/CO
IJB to consider/agree indicative budget based on presentation and supporting budget paper which will be tabled at the meeting	20/03/2018	IJB

6.0 MEDIUM TERM FINANCIAL PLAN

6.1 It is difficult to make final assumptions based on 1 year budgets, however a medium term financial strategy and plan covering 2018-2021 is being developed as part of this process. Given the timelines outlined above, it would make sense for this medium term plan to come to the March 2018 IJB for consideration and approval to ensure that the plan is reflective of the latest information on funding and budget pressures and is as up to date as possible.

7.0 IMPLICATIONS

7.1 FINANCE

There are no direct financial implications within this report.

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

Annually Recurring Costs / (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From	Other Comments
N/A					

LEGAL

7.2 There are no specific legal implications arising from this report.

HUMAN RESOURCES

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

EQUALITIES

- 7.4 There are no equality issues within this report.
- 7.4.1 Has an Equality Impact Assessment been carried out?

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YES (see attached appendix)

NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

7.4.2 How does this report address our Equality Outcomes

There are no Equalities Outcomes implications within this report.

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

7.5 CLINICAL OR CARE GOVERNANCE IMPLICATIONS

There are no governance issues within this report.

7.6 NATIONAL WELLBEING OUTCOMES

How does this report support delivery of the National Wellbeing Outcomes

There are no National Wellbeing Outcomes implications within this report.

National Wellbeing Outcome	Implications
People are able to look after and improve their own health	None
and wellbeing and live in good health for longer.	
People, including those with disabilities or long term	None
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	
People who use health and social care services have	None
positive experiences of those services, and have their	
dignity respected.	
Health and social care services are centred on helping to	None
maintain or improve the quality of life of people who use	
those services.	
Health and social care services contribute to reducing	None
health inequalities.	
People who provide unpaid care are supported to look	None
after their own health and wellbeing, including reducing	
any negative impact of their caring role on their own	
health and wellbeing.	
People using health and social care services are safe	None
from harm.	

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.	None

8.0 CONSULTATION

8.1 This report has been prepared by the Chief Financial Officer of the IJB after due consultation with the Chief Officer and input from the Director of Finance for Greater Glasgow & Clyde NHS and the Chief Finance Officer for Inverclyde Council.