

Health and Sport Committee: Integration Authorities Survey 2020**Budget Scrutiny: Integration Authorities**

1. Which integration authority are you responding on behalf of?

Moray

2. The Cabinet Secretary for Health and Sport provided information to the Committee on agreed budgets for 2020-21 (see Annex A). Please confirm any revisions to this budget information, indicating:
- (a) Changes due to additional COVID-19 funding
 (b) Changes for other reasons (please provide details)

	NHS allocation £m	Local authority allocation £m	Total £m	Set aside £m
Initial position (as per Annex)	78.831	44.987	135.583	11.765
Additional COVID-19 funding	0.860			
Other changes	0.697			0.487
Current budget position	80.388	44.987	137.627	12.252

3. Please show how your final 2020-21 budget has been allocated (before and after any additional COVID-19 funding):

	Pre-COVID-19 £m	Post-COVID-19 £m
Hospital (inc Set Aside)	17.522	17.522
Community healthcare	28.954	28.954
Family health services & prescribing	33.084	33.084
Social care	57.207	58.067
Total	136.767	137.627

4. Please provide details of how additional COVID-19 funds have been used.

Primarily relates to measures put in place to increase bed capacity in the community and the set up and function of the Covid hub and will support the provider sustainability payments as they claims are processed.

5. As a result of the pandemic, please indicate:

- a. The main three areas of additional spending

**Surge capacity in community (reducing Delayed Discharge)
Operating the Covid hubs
Supporting external providers (anticipated)**

Loss of income is also a factor

- b. The main three areas of reduced spending

**External Day Care (inc Shared Lives and transport provision)
Mental Health (Use of locums and consultants)
Staff vacancies – there has been delay/ pause in recruiting to posts.**

6. Of the areas identified in Q5, do you anticipate that any changes in service delivery will lead to longer-term changes in spending? Please provide brief details, including details of anticipated annual savings or additional costs associated with each change. (200 words max for each change)

Additional costs – through the Strategic Plan and Homefirst model of delivery it is anticipated that costs relating to community care provision will increase. The pandemic has provided increased insight and opportunity into what is possible both in the short-term response to Covid but also the potential to redesign over the longer term using homefirst principles. It is recognised this can only be achieved through reducing spend in other areas.

Savings – The closure of day services has provided opportunity to consider what the future provision may look like. It is not anticipated that day services will return to the same level following the lifting of restrictions and in-turn, longer term solutions are being considered. In relation to staff vacancies – the scope and potential here is derived from the opportunity and learning to do things differently, so whilst any reduced spending in relation to staffing is unlikely to be sustained, services are considering future service provision and how this can best

be supported. The pandemic has provided an opportunity to think differently.

7. Have any of the changes detailed at Q6 resulted in:

a. A change in the set aside budget in 2020-21?

Not as yet

b. A shift in the balance of spending between hospital / community / social care in 2020-21?

Not particularly a shift, in the main due to staffing costs but increased spending in community to support us through the surge capacity. Whilst early days, the Homefirst Model will support this shift.

c. Would these changes be expected to continue into 2021-22?

Potentially set to continue. Will depend on decision making in the near future.

8. Which of your performance indicators have been most negatively impacted by the pandemic, and what is the projected effect on their trajectory for the coming year? Please list **three** indicators, showing their expected performance in 2020-21, compared with pre-Covid plans.

The timing of official data being available makes this difficult to respond to in totality so results are in the main derived from management level data.

Emergency Readmission to Hospital – 28 days – (predicted to be over 10% in Q1). Expected to return to pre-Covid levels as general admissions increase.

Emergency Readmission to Hospital – 7 days – (predicted to be over 10% in Q1). Expected to return to pre-Covid levels as general admissions increase

Number of Reviews Outstanding (Q1) – management data suggests that the number of outstanding reviews will have increased significantly due to Social Workers being redirected to manage the increased demand for assessments to clear hospital beds.

Staff Absence figures are predicted to have increased significantly but figures as yet are not available.

9. When would you expect performance in these areas to recover and what action / spending will be required? (Please provide a brief description for each of the indicators listed at Q8.)

Emergency Readmission to Hospital – 28 days – (predicted to be over 10% in Q1). **Expected to return to pre-Covid levels as general admissions increase**

Emergency Readmission to Hospital – 7 days – (predicted to be over 10% in Q1). **Expected to return to pre-Covid levels as general admissions increase**

Number of reviews outstanding – **will be addressed through increased efficiency, management and monitoring.**

10. The Committee recently published a report on social prescribing. How much do you plan to spend on social prescribing in 2020-21? Please provide details of planned spend on community connectors / link workers as well as any other community wellbeing initiatives. If applicable, please provide breakdown of activity and budget as a table.

	Planned expenditure in 2020-21 £m
Link workers	0.220
Health Improvement – Staffing relating to health point advisors, public health co-ordinators. Examples of initiatives are, health walks, baby steps, community bike initiatives, health point, MEOC	0.277
Community & Volunteer Development (staff costs and volunteer expenses) – Service provision is being delivered differently through the pandemic. Ordinarily, activity would be through team events such as vintage tea parties, Boogie in the bar etc. Currently provision is focussing more on personal support and intervention.	0.042
Total spend on social prescribing	0.539

Annexe A

Budgets are subject to routine in-year adjustments					
	2020-21	2020-21	2020-21	2020-21	2020-21
Integrated Authority	NHS Allocation (£000)	Council Allocation (£000)	Total (£000)	Set Aside (£000)	Interim or Agreed Budget
Aberdeen City	235,996	94,329	330,325	46,416	Agreed
Aberdeenshire	217,595	117,014	334,609	28,524	Agreed
Angus	131,259	49,704	180,963	9,734	Agreed (subject to refinement)
Argyll & Bute	225,662	60,077	285,739	n/a	Agreed
Clackmannanshire & Stirling	143,584	56,310	199,894	22,442	Agreed
Dumfries & Galloway	319,887	78,951	398,838	n/a	Interim
Dundee City	167,600	80,100	247,700	18,172	Interim
East Ayrshire	185,003	83,074	268,077	24,133	Agreed
East Dunbartonshire	116,349	56,750	173,099	32,944	Agreed
East Lothian	106,477	55,251	161,728	17,831	Agreed
East Renfrewshire	72,135	52,469	124,604	31,674	Agreed (subject to refinement)
Edinburgh	451,898	230,661	682,559	89,176	Interim
Eilean Siar	43,078	20,068	63,146	6,828	Agreed
Falkirk	136,538	68,965	205,503	28,311	Interim
Fife	394,752	157,350	552,102	36,473	Interim
Glasgow City	715,447	444,200	1,159,647	221,914	Interim
Highland	560,000	105,000	665,000	n/a	Interim
Inverclyde	91,598	52,289	143,887	23,956	Agreed
Midlothian	91,115	45,027	136,142	15,389	Agreed
Moray	90,596	44,987	135,583	11,765	Agreed
North Ayrshire	180,827	96,963	277,790	30,997	Agreed
North Lanarkshire	474,110	166,422	640,532	63,066	Agreed
Orkney	26,381	20,343	46,724	7,409	Interim
Perth & Kinross	144,200	57,500	201,700	16,280	Agreed
Renfrewshire	175,938	72,626	248,564	57,605	Interim
Scottish Borders	135,417	51,477	186,894	24,476	Agreed
Shetland	22,283	24,079	46,362	4,374	Interim
South Ayrshire	113,891	77,326	191,217	25,128	Agreed
South Lanarkshire	412,241	134,727	546,968	59,501	Agreed
West Dunbartonshire	124,733	70,650	195,383	28,694	Interim
West Lothian	155,294	76,616	231,910	32,292	Interim
TOTAL	6,461,884	2,801,305	9,263,189	1,015,504	