



AGENDA ITEM NO 7

REPORT NO IJB 15/24

ANGUS INTEGRATION JOINT BOARD

24 APRIL 2024

FINANCE REPORT – 2023/24

REPORT BY ALEXANDER BERRY, CHIEF FINANCE OFFICER

1. ABSTRACT

The purpose of this report is to provide Angus Integration Joint Board (IJB) with an update on the financial position of Angus IJB including financial projections for 2023/24, an update on reserves, financial risks, and governance.

2. ALIGNMENT TO THE STRATEGIC PLAN

This report contributes to the following strategic enablers in the Angus IJB Strategic Commissioning Plan: -

- Deliver financial sustainability; and
- Seeking to achieve best value and cost effectiveness.

3. RECOMMENDATIONS

It is recommended that the Integration Joint Board:-

- (i) Accept the overall projected financial position of Angus IJB;
- (ii) Accept and note the update on Reserves in Appendix 2; and
- (iii) Scrutinise and note the issues documented regarding Financial Governance in Appendix 3.

4. BACKGROUND

- 4.1 This report describes the most recent financial monitoring and projections for Angus IJB for financial year 2023/24, based on information to the end of February 2024, including NHS Directed Services and Angus Council Directed Services.
- 4.2 Information contained within this report reflects estimates for the whole of 2023/24 and consequently, projections remain subject to revision as we approach the year end.
- 4.3 As noted previously Board members should be reminded that throughout the year, the IJB Finance reports reflect "management accounting" information for management purposes. The impending IJB's final year end position will be reported from both a "management accounting" perspective in IJB reports and, in the IJB's published annual accounts, from a "financial accounting" perspective. The latter has a different treatment for some transactions - specifically regarding reserves.
- 4.4 The IJB's detailed projected financial position for 2023/24 is set out in Appendix 1. This shows that the overall projected financial position for the year to March 2024 is an under spend of c£3.811m.

5. CURRENT POSITION NHS DIRECTED SERVICES

5.1 **Local Hospital and Community Health Services** – These services are projecting a year end under spend of c£0.651m. Key factors to note includes: -

- Several service areas continue to have unfilled vacancies linked to staff turnover and recruitment which has a consequent impact on service delivery.
- Psychiatry of Old Age services continue to incur the costs associated with Angus patients boarding in non-Angus hospitals due to the non-operational ward (Prosen) in Angus.
- Medicine for the Elderly service continues to project an overspend with the service previously using higher levels of staffing linked to higher nursing absence levels, and an increase in overnight staffing levels required on the ward to deliver safe patient care due to ward environmental conditions. Both issues continue to be monitored by Management.
- Community Nursing wound management product costs are rising. The service is reviewing this position. However, due to capacity, progress has been delayed.
- Substance Use service had previously been projecting an overspend against Bupropion drug cost. However, the service has identified one-off funding to support this pressure in the current year. A financial recovery plan is being developed to address the recurring financial overspend and this will be presented to the Executive Management Team by the end of April 2024.
- The financial exposure in these budgets associated with Angus 2C GMS Practices is c£0.935m overspend.
- Noting the in-year projected position, this does offset against other, often recurring, cost pressures within the IJB's overall financial position for 2023/24 (e.g. Prescribing).

5.2 **Lead Partner Services in Angus** – These services are projecting a year end overspend of c£0.444m for the Angus share of these costs noting there is some offsetting funding locally to support these costs. Key point to note includes: -

- As previously reported, the Out of Hours (OOH) Service has seen changes in demand, during and since Covid-19, resulting in increased costs. Whilst the number of clinician-patient contacts is similar post Covid-19 to pre Covid-19, the consultation times are longer due to more complex case mix. The associated increased costs were supported by Scottish Government Covid-19 funding until March 2023. Whilst some improvement actions have been completed, the service is forecasting an in year overspend position of £1.715m and a recurring forecast position of c£1.500m of an over commitment. The financial recovery plan, originally requested in December 2022, was presented to the Executive Management Team in February 2024 and, whilst some savings have now progressed, and some further cost reductions are anticipated, Angus Executive Management Team have supported an outcome that suggests a regional cost base of at least £1m beyond historic levels. If this is supported by all 3 IJBs, then this cost will need to be permanently embedded in financial plans and will require offsetting elsewhere.
- Forensic Services continue to have operational workforce issues with supplementary staffing being used to cover these service gaps to ensure the workforce is safe, resulting in a projected overspend of c£0.155m.
- Tayside Continence Service is forecasting an overspend of c£0.245m driven by contractual price increases and patient growth. The service presented their financial recovery plan to the Executive Management Team in February 2024. The service has identified savings equivalent to c12% of the recurring financial overspend with progress being limited.

New improved financial governance arrangements have been established between the Lead Partners through the introduction of electronic reporting which is updated regularly and is accessible to each Lead Partner, providing the latest information on financial reporting, financial planning, and financial risk against Lead Partner Services. Going forward this information will be shared at the regional Lead Partner Arrangement Meetings.

5.3 **Lead Partner Services in Dundee/Perth** - As the IJB will be aware several devolved services are managed by other IJBs on behalf of Angus IJB. The projected year end position for these services is an under spend of c£0.420m, as detailed in Table 1 below. The main points to note are: -

- Increased pressures continue against Palliative Care and Dietetics Services;
- A new pressure has emerged against services in Perth due to Scottish Government allocations being lower than anticipated for the Women's Community Custody Unit;
- Above pressures are offset by a range of service under spends mainly relating to unfilled vacancies linked to recruitment challenges.

Table 1 - Lead Partner Services in Dundee and Perth IJBs on Behalf of Angus IJB	Annual Budget (£k)	Projected (Over) / Under (£k)
Angus Share of Lead Partner Services in Dundee		
Palliative Care	7,818	(273)
Brain Injury	2,048	30
Sexual & Reproductive Health	2,558	130
Psychological Therapies	8,413	233
Dietetics (Tayside)	4,574	(110)
Other Services in Dundee	2,211	480
Grand Total	27,622	490
Angus Share (27.1%)	7,485	133
Angus Share of Lead Partner Services in Perth		
Podiatry (Tayside)	3,695	394
Prison Health Services	4,931	156
Public Dental Service	2,671	520
Other Services in Perth	34	(11)
Grand Total	11,332	1,059
Angus Share (27.1%)	3,071	287
Total Angus Share of Lead Partner Services	10,556	420

5.4 **Family Health Services (FHS) Prescribing** – The year end forecast position is now for a lower overspend than envisaged in the financial plan, and lower than more recent projections shared with the IJB, with the IJB now projecting an overspend of c£1.406m (c£2.100m in February IJB). Part of this improvement relates to specific price reductions that will also improve the financial planning position. The previous reported delays in prescribing data, due to national reporting issues, are now resolved with the current data being two-months behind. The prescribing volume information continues to remain uncertain whilst prices remain volatile.

Separately, the IJB has previously requested ([Report 57/23, appendix 4. August 2023](#)) updates from the regional Prescribing Management Group (PMG) regarding a series of complicated outstanding prescribing issues. A response has now been received from NHS Tayside. Through the Chief Officer, the IJB acknowledged receipt of this response and reflected that while the response from NHS Tayside does provide helpful context and an NHS Tayside perspective for the IJB, it does not resolve the fundamental issues of affordability of drug treatments within the IJBs. Further work will continue to be required to address the governance issues being channelled through the regional Prescribing Management Group. Following the December 2023 IJB meeting this was recorded as a separate IJB action point and will

continue to involve liaison with other IJBs in Tayside to ensure a degree of regional consistency. This issue may merit being considered as part of any upcoming IJB development sessions.

- 5.5 **General Medical Services (GMS) and Family Health Services** – The Scottish Government has confirmed the revised GMS funding allocation for Tayside IJBs is slightly higher than the original allocation received in September 2023. However, there continues to be a series of commitments that have not received an appropriate inflationary funding uplift which increases financial pressures on GMS budgets. Updates continue to be prepared and shared with Primary Care management forums describing the financial planning position.

As previously reported, all three Tayside partnerships have agreed to review the financial risk sharing for Primary Care. Interim working arrangements are in place and Angus IJB is already absorbing an increased proportion of financial pressures. This remains work in progress and an update on the outcome of this review will be shared with the IJB in due course.

As previously noted, the GMS (2C Practices) management team were requested to provide a financial recovery plan for approval by the IJB's Executive Management Team by the end of October 2023. Two of three (GP practices) financial recovery plans were presented to the Executive Management Team in February 2024 with the final financial recovery plan for Brechin to be presented to the Executive Management Team in April 2024. To date, while these recovery plans do demonstrate some progress in terms of reducing over-commitments and developing services, they do also lead to increased cost exposures in the wider system.

Longer term risks continue to remain regarding the challenges re General Practitioner recruitment and GP sustainability, the introduction of the new GMS contract (IJB report 36/23) and the underlying growth in Premises costs including any implications from the Angus General Practice Premise Strategy (IJB report 35/23).

- 5.6 **In Patient Mental Health Services** - As the IJB is aware Inpatient Mental Health Services are currently operationally managed by NHS Tayside. However, resources do remain formally devolved to the IJB for Strategic Planning.

As previously noted, whilst a financial recovery plan to address some of the pressures within the service has been developed, it is expected that the regional financial pressures could be c£5.5m this year. The issue of unresolved future financial risk sharing regarding In Patient Mental Health Services continues to present a medium-term risk to the IJB. Through the IJB's Chief Officer and Chief Financial Officer, and with input from Angus Council's Chief Executive, Angus IJB will continue to participate in constructive senior-level discussions with NHS Tayside and other IJBs aimed at resolving these issues.

The February 2024 IJB (report 3/24) approved the current year contribution to In Patient Mental Health overspends from utilising a combination of the in-year position and the IJB's Mental Health Reserve. However, due to how other Scottish Government allocations have worked out there is extra capacity to absorb the full contribution through the in-year position.

A progress update on how future years overspend will be managed will be provided to the IJB in August 2024.

- 5.7 **Large Hospital Services** – As of April 2023 this budget was re-set at £9.811m based on 2022/23 activity and pricing levels.

As noted previously, discussions are ongoing with NHS Tayside regarding developing a process to manage changes in volume of these services (largely delivered in Ninewells) for 2023/24 and beyond and outcomes of these discussions will be shared with the IJB in due course.

While this report routinely refers to budget and costs, for Large Hospitals, activity is the key driver for financial commitments. The IJB remains committed to working with partners to contain the number of occupied bed days used by Angus residents in Ninewells. Table 2 below sets out provisional activity positions for the key Occupied Bed Days indicator for “Large Hospital” activity. (Note – there is still ongoing refinement of this data.)

The latest projections suggest an increase in activity, particularly compared with Pre COVID-19 (17%), with consequent resource implications.

Table 2	2019/20	2022/23	2023/24 (Projected)	2023/24 (Change from prior year)	2023/24 (%age Change)
Occupied Bed Days	16,871	18,579	19,764	1,185	6.4%

ANGUS COUNCIL DIRECTED SERVICES

5.8 **Adult Services** – These services are projecting a year end over spend of c£0.330m. Key factors contributing to this are: -

- Physical Disability service costs are continuing to see an increase in both service users and high-cost packages resulting in a projected overspend of c£1.191m.
- Learning Disabilities service continue to forecast an overspend of £0.478m linked to care packages.
- Community Mental Health services (Under 65s) have seen an increase in the number of complex high-cost care packages to support service users stay in the community and high-cost residential placements, with these costs being managed in year through non-recurring funding. The service was asked to develop a financial recovery plan by March 2024 to address the recurring financial overspend. This is now anticipated to be presented to the Executive Management Team in April 2024.
- Occupational Therapy services are projecting an overspend of c£0.110m, slightly reduced from the previously reported position, due to both an increase in demand and price of adaptations. The service has been asked to develop a financial recovery plan to address the recurring financial overspend with this to be presented to the Executive Management Team by the end of April.
- The Community Joint Equipment Store continues to project an overspend of £0.180m due to increases in price and number of service user and/or volume of equipment provision. As noted above, the Occupational Therapy services has been asked to develop a financial recovery plan which will also capture the Community Joint Equipment Store.
- Older People services continue to commission a steady, but lower than budgeted, level of care home beds resulting in a projected under spend of c£0.9m.
- Demand for Care at Home services across all services continue to exceed the available capacity within the Partnership, it might be reasonable to assume additional annualised costs of up to c£1.4m if unmet need was fully delivered.
- Several service areas have unfilled vacancies linked to staff turnover and recruitment which has a consequent impact on service delivery.
- As previously requested by the IJB, progress continues to be made to reviewing the Older People’s Services and resource requirements which will include redefining how Older Peoples Services budgets are reported to the IJB in this report. As noted previously similar reviews still need to be progressed to determine realistic and affordable resource frameworks for both Learning and Physical Disability Services.

CENTRALLY MANAGED BUDGET

5.9 **Centrally Managed Budget** – The Centrally Managed budget continues to reflect previous progress with savings (as per the IJB’s strategic financial plan). It is important to recall that the IJB’s Strategic Financial Plan did anticipate recurring overspends (e.g. Prescribing, GMS) with offsetting under spends and funding

elsewhere in the IJB. In an ideal world, and within an agreed Strategic Financial Plan, the IJB would be able to realign some budgets to more closely match funding with agreed plans (e.g. for Disability Services, Older Peoples Services and Prescribing). However, with a series of unresolved issues within our budgetary framework, this is not currently possible.

OUTLOOK POSITION

- 5.10 **Progress with Strategic Financial Plan (Planned Interventions)** – As previously reported at the February 2024 IJB Board meeting, there has been no change to the status of planned interventions with residual gaps in future years reflected in the Strategic Financial Plan.
- 5.11 **IJB Strategic Financial Plan** – A report on the updated three-year Strategic Financial Plan is provided separately to the April 2024 IB.
- 5.12 **IJB Reserves** – Appendix 3 provides an update on the reserves position.

6. PROPOSALS

There are no recommendations for approval in this report.

7. FINANCIAL IMPLICATIONS

- 7.1 The IJB is reporting an overall under spend of c£3.811m, see Appendix 1. This contrasts with forecast overspends set out in the IJB's Strategic Financial Plan for 2023/24 which suggested an overspend of £3.327m, albeit it was expected the level of in-year underspend would offset this overspend, as demonstrated below. The main differences to the plan are consistent to those described in previous IJB Finance report and include:
 - Unfilled vacancies linked to staff turnover and recruitment challenges, as described above, totalling c£2.6m;
 - Unfilled vacancies linked to staff turnover and recruitment challenges in Lead Partner Services of just under c£0.5m;
 - Factors linked to timing and scale of impact of financial planning provisions c£1.8m;
 - A lower use of care home beds compared to budgeted levels of c£0.9m;
 - Net effect of unmet need within Care at Home services c£1.4m.
- 7.2 In many of these cases, it is assumed that costs not consumed this year will be incurred in future years. In any further iteration of the IJB's Strategic Financial Plan, it would be logical to explore the potential for any of the above underspends to be embedded in future planning. Through the IJB's EMT, this could continue to be taken forward as a financial recovery action.
- 7.3 As the IJB is forecasting a year end under spend of c£3.811m so the impact of the IJB's financial position for both Angus Council and NHS Tayside would be neutral. The IJB currently holds a "Financial Planning Reserve" and it is suggested any balance of underspend is applied to that type of reserve, after adjusting for the increase to the Contingency Reserve (as described in Appendix 2). That type of reserve has previously been held for future-year consideration including looking at options to potentially return of some reserves to the IJB's partners in the succeeding financial year depending on future circumstances and agreement.
- 7.4 All projections are preliminary at this point and subject to multiple risks as noted above.

8. RISK MANAGEMENT

- 8.1 **Risk** – Angus IJB formally monitors its corporate risks through the Angus Clinical, Care and Professional Governance group. The updated three-year Strategic Financial Plan report provided separately to the April 2024 IJB provides a summary of future financial risks. Many of the finance risks are IJB wide risks including funding

levels and risks regarding financial planning. It should be noted, however that further risks may still materialise in the financial year end projections.

Risk Description	Failure to develop and implement a balanced financial plan will lead to a risk of unsustainable services.
Risk Category	Strategic
Inherent Risk Level	Likelihood 5 x Impact 5 = Risk Scoring 25 (very high-risk level). No change.
Mitigating Actions	Funding - Ongoing dialogue with NHS Tayside, Angus Council and, via national forums, Scottish Government. Resolve outstanding budget issues – Ongoing dialogue with NHS Tayside. Progress with Strategic Commissioning, Delivery and Financial Recovery Plans alongside Service Review - Monitor via Executive Management team meetings and reports to IJB regularly. Managing services within agreed budgets - Financial recovery plans may be requested from over-committed services.
Residual Risk Level	Likelihood 5 x Impact 4 = Risk Scoring 20 (very high-risk level). No change.
Planned Risk Level	Likelihood 4 x Impact 4 = Risk Scoring 16 (high-risk level). No change.
Approval Recommendation	Even with the progression of all agreed actions, this risk remains very high. Scheduled reporting and monitoring will continue alongside the further development of risk mitigation actions.

8.2 **Governance** - As previously noted, there remain a few long-term financial governance issues that the IJB's Audit Committee continues to monitor. A summary of the main issues is set out in Appendix 3. Separately, IJB members will recall that Finance Report 27/23 (April 2023) set out a series of proposals for improved IJB working arrangements. An update regarding these proposals will be reported back to the IJB in June 2024 as per the IJB Action Points.

9. PUBLIC HEALTH IMPLICATIONS

There are no direct public health implications arising from the recommendations of this report.

10. CLIMATE SUSTAINABILITY IMPLICATIONS

There are no direct environmental implications arising from the recommendations of this Report.

11. EQUALITY IMPACT ASSESSMENT, CHILDREN'S RIGHTS AND FAIRER SCOTLAND DUTY

A copy of the EIA screening assessment, showing that a full EIA is not required for the following reasons:

- As the nature of the report is a finance update on operational matters; and
- No impact on any protected characteristics.

will be made available on the IJB's web site after the relevant IJB meeting.

COMMUNICATION AND ENGAGEMENT (IF APPLICABLE)

Not Applicable.

12. DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans, and this is provided for in Section 26 to 28 of the Public Bodies (Joint Working) (Scotland) Act 2014. This mechanism takes the form of binding

directions from the Integration Joint Board to one or both of Angus Council and NHS Tayside.

Direction Required to Angus Council, NHS Tayside or Both	Direction to:	
	No Direction Required	X
	Angus Council	
	NHS Tayside	
	Angus Council and NHS Tayside	

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List of Appendices:

Appendix 1: Angus Health and Social Care Partnership Financial Monitoring Report 2023/24

Appendix 2: IJB Reserves 2023/24

Appendix 3: Financial Governance

Appendix 1 Angus Health and Social Care Partnership Financial Monitoring Report 2023/24

Angus Health & Social Care Partnership - Financial Monitoring Report 2023/24						
	Adult Services		Angus NHS Directed Services		HSCP	
	Annual Budget	Projected (Over) / Under	Annual Budget	Projected (Over) / Under	Annual Budget	Projected (Over) / Under
	£k	£k	£k	£k	£k	£k
Local Hospital and Community Health Services						
Older Peoples Services						
Psychiatry Of Old Age			6,117	215	6,117	215
Medicine For The Elderly			7,009	(256)	7,009	(256)
Minor Injuries + Illness Units			2,071	490	2,071	490
Community Nursing			7,871	17	7,871	17
Management & Admin	1,670	(154)			1,670	(154)
Care at Home	6,160	(26)			6,160	(26)
Intermediate Care	416	0			416	0
Community Support	871	16			871	16
Supported Accommodation	342	31			342	31
Internal Residential	4,830	(7)			4,830	(7)
Care and Assessment	30,512	1,715			30,512	1,715
Community Mental Health	2,033	403			2,033	403
Older Peoples Service	46,835	1,978	23,068	467	69,903	2,445
General Adult Psychiatry	4,540	(363)	3,941	364	8,481	1
Admin Community Support	3,434	51			3,434	51
Non Residential Care	9,159	(287)			9,159	(287)
Residential Care	6,704	(337)			6,704	(337)
Learning Disability(Angus)			670	94	670	94
Learning Disability	19,297	(572)	670	94	19,967	(478)
Physical Disabilities	5,786	(1,191)	0	0	5,786	(1,191)
Substance Use	1,869	31	1,726	189	3,595	219
Community Services						
Physiotherapy			2,897	20	2,897	20
Occupational Therapy	1,837	(181)	789	71	2,626	(110)
Joint Store	765	(152)			765	(152)
Anti-Coagulation			219	31	219	31
Primary Care			1,598	45	1,598	45
Angus 2c (gms) Services			687	(935)	687	(935)
Carers	774	0			774	0
Homelessness	1,431	72			1,431	72
Other Community Services			1,431	115	1,431	115
Community Services	4,807	(261)	7,620	(653)	12,427	(914)
Planning / Management Support						
I/b Management	364	27	2,109	154	2,473	181
Improvement And Development	1,825	22	609	38	2,433	59
Planning / Management Support	2,189	49	2,718	191	4,907	240
Local Hospital and Community Health Services						
Lead Partner Services - Angus						
Forensic Service			1,177	(155)	1,177	(155)
Out of Hours			9,236	(1,715)	9,236	(1,715)
Speech Therapy (Tayside)			1,509	3	1,509	3
Locality Pharmacy			3,280	0	3,280	0
Tayside Continence Service			1,552	(245)	1,552	(245)
Hosted Services Centrally Managed Budget			535	474	535	474
Hosted Services Recharges to Other IJBs			(12,604)	1,194	(12,604)	1,194
Lead Partner Services in Angus	0	0	4,685	(444)	4,685	(444)
Lead Partner Services - Dundee/Perth						
	0	0	10,556	420	10,556	420
GP Prescribing			23,247	(1,371)	23,247	(1,371)
Other FHS Prescribing			586	(35)	586	(35)
General Medical Services			21,429	1	21,429	1
Family Health Services			16,324	22	16,324	22
In Patient Mental Health Services			0	0	0	0
Large Hospital Set Aside			9,811	0	9,811	0
Total	85,324	(330)	126,381	(756)	211,705	(1,086)
Centrally Managed	2,218	3,942	853	955	3,071	4,897
Grand Total	87,542	3,612	80,740	199	214,776	3,811

Appendix 2: IJB Reserves 2023/24

The IJB's Reserves Policy sets out that the IJB may hold both "ear-marked" reserves and general reserves. Ear-marked reserves will generally be for specific projects or issues, ear-marked due to specific constraints or ear-marked due to funding factors. General reserves are intended to assist the IJB manage its overall resources over the longer term.

Contingency Reserves – The IJB holds a contingency reserve of £6.450m. At any time, the IJB may require to commit this reserve to address developing situations and should the IJB overspend in a financial year then the IJB's contingency reserves would be required to offset any in year overspend. This would only provide short term relief to ongoing financial pressures. The February 2024 IJB meeting (report 3/24) supported the recommendation to increase this reserve by c£0.450m from the IJB's projected 2023/24 underspend. This will ensure the reserve is re-set at 3% of, now increased, turnover and therefore remains aligned to the IJB's Reserve's Policy. This will be updated on completion of the year end.

Ear-marked Reserves – Evolving financial plans exist for each reserve to ensure this funding is mobilised effectively in a way that meets Scottish Government criteria, is sustainable and delivers good value for money. It should be noted that "ear-marked reserves" linked to Scottish Government funding must be used in line with specific criteria.

The IJB also retains some locally derived "ear-marked reserves" as follows: -

Strategic Plan Reserve – Opening value at April 2023 - £2.790m; This resource is managed over the duration of the new Strategic Commissioning Plan to March 2026 and is overseen by the Strategic Planning Group (SPG). This reserve has been used to support a number of Programme Project posts and due to recruitment challenges across the HSCP these costs have been contained within core budgets in the current year.

Financial Planning Reserve 2022/23 – Opening Value at April 2023 - £1.090m. This reserve has been fully depleted as described in IJB Report 81/23.

Financial Planning Reserve 2023/24 – Opening Value at April 2023 £3.038m. This resource has partially been utilised to create the Workforce Reserve noted below. At the February 2024 IJB meeting, it was agreed that plans for the balance of £1.164m would be developed with IJB voting members. After communication with voting members in March 2024, it has been agreed to utilise this balance to support the likes of IT issues at the IJB/Partner interface with the balance of any funds being passed back to Partners in this financial year.

Property Reserve – £3.300m. This reserve was created via report 26/22 to "support future property and accommodation commitments with intention of releasing revenue funds to support the IJB's Strategic Financial Plan..." and it has subsequently been noted this reserve could also be used flexibly to support some strategic aspects of the IJB's Primary Care Premises Strategy.

Primary Care Investment Reserve – £0.700m. This reserve has been created as per previous report (66/22) which noted the reserve was created to "support future primary care investment funds".

Mental Health Recovery Financial Reserve – £2.000m. This reserve has been created per report 27/23.

Workforce Reserve - £0.900m. This reserve has been created per report 3/24.

Table 3 Angus IJB Reserves	Reserves Opening Balance April 2023	Change in Year	Closing Balance March 2024	Additional Comment (including commentary regarding deployment of funds)
	£k	£k	£k	
General Fund Balance (Usable Reserve) -General Reserve	6,450	0	6,450	Per Reports (91/22 & 2/23). Note future recommendation in Report 3/24.
General Fund Balance (Ear-Marked Reserves) (Local)				
Strategic Plan Reserve	2,790	0	2,790	Per Report 66/22
Financial Planning Reserve 2022/23	1,090	(1,090)	0	Redistribution of £2.064m to IJB Partners and creation of new Workforce Reserve £0.900m
Financial Planning Reserve 2023/24	3,038	(1,874)	1,164	
Property Reserve	3,300	0	3,300	Per Report 25/22
Local Primary Care Investment Reserve	700	0	700	Plans are being developed with intention to spending these funds in 2024/25
Mental Health Recovery Financial Reserve	2,000	(41)	1,959	Per Report 66/22.
Workforce Reserve	0	900	900	Per Report 3/24
	12,918	(2,105)	10,813	
General Fund Balance (Ear-Marked Reserves) (Scottish Government Funding)				
Primary Care Improvement Fund	137	(137)	0	Re-evaluating service models.
Mental Health Action 15	166	(166)	0	Plans developed.
Primary Care Transformation Fund	190	(17)	173	Plans being developed, with spend scheduled in future years.
Primary Care Premises	245	0	245	
Alcohol & Drug Partnership Fund	59	31	90	Plans are evolving.
Forensic Medical Services	8	(8)	0	Complete.
Drug Death Task Force	44	(44)	0	Complete.
Community Living Change	332	(101)	231	Plans being developed. SG confirmed unused funds can be carried forward.
Workforce Wellbeing Primary and Social Care	30	(25)	5	Plans developed.
Mental Health Facilities Project	324	(102)	222	Plans being developed, with spend schedule in future years.
General Dental Services	109	0	109	Awaiting SG confirmation if unused funds can be carried forward.
Community Nursing Neurological Care	41	(41)	0	Complete.
Dementia Post Diagnostic Support	9	(9)	0	Complete.
Unscheduled Care	42	42	0	Complete.
Expanding Care at Home	340	(340)	0	Complete.
Learning Disability Health Checks	43	43	83	Plans evolving, aligned to Tayside service model.
Realistic Medicine - GMS	15	0	15	Plans developed, remaining spend planned in May/June 2024.
Carers PPE Reserve	3	(3)	0	Complete.
Long COVID Support Fund	59	1	60	Plans developed.
	2,196	(750)	1,446	
Total General Fund Balance (Ear-Marked Reserves)	15,114	(2,855)	12,259	
Total General Fund Balance	21,564	(2,855)	18,709	

Appendix 3: Financial Governance

With respect to governance issues, there are several long-standing issues that remain unresolved, and it has been previously agreed that it would be helpful to highlight these to the IJB. The issues and some commentaries are detailed below.

Issue	Status / Background to Status	Implications of Status	Action Required	Commentary
Development of Large Hospital Set Aside arrangements in conjunction with NHS Tayside	Limited Progress - See separate IJB report (81/20) – A complicated concept that requires resolution between NHS Tayside and all local IJBs. Coordinated management resource is required to resolve this and that has been challenging since the inception of IJBs.	The lack of progress undermines the IJB's ability to fully direct resources within the IJB's Strategic Plan. Noting that pre-COVID 19 information did suggest Angus had reduced its use of Acute Services since the inception of Integration. Information during 2022/23 did suggest Acute Services activity had risen post-COVID 19.	CO/CFO - An improved dialogue between NHS Tayside and local IJBs, which itself requires all parties to be able to dedicate coordinated resource to progress this.	Subject to a separate update report to the June 2021 IJB (17/21). As noted in the main report, discussions will continue to progress with NHS Tayside regarding an improved way of considering activity associated with these resources.
Development of improved Lead Partner Services arrangements in conjunction with neighbouring IJBs	Good Progress – This has required proportionate improved coordination between all 3 IJBs.	Previous lack of progress undermined the IJB's ability to fully direct resources within the IJB's Strategic Plan.	CO/CFO - IJB intends to develop a consolidated information set regarding local Lead Partner Services covering Finance, Performance and Risks.	Financial reporting is complete. Other elements such as risk and performance are nearing completion with the introduction of a Lead Partner Arrangements meeting involving all 3 IJBs now in place now acting as the focus for these issues.
Review of Information Governance Strategy	The IJB has an outstanding action to review its 2019-2022 Information Governance Strategy.	While the previous strategy is still in place, the lack of an updated Information Governance Strategy undermines overall Information Governance within the IJB.	CO – Through the IJB's Clinical Care and Professional Governance groups, to review and update the Strategy	The majority of actions in the previous Information Governance Strategy have now been completed. A new Information Governance Model was proposed and agreed in December 2023 and discussions have taken place with Angus Council and NHS to work up the new model.

These issues continue to be monitored by the IJB's Audit Committee. Many are complex, require concurrent joint working with Partners and the IJB's ability to progress issues can be affected by capacity constraint.