

Report To:	Inverclyde Integration Joint Board	Date: 24 June 2019	
Report By:	Louise Long Corporate Director (Chief Officer) Inverclyde Health & Social Care Partnership	Report No: IJB/43/2019/L/	A
Contact Officer:	Lesley Aird Chief Financial Officer	Contact No: 01475 71538	1
Subject:	INVERCLYDE IJB BUDGET 2019/20		

1.0 PURPOSE

1.1 The purpose of this report is to agree the budget for the Inverclyde Integration Joint Board (IJB) for 2019/20 in line with the Strategic Plan.

2.0 SUMMARY

- 2.1 Inverclyde Council set their 2019/20 budget on 21 March. Greater Glasgow & Clyde Health Board confirmed our funding allocation for 2019/20 on 3 June 2019. In advance of this the IJB agreed an Indicative Budget on 19 March based on latest updates and discussions with Council and Health Board officers.
- 2.2 The Chief Officer, on behalf of the IJB, has formally accepted the offers from the Council and Health Board which were broadly in line with the figures contained within the Indicative Budget.
- 2.3 The planned net spend based on the formal offers from the Council and Health Board is now £154.875m (£67.368m for Social Care, £87.507m for Health). The agreed Interim budget was £154.911m, £67.368m for Social Care and £87.543m for Health, including Set Aside. The £0.036m decrease in funding and expenditure from the Interim budget is detailed later in this report.
- 2.4 The anticipated Set Aside budget for 2019/20 is £16.857m which is in line with the 2018/19 indicative budget plus 2.54% uplift.
- 2.5 Any in year over/underspends will be funded from/carried forward into IJB reserves.

3.0 RECOMMENDATIONS

- 3.1 It is recommended that the Integration Joint Board:
 - 1. Notes the contents of this report;
 - 2. Notes the agreed funding of £50.617m from Inverclyde Council;
 - 3. Notes the agreed funding of £86.876m from Greater Glasgow & Clyde (GG&C) Health Board, and notional Set Aside budget of £16.857m;
 - 4. Notes the anticipated additional health funding for Continuing Care;
 - 5. Notes that the additional costs and funding are still to be confirmed for the Health

superannuation employers cost increase, those figures are not currently reflected in the budget but are expected to be in the region of £1m;

- Approves net expenditure budgets of £67.368m to Inverclyde Council and £70.650m, excluding the "set aside" and direct that this funding is spent in line with the Strategic Plan;
- 7. Authorises officers to issue updated Directions to the Health Board and Council;
- 8. Notes and approves the proposals relating to the creation of and/or use of reserves at the yearend; and
- 9. Notes the ongoing work in relation to the "set aside" budget.

Louise Long Chief Officer

Lesley Aird Chief Financial Officer

4.0 BACKGROUND

- 4.1 In March the IJB approved an indicative budget for 2019/20 based on indicative funding offers from the Council and Health Board. Inverclyde Council formally confirmed their offer at its meeting of 21 March. The Health Board offer was confirmed in writing on 3 June. A copy of the Health offer letter is enclosed at Appendix A.
- 4.2 At the March meeting, the IJB delegated authority to the Chief Officer to accept the formal offers from each partner if they were in line with the agreed indicative budget. Now that the funding offers have been confirmed, the IJB can formally approve the 2019/20 budget, give directions and allocate budget where relevant to the Health Board and Local Authority for delivery of the services in line with the Strategic Plan.
- 4.3 Appendices B1 to B9 contain the detailed budget proposals.

5.0 REVENUE FUNDING ALLOCATION FROM INVERCLYDE COUNCIL AND AGREED SAVINGS FOR SOCIAL CARE FOR 2019/20

- 5.1 On 21 March 2019, the Council agreed its budget for 2019/20. Included within this, the Council agreed £50.617m to be designated as the Council's contribution to the IJB in line with the Integration Scheme. This is in line with the indicative budget.
- 5.2 The net budget direction to the Council may be reviewed and updated during the year.

6.0 REVENUE FUNDING ALLOCATION FROM GREATER GLASGOW & CLYDE (GG&C) HEALTH BOARD AND AGREED SAVINGS FOR HEALTH FOR 2019/20

6.1 The Health Board confirmed its 2019/20 funding offer on 3 June 2019 as £86.876m, excluding the monies for Continuing Care beds estimated at £0.561m and the Superannuation employers cost increase. The superannuation cost increase is expected to be fully funded by the Scottish Government. Initial indications suggest that the cost for Inverclyde will be circa £1m. Both this and the continuing care actual costs are still to be finalised and confirmed. The Indicative Budget including monies for continuing care was £87.507m, the difference between that and the final budget is a decrease of £0.036m which relates to a slight reduction in anticipated cost pressures and associated funding.

The notional Set Aside budget has been confirmed as $\pounds 16.857$ m which is an increase of $\pounds 0.418$ m from 2018/19 to reflect the 2.54% Health uplift.

6.2 Work is ongoing across GG&C to review the set aside budgets and agree a mechanism for the transfer of resource to replace the current notional allocations.

6.3 Prescribing

Prescribing remains the most significant cost pressure and risk for the IJB. The budget assumes:

- prescribing volumes stay relatively consistent with the previous year
- anticipated inflation levels on drug prices
- ongoing issues continue around prices relating to short supply (see below)
- a number of prescribing efficiencies are delivered by the prescribing team
- further work to increase the value of prescribing efficiencies deliverable in year will take place.

Prescribing budgets can be volatile with a number of external factors influencing in year cost. This presents a significant financial risk to all IJBs which requires careful in year monitoring.

6.4 <u>Prescribing Short Supply</u>

One of the key factors in Prescribing budget volatility is "short supply". "Short supply" is when there is a drug shortage. This can occur at a local, national or global level and, if serious, the shortage may impact on the ability of dispensers both in acute and primary care to provide drugs for patients.

- 6.5 As the production of drugs is complex and highly regulated, difficulties can arise at a number of steps in the process which can lead to delays in drugs being released into the market. Examples of some of the reasons drugs go on short supply include:
 - malfunctioning equipment on the production line
 - shortage of a raw material
 - packaging failing to meet the required specification
 - batch failures occurring for no obvious reason, necessitating a thorough investigation to get to the root cause of the problem
 - manufacturing temporarily suspended due to quality concerns following an inspection
 - an imbalance between supply and demand, e.g. unanticipated changes in demand or inaccuracies in forecast usage
 - economic reasons for reductions in available supply
 - competition driving the price of drugs down to unsustainable levels leading to suppliers exiting the market
 - the globalisation of the pharmaceutical industry has increased the fragility of the pharmaceutical supply chain
 - medicines are often manufactured in just one or two sites worldwide, production schedules have to be planned months in advance and this along with the move to 'just in time manufacture' and minimising stockholdings throughout the supply chain means that there is little flexibility in the system when problems do arise
 - where one manufacturer has a supply problem, it can have a knock on effect on suppliers of similar products within a therapy area and an increased demand for alternatives can then create further shortages
- 6.6 The National Short Supply Working Group has an agreed protocol in place which details the actions to be taken in the event of a drug going on short supply. Short supply is not a problem that can be resolved locally, it is a national/UK problem and representations have been made to the Scottish Government regarding the scale of these cost pressures which are unprecedented. Over the last couple of years, there has been a continuing cycle of generic drugs going on short supply and remaining on short supply for an extended period and there is no intelligence at this time to indicate that the situation is going to improve any time soon.

6.7 Mental Health Inpatients

Mental Health Inpatients has been a risk area within the IJB budget since the IJB was formed. The IJB inherited a £1.2m budget pressure around this area which had been funded non-recurringly since the IJB was established. In 2018/19 the IJB invested an additional £0.250m into the service on a recurring basis. Staff within this area have succeeded in bringing the underlying budget pressure down significantly but it remains an area of budget and operational pressure and risk for the IJB. The remaining budget pressure is primarily linked to the additional costs of covering medical vacancies through the difficultly of recruiting to these posts in Inverclyde and unfunded enhanced observations.

6.8 The net budget direction to the Health Board may be reviewed and updated during the year.

7.0 RESERVES

7.1 As per the Financial Monitoring reports issued throughout the year any over/under spends in the final outturn are offset against or added to reserves. An updated reserves position will be brought to future IJB meetings through the Revenue Monitoring reports. At the yearend the net £1.485m underspend was carried into Earmarked Reserves taking the total IJB Reserves balance to £7.281m.

8.0 IMPLICATIONS

8.1 **FINANCE**

The IJB is being asked to set its 2019/20 budget at this stage in line with the Indicative Budget agreed on 24 March 2019 and the recommendations above.

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

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

HUMAN RESOURCES

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

EQUALITIES

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

	YES (see attached appendix)
N	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.

8.4.2 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	None
protected	character	istic groups,	can a	ccess	HSCP	

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

8.5 CLINICAL OR CARE GOVERNANCE IMPLICATIONS

There are no clinical or care governance issues within this report.

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

	ensure that resources are used effectively
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9.0 DIRECTIONS

9.1

	Direction to:	
Direction Required	1. No Direction Required	
to Council, Health	2. Inverclyde Council	
Board or Both	NHS Greater Glasgow & Clyde (GG&C)	
	4. Inverclyde Council and NHS GG&C	Х

10.0 CONSULTATION

10.1 This report has been prepared by the IJB Chief Financial Officer. The Chief Officer, the Council's Chief Financial Officer and Director of Finance NHSGGC have been consulted.

11.0 BACKGROUND PAPERS

11.1 None.

Greater Glasgow and Clyde NHS Board

3 June 2019

Dear Louise

2019/20 Financial Allocation to Inverclyde Health and Social Care Partnership

Further to Mark White's letter issued to the HSCP by email on 25 March the Board subsequently approved the Financial Plan for 2019/20 on 16 April 2019. I can therefore now confirm that the allocation indicated to you in the appendix to that letter has been approved.

I will issue an updated and final schedule when the Board receives confirmation of the additional funding due from Scottish Government to meet the increased employer's superannuation cost from 1 April 2019. At this stage we do not know the actual amount the Board will receive and therefore it is not yet possible to calculate the final recurring allocation.

Yours sincerely



James Hobson Assistant Director of Finance NHS Greater Glasgow and Clyde

Copy of table from Indicative Health Funding Letter received 25/03/2019

Spend Categories		l nverclyde HSCP
		£000s
Family Health Services *		25,505
Fhs Income*		(877)
Family Health Services Budget (Net)		24,628
Prescribing & Drugs		18,516
Non Pay Supplies		3,720
Pay		20,738
Other Non Pay & Savings		17,776
Other Income		(43)
Budget - HCH incl Prescribing		60,705
Total Rollover budget - NET		85,334
Adjustments:		
Non Recurring budget allocated to base		
Budget Eligible for HCH & Prescribing uplift		60,705
<u>Uplifts</u>		
Scottish Government allocation	2.54%	1,542
Revised Budget		86,876
Set Aside Budget for 2018/19		16,439
Uplift @ 2.54%		418
Set Aside Budget 2019/20		16,857

IJB BUDGET 2019/20

FINANCIAL APPENDICES - B

- B1 Summary Budget
- B2 Social Care Budget
- B3 Social Care Pressures
- B4 Social Care Savings
- B5 Health Budget
- B6 Health Pressures
- B7 Health Savings
- B8 Directions
- B9 Earmarked Reserves

APPENDIX B1

INVERCLYDE HSCP

REVENUE BUDGET 2019/20

SUBJECTIVE ANALYSIS	Budget 2018/19 £000	Other Budget Movements/ Pressures £000	Savings £000	Budget 2019/20 £000
Employee Costs	48,130	2,858	(785)	50,203
Property Costs	1,121	0	0	1,121
Supplies & Services, Transport, Admin & PTOB	46,751	2,408	(540)	48,619
Family Health Services (net)	24,549			24,549
Prescribing (net)	18,262	900	0	19,162
Income	(5,530)	0	(104)	(5,634)
Set Aside	16,439	418	0	16,857
	149,720	6,584	(1,429)	154,875

OBJECTIVE ANALYSIS	Budget 2018/19 £000	Other Budget Movements/ Pressures £000	Savings £000	Budget 2019/20 £000
Strategy & Support Services	2,265	0	(105)	2,160
Older Persons	27,398	1,401	(532)	28,267
Learning Disabilities	11,871	0	(361)	11,510
Mental Health - Communities	6,541	0	0	6,541
Mental Health - Inpatient Services	8,400	0	0	8,400
Children & Families	12,774	0	0	12,774
Physical & Sensory	2,882	0	(54)	2,828
Addiction / Substance Misuse	3,325	0	0	3,325
Assessment & Care Management / Health & Community	7,583	460	0	8,043
Support / Management / Admin	5,402	0	(160)	5,242
Criminal Justice / Prison Service **	0	0	0	0
Homelessness	801	0	(58)	743
Family Health Services	24,549	79	0	24,628
Prescribing	18,262	900	0	19,162
Change Fund	1,228	0	0	1,228
Unallocated Funds	0	3,326	(159)	3,167
HSCP NET EXPENDITURE (DIRECT SPEND)	133,281	6,166	(1,429)	138,018
Set Aside	16,439	418	0	16,857
HSCP NET EXPENDITURE	149,720	6,584	(1,429)	154,875

** Fully funded from external income hence nil bottom line position.

PARTNERSHIP FUNDING/SPEND ANALYSIS	Budget 2018/19 £000	Other Budget Movements/ Pressures £000	Savings £000	Budget 2019/20 £000
NHS Contribution to the IJB	101,658	2,600	0	104,258
Council Contribution to the IJB	48,062	, , ,	(1,429)	50,617
HSCP NET INCOME	149,720	6,584	(1,429)	154,875
NHS Expenditure on behalf of the IJB	101,658	2,600	(0)	104,258
Council Expenditure on behalf of the IJB	48,062	3,984	(1,429)	50,617
HSCP NET EXPENDITURE	149,720	6,584	(1,429)	154,875
HSCP SURPLUS/(DEFICIT)	0	0	0	0

APPENDIX B2

SOCIAL WORK

REVENUE BUDGET 2019/20

SUBJECTIVE ANALYSIS	Budget 2018/19 £000	Other Budget Movements/ Pressures £000	Savings £000	Budget 2019/20 £000
SOCIAL WORK				
Employee Costs	27,390	1,838	(785)	28,443
Property costs	1,115			1,115
Supplies and Services	912			912
Transport and Plant	381			381
Administration Costs	783			783
Payments to Other Bodies	39,511	2,146	(540)	41,117
Resource Transfer	(16,751)			(16,751)
Income	(5,278)		(104)	(5,382)
SOCIAL WORK NET EXPENDITURE	48,062	3,984	(1,429)	50,617

OBJECTIVE ANALYSIS	Budget 2018/19 £000	Other Budget Movements/ Pressures £000	Savings £000	Budget 2019/20 £000
SOCIAL WORK				
Strategy & Support Services	1,805		(105)	1,700
Older Persons	27,398	1,401	(532)	28,267
Learning Disabilities	11,410		(361)	11,049
Mental Health	3,539			3,539
Children & Families	9,837			9,837
Physical & Sensory	2,882		(54)	2,828
Addiction / Substance Misuse	1,772			1,772
Business Support	3,247		(160)	3,087
Assessment & Care Management	2,123			2,123
Criminal Justice / Scottish Prison Service	0			0
Change Fund	0			0
Homelessness	801		(58)	743
Resource Transfer	(16,751)			(16,751)
Unallocated Budget Changes	0	2,583	(159)	2,424
SOCIAL WORK NET EXPENDITURE	48,062	3,984	(1,429)	50,617

COUNCIL CONTRIBUTION TO THE IJB	Budget 2018/19 £000	Other Budget Movements/ Pressures £000	Savings £000	Budget 2019/20 £000
Council Contribution to the IJB	48,062	3,984	(1,429)	50,617

APPENDIX B3

Social Care Budget Pressures

	2019/20
Social Care Budget Pressures	£000
2018/19 Pay Award	847
Cost of Pay and Grading Model	200
2019/20 Pay Award	791
NCHC Inflation & Living Wage	800
Free Personal Care for Under 65s*	429
Carers Act*	172
Homelessness Temporary Accommodation	104
Demographic & Other Cost Pressures	268
Total Estimated Social Care Budget Pressures	3,611
Opening Budget Realignment	373
Total Budget Movement/Pressure	3,984

* - Actual values still to be confirmed

APPENDIX B4

Savings already agreed by the IJB March 2019	2019/20 £m	FTE
Income Growth through Charging	0.084	0.0
Management Restructure	0.160	4.6
Housing Warden Service	0.058	0.0
Efficiencies	0.032	0.0
Long Term Care Placements	0.278	0.0
Learning Disabilities	0.361	8.5
Removal of vacant posts (VER)	0.159	3.2
Older People Day Services efficiency	0.028	0.0
Review of Physical Disability Service	0.054	0.0
Further Reduction in Care Home Beds	0.090	0.0
3% charges increase	0.020	0.0
Redesign of Advice Team	0.105	tbc
TOTAL	1.429	16.3

APPENDIX B5

<u>HEALTH</u>

REVENUE BUDGET 2019/20

SUBJECTIVE ANALYSIS	Recurring Budget 2018/19 £000	Other Budget Movements/ Pressures £000	Savings £000	Recurring Budget 2019/20 £000
HEALTH				
Employee Costs	20,740	1,020		21,760
Property	5			5
Supplies & Services	5,164	183		5,347
Family Health Services (net)	24,549	79		24,628
Prescribing (net)	18,262	900		19,162
Resource Transfer	16,751			16,751
Income	(252)			(252)
HEALTH DIRECT NET EXPENDITURE	85,219	2,182	0	87,401
Set Aside	16,439	418		16,857
HEALTH NET EXPENDITURE	101,658	2,600	0	104,258

OBJECTIVE ANALYSIS	Recurring Budget 2018/19 £000	Other Budget Movements/ Pressures £000	Savings £000	Recurring Budget 2019/20 £000
HEALTH				
Children & Families	2,937			2,937
Health & Community Care	5,460	460		5,920
Management & Admin	2,155			2,155
Learning Disabilities	461			461
Addictions	1,553			1,553
Mental Health - Communities	3,002			3,002
Mental Health - Inpatient Services	8,400			8,400
Strategy & Support Services	460			460
Change Fund	1,228			1,228
Family Health Services	24,549	79		24,628
Prescribing	18,262	900		19,162
Unallocated Funds/(Savings)	0	743		743
Resource Transfer	16,751			16,751
HEALTH DIRECT NET EXPENDITURE	85,219	2,182	0	87,401
Notional Set Aside Expenditure	16,439	418		16,857
HEALTH NET EXPENDITURE	101,658	2,600	0	104,258

HEALTH CONTRIBUTION TO THE IJB	Recurring Budget 2018/19 £000	Other Budget Movements/ Pressures £000	Savings £000	Recurring Budget 2019/20 £000
NHS Contribution for Direct Services	85,219	2,182		87,401
Notional Set Aside Contribution	16,439	418		16,857
Total NHS Contribution to the IJB	101,658	2,600	0	104,258

Health Budget Pressures

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	2019/20
HSCP Budget Pressure Description	£000
Pay Award est at 3%	610
Prescribing Uplift est at 5% (could be between 3-6%)	900
Non Pay Inflation	145
Compassionate Inverclyde - proposed new recurrent funding support linked to shifting the balance of care	50
Health Visitor Regrading - costs of implementing the nationally agreed regrade	60
FHS Budget Increase - fully funded by Scottish Government	79
Home First & AHP Investment - Shifting the Balance of Care	350
Inverclyde Health Budget Pressures	2,194
2.54% Uplift all budgets	(1,542)
FHS Budget Increase - fully funded by Scottish Government	(79)
Continuing Care Fund Transfer - final amount still to be confirmed by Health	(561)
Inverclyde Health Budget Surplus/(Gap)	12

APPENDIX B6

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APPENDIX B7

Health Savings already agreed by the IJB March 2019 - Agreed to defer for future years	2019/20 £m	FTE
Removal of Budgets with Recurrent Underspends		0.0
Addictions Community	0.025	0.0
Adult Community	0.016	0.0
CQL Sessions now funded through PCIP	0.028	0.0
Management - release of prior year budget pressure monies not req'd due to uplift	0.166	0.0
TOTAL	0.235	0.0

Agreed at March IJB that these budgets would be used to assist with future year savings



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INVERCLYDE INTEGRATION JOINT BOARD

DIRECTION

ISSUED UNDER S26-28 OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

THE INVERCLYDE COUNCIL is hereby directed to deliver for the Inverclyde Integration Joint Board (the IJB), the services noted below in pursuance of the functions noted below and within the associated budget noted below.

Services will be provided in line with the IJB's Strategic Plan and existing operational arrangements pending future directions from the IJB. All services must be procured and delivered in line with Best Value principles.

- Services: All services listed in Annex 2, Part 2 of the Inverclyde Health and Social Care Partnership Integration Scheme.
- Functions: All functions listed in Annex 2, Part 1 of the Inverclyde Health and Social Care Partnership Integration Scheme.

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Associated Budget:		OBJECTIVE ANALYSIS	Budget 2019/20 £000
		SOCIAL WORK	
	Budget	Strategy & Support Services	
SUBJECTIVE ANALYSIS	2019/20		1,700
	£000		
SOCIAL WORK		Older Persons	28,267
Employee Costs	28,443	Learning Disabilities	11,049
Property costs	1,115	Mental Health	3,539
Supplies and Services	912	Children & Families	9,837
Transport and Plant	381	Physical & Sensory	2,828
Administration Costs	783	Addiction / Substance Misuse	1,772
Payments to Other Bodies	41,117	Business Support	3,087
Income (incl Resource Transfer)	(16,751)	Assessment & Care Management	2,123
Unallocated Funds	(5,382)	Criminal Justice / Scottish Prison Service	0
SOCIAL WORK NET EXPENDITURE	50,617	Change Fund	0
		Homelessness	743
		Unallocated Budget Changes	2,424
		Resource Transfer	(16,751)
		SOCIAL WORK NET EXPENDITURE	50,617

This direction is effective from 24 June 2019



104,258

INVERCLYDE INTEGRATION JOINT BOARD

DIRECTION

ISSUED UNDER S26-28 OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

GREATER GLASGOW & CLYDE NHS HEALTH BOARD is hereby directed to deliver for the Inverclyde Integration Joint Board (the IJB), the services noted below in pursuance of the functions noted below and within the associated budget noted below.

Services will be provided in line with the IJB's Strategic Plan and existing operational arrangements pending future directions from the IJB. All services must be procured and delivered in line with Best Value principles.

- Services: All services listed in Annex 1, Part 2 of the Invercivde Health and Social Care Partnership Integration Scheme.
- Functions: All functions listed in Annex 1, Part 1 of the Inverclyde Health and Social Care Partnership Integration Scheme.

			Budget
Associated Budget:		OBJECTIVE ANALYSIS	2019/20
-			£000
		HEALTH	
	Budget	Children & Families	
SUBJECTIVE ANALYSIS	2019/20		2,937
	£000		
HEALTH		Health & Community Care	5,920
Employee Costs	21,760	Management & Admin	2,155
Property costs	5	Learning Disabilities	461
Supplies and Services	5,347	Addictions	1,553
Transport and Plant	24,628	Mental Health - Communities	3,002
Administration Costs	19,162	Mental Health - Inpatient Services	8,400
Payments to Other Bodies	16,751	Strategy & Support Services	460
Income	(252)	Change Fund	1,228
HEALTH DIRECT NET EXPENDITURE	87,401	Family Health Services	24,628
Set Aside	16,857	Prescribing	19,162
HEALTH NET EXPENDITURE	104,258	Unallocated Funds/(Savings)	743
		Resource Transfer	16,751
		HEALTH DIRECT NET EXPENDITURE	87,401
		Notional Set Aside Expenditure	16,857

This direction is effective from 24 June 2019

HEALTH DIRECT NET EXPENDITURE

EARMARKED RESERVES INVERCLYDE HSCP

Project	Planned	EMR
	<u>Use By Date</u>	<u>C/Fwd into 2019/20</u> <u>£000</u>
Scottish Government Funding		333
Mental Health Action 15	31/03/2020	98
ADP	31/03/2020	235
Existing Projects/Commitments		2,077
Self Directed Support	31/03/2020	43
Growth Fund - Loan Default Write Off	ongoing	25
Integrated Care Fund	ongoing	11
Delayed Discharge	ongoing	428
CJA Preparatory Work	31/03/2020	112
Service Reviews	31/03/2021	240
Primary Care Support	31/03/2020	241
Swift Replacement Programme	30/09/2019	27
Rapid Rehousing Transition Plan (RRTP)	31/03/2020	30
Dementia Friendly Properties	tbc once Strategy finalised	100
Contribution to Partner Capital Projects	ongoing	145
Continuing Care	ongoing	675
Transformation Projects		2,815
Transformation Fund	ongoing	2,505
Mental Health Transformation	ongoing	310
Budget Smoothing/Contingency		2,056
C&F Adoption, Fostering Residential Budget Smoothing	ongoing	732
Advice Services Smoothing Reserve	ongoing	88
Prescribing	ongoing	310
Residential & Nursing Placements	ongoing	926
Total Anticipated Carry Forward		7,281