### AGENDA ITEM NO. 8



## **REPORT NO IJB 77/18**

## **ANGUS HEALTH AND SOCIAL CARE**

## **INTEGRATION JOINT BOARD - 24 OCTOBER 2018**

## **ANGUS IJB FINANCIAL PLAN 2019/20 - 2021/22**

## REPORT BY ALEXANDER BERRY, CHIEF FINANCE OFFICER

## **ABSTRACT**

The purpose of this report is to update the Integration Joint Board (IJB) regarding the developing Angus IJB Financial Plan for period 2019/20 to 2021/22.

### 1. RECOMMENDATIONS

It is recommended that the Integration Joint Board:-

- i. note this update regarding the IJB's multi-year financial plan and requests an update to a future meeting.
- ii. regarding interventions set out in 2018/19, requests an update regarding progress with MIIU plans and the final stages of the originally approved Angus Care Model (In Patients workstream) at its next Board meeting including a restatement of financial planning impacts.
- iii. receives an update regarding proposed changes in charging for 2019/20 at its next Board meeting.
- iv. regarding funding streams, that Board members, specifically voting members, are kept more fully informed of discussions with Partners as they develop in the period in advance of formal budget approval.
- v. regarding cost pressures, receives a report to its next meeting that contains further detail about the likely impact of demographic pressures going forward and that provide updated assessments of the financial impact of the Carers Act and Free Personal Care (under 65s).
- vi. regarding Planned Interventions, receives an updates at its next Board meeting:
  - a. regarding extending the Angus Care Model Review of In Patient Services including setting out refined financial plans.
  - b. regarding Psychiatry of Old Age plans including setting out refined financial plans.
  - c. regarding progress with the Angus Care Model Care Home Review including a restatement of financial plans for In House Care provision and Nursing Services.
  - d. regarding progress with the Angus Care Model Care Home Support Services worksteam (noting this will now include a broader review of Support Services).
  - e. regarding progress with the Learning Disability Review / Improvement Plan including a re-statement of financial plans.
  - f. regarding the potential benefit of both Collaboration and Working with Partners (Angus Council and NHS Tayside) (February 2019 IJB meeting).

### 2. BACKGROUND

2.1 In April 2018, Angus IJB shared its first multi-year financial plan covering period 2018/19 to 2020/21 (report 25/18). That report set out assumptions re funding uplifts, inflationary, demographic and legal pressures and a series of planned interventions, consistent with the IJB's Strategic Commissioning Plan, intended to help the IJB deliver a balanced budget. While the plan at the time did not fully deliver a balanced budget, subsequent reports suggest non-recurring factors in 2018/19 may assist the financial position as reported through regular finance reports.

The IJB is now at the stage of refining its financial plans for beyond 2018/19. Updates are required to inform imminent work including developing discussion regarding budget settlements. Plans also require to be consistent with the IJB's Strategic Commissioning Plan noting that, in turn, the Strategic Commissioning Plan will influence the financial plan.

This document sets out the opening financial planning position as the IJB moves forward with its strategic planning process, acknowledging the intention of producing a draft Strategic Commissioning Plan for 2019/20 to 2021/22 by December 2018.

This paper sets out a number of issues as follows:-

- Opening financial planning position (i.e. projected roll-over position from 2018/19).
- Funding assumptions.
- Cost Pressures including inflationary, demographic and legal pressures.
- Planned Interventions.

At this stage of financial planning, these workings contain multiple assumptions and risks. As risks are inherent at this stage of planning, so no detailed risk assessment is included in this paper. Various recommendations are made in each section of the report reflecting the state of each part of the IJB's overall planning.

Based on the information included in this report, two Appendices are then attached. These show multi-year financial plans for both services directed through Angus Council and services directed through NHS Tayside. A brief commentary on these two Appendices is included in the summary of this paper (section 7), but primarily this paper is intended to support the imminent work within the IJB regarding strategic planning.

## 3. OPENING FINANCIAL PLANNING ASSUMPTIONS

- 3.1 This part of the IJB's financial plan reflects two sets of information:
  - a) Information regarding the IJB's underlying financial performance during 2018/19.
  - b) Information regarding progress with 2018/19 savings plans.

# 3.2 CURRENT UNDERLYING FINANCIAL PERFORMANCE

The underlying financial performance described here is considered independently from progress with savings. The financial position for all services is reported in finance reports at each IJB meeting. From reviewing the 2018/19 position the following material issues as reflected in the IJB's multi-year financial plan should therefore be noted:-

Service	Position	Impact (£k)	Comment
Adult Services – Older People's Services & Learning Disability	Services significantly overspending in 2018/19 – this is most likely to be attributable to the impact of demographic and demand pressures.	Neutral	Current pressures will be offset by IJB funds held to manage demographic impacts. Is impact neutral for planning purposes.
Adult Services	The IJB has made some progress in containing cost pressures	c£500k (benefit)	Assuming the IJB can continue to contain cost pressures, then this will benefit the opening

	(inflationary and demographic) to date.		financial planning for 2019/20.
Community Health	The IJB has made good progress in releasing recurring savings regarding these services.	c£1000k (benefit)	Assuming the IJB can continue to contain cost pressures, then this will benefit the opening financial planning for 2019/20.
Out Of Hours	This service continues to overspend while recovery plans are again looked at.	c£200k	While recovery plans are in development, this pressure needs to be allowed for in financial plans.
General Medical Services	Workforce issues are placing specific financial pressures on services.	c£100k	This reflects service provision at, for example, Brechin.
Prescribing	The IJB has previously described ongoing issues re Prescribing.	c£2200k (assumed at c10% of spend)	This pressure, along with offsetting recovery plans, needs to be allowed for in financial plans.
Hosted Services (Elsewhere)	These pressures include In Patient Mental Health Plans.	c£500k	This is a share of Tayside pressure. Recovery interventions will be overseen by other Tayside IJBs. In future years it is assumed that incremental savings will ensure any pressure at least does not increase.

The above factors, while all still under review, are all allowed for in setting out the opening commitments for 2019/20.

# 3.3 DELIVERY OF 2018/19 SAVINGS PLANS

Updates are provided routinely re the delivery of 2018/19 savings plans within Finance reports. The following provides the most current assessment of savings that effect future year planning:-

Intervention	Target £k	Revised 2018/19 Forecast £k	Comment	2019/20 Impact
Angus Care Model – MIIU	300	0	Programme remains under development but behind schedule for in year savings delivery. Recurring savings still expected to be of planned magnitude.	Roll forwards recurring savings plan (£300k).
Angus Care Model – In Patients	550	488	Saving delivered though parts of Angus Care Model (noting some final changes still to be completed).	Roll forwards undelivered parts of plan (£157k). Additional support service saving (£150k from 2020/21).
Angus Care Model – Future Phase	50	0	This was originally assumed for Quarter 4 of 2018/19, but is now assumed to occur in 2019/20.	This was previously only a high-level plan. Now see section 6 of report ('Planned Interventions').
Help to Live at Home	860	860	Complete.	Ongoing annual savings re Fair Cost of Care (£50k per annum to 2020/21).
Increased Income/Charging	200	200	Complete.	Benefit assumed to re-occur at c£240k in 2019/20 then c£200k per annum.
Improvement & Change programme	550	550	Complete.	New 2019/20 targets to be set – see section 6 of report ('Planned Interventions').
Care Home Review	250	0	Programme remains under development but behind schedule for in year savings delivery.	Recurring savings still expected to be of planned magnitude. See section 6 of report ('Planned Interventions').
Learning Disability Review	150	150	Programme remains under development but behind	Recurring savings still expected to be of planned

schedule for ir delivery.	n year savings magnitude. See section 6 of report ('Planned
	Interventions').

All the relevant information from the above is reflected in the IJB's multi-year plan and final delivery of these plans will be reflected in the 2019-2022 Strategic Commissioning Plan.

In order to ensure progression of the above it is recommended that:-

- 1) the IJB received an update regarding progress with MIIU plans at its next Board meeting including a re-statement of financial planning impact.
- 2) the IJB receives an update regarding the final stages of the originally approved Angus Care Model In Patients work stream at its next Board meeting including a re-statement of financial planning impact.
- 3) the IJB receives an update regarding proposed changes in charging for 2019/20 at its next Board meeting in advance of papers being submitted to the February 2019 Angus Council meeting for final approval (noting Angus Council retains the authority to approve charges).

# 4. FUNDING ASSUMPTIONS (BUDGET SETTLEMENTS)

4.1 As is evident from other reports to the October 2018 IJB meeting, the issue of budget settlement can be complicated and challenging for the IJB.

For 2019/20 and beyond a series of budget planning assumptions require to be made as set out below. However these will be subject to significant future revision and much further debate with both local partners (i.e. Angus Council and NHS Tayside) and any inclusion in this paper does not represent an endorsement of these assumptions.

Partner	Position	£k	Risk/Comments
Angus Council	Angus Council have not currently committed to any increase in the funding they provide to Angus IJB. Angus Council report 310/10 noted an assumption 'of the flat cash position over the 3-year term'.	c£0k	Noting that Angus IJB faces significant inflationary pressures that may be higher than elsewhere in Angus Council (due to Living Wage and scale of relationship with Third Parties) and significant demand pressures (e.g. re Older People), the IJB may wish to discuss this impact further with Angus Council.
NHS Tayside	In 2018/19, NHS Tayside passed through a fair share of funding uplifts received from Scot. Govt. to Angus IJB. A similar assumption of a 1.5% uplift is included going forward.	c£1400k	The 2018/19 agreements with NHS Tayside have been assessed as largely being fair and recognised that pressures (e.g. pay pressures) are felt evenly across the Health system.
Scottish Government	It is expected that the Scottish Government will provide some additional ring fenced funds to support polices such as the roll out of the Carers (Scotland) Act 2016 and Free Personal Care (under 65s). It is possible funds may be channelled through Local Authorities.	c£200k	At this stage this assumption is notional. In 2017/18 Angus Council did not fully ring fence additional funding from the Scottish Government to support Social Care (and protect historic budgets at the same time). The IJB may wish to discuss this further with Angus Council.

It is important to note that while the headline budget agreements with NHS Tayside have been relatively transparent in 2018/19, there are a number of complicating factors that are recognised but are difficult to reflect discretely in financial plans as follows:-

- 1) Unresolved issues regarding Complex Care funding while this remains unresolved and is an ongoing risk, for financial planning purposes this is assumed to be neutral for Angus IJB.
- 2) Unresolved issues regarding Large Hospital Set Aside resources this issue is a Scottish Government priority for 2018/19 but, to date, little progress has been made in Tayside to resolve this. For financial planning purposes this is assumed to be neutral for Angus IJB.

3) Underlying issues regarding the adequacy and fairness of the devolved Prescribing budget. While this matter is considered elsewhere, within the financial plan it is assumed there will be no change to the existing funding framework.

In order to ensure discussion regarding future budget settlements progress as productively as possible from an Angus IJB perspective, for 2019/20 budget it is recommended that IJB members (specifically voting Board members with roles within Partner organisations), are kept more fully informed of discussions with Partners as they develop in the period in advance of formal budget approval.

### 5. COST PRESSURES

5.1 Previous versions of the IJB's multiyear financial plan have set out a series of cost pressures faced by the IJB. These pressures, and the mitigation of them, are still a critical factor within financial planning and future costs pressures are described below:-

## 5.2 Inflationary Pressures

With pay inflation now running at a higher level than in previous years, this has an increasing impact on the IJB's planning. Pay inflation for employed staff is assumed to be c3% for the duration of the plan, Third Party Provider inflation is also allowed for. The IJB has previously allowed for a level of drug cost inflation and is now also factoring in a level of inflation on general supplies (reflecting ongoing general inflation). In addition the IJB is allowing for annual changes in the costs of the National Care Home Contract. These, in particular, could be subject to a stepped change in 2019/20. While attached plans need to allow for these factors, each will be subject to refinement, negotiation and potential mitigation over the coming months.

It is important to note that for the IJB, unlike a number of other services, non-pay inflation (e.g. 'supplies' inflation) will be more directly influenced by pay inflation due to the IJB reliance on Third Party Providers. This creates a particular pressure within the IJB.

## 5.3 Demographic Pressure

It remains a general assumption that most of the IJB's growth will occur within Social Care and Prescribing and that, for example, the In Patient component of care within Angus IJB will have a relatively static capacity.

Factors currently allowed for include growth in Older People's Social Care of c3% per annum and an increased level of prescription volume (0.5% per annum). Due to forecast changes in client numbers, an assumed level of growth has also been allowed for within Learning and Physical Disabilities. The effects of demographic growth are not solely felt in front line services and the wider impact of demographic growth also needs to be considered.

Generally where a service may experience marginal demographic growth then it will be expected that the service will contain this through internal redesign and re-prioritisation.

As projections to date are high level, during the next stages of the development of the Strategic Commissioning Plan, the IJB needs to improve its understanding of the likely impact of demographic growth and the workforce and financial impact associated with this growth. As such it is expected that reports to the next meeting of the IJB will describe this issue in a concise but comprehensive manner.

# 5.4 Legal Pressures

The two main immediate legal issues that require to be reflected in plans are the continued rollout of the Carers (Scotland) Act 2016 and delivery of the Scottish Governments' commitment to extend Free Personal Care to all Under 65s who require it regardless of condition.

To date the IJB has not been able to properly quantify the impact of the implementation of the Carers (Scotland) Act 2016 (the Act). This presents a number of problems – including a reduced ability to financially plan for the impact of the Act (including making a case for additional resource being reflected in budgetary frameworks) and a reduced ability to monitor the financial impact of the Act. Work needs to rapidly progress to resolve this issue and it is recommended an update is provided to the next IJB meeting regarding this. For now an allowance of c£200k per annum has been built into plans, but this could be a material understatement as some estimates have been at significantly higher levels.

Free Personal Care (under 65s) is to be introduced with effect from April 2019. As yet the financial impact is not known but early estimates are of an impact of c£100k per annum, increasing to £200k per annum by year 2020/21 - reflecting the impact of removal of charging for Free Personal Care (under 65s) and the potential impact of additional demand.

### 5.5 Other Pressures

At any given time in any given year the IJB will need to manage additional, sometime unforeseen, pressures. The IJB needs to maintain a flexible budget framework such that it is able to address these other pressures in a responsive and pragmatic manner. Examples may include workforce issues – including issues within Third Party Providers and General Practice.

Noting the scale of the potential inflationary, demographic and legal pressures, the IJB needs to do what it can to mitigate these. However it is reasonable to say that the compounding impact of pressures does place a material burden on the IJB. This needs to be addressed through a combination of mitigating these growth factors on a practical basis, implementing offsetting efficiencies and through agreeing supportive budget settlements with Partners.

In order to ensure proper development of the IJB's understanding of these pressures, it is recommended that:-

- 1) The IJB receives a report to its next meeting that contains further detail about the likely impact of demographic pressures going forward.
- 2) The IJB receives a report to its next meeting that provides an updated assessment of the financial impact of the Carers (Scotland) Act 2016 and Free Personal Care (under 65s).

### 6. PLANNED INTERVENTIONS

6.1 Section 3.3 above noted that a number of 2018/19 planned interventions roll forward. The narrative below reflects new and revised planned interventions as follows:-

Angus Care Model – Extended Review of In-Patient Services - In the January 2018 plans to implement the Angus Care Model (In-Patients), the planned ward configuration did result in wards with varying nurse staffing ratios – largely dependent on the bed numbers in those wards. Noting both workforce and financial constraints, it is expected that a move towards more efficient nurse staffing ratios through reconfiguration could contain staffing costs. Estimated saving – 2019/20 - £150k; recurring £300k.

Angus Care Model – Psychiatry of Old Age (POA) - The January 2018 plans resulted in 3 remaining POA wards. Further review of this could be undertaken to seek to revise in-patient bed capacity and increase the focus and investment in a more comprehensive POA use of Care Home beds or other community resources. Initial estimated saving – 2019/20 - £150k; recurring £300k.

Angus Care Model – Care Home Review - In House Care Provision – While this was initially part of the overall Care Home Review within the Angus Care Model, it is now proposed to treat this as a discrete work stream retaining the previous target of a £400k recurring saving from April 2019.

Angus Care Model – Care Home Review - Nursing Services - While this was initially part of the overall Care Home Review within the Angus Care Model, it is now proposed to treat this as a discrete work stream retaining the previous target of an annualised £100k recurring saving from mid 2019/20.

Angus Care Model – Care Home Review - Support Services - While this was initially part of the overall Care Home Review within the Angus Care Model, it is now proposed to treat this as a discrete 'Support Services' work stream retaining the previous target of an annualised £100k recurring saving from April 2019, with an additional target of c£50k from 2020/21 reflecting broader reviews of 'support services'.

Learning Disability Review / Implementation Plan – This has previously been described to the IJB and it is proposed that original recurring savings targets (£1200k over period to 2021/22) remain in place, albeit risk assessed (at an assumed level of 75% delivery) in the financial plan. However the overall plan needs to be re-described to the IJB.

Executive Management Team Reviews – During 2017/18 and through forums such as the Improvement and Change Board, Executive Management Team members, working with the IJB's wider management team, oversaw the delivery of significant levels of savings outwith the headline work streams the IJB is progressing. It is anticipated a similar process will happen in advance of April 2019 to act as a contributing factor in the 2019/20 budget setting process.

While services are affected by main work streams differentially, and at the outset it is difficult to determine how any specific saving will be delivered, it is reasonable to set and include savings targets associated with this activity. For this version of the IJB's multi-year financial plan this target is initially set at 1.5% of budgets (for 2019/20) equating to:-

- Adult Services (delivered via Improvement and Change Board) £300k for 2019/20 then c£200k per annum.
- Community Health Services £200k for 2019/20 then c£150k per annum.

These targets, which will include reviews of management and administrative functions, may need to be revisited in the context of the IJB's overall financial planning position. Similar targets will also exist for locally hosted services.

Prescribing – Prescribing plans will be developed in parallel to the IJB's overall plans. For now opening commitments and interventions are only reflected at a high level and are consistent with previously documented intentions to reduce the Angus variation from national weighted average costs per patient (including increasing funding to support Prescribing).

Collaboration – While the IJB has already developed some successful instances of collaboration, it is now suggested that this principle is further developed with the intention of both reflecting the best way to configure services but also with the specific intention of delivering services at a lower cost without undermining their quality. At this stage, and subject to developing proposals with other agencies, a notional target of £100k per annum by mid-2019/20 is attached to this high level intention.

Working With Partners – It is anticipated that work ongoing with Partners (Angus Council and NHS Tayside) will contribute to financial plans. At this stage this has not yet been quantified but this be developed in due course.

In order to ensure progression of the above it is recommended that:-

- the IJB receives an update regarding Extending the Angus Care Model Review of In-Patient Services at its next Board meeting including setting out refined financial plans.
- the IJB receives an update regarding Psychiatry of Old Age plans at its next Board meeting including setting out refined financial plans.
- 3) the IJB receives an update regarding progress with the Angus Care Model Care Home Review at its next Board meeting including a re-statement of financial plans regarding In House Care provision and Nursing Services.
- 4) the IJB receives an update regarding progress with the Angus Care Model Care Home Support Services work-steam at its next Board meeting (noting this will now include a broader review of Support Services).
- 5) the IJB receives an update regarding progress with the Learning Disability Review / Improvement Plan at its next Board meeting including a re-statement of financial plans.
- 6) the IJB receives updates regarding the potential benefit of both Collaboration and Working with Partners (Angus Council and NHS Tayside) at the February 2019 Board meeting.

### 7. SUMMARY

While previous iterations of the IJB's multiyear financial plan set out the planning position from 2018/19 they also set out that the IJB faced significant financial planning shortfalls from 2019/20 in particular. The position has now been revised to reflect the likes of revisions to some 2018/19 financial plans, an increased expectation regarding inflation pressures, updated assumptions regarding funding and other relevant factors.

After allowing for assumptions set out in this paper, from Appendix 1 and Appendix 2, it can be seen that the IJB still faces significant potential shortfalls from 2019/20 of c£4m across Adult Services and Community Health Services – with shortfalls increasing going forward. On that basis, and as the IJB's Strategic Commissioning Plan develops over the coming weeks, the IJB, and each of the IJB's Strategic Planning Group, Executive Management Team and Senior Leadership Team, will all now need to agree a series of additional interventions to assist the IJB deliver the required balance budget in the short and longer term consistent with the intention set out in the Strategic Commissioning Plan.

While the Strategic Commissioning Plan is still developing, a number of high level aspirations that will support the financial position will be considered including:-

- 1) Demographic and Demand Management.
- 2) Day Care Review.
- 3) Prescribing Plans.
- 4) Palliative Care Improvement Plan.
- 5) Digital Improvement Plan.
- 6) Older People's Mental Health Improvement Plan.

It should be expected that many of these, and other initiatives, will feature in future iterations of the IJB's multi-year financial plans.

It is anticipated that a draft of the Strategic Commissioning Plan will be brought to the IJB in December 2018 before formal pubic consultation. The plan will set out the ambition of the Partnership to deliver a greater shift in the balance of care and address public health issues more broadly in an attempt to mitigate growing demand for care and support.

To summarise, the information in this paper sets out the current status of the IJB's financial planning as the IJB is refining its financial plans for beyond 2018/19. These financial plans require to be consistent with the IJB's Strategic Commissioning Plan and in turn the Strategic Commissioning Plan will influence the financial plan.

The scale of interventions and remaining shortfalls reflect the challenges that the IJB need to address. This indicates that further work needs to be rapidly undertaken to both conclude existing plans and to develop further strategic interventions as part of the development of the Strategic Commissioning Plan.

REPORT AUTHOR: ALEXANDER BERRY, Chief Finance Officer

EMAIL DETAILS: hsciangus.tayside@nhs.net

October 2018

List of Appendices:

Appendix 1: Adult Services Financial Planning Summary

Appendix 2: Community Health Services Financial Planning Summary

Appendix 1: Adult Services Financial Planning Summary

	Services Delivered by Angus Counci								
Year	2019/20	2020/21	2121/22 £k						
icai	£k	£k							
	I.K	LK							
Brought Forward Budget	44389	44589	44689						
Assumed Budget Uplift									
Partner - Inflation	0	0	0						
Partner - Demographic	0	0	0						
Scottish Government	200	100	100						
Annual	200	100	100						
Total Available Budget	44589	44689	44789						
Brought Forward Spend Commitments	43889	46964	49554						
·									
Inflation Pressures	720	700	010						
Inflation - Pay (inc. Increments) Inflation - Third Parties	730	780	810						
	630	620	540						
Inflation - NCHC	1300	820	850						
Inflation - Other	40	40	40						
Annual Inflation Pressures	2700	2260	2240						
Service Pressures									
Legal - Carers	200	200	200						
Legal - Free Personal Care (FPC)(under 65s)	100	100	100						
Children In Transition (LD,PD,MH)	290	230	200						
Demographics (Older People)	1000	1000	1000						
Annual Service Pressures	1590	1530	1500						
Planned Expenditure	48179	50754	53294						
Initial Annual Shortfall	-3590	-6065	-8505						
Less Planned Interventions									
Help to Live at Home (FCC)	50	50	0						
Increased Charging/Recoveries	240	200	200						
Improvement & Change Programme	300	200	200						
HTLH - Care Home Review - In House Care <sup>1</sup>	200	200	0						
HTLH - Care Home Review - Nursing Care	50	50	0						
Support Services Review <sup>2</sup>			-						
Support Services Review LD - Remodel Care	100 250	50 425	0 75						
Collabortion	250	25	0						
Conadortion	25	25	U						
Total Interventions	1215	1200	475						
Revised Planned expenditure	46964	49554	52819						
Revised Annual Shortfall	-2375	-4865	-8030						
Cumulative Shortfall	-2375	-7240	-15270						
Notes									
1. Excludes Support Services.									

Appendix 2: Community Health Services Financial Planning Summary

Angus HSCP - Financial Plan 2017/18 - 2021/22	Services	Delivered	by NHS Ta	yside																	
	2019/20							2020/21							2021/22						
		Hosted	Hosted			Large			Hosted	Hosted			Large			Hosted	Hosted			Large	
Year	Local	(Angus)	(In)	PX	FHS	Hospitals	Total	Local	(Angus)	(In)	PX	FHS	Hospitals	Total	Local	(Angus)	(In)	PX	FHS	Hospitals	Total
	£k	£k	£k	£k	£k	£k	£k	£k	£k	£k	£k	£k	£k	£k	£k	£k	£k	£k	£k	£k	£k
Brought Forward Budget	44376	11540	13116	21836	28994	8946	128808	44646	11710	13316	22566	28994	8946	130178	45116	11890	13516	23106	28994	8946	131568
Annual Assumed Budget Uplift																					
Partner	670	170	200	330	0	0	1370	670	180	200	340	0	0	1390	680	180	200	350	0	0	1410
Transfer (Within IJB)	-400	0	0	400	0	0	0	-200	0	0	200	0	0	0	0	0	0	0	0	0	0
Annual Assumed Budget Uplift	270	170	200	730	0	0	1370	470	180	200	540	0	0	1390	680	180	200	350	0	0	1410
Available Budget	44646	11710	13316	22566	28994	8946	130178	45116	11890	13516	23106	28994	8946	131568	45796	12070	13716	23456	28994	8946	132978
Brought Forward Spend Commitments	43398	11928	13616	24766	29094	8946	131748	43496	12088	13816	24466	29094	8946	131906	43951	12268	14016	24546	29094	8946	132821
Inflation Pressures																					
Inflation - Pay	660	350	410	0	0	0	1420	650	360	410	0	0	0	1420	660	360	420	0	0	0	1440
Inflation - Third Parties	420	10	0	0	0	0	430	430	10	0	0	0	0	440	440	10	0	0	0	0	450
Inflation - Prescribing	0	0	0	250	0	0	250	0	0	0	240	0	0	240	0	0	0	250	0	0	250
Annual	1080	360	410	250	0	0	2100	1080	370	410	240	0	0	2100	1100	370	420	250	0	0	2140
New Service Pressures																					
Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Drugs	0	0	0	250	0	0	250	0	0	0	240	0	0	240	0	0	0	250	0	0	250
Annual	0	0	0	250	0	0	250	0	0	0	240	0	0	240	0	0	0	250	0	0	250
Planned Expenditure	44478	12288	14026	25266	29094	8946	134098	44576	12458	14226	24946	29094	8946	134246	45051	12638	14436	25046	29094	8946	135211
La Production of the cast III	460	570	740	2700	100		2020	F 40	500	740	4040	100		2670	745	500	720	4500	100	_	2222
Initial Annual Shortfall	168	-578	-710	-2700	-100	0	-3920	540	-568	-710	-1840	-100	0	-2678	745	-568	-720	-1590	-100	0	-2233
Less Planned Interventions																					
MIIU Review	300	0	0	0	0	0	300	0	0	0	0	0	0	0	0	0	0	0	0	0	0
OOH Review	0	200	0	0	0	0	200	0	0	0	0	0	0	0	0	0	0	0	0	0	0
In Patient Care Review	157	0	0	0	0	0	157	150	0	0	0	0	0	150	0	0	0	0	0	0	0
In Patient Review (Extended review of In Patients)	150	0	0	0	0	0	150	150	0	0	0	0	0	150	0	0	0	0	0	0	0
In Patient Review (POA Review)	150	0	0	0	0	0	150	150	0	0	0	0	0	150	0	0	0	0	0	0	0
Additional Service Efficienices	200	0	210	0	0	0	410	150	190	210	0	0	0	550	150	190	0	0	0	0	340
Collaboration	25	0	0	0	0	0	25	25	0	0	0	0	0	25	0	0	0	0	0	0	0
GP PX (Additional Savings)	0	0	0	800	0	0	800	0	0	0	400	0	0	400	0	0	0	300	0	0	300
Total Interventions	982	200	210	800	0	0	2192	625	190	210	400	0	0	1425	150	190	220	300	0	0	860
	982	200	210	800	0	0	2192	1607	390	420	1200	0	0	3617	1757	580	640	1500	0	0	4477
Revised Planned expenditure	43496	12088	13816	24466	29094	8946	131906	43951	12268	14016	24546	29094	8946	132821	44901	12448	14216	24746	29094	8946	134351
Revised Shortfall	1150	-378	-500	-1900	-100	0	-1728	1165	-378	-500	-1440	-100	0	-1253	895	-378	-500	-1290	-100	0	-1373
ne rises shortan	1130	3/0	300	1300	100	0	1/20	1103	376	300	1-11-10	100	0	1233	333	3/6	300	1230	100	- 0	13/3
Adjustment For Hosting	0	276	0	0	0	0	276	0	276	0	0	0	0	276	0	276	0	0	0	0	276
Final Shortfall	1150	-102	-500	-1900	-100	0	-1452	1165	-102	-500	-1440	-100	0	-977	895	-102	-500	-1290	-100	0	-1097