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**Item No: 7**

**Meeting Date: Wednesday 22<sup>nd</sup> March 2023**

**Glasgow City  
Integration Joint Board**

**Report By: Sharon Wearing, Chief Officer, Finance and Resources**

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**Integration Joint Board  
Financial Allocations and Budgets for 2023-24**

**Purpose of Report:**

This report will outline the revenue budget for Glasgow City Integration Joint Board for 2023-24 and the budget available for services commissioned from Glasgow City Council and NHS Greater Glasgow & Clyde.

**Background/Engagement:**

In line with the Integration Scheme, the Chief Officer has fully engaged in Glasgow City Council's budget setting process for 2023-24, which determined the funding allocations delegated to the IJB for 2023-24. The Chief Finance Officer has had initial informal discussions with the Assistant Director of Finance in relation to the interim budget offer from NHS Greater Glasgow and Clyde.

**Governance Route:**

The matters contained within this paper have been previously considered by the following group(s) as part of its development.

- HSCP Senior Management Team ☒  
Council Corporate Management Team ☐  
Health Board Corporate Management Team ☐  
Council Committee ☐  
Update requested by IJB ☐  
Other ☐  
Not Applicable ☐

**Recommendations:**

The Integration Joint Board is asked to:

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- a) note the contents of this report;
- b) note the funding allocation from Glasgow City Council;
- c) note the indicative funding allocation from NHS Greater Glasgow and Clyde, subject to confirmation when the out-turn for the 2022-23 financial year has been finalized and the pay award allocations have been confirmed for 2022-23 and 2023-24;
- d) agree the balanced budget outlined in section 6 including the savings programme detailed in section 6.9;
- e) agree that savings identified at 6.10 are approved in principle subject to engagement with service users to consider their individual needs and opportunities for mitigations. This will then be reported back to the May IJB before savings are approved for implementation;
- f) refer the proposed 5% inflationary increase to charges and the revision to the taper for non-residential charges to Glasgow City Council City Administration Committee for approval;
- g) delegate a budget to NHS Greater Glasgow and Clyde of £1,016,836,000 and direct that this budget is spent in line with the strategic plan of the IJB and the proposals included within this paper at section 6;
- h) delegate a budget to Glasgow City Council of £527,231,500 and direct that this budget is spent in line with the strategic plan of the IJB and the proposals included within this paper at section 6;
- i) agree that the Partnership will offer a 3.80% uplift to an agreed percentage of full contract values (detailed at paragraph 6.4 to 6.5), to providers of Adult and Children and Families Social Care within Glasgow Purchased Services and a 3.80% uplift on the full contract value to residential providers of Adult and Children and Families Social Care within Glasgow Purchased Services effective from 10 April 2023;
- j) note that the uplifts agreed at i) will be subject to Providers confirming they will pay staff providing direct care at least £10.90 per hour from 10 April 2023;
- k) agree the 2022-23 budget to meet the cost of the revised nursing care rate of £838.12 per week for the national care home contract effective from 12 April 2022; and
- l) agree the additional saving proposed on the Homelessness Alliance contract as outlined in section 10.2

The Integration Joint Board further asks that the Chair and Vice Chair:

- m) note that the proposed budget will put the IJB at risk of failing to meet current statutory duties and also fails to

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	<p>take into account rising future service user needs and budgetary pressures;</p> <p>n) note that the proposed budget carries significant in-year risks, in particular in relation to Homelessness Services;</p> <p>o) note that the proposed budget also places significant risks on future years, given that it will severely deplete IJB reserves ahead of an estimated funding gap for 24/25 of £45 million, as detailed in section 12.2; and</p> <p>p) therefore agree to:</p> <p>(i) write to Scottish Ministers strongly expressing concerns over the funding settlement and outlining the severity of cuts which will be needed should additional funding not be made available to the IJB, and requesting that funding is increased; and</p> <p>(ii) instruct the Chair to write to the City Treasurer asking that they justify the decision to retain funding which the Council has received for the 2022-23 pay award for Social Work staff, as has been outlined in 6.23, particularly considering the potential consequences for Council not meeting their statutory duties as outlined in section 7.6.</p>
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### Relevance to Integration Joint Board Strategic Plan:

This report describes the financial allocation and budgets made available to the Integration Joint Board for 2023-24 by Glasgow City Council and NHS Greater Glasgow and Clyde; outlines the financial pressures on health and social care services; and the measures we will take to address the financial challenges and the implications this has for the priorities outlined in the Strategic Plan.

### Implications for Health and Social Care Partnership:

<b>Reference to National Health &amp; Wellbeing Outcome(s):</b>	The financial framework for the Partnership contributes to the delivery of the 9 national health and wellbeing outcomes that health and social care partners are attempting to achieve through integration.
<b>Personnel:</b>	Staffing implications are highlighted where appropriate in the report.
<b>Carers:</b>	Supporting carers to sustain them in their caring role remains a strategic priority for the HSCP. All of the budget measures proposed here are informed by that commitment. Accordingly, no savings proposals have been brought forward in relation to carer support budgets. However, it is prudent to assume that other savings proposals will have a broader impact on carers across the city. Specifically any measures that might result in a delay

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	to accessing new or increased HSCP service input in relation to the person(s) they care for.
<b>Provider Organisations:</b>	An update on the proposed annual uplift for provider organisations is included within this report.
<b>Equalities:</b>	Within this report there is reference to proposals against which projected savings targets have been applied. The activity to achieve any proposed savings will be carried out with a focus on equalities and the extent to which any subsequent changes to policies and/or services may impact on any stakeholders, but in particular stakeholders with protected characteristics. Proposals have been subject to a preliminary Equality Impact Assessment to understand impacts, inform the development of the proposals, and to take steps to mitigate any impacts identified, wherever possible. Where proposals are not sufficiently developed and where the engagement activity with stakeholders to inform the proposal has not yet been undertaken then further engagement will be undertaken and reported back to the May IJB. The outcome of the equality considerations of the proposals within this report can be accessed on our website. <a href="https://glasgowcity.hscp.scot/equalities-impactassessments">https://glasgowcity.hscp.scot/equalities-impactassessments</a>
<b>Fairer Scotland Compliance:</b>	Overall the expenditure on services within this budget supports the delivery of a Fairer Scotland, however some of the equality impact assessments have identified that there is potential for a disproportionate impact on those living in poverty. Mitigations are being planned wherever possible.
<b>Financial:</b>	Financial implications are detailed throughout this report.
<b>Legal:</b>	The Chief Finance Officer's duties in Scotland require a balanced budget to be set. This is established in s108(2) of the Local Government (Scotland) Act 1973 and s93(3) of the Local Government Finance Act 1992. Directions are being issued in line with the legislation.
<b>Economic Impact:</b>	Not applicable at this time.
<b>Sustainability:</b>	The financial position of the IJB is dependent on the funding allocations received from the Council and the Health Board. The financial pressures facing the IJB is unprecedented and is reflective of both cost and demand pressures. The funding allocations received do not fully meet these pressures. The financial strategy included

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	<p>within this report includes a significant use of the IJBs General Reserves. This has implications in terms of the IJBs ability to deal with volatility arising within these pressures and also the IJBs ability to deal with any further unknown risks both in 2023-24 and in future years. This poses a risk for the longer-term sustainability of the IJB.</p> <p>The use of General Reserves only offers a temporary solution for cost pressures. If market conditions do not return to normal levels or actions are not taken to reduce demand or reduce the cost-base then the IJB will face a significant financial challenge in future years. Work will continue to develop a financial strategy over the short and medium term which will respond to these challenges to deliver financial balance.</p>
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<b>Sustainable Procurement and Article 19:</b>	Not applicable at this time.
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<b>Risk Implications:</b>	<p>Delays in setting the budget will impact on the IJBs ability to achieve financial balance in 2023-24 and will require recovery plans to be put in place which will impact on all services.</p> <p>The volatility of the drugs supply market, demand for services, cost of living crisis and inflation continues to represent a significant financial risk to the IJB. This level of risk will require the IJB to keep its financial strategy under review to ensure services are delivered within the funding available. This will require the IJB to use general reserves to manage this financial risk. This financial risk will be monitored during 2023-24 and reported through the financial performance reports to the IJB and IJB Finance, Audit and Scrutiny Committee.</p> <p>The IJB has a statutory duty to deliver a balanced budget within the funding allocations provided by Partner Bodies. To achieve this, decisions are required which will result in a number of services being reduced. It is recognised that this comes with a risk in relation to Partner Bodies being able to meet their statutory obligations. There are no other options available to the IJB given the funding available and the pressures being faced.</p>
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<b>Implications for Glasgow City Council:</b>	The budget is required to be spent in line with the Strategic Plan and the approved directions.
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<b>Implications for NHS Greater Glasgow &amp; Clyde:</b>	The budget is required to be spent in line with the Strategic Plan and the approved directions.
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Direction Required to Council, Health Board or Both	
Direction to:	
1. No Direction Required	<input type="checkbox"/>
2. Glasgow City Council	<input type="checkbox"/>
3. NHS Greater Glasgow & Clyde	<input type="checkbox"/>
4. Glasgow City Council and NHS Greater Glasgow & Clyde	<input checked="" type="checkbox"/>

### 1. Purpose

- 1.1. This report will outline the revenue budget for Glasgow City Integration Joint Board for 2023-24 and the budget available for services commissioned from Glasgow City Council and NHS Greater Glasgow & Clyde.

### 2. Background

- 2.1. The Health Board and Local Authority will delegate function and make payments to the Integration Joint Board (IJB) in respect of those functions as set out in the Integration Scheme. Additionally, the Health Board will also "set aside" an amount in respect of large hospital functions covered by the integration scheme.
- 2.2. The IJB will make decisions on integrated services based on the strategic plan and the budget delegated to it. The IJB is also required to publish an Annual Financial Statement setting out the total resources included in the Strategic Plan. The IJB will also give directions and make payment where relevant to the Health Board and Local Authority for delivery of the services in line with the Strategic Plan. This should be completed by 1st April each year.

### 3. IJB and Chief Finance Officer's Responsibility to Set a Balanced Budget

- 3.1. The Chief Finance Officer's duties in Scotland require a balanced budget to be set. This is established in s108(2) of the Local Government (Scotland) Act 1973 and s93(3) of the Local Government Finance Act 1992.
- 3.2. CIPFA produced the statement 'The Role of the Chief Finance Officer in Local Government'. This sets out how the requirement of this legislation and professional standards should be fulfilled by the Chief Finance Officer in carrying out their role as well as the role of the organisation in meeting these requirements.
- 3.3. This statement confirms that the IJB has the following responsibilities:-
- Establish a medium-term business and financial planning process to deliver the organisation's strategic objectives, including:
    - a medium-term financial strategy to ensure sustainable finances
    - a robust annual budget process that ensures financial balance

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- Ensure that professional advice on matters that have financial implications is available and recorded well in advance of decision making and used appropriately.
- Ensure that those making decisions are provided with information that is fit for purpose – relevant, timely and giving clear explanations of financial issues and their implications.

3.4. This statement confirms that the Chief Financial Officer has the following responsibilities:-

- Lead development of a medium-term financial strategy and the annual budgeting process to ensure financial balance and a monitoring process to ensure its delivery.
- CFO deemed to be holder of the 'red card', the CFO must exercise a professional responsibility to intervene in spending plans in order to maintain the balance of resources so that the IJB remains in sound financial health.
- Ensuring that opportunities and risks are fully considered and decisions are aligned with the overall financial strategy.
- Providing professional advice and objective financial analysis enabling decision makers to take timely and informed business decisions

## 4. Financial Allocation from Glasgow City Council

4.1 The financial forecast for Glasgow City Council has been updated and identified a spending gap of £49.3m for 2023-24. The gap has reduced from the original planning assumption of £119.4m and reflects the local government settlement offer from the Scottish Government on 15 December 2022, the removal of pay inflation pressures for Health and Social Care employees and an estimate of funding which will come from the additional £100m which has been made available nationally to assist in the funding of pay deals in 2023-24. A copy of the letter issued to local authorities on 15 December 2022 is attached at Appendix 1.

4.2 This confirms the £95 million is provided to support social care in the following areas:-

Increase of adult social care pay in commissioned services from £10.50 to £10.90	+ £100 million
inflationary uplift on Free Personal Nursing care rates	+ £15 million
Removal of non-recurring interim care money	- £20 million
Net Increase	+ £95 million

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- 4.3 The letter to COSLA Leaders confirms that this additional funding allocated to Integration Authorities should be additional and not substitutional to each Council's 2022-23 recurring budgets for social care services that are delegated.
- 4.4 On 16 February 2023, the Council agreed its budget for 2023-24. The Council offer letter is attached in Appendix 2. This budget confirms funding of £527.231m. This letter reflects Glasgow's share of the funding outlined at section 4.2 which has been issued to the Council. This offer is compliant with the conditions outlined at section 4.3.
- 4.5 The Scottish Government budget baselined the additional £260.6 million allocated nationally to support the local government pay deal for 2022-23 for the Local Government workforce and confirmed that this will continue to be made on a recurring basis. As advised previously to the IJB, the Councils position remains that the IJB will not receive any share of this funding. It is estimated that on a pro-rata basis the IJBs share of this funding would have been £7.8m.

## **5. Financial Allocation from NHS Greater Glasgow and Clyde Health Board**

- 5.1 The Scottish Government wrote to Health Boards on 15 December 2022 in relation to the Draft Budget for 2023-24 as set out by the Cabinet Secretary for Finance in Parliament that day. The letter is attached in Appendix 3. The letter covers the Scottish Government's expectations of the Health Board in relation to the budget and any financial implications for Integration Authorities. This letter confirms that NHS payments to Integration Authorities for delegated health functions must deliver an uplift of at least uplift of 2% over 2022-23 agreed recurring budgets and make appropriate provision for 2022-23 pay.
- 5.2 NHS Greater Glasgow and Clyde Health Board have provided the IJB with an indicative offer for 2023-24 which is subject to confirmation when the out-turn for the 2022-23 financial year has been finalised and the totality and distribution of the pay awards for both 2022-23 and 2023-24 has been determined. The interim budget offer is attached in Appendix 4 and represents a 2% uplift reflecting the board uplift from the Scottish Government and is compliant with Scottish Government expectations subject to the pay award allocations being confirmed for 2022-23 and 2023-24.
- 5.3 This offer includes the uplift for Specialist Children Services, which is due to transfer to East Dunbartonshire IJB. This equates to £0.191m and has been excluded from our budget proposed within this budget.
- 5.4 The set aside budget included within the 2023-24 indicative offer letter continues to be notional budget based on estimated actual usage of in scope services uplifted by 2%. This will continue to be a notional allocation.

## **6. Proposed Budget for 2023-24**

- 6.1 The IJB has a number of pressures which require to be funded in 2023-24.

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<b>Pressures</b>	<b>Total Pressure £millions</b>
Pay Inflation 22/23 Shortfall - Council Services	9.900
Pay Inflation 23/24 - @3% Council and 2% Health	12.768
Inflation : Contractual	0.139
SG Funding - Scottish Living Wage (Adult and Children Providers) and National Care Home Contract	11.255
SG Funding - Free Personal Care Uplift	0.635
SG Funding - Scottish Disability Assistance	0.199
SG Funding - Interim Care - Removal of Non-Recurring Funding	-2.203
Cost Pressure : Prescribing 22/23	5.912
Cost Pressure : Prescribing 23/24	9.114
Cost Pressure : Office 365 Licences	0.935
Cost Pressure : Demographics - SDS	3.000
Cost Pressure : Inflation - Fuel, Food etc	2.000
Cost Pressure : Homelessness	8.607
<b>Total Pressures</b>	<b>62.261</b>

- 6.2 Pay inflation has been capped at 3% for Council employees based on advice from the Council's Director of Finance who has advised that any costs above 3% will be met from additional Scottish Government funding which the Council will transfer to the IJB. Pay inflation has been capped at 2% for Health employees on the basis that Scottish Government have provided assurances that any costs greater than this will be met from additional funding provided by the Scottish Government and issued to IJBs.
- 6.3 The Scottish Government have revised the Free Personal and Nursing Care rates. From 1 April 2023 these rates will increase from £212.85 to £233.10 per week for personal care and from £95.80 per week to £104.90 per week for nursing care, subject to Parliamentary approval. The cost of this uplift will be £0.635m and will be funded from the additional monies provided by the Scottish Government to integration authorities in 2023-24.
- 6.4 Scottish Government funding has been provided to enable employers to update the hourly rate of Adult Social Care Staff offering direct care in commissioned services in the third and independent sectors. The funding will enable an increase from at least £10.50 per hour to at least £10.90 per hour, which will take effect from 10 April 2023. The pay uplift will apply to staff providing direct care within Adult Social Care in commissioned services in the third and independent sectors. Similar to last year this will be extended to providers of Children and Families Social Care within Glasgow Purchased Services.

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- 6.5 In line with previous years, it is proposed to apply a 3.80% uplift to an agreed percentage of full contract values, in with typical workforce costs for non-residential services. A separate agreed weighted percentage has been set for Personal Assistants who are paid directly through SDS Option 1 budgets. The percentages to be applied are as follows:-
- Non-residential – uplift applied to 86.9% of full contract value
  - Personal Assistants – uplift applied to 90% of SDS Option 1 budgets
- 6.6 In addition it is proposed to uplift the full contract value for residential care within this contract by 3.80%. This is being done in recognition of the exceptional energy prices being experienced in this sector and brings parity with increases agreed as part of the National Care Home Contract.
- 6.7 The National Care Home Contract is still subject to national negotiation and will be the subject of a future reports to the IJB.
- 6.8 The funding offered from Partners and anticipated funds from Scottish Government are detailed below and total £20.519m. This leaves a funding gap of £41.742m.

<b>Movement in Funding</b>	<b>£millions</b>
NHS Greater & Glasgow and Clyde - Funding Uplift excl SCS	10.633
Glasgow City Council - Flat Cash Settlement	0.000
<b>Sub Total - Partners Funding</b>	<b>10.633</b>
<b>Scottish Government Funding - New Monies</b>	
Investment in Social Care including £10.90 Uplift to Adult Social Care Providers	11.255
Free Personal Care Uplift	0.635
Scottish Disability Assistance	0.199
Interim Care - Removal of Non-Recurring Funding	-2.203
<b>Sub Total - Scottish Government Funding - New Monies</b>	<b>9.886</b>
<b>Total Additional Funding</b>	<b>20.519</b>

- 6.9 The IJB has a statutory responsibility to deliver a balanced budget each year. The pressures are so significant this year that a hybrid approach to the IJBs financial strategy has been required to be adopted to deliver financial balance. The table below highlights £21.576m of savings which have been developed as part of this strategy.

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<b>Savings Proposals - Efficiency</b>	<b>£millions</b>
National Insurance - Reduction to Employer Rate	-3.504
Removal of GP Costs Related to Care Homes - No Longer Required	-0.333
8% Reduction in Non Pay Budgets Across A Range of Services	-0.813
Ceasing Treatment Foster Care Service Payments Following End of Contract	-0.300
Reduction in Move On Addictions Budget	-0.050
Review of Management Structures - Specialist Children Services - Service Manager	-0.090
8% Reduction in Planning Team Costs	-0.069
Review of Learning and Development Staffing Structure	-0.111
Review of Commissioning Staffing Structure	-0.070
Review of Catering Arrangements in Borron Street	-0.060
Reduction in Staffing - Management Structures	-0.151
Reduction in Staffing - Administration	-0.180
<b>Total Savings Proposals - Efficiency</b>	<b>-5.731</b>

<b>Savings Proposals - Income Maximisation</b>	<b>£millions</b>
Increase Charges to Service Users by 5%	-0.080
2% Uplift on Service Level Agreements	-0.180
Additional Income from Learning and Development Activities	-0.040
Income Maximisation - Recovery of Client Contributions	-0.200
Increase Client Contributions for Non-Residential Services	-1.725
<b>Total Savings Proposals - Income Maximisation</b>	<b>-2.225</b>

<b>Savings Proposals - Transformation</b>	<b>£millions</b>
Reduction in Community Pharmacy Contractor Costs Due to Roll Out Of Buvidal	-0.300
Transforming the Balance of Care (Children and Families) - Care Packages	-1.600
Transforming the Balance of Care (Children and Families) - Staffing	-0.400
Review of Sign Language and Interpreting Service (SLIS) and Sensory Impairment (SI)	-0.100

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Health and Social Care Connects - Reduction in Staffing - Social Work	-0.500
Cease Delivery of Autism Resource Centre	-0.070
Intermediate Care - Reduction of 15 beds	-0.600

<b>Total Savings Proposals - Transformation</b>	<b>-3.570</b>
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<b>Savings Proposals - Transformation/Reduce Services</b>	<b>£millions</b>
Decommissioning Children Affected by Parental Addiction Services	-0.350
Reform of Day Care Services for Adults and Older People	0.000
<b>Total Savings Proposals - Transformation/Reduce Services</b>	<b>-0.350</b>

<b>Savings Proposals - Stop/Reduce Services</b>	<b>£millions</b>
Reduction to Purchased Care Home Budgets	-2.000
Reduction to Staffing Across all Community Health Teams including Management and Administration	-3.794
Reduction in Mental Health Commissioning Contract	-0.115
Reduction in Self Directed Support Budget (Adults and Older People)	-2.339
Reduction in Older People Day Care Services to Monday to Friday Only	-0.259
Review of Purchased/In-House Supported Living Service	-0.292
Reduction in Care at Home and Mainstream Home Care Services	-0.901
<b>Total Savings Proposals - Stop/Reduce Services</b>	<b>-9.700</b>

<b>Total Savings Proposals</b>	<b>-21.576</b>
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- 6.10 Appendix 5 provides high level details of these savings proposals for reference. It is anticipated that a number of the savings proposals could have a negative impact on equality groups. Where possible, mitigating action has been identified during the assessment process. For options where a significant impact has been identified, further work is required. Due to the sensitivity of the reductions, it has not been possible to engage with service users to fully assess the impact and any further opportunities for mitigating action. For these proposals, fuller engagement will be undertaken with service users, taking into consideration their individual needs and opportunities for

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mitigation on a case by case basis and presented to the May IJB prior to agreeing implementation. The following savings fall into this category:-

- Reduction in Self Directed Support Budget (Adults and Older People)
- Reduction in Older People Day Care Services to Monday to Friday Only
- Review of Purchased/In-House Supported Living Services
- Reduction in Care at Home and Mainstream Home Care Services

- 6.11 For these savings the IJB is asked to approve in principle, subject to the full EQIA being completed and reported back to the May IJB before savings are approved for implementation.
- 6.12 The savings proposals outlined in section 6.9 include a proposal to increase client contributions for non-residential services and an inflationary increase to charges to service users at 5%. Both of these changes will require a change to the Councils charging policy. The IJB does not have the legal powers to introduce or change charges. This legal power lies with the Council. If approved by the IJB, Glasgow City Council will be required to be directed to revise their charging policy to secure the additional income which these savings will generate.
- 6.13 The savings above will result in a reduction of 197 FTE across a range of services. A range of options will be used to minimise the impact on employees including the non-filling of vacancies, the use of natural attrition and redeployment of staff where appropriate. Where delivery cannot be delivered through these options, voluntary redundancies/early retirements may be required and these will be considered on a case by case basis.
- 6.14 The saving proposals include the reform of Day Care Services for Adults and Older People. This review will commence during 2023-24 and the outcome reported back to the IJB for consideration as part of the 2024-25 budget.
- 6.15 It has not been possible to fully bridge the funding gap with savings alone. There are a number of pressures that it is proposed to be managed from General Reserves. These are noted in the table below:-

Risks to be Managed Through Reserves	£millions
Cost Pressure : Prescribing 23/24 - above 2% uplift	6.559
Cost Pressure : Homelessness	8.607
Inflationary Pressures - Fuel, Food etc	2.000
<b>Net Funding Gap</b>	<b>17.166</b>

- 6.16 It is currently forecast that the IJB will start 2023-24 with a General Reserve of £23.5m. Therefore, assuming the assumptions in the above table hold, this will result in the IJB closing with a General Reserve of £6.3m at the end of 2023-24, which represents 0.4% compared to the targeted 2% for General Reserves.

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- 6.17 Holding General Reserves significantly below the 2% target level represents a significant risk to the IJB. Reserves is a key component of the IJB's funding strategy. General Reserves are not held to meet any specific liability and offer the IJB some flexibility to deal with unforeseen events or emergencies. It is also important for the long-term financial stability and the sustainability of the IJB that sufficient General Reserves are held in reserve to manage unanticipated pressures from year to year.
- 6.18 General Reserves at 0.4% are considered low, however given the cost pressures and the funding offered by Partners, there is no other option but to use reserves as part of this funding strategy. However it would be prudent to consider options to increase this as part of the 2022-23 outturn report due to the IJB in June. As part of the Outturn report a full review of earmarked reserves will be undertaken to determine if any can be re-allocated to General Reserves to increase the provision available to support the IJB over the medium term.
- 6.19 There are two areas where services will be asked to manage pressures within their current service budget. See table below:-

Risks to be Managed Within Existing Budget	£millions
National Care Home Contract Uplift - above £10.90 - places capped	tbc
Cost Pressure : Demographics - SDS - New Demand	3.000

- 6.20 Scottish Government funding has only been provided to meet the uplift to the National Care Home Contract linked to the uplift in the Scottish Living Wage from £10.50 to £10.90. This contract is a national contract and if an uplift is agreed beyond this, the only option for the IJB to fund this will be to cap the care home places that are funded through this contract to the budget which is available. The impact of this is not known at this stage but will be the subject of a future report to the IJB.
- 6.21 There is no funding available to meet new demand as a result of demographic pressures. This will be required to be managed within existing SDS budgets and will be in addition to the saving which is proposed at section 6.9.
- 6.22 The above proposals deliver a balanced budget for the IJB and this is summarised below:-

Summary Proposed Strategy	£millions
Funding Gap	41.742
Risks to be Managed Through Reserves	-17.166
Risks to be Managed Within Existing Budgets	-3.000

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Savings Proposed	-21.576
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<b>Balanced Budget</b>	<b>0.000</b>
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- 6.23 The decision taken by the Council to retain the funding for the 2022-23 pay award for Social Work staff has had significant implications for the IJBs budget. If this funding was forthcoming, the following savings would be removed from the financial strategy for 2023-24.

<b>Savings Proposals Removed If Funding For Pay Provided</b>	<b>£millions</b>
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Decommissioning Children Affected by Parental Addiction Services - Support Increased Investment in Commissioned Service	-0.169
Increase Client Contributions for Non-Residential Services	-1.725
Reduction to Purchased Care Home Budgets	-2.000
Reduction in Mental Health Commissioning Contract	-0.115
Reduction in Self Directed Support Budget (Adults and Older People)	-2.339
Reduction in Older People Day Care Services to Monday to Friday Only	-0.259
Review of Purchased/In-House Supported Living Service	-0.292
Reduction in Care at Home and Mainstream Home Care Services	-0.901

<b>Total Savings</b>	<b>-7.800</b>
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## 7. Statement from Chief Social Worker

- 7.1 £14.6m of savings have been identified in Social Work Services as part of this budget, of which £8.3m will be generated from efficiency measures, income generation and our transformation programme. These savings can be delivered and still enable the Council to meet its statutory obligations.
- 7.2 The paperwork includes further savings totaling £6.3m which will leave the Council at risk of being unable to fulfil its statutory responsibilities. For existing service users there is no ability to simply stop services. Service users have an assessed need and support packages cannot be changed without re-assessments being made and alternative services put in place. A failure to do this will result in the Council breaching its statutory duty. This significantly hinders the IJBs ability to deliver savings on the scale required.
- 7.3 This will mean budgets available for new demand will require to be curtailed across the whole of Social Work Services and services users with an assessed need will require to wait for a service until the funding becomes available.

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- 7.4 As Chief Social Work Officer, I have to advise the IJB that there is a risk of not fulfilling our statutory responsibilities, however if no budget were to be approved the risk to the Council and the Service would increase significantly. This would mean that no additional funding could be identified for people's care needs and this would leave many vulnerable people across the City at a higher level of risk. Not having an approved budget would have severe and enduring repercussions for extremely vulnerable people and would leave both children and adults at increased risk of serious harm.
- 7.5 It is clear to make a balanced budget the reduction in service requires to take place and despite our transformation agenda there will be reduced funding for many of our core packages of support. Staff will require to work with service users regarding the impact in order to ensure that we do not leave the most vulnerable in our society at unacceptable risk.
- 7.6 The Council may also be challenged on the removal of services from Scottish Government. There will also be challenges from the European Commission for Human Rights, the Mental Welfare Commission and the Care Inspectorate in relation to failing to meet our statutory duties and the duty of care. The position the IJB finds itself in is concerning and work will require to take place in order to ensure that there is equity across the system to ensure that we are able to support as many people as possible.

## **8. Implications of Not Setting a Balanced Budget**

- 8.1 If the IJB does not approve a balanced budget this will require a recovery plan to be put in place immediately to ensure that the IJB remains in financial balance and does not enter into expenditure which cannot be met from the funding which is available. This would result in a freeze on all new expenditure until financial balance is secured and would impact on all services delegated to the IJB. This would impact on all expenditure including recruitment and approval of care packages. The recommendation of the Chief Officer and the Chief Finance Officer is the budget strategy which has been summarised at section 6.22.

## **9. Criminal Justice**

- 9.1 Since 2017-18 the funding for Community Justice Authorities has come to IJB's from Central Government. This budget continues to be ring-fenced solely for the provision of criminal justice social work services.
- 9.2 The 2022-23 allocation letter received on 19 December 2022 confirmed an indicative allocation of £19,629,059 for Glasgow City HSCP. In additional funding of £1,897,364 has been made available for COVID recovery and £426,103 for bail assessment and bail supervision. Effectively, there is no inflationary increase in this funding. This means that this funding has not kept pace with the inflationary pressures experienced over recent years. This represents a significant financial challenge for Criminal Justice and work is underway to manage the services within this allocation.

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**10. Other Ring-Fenced Funding**

- 10.1. In addition to the above, there are a number of other national priorities which are funded from ring-fenced funding. This includes Mental Health Renewal and Recovery, Action 15, Primary Care Improvement Fund, Alcohol and Drug Partnership funding. A commitment has been given from Scottish Government to fund pay uplifts for these programmes for 2022-23 and 2023-24. Details of this are awaited and once known impact on investment programmes will be considered and reported to the IJB.

**11. Homelessness Services Recovery Planning Arrangements**

- 11.1. On 25<sup>th</sup> January 2023 the IJB approved a recovery plan for Homelessness Services which agreed actions which has the potential to reduce costs in this service by £5.713m.
- 11.2. The Homelessness Alliance contract includes a provision for a 5% per annum saving which to date has not been taken by the IJB. In the last two years the services covered by the Alliance contract have been underspending by circa £0.5m per annum. In light of the financial position of this service it is proposed to seek a 2% saving on this contract which will deliver a saving of £0.520m as a further contribution to the recovery arrangements for this service.

**12. Revenue Budget for 2024-25 and 2025-26**

- 12.1 The IJB is operating in an increasingly challenging environment with funding not keeping pace with increasing demand for services and increasing costs linked to delivery. This represents a challenging backdrop to deliver on our ambitions and it will have an impact on what can be delivered and when. The next three years will be the greatest financial challenge that the IJB has been asked to manage since its inception. Glasgow City IJB is clear about the challenges which are ahead and its aspirations for its services. However, we also need to be realistic about what can be delivered within the funding envelope available. This will require the IJB to prioritise decisions for investment and disinvestment in order to support delivery of the Strategic Plan and deliver on our priority of a sustainable future for health and social care.
- 12.2 Glasgow City Integration Joint Board (IJB) Medium Term Financial Outlook provides a medium-term view of the challenges and opportunities which face the IJB and considers what the implications of this are for the finances of the organisation. This is the subject of a separate report to the IJB and identifies an estimated funding gap of £45m and £19m in 2024-25 and 2025-26. This plans demonstrates the impact of utilising reserves in 2023-24 and the increase challenge this will bring if pressures continue to persist in 2024-25.

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### 13. 2022-23 National Care Home Contract

- 13.1 On 9<sup>th</sup> June 2022 the Council's City Administration Committee agreed to apply an uplift rate of 5.38% to nursing care and 5.58% to residential care, following approval at the IJB on 27 April 2022.
- 13.2 A commitment was given at that time by Scotland Excel and COSLA Leaders to revisit the agreed care home rate within the 2022-23 financial year when the NHS pay uplift for 2022-23 had been agreed.
- 13.3 To reflect the increase in the pay settlement for registered nurses, the nursing rate has been increased to £838.12 per week, there is no increase to the residential rate which remains at £719.50 per week. The cost of the additional uplift is £0.626m and will be funded from within the 2022-23 IJB budget.

### 14. Recommendations

- 14.1 The Integration Joint Board is asked to:
- a) note the contents of this report;
  - b) note the funding allocation from Glasgow City Council;
  - c) note the indicative funding allocation from NHS Greater Glasgow and Clyde, subject to confirmation when the out-turn for the 2022-23 financial year has been finalized and the pay award allocations have been confirmed for 2022-23 and 2023-24;
  - d) agree the balanced budget outlined in section 6 including the savings programme detailed in section 6.9;
  - e) agree that savings identified at 6.10 are approved in principle subject to engagement with service users to consider their individual needs and opportunities for mitigations. This will then be reported back to the IJB or IJB Finance, Audit and Scrutiny before savings are approved for implementation;
  - f) refer the proposed 5% inflationary increase to charges and the revision to the taper for non-residential charges to Glasgow City Council City Administration Committee for approval;
  - g) delegate a budget to NHS Greater Glasgow and Clyde of £1,016,836,000 and direct that this budget is spent in line with the strategic plan of the IJB and the proposals included within this paper at section 6;
  - h) delegate a budget to Glasgow City Council of £527,231,500 and direct that this budget is spent in line with the strategic plan of the IJB and the proposals included within this paper at section 6;
  - i) agree that the Partnership will offer a 3.80% uplift to an agreed percentage of full contract values (detailed at paragraph 6.4 to 6.5), to providers of Adult and Children and Families Social Care within Glasgow Purchased Services and a 3.80% uplift on the full contract value to residential providers of Adult and Children and Families Social Care within Glasgow Purchased Services effective from 10 April 2023;
  - j) note that the uplifts agreed at i) will be subject to Providers confirming they will pay staff providing direct care at least £10.90 per hour from 10 April 2023;

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- k) agree the 2022-23 budget to meet the cost of the revised nursing care rate of £838.12 per week for the national care home contract effective from 12 April 2022; and
- l) agree the additional saving proposed on the Homelessness Alliance contract as outlined in section 10.2.

14.2 The Integration Joint Board further asks that the Chair and Vice Chair:

- m) note that the proposed budget will put the IJB at risk of failing to meet current statutory duties and also fails to take into account rising future service user needs and budgetary pressures;
- n) note that the proposed budget carries significant in-year risks, in particular in relation to Homelessness Services;
- o) note that the proposed budget also places significant risks on future years, given that it will severely deplete IJB reserves ahead of an estimated funding gap for 24/25 of £45 million, as detailed in section 12.2; and
- p) therefore agree to:
  - (i) write to Scottish Ministers strongly expressing concerns over the funding settlement and outlining the severity of cuts which will be needed should additional funding not be made available to the IJB, and requesting that funding is increased; and
  - (ii) instruct the Chair to write to the City Treasurer asking that they justify the decision to retain funding which the Council has received for the 2022-23 pay award for Social Work staff, as has been outlined in 6.23, particularly considering the potential consequences for Council not meeting their statutory duties as outlined in section 7.6.

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**Direction from the Glasgow City Integration Joint Board**

1	Reference number	230323-7
2	Report Title	Integration Joint Board Financial Allocations and Budgets for 2023-24
3	Date direction issued by Integration Joint Board	22 March 2023
4	Date from which direction takes effect	22 March 2023
5	Direction to:	Glasgow City Council and NHS Greater Glasgow and Clyde jointly
6	Does this direction supersede, revise or revoke a previous direction – if yes, include the reference number(s)	No
7	Functions covered by direction	Budget 2023-24
8	Full text of direction	<p>Glasgow City Council is directed to spend the delegated net budget of £527,231,500 in line with the Strategic Plan and the budget outlined within this report. NHS Greater Glasgow and Clyde is directed to spend the delegated net budget of £1,016,836,000 in line with the Strategic Plan and the budget outlined within this report.</p> <p>Glasgow City Council is directed to implement, effective from 10 April 2023, the 3.80% uplift to an agreed percentage of full contract values (detailed at paragraph 6.4 and 6.5), in line with typical workforce costs, to providers of Adult Social Care within Glasgow Purchased Services and 3.80% uplift to residential providers of Adult and Children and Families Social Care within Glasgow Purchased Services.</p>

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		Glasgow City Council is directed to apply the uplift to NCHC rate for nursing as outlined in section 13.3 and instruct the Council to vary the contracts in line with this.
<b>9</b>	<b>Budget allocated by Integration Joint Board to carry out direction</b>	The budget delegated to NHS Greater Glasgow and Clyde is £1,016,836,000 and Glasgow City Council is £527,231,500 as per this report.
<b>10</b>	<b>Performance monitoring arrangements</b>	The budget will be monitored through standard budget monitoring arrangements.
<b>11</b>	<b>Date direction will be reviewed</b>	1 April 2024

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An Leas-phrìomh Mhinistear agus Ath-shlànachadh  
Cobhid  
Deputy First Minister and Cabinet Secretary for Covid  
Recovery  
John Swinney MSP



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Copy to: Councillor Steven Heddle  
The Leaders of all Scottish local authorities

15 December 2022

Dear Shona,

Today I formally set out the Scottish Government's proposed Budget for 2023-24 in a statement to the Scottish Parliament. I write now to confirm the details of the local government finance settlement for 2023-24.

As discussed when I met with you, the Resources Spokesperson, and Group Leaders on 1 December, we are facing the most challenging budget circumstances since devolution. This is primarily due to over a decade of austerity eroding financial settlements from Westminster, compounded by the impact of Brexit and the disastrous mini-budget. Scottish and local government are experiencing unprecedented challenges as a result of the UK Government's economic mismanagement, resulting in rising prices and soaring energy bills, with inflation estimated to be running at a 41 year high of 11.1% at the time of the Chancellor's Autumn Statement.

My Cabinet colleagues and I have engaged extensively with COSLA Leaders and spokespersons over the course of the year and there is collective understanding that this economic context is also having a significant impact upon local authorities. Councils, like the Scottish Government and rest of the public sector, are working hard to support people through the cost crisis. In this regard we are hugely grateful to councils for their hard work and we fully appreciate that no part of public life has been immune from taking deeply difficult decisions to live within the current fiscal reality.

I have already taken the unprecedented step of making a statement to Parliament to reprioritise over £1.2 billion of funding as part of my Emergency Budget Statement. Despite the scale of that challenge the Scottish Government actively chose to protect Councils during

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that exercise and increased the funding available to councils whilst most other portfolios were required to make significant savings.

The Scottish Government's revenue raising powers offer limited flexibility to deal with challenges of this magnitude. I wrote to the Chancellor on 19 October to highlight the impact of inflation on the Scottish Government's budget and to call for additional funding to help us deal with these inflationary pressures and to support public services.

As we face these challenges, and in the absence of meaningful change in direction by the UK Government, we need to work together to ensure that we deliver for people within the financial constraints we have. I very much welcomed the open discussion on 1 December about how we focus our efforts on our shared priorities, and to that end we are offering to jointly develop an approach to working within this budget which delivers our ambitions.

## **The Local Government Settlement**

Before turning to that offer, I will first set out how I have sought to support local government through the budget itself.

The Resource Spending Review guaranteed the combination of General Revenue Grant and Non-Domestic Rates Income at existing levels between 2023-24 and 2025-26 including the baselining of the £120 million that was added in Budget Bill 2022-23. The Budget delivers those commitments in full, despite the fact that the UK Government's Autumn Statement reversed their previous position on employer National Insurance Contributions resulting in negative consequential. This decision has conferred around £70 million of additional spending power for local government.

The difficult decisions in the Emergency Budget Statement provided one-off additional funding to support enhanced pay deals for local government staff. We recognise the role that increasing pay for local authority employees, especially those on lower incomes, plays in helping more people cope with the cost crisis, but the fact remains that every additional pound we spend on recurring pay deals, must be funded from elsewhere within the Scottish Government budget. I therefore hope that councils will welcome the fact that the budget baselines the additional £260.6 million allocated in 2022-23 to support the local government pay deal and also delivers additional funding to ensure that payment of SSSC fees for the Local Government workforce will continue to be made on a recurring basis.

Despite the challenging budget settlement I have sought to increase funding as much as I can. I have been able to increase General Revenue Grant by a further £72.5 million, taking the total increase to over £550 million. I have also ensured that we have maintained key transfers worth over £1 billion and added a further £102 million of resource to protect key shared priorities particularly around education and social care.

The Resource Spending Review also confirmed the outcome of the 2021 Capital Spending Review and this has been supplemented by £120.6 million mentioned as part of the support to the local government pay deal plus a further £50 million to help with the expansion of the Free School Meals policy.

With regards to that wider settlement, we are providing £145 million to be used by councils to support the school workforce. The Cabinet Secretary for Education and Skills has written separately to COSLA on this matter.

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I am also very grateful for the work undertaken through the Early Learning and Childcare Finance Working Group to develop and scrutinise detailed analysis of the delivery costs for the 1140-hour commitment. This is crucial to ensuring we meet our shared commitment to providing transparency and value for money in a significant programme of public sector investment. The Early Learning and Childcare settlement for 2023-24 takes account of significant declines in the eligible population in recent years and makes provision for important policy and delivery priorities based on feedback from COSLA and local government colleagues.

As set out in separate detailed communications, the Health and Social Care Portfolio will transfer net additional funding of £95 million to Local Government to support social care and integration, which recognises the recurring commitments on adult social care pay in commissioned services (£100 million) and inflationary uplift on Free Personal Nursing Care rates (£15 million). This is offset by the non-recurring interim care money ending (£20 million).

The overall transfer to Local Government includes additional funding of £100 million to deliver a £10.90 minimum pay settlement for adult social care workers in commissioned services, in line with Real Living Wage Foundation rate.

The funding allocated to Integration Authorities should be additional and not substitutional to each Council's 2022-23 recurring budgets for services delegated to IJBs and therefore, Local Authority social care budgets for allocation to Integration Authorities must be at least £95 million greater than 2022-23 recurring budgets.

The consolidation of funding into the new £30.5 million homelessness prevention fund not only reflects the importance local and national government jointly place on homelessness prevention and earlier intervention, but also simplifies the homelessness funding landscape. This provides more flexibility for council and greater clarity for citizens who want to understand how national and local government are working jointly to improve outcomes.

In total, including the funding to support the devolution of Empty Property Relief, the budget increases the local government settlement by over £550 million relative to the Resource Spending Review position.

I am conscious of the position you set out to me, and the challenges which councils will still face, like all parts of the public sector, in meeting current and emerging demands from within this budget. Therefore, I am offering to continue to work with you with real urgency in the coming weeks to determine how we might jointly approach these challenges and ensure sustainable public services to support our shared priorities now and in the future.

### **Delivering for People and Communities by Working Together Flexibly**

Through the Covid Recovery Strategy, Scottish Government and Local Government, committed to work together to address the systemic inequalities made worse by Covid, to make progress towards a wellbeing economy, and accelerate inclusive person-centred public services.

We must sustain this focus on the outcomes we care most deeply about, in particular:

- i) tackling child poverty,

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- ii) transforming the economy to deliver net zero, and
- iii) sustaining our public services.

No single part of the public service landscape can deliver these outcomes alone. We need to work in partnership to deliver outcomes for people and places across Scottish and local government as our two spheres of government, recognising our joint accountability for change. Local service providers have the critical relationships with people and communities and must be empowered and enabled to organise services around their needs, rather than the funding stream, policy area or body delivering. By doing so, we will collectively reduce complexity and barriers for people, deliver improved outcomes and reduce inequalities among communities in Scotland, and enable the fiscal sustainability of key public services.

Strong local leadership will make this approach work in practice, supported by a national vision and learning from good practice. Community Planning Partnerships are the mechanism in which we need to see a collective and intensive effort to align available resources into prevention and early intervention focused on delivering shared outcomes for people and place. Local authorities have the leading, critical role in CPPs, but CPPs also involve a range of public bodies which must play their part, alongside local third sector and community bodies.

The Scottish Government is committed to building trust and maximising benefits for our citizens and communities. We will act to:

- align budgets to maximise impact on outcomes;
- remove barriers which hinder flexibility in funding, and in the design and delivery of services around people, helping to embed the service changes flowing from this;
- require our partner public bodies and agencies to work collaboratively within CPPs to deliver shared outcomes, take action to address local priorities and align local funding, this will be supported by our Place Director network;
- enable third sector partners to participate and contribute in local plans, including through flexible funding.

Local authorities are key partners in this endeavour. Through COSLA, we will invite local authorities to work with us to:

- prioritise spending to agreed key outcomes for which we are jointly accountable, with clarity as to the way in which we will work together to secure and measure success;
- ensure that joint plans of activity across Community Planning Partnerships can deliver those outcomes in a way which reflects the needs of a local communities, and to robustly account for delivery of these plans;
- share resources across CPPs to deliver these activities in whatever way is most effective;
- continue to share and learn from best practice nationally and locally to embed person centred approaches that work for individuals and communities, and reduce barriers and duplication in our joint systems.

We will seek to agree jointly how to put this commitment into operation practically over the coming months and to develop robust assurance that demonstrates delivery of critical priorities and reform. We need to be data driven and transparent, reflecting the accountability which comes with responsibility. Scottish and Local Government need to agree metrics and mechanisms for monitoring impact and outcomes, so that intervention and resource can be

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targeted where it is most needed to secure improvement. This will include seeking to reduce unnecessary reporting.

This approach is aimed at building trust and relationships and as well as adopting it through this budget, it will be reflected in the partnership agreement that will underpin the New Deal for Local Government set out in the Resources Spending Review. In order to offer flexibility across funding and work towards removal of ring fencing, the Scottish Government will need clear commitment from local government about delivery of agreed joint outcomes.

The Cabinet Secretary for Social Justice, Housing and Local Government would welcome an initial discussion on this when you meet next week at the Strategic Review Group, in order to pave the way for work at pace among our officials.

## **Non-Domestic Rates and Other Local Taxation Measures**

As Leaders will be aware, the 1 April 2023 marks the date of the next Non-Domestic Rates revaluation, and the first to reflect the reforms introduced by the independent Barclay Review of Non-Domestic Rates. These reforms, including the move to three-yearly revaluations and a one-year tone date, will ensure that property values more closely align with prevailing property market conditions in Scotland.

The Budget freezes the poundage and acknowledges the impact of the revaluation by introducing a number of transitional reliefs to ensure that any properties which see significant increases in their rates liabilities following the revaluation do so in a phased manner. The Barclay Review also recommended a number of reforms to the Non-Domestic Rates appeals process which are critical to ensuring the deliverability of the three-yearly revaluation.

The new two-stage appeals process will commence on 1 April 2023 alongside the transfer of functions of Valuations Appeals Committees to the Scottish Courts and Tribunals Service. The Non-Domestic Rates (Scotland) Act 2020 and subsequent regulations have, amongst other things, provided Assessors and Councils with greater information-gathering powers and have also increased the transparency of the process for ratepayers including, for the first time, the provision of draft values on 30 November 2022. These reforms are intended to reduce the reliance on the formal appeals process to deliver accurate rateable values and the Act also provided a legal basis for the pre-agreement of values.

Many of the reforms of the Barclay Review seek to incentivise behaviour changes to deliver a more effective and efficient system. Reflecting the ability to pre-agree values and the importance of building resilience in the new appeals system to support the transition to more frequent revaluations, Ministers plan to make administrative changes to the funding treatment of appeals associated with public sector bodies, including councils.

The current system essentially sees the public sector challenge other parts of the public sector with private sector advisor fees effectively extracting resources from public services. The conclusion of the process determines funding allocations outside the remit of the annual budget framework with successful public bodies benefiting financially to the detriment of other ratepayers and public services. The volume of public sector appeals also serves to delay access to justice for other appellants.

Ministers do not believe that this offers value for money for the public. Whilst the right to propose and appeal will remain, to incentivise the use of the pre-agreement powers and

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discourage the continued reliance on the formal appeals process, from 1 April 2023, all bodies, including councils, who receive their funding through the Scottish Government budget process, will see the financial incentive for proposing and appealing removed.

Where a property occupied by a public body is subject to a successful proposal or appeal, the financial benefit from the reduction in rateable value will result in a downward re-determination of revenue allocations at a subsequent fiscal event. On this basis, Ministers will be encouraging all public bodies to begin the process of pre-agreement with their local assessors ahead of 1 April 2023 to ensure that values are accurate prior to the start of the revaluation and that this approach be adopted by default for future revaluations.

The Non-Domestic Rates (Scotland) Act also had the effect of abolishing Empty Property Relief as agreed with the Scottish Green Party a part of the 2019-20 Budget process. Unoccupied properties will therefore be liable for full rates from 1 April 2023 if relief is not available under a local scheme. To effectively devolve responsibility for the relief and provide greater fiscal empowerment for council, as agreed by the Settlement and Distribution Group, the budget provides an additional £105 million of General Revenue Grant, significantly more than the cost of maintaining the national relief in light of the subsequent decision to freeze the poundage.

In addition, following consultation with members of the Institute of Revenues, Rating and Valuation, we will bring forward regulations intended to empower councils to tackle rates avoidance more effectively. In combination, the funding transfer and the proposed new powers will provide significant additional fiscal flexibility to councils to administer support for unoccupied properties in a way that is tailored to local needs.

Furthermore, I can confirm that the Scottish Government will not seek to agree any freeze or cap in locally determined increases to Council Tax, meaning each council will have full flexibility to set the Council Tax rate that is appropriate for their local authority area. I do hope that councils will reflect carefully on the cost pressures facing the public when setting council tax rates.

We are also committed to expanding councils' ability to raise additional revenues and discussions among our respective officials have commenced to identify a structured approach to future potential local taxes. At the same time, councils now have the power to establish local workplace parking levy schemes and our work to introduce a local visitor levy bill in this parliamentary session is on track.

Finally, I am conscious that, while it is not directly applicable to Local Government pay negotiations, many stakeholders have used Public Sector Pay Policy as a reference point in previous years. For this reason, I feel it is important to highlight to you that we have taken the decision not to announce pay uplifts or publish a Public Sector Pay Policy for 2023-24.

There are a number of reasons for this, not least among them the desire to approach pay negotiations differently for 2023-24, the imperative for reform and the need to ensure the sustainability of public sector pay and workforce arrangements. This does not change our view that our job in the midst of a cost crisis is not to press down on pay, particularly the most vulnerable. We will be sharing further guidance in relation to 2023-24 pay at an appropriate point in the new year which is likely to be considered by Trade Union colleagues relevant in Local Government pay negotiations, if you agree I will ask my officials to engage

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with COSLA officers as this develops to determine if you might wish to formally endorse or adopt it.

I am under no illusions about the challenging fiscal environment we face across all of our public services over the next few years but I have sought to protect the local government settlement as far as possible with an overall settlement of over £13.2 billion. The budget goes significantly beyond the commitments made in the Resource Spending Review. It provides substantive additional funding and it does not pass on the negative consequential for employer national insurance contributions resulting from of the Autumn Statement. Importantly, it provides a number of fiscal and policy flexibilities. Alongside the settlement, I hope my offer to build on the Covid Recovery Strategy will be warmly and urgently received, to enable us to make urgent progress on the New Deal.

I want us to work in partnership, to build on the Covid Recovery Strategy and agree an approach which improves delivery of sustainable public services, designed around the needs and interests of the people and communities of Scotland, at its heart.

I would welcome confirmation that you are supportive of the proposed joint work outlined above and I look forward to working with COSLA and Leaders in the months ahead to deliver on our shared priorities.

**JOHN SWINNEY**

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10 March 2023

Executive Director Social Care Services/Chief Officer Glasgow City HSCP  
Commonwealth House  
32 Albion Street  
Glasgow  
G1 1LH

Dear Ms Millar

As a result of the budget approved by the Council on 16, February 2023 I can confirm that the Council's 2023-24 contribution to the Glasgow Health and Social Care Partnership amounts to £527,231,500.

Yours sincerely

**Martin Booth**  
**Executive Director of Finance**

Directorate for Health Finance and Governance  
Richard McCallum, Director



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Chief Executives, NHS Scotland

Copy to: NHS Chairs  
NHS Directors of Finance  
Integration Authority Chief Officers  
Integration Authority Chief Finance Officers

***Issued via email***

15th December, 2022

Dear Chief Executives

**Scottish Government Budget 2023-24**

Following the announcement of the Scottish Government's Budget for 2023-24 by the Deputy First Minister in Parliament today, I am writing to provide details of the indicative funding settlement for Health Boards. A breakdown of this is provided in **Annex A** to this letter.

The Deputy First Minister has set out this budget in the context of the current cost of living crisis and funding parameters set by the Chancellor of the Exchequer in November 2022. This budget sets out the next steps to deliver the Health and Social Care commitments outlined in the Programme for Government, taking into account the current economic environment and recent Emergency Budget Review.

As in previous years, the position will be subject to any amendments agreed through the Scottish Parliament's Budget Bill process, as well as recognising the further work that we will undertake with you specifically in relation to Covid-19 and pay funding arrangements. I will keep you up to date with any changes to our planning assumptions.

**Budget Uplift**

Compared to 2022-23 budgets, Boards will receive a total increase of 5.9% for 2023-24. This includes recurring funding for pay in 2022-23 and a baseline uplift of 2% for 2023-24. Within this total, those Boards furthest from NRAC parity will receive a share of £23.2 million, which will continue to maintain all Boards within 0.8% of parity.

In terms of pay, given the challenging and uncertain outlook for inflation, the need to conclude some pay deals for the current year and the associated implications for spending baselines, the Government has not set out a public sector pay policy alongside the 2023-24 Budget and we will say more on 2023-24 pay (covering Agenda for Change and other staff groups) at an appropriate point in the new year. As part of Boards recurring adjustments for 2022-23, amounts have been included based on pay offers for Agenda for Change and Medical and Dental staffing in 2022-23. The Agenda for Change pay deal remains subject to agreement, and we will work with Directors of Finance to finalise this position once the outcome is known. I will write to Boards in 2023 to confirm finalised baseline budgets following the conclusion of this work.

## **Health & Social Care Levy Funding**

I can confirm that the £69.1 million allocated in 2022-23 to support Boards with the costs of the additional National Insurance levy in 2022-23 will remain with Boards. Following the change in policy by UK Government, this funding is not ringfenced and it is to be determined locally how this resource is utilised.

## **Covid-19 Funding**

Whilst the scale of Covid-19 costs has reduced significantly in 2022-23 and projected to reduce further in 2023-24, we recognise that there are specific legacy costs that will require additional funding support in the new financial year. This includes funding for:

- Vaccinations staffing and delivery;
- Test & Protect activities including Regional Testing facilities;
- Additional PPE requirements; and
- Some specific Public Health measures.

Following today's budget we will seek to provide early clarity as to the total funding to be provided to support these costs. However, beyond the above, NHS Boards and Integration Authorities should expect to meet remaining costs from baseline funding and should continue to drive these costs down as far as possible.

## **Policy Funding**

In addition to the baseline uplift outlined, funding aligned to policy commitments and recovery of health and social care services will be allocated to Boards and Integration Authorities in 2023-24. It is our intention to provide early indication of allocations, where possible, and to align this to the planning guidance that will be issued in relation to Annual Delivery Plans, setting out the priorities for health and social care in the coming year.

Recognising the level of funding that is provided through in-year non-recurring allocations, and to maximise flexibility in delivery, we intend to review funding arrangements ahead of 2023-24. As part of this work, we will seek to bundle and baseline funding where this is appropriate. We will work closely with both Territorial and National Boards to establish a suitable approach.

## **Health and Social Care Integration**

In line with previous years, 2023-24 NHS payments to Integration Authorities for delegated health functions must deliver an uplift of 2% over 2022-23 agreed recurring budgets and make appropriate provision for 2022-23 pay.

The Health and Social Care Portfolio will transfer net additional funding of £95 million to Local Government to support social care and integration, which recognises the recurring commitments on adult social care pay in commissioned services (£100 million) and inflationary uplift on Free Personal Nursing Care rates (£15 million). This is offset by non-recurring Interim Care money ending (£20 million).

The overall transfer to Local Government includes additional funding of £100 million to deliver a £10.90 minimum pay settlement for adult social care workers in commissioned services, in line with Real Living Wage Foundation rate.



The funding allocated to Integration Authorities should be additional and not substitutional to each Council's 2022-23 recurring budgets for services delegated to IJBs and, therefore, Local Authority social care budgets for allocation to Integration Authorities must be at least £95 million greater than 2022-23 recurring budgets.

## **Capital Funding**

The Health Capital settlement for 2023-24 is in line with the expectations of the Capital Spending Review. Therefore I can confirm that Boards' Capital Resource Limit will be in line with that for 2022-23, plus additional funding will be provided for legally committed projects. The capital programme and commitments is subject to ongoing review by the National Infrastructure Board and the Capital Investment Group, and Boards will be advised at the earliest opportunity on any further allocations for projects in development during 2023-24.

## **2023-24 Financial Planning**

As previously confirmed, where Boards are indicating that financial support is required in 2022-23, we have asked Boards to submit financial recovery plans in the new year, setting out a return to financial balance in the next three years. I expect that Boards are taking proactive steps to develop these plans.

We will be requesting that financial plans for 2023-24 are submitted in the new year and will be issuing guidance to this effect shortly. As noted in my letter on 12 September, all Boards are expected to be engaging with the Sustainability and Value (S&V) programme, reflecting this work at a local level to support delivery of a cost reduction target of 3% per annum and productivity and related improvements in line with the four aims. The S&V board is now meeting regularly as are the working groups taking forward specific ideas. Value propositions have been set out to bring various elements of this work together which will be shared in due course.

Longer term work is required as we move out of recovery, towards transformation and renewal of our health services to deliver world-class, safe, person-centred, and sustainable healthcare for the people of Scotland. This will build on and prioritise specific areas of work in a joined-up way, whilst working in parallel to develop longer term transformation and renewal of our health services.

It is clear that there is significant financial challenge in 2023-24 and we will continue to work closely with Chief Executives to address this. I thank you again for your support to date and your continued engagement moving into the next financial year.

Yours sincerely

Richard McCallum  
Director of Health Finance and Governance



## Annex A – Board Funding Uplifts

	2022-23 Allocation	Recurring Allocations*	22-23 Pay**	Total 2022-23 Allocation	Uplift***	2023-24 Total Allocation	Uplift from 2022-23	NRAC Funding	Distance from NRAC Parity	HSC Levy Funding (retained by Boards) ****	Uplift from 2022-23 (inclusive of HSC Levy)
	£m		£m	£m	£m	£m		£m	%	£m	%
<b>NHS Territorial Boards</b>											
Ayrshire and Arran	806.8	(0.6)	27.4	833.5	16.7	850.2	5.4%	0.0	-0.4%	4.4	6.0%
Borders	234.8	(0.1)	8.0	242.6	6.0	248.6	5.9%	1.1	-0.8%	1.3	6.5%
Dumfries and Galloway	334.1	(0.2)	11.3	345.3	6.9	352.2	5.4%	0.0	1.9%	1.8	6.0%
Fife	749.4	(0.5)	25.5	774.3	16.5	790.8	5.5%	1.0	-0.8%	4.0	6.1%
Forth Valley	598.1	(0.3)	20.3	618.1	13.0	631.1	5.5%	0.6	-0.8%	3.2	6.1%
Grampian	1,072.2	(0.9)	36.4	1,107.7	22.2	1,129.9	5.4%	0.0	-0.4%	5.8	6.0%
Greater Glasgow and Clyde	2,504.0	(1.4)	85.0	2,587.6	51.8	2,639.4	5.4%	0.0	1.7%	13.6	6.0%
Highland	725.6	(0.5)	27.8	752.9	15.3	768.2	5.9%	0.2	-0.8%	3.9	6.4%
Lanarkshire	1,346.8	(0.8)	45.7	1,391.8	32.3	1,424.1	5.7%	4.5	-0.8%	7.3	6.3%
Lothian	1,639.3	(1.3)	55.7	1,693.7	49.6	1,743.3	6.3%	15.7	-0.8%	8.9	6.9%
Orkney	57.1	(0.1)	1.9	59.0	1.2	60.2	5.5%	0.1	-0.8%	0.3	6.0%
Shetland	57.0	0.0	1.9	59.0	1.2	60.1	5.5%	0.0	2.3%	0.3	6.1%
Tayside	856.5	8.7	29.1	894.3	17.9	912.2	6.5%	0.0	-0.7%	4.7	7.1%
Western Isles	84.5	(0.0)	2.9	87.3	1.7	89.0	5.4%	0.0	11.5%	0.5	6.0%
<b>Territorials Total</b>	<b>11,066.1</b>	<b>2.0</b>	<b>379.0</b>	<b>11,447.1</b>	<b>252.2</b>	<b>11,699.2</b>	<b>5.7%</b>	<b>23.2</b>		<b>60.0</b>	<b>6.3%</b>
<b>NHS National Boards</b>											
National Waiting Times Centre	68.1	0.0	6.2	74.3	1.5	75.8	11.3%			0.9	12.8%
Scottish Ambulance Service	305.9	5.6	16.2	327.7	6.6	334.2	9.3%			2.0	10.0%
The State Hospital	40.0	0.0	1.7	41.7	0.8	42.5	6.3%			0.3	7.0%
NHS 24	78.4	5.5	5.0	88.9	1.8	90.7	15.7%			0.7	16.7%
NHS Education for Scotland	492.3	1.4	13.8	507.5	10.1	517.6	5.1%			2.8	5.7%
NHS National Services Scotland	355.3	5.6	10.4	371.2	7.4	378.6	6.6%			1.5	7.0%
Healthcare Improvement Scotland	30.4	1.1	1.4	32.9	0.7	33.6	10.4%			0.2	11.0%
Public Health Scotland	52.1	0.2	3.5	55.8	1.1	56.9	9.3%			0.7	10.8%
<b>Nationals Total</b>	<b>1,422.6</b>	<b>19.5</b>	<b>58.0</b>	<b>1,500.1</b>	<b>30.0</b>	<b>1,530.1</b>	<b>7.6%</b>			<b>9.1</b>	<b>8.3%</b>
<b>Total NHS Boards</b>	<b>12,488.7</b>	<b>21.5</b>	<b>437.0</b>	<b>12,947.2</b>	<b>282.2</b>	<b>13,229.3</b>	<b>5.9%</b>			<b>69.1</b>	<b>6.5%</b>

\* Includes recurring allocations from 2021-22

\*\* Includes estimated funding for Agenda for Change and Medical & Dental pay uplift in 2022-23.

\*\*\* Includes NRAC parity adjustments.

\*\*\*\* Included in Boards 2022-23 Baseline Budgets

**Greater Glasgow and Clyde NHS Board**

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Dear Susanne

**2023/24 Indicative Financial Allocation to Glasgow Health and Social Care Partnership**

Further to initial informal discussions with Chief Officers and Chief Finance Officers, I am writing to you with an indicative budget proposal for 2023/24. An update to this letter formally confirming your final allocation for 2023/24 will be issued on behalf of the Board after the Board's financial plan has been approved at the April board meeting and when the Board's financial out-turn is confirmed along with further clarification on the totality and distribution of the pay awards have been determined.

**Annual uplift to NHSGGC**

The annual general uplift is provided by the Scottish Government to support Boards in meeting expected additional costs related to pay, supplies (which includes prescribing growth and utilities charges) and capital charges. The Board's uplift for 2023/24 is 2.0% totalling £51.8m.

**The HSCP Settlement**

The Scottish Government's budget letter issued on 15th December 2022 states that *"In line with previous years, 2023-24 NHS payments to Integration Authorities for delegated health functions must deliver an uplift of 2% over 2022-23 agreed recurring budgets and make appropriate provision for 2022-23 pay."*

The total allocation uplift to all six HSCPs should be £18.5m based on the current recurring budget at 31st January 2023. This will be adjusted when the 2022/23 out-turn is finalised in April and the pay award allocations have been confirmed.

A further adjustment will also be required to the individual HSCP settlements when the reallocation of the Specialist Children's budgets have been agreed.

An indicative allocation based on Month 10 figures is included in **Appendix 1**.

## **Set Aside Budget**

This is initially based on the estimated set aside budget for 2022/23 uplifted by 2.0% and will be revised when the Board's final out-turn is confirmed. This figure represents the estimated actual usage of in scope Acute services. This will continue to be a notional allocation.

## **Covid-19 Funding**

As per the budget letter NHS Boards and Integration authorities should expect to meet the remaining costs from baseline funding and should continue to drive these costs down as far as possible as there is no additional funding available to support these costs with the exception being the following:-

- Vaccinations staffing and delivery;
- Test & Protect activities including Regional Testing facilities;
- Additional PPE requirements; and
- Some specific Public Health measures

## **Recharges to HSCPs**

The following items will continue to be charged to the HSCP during 2023/24:

- The HSCP's proportional share of the Apprenticeship Levy based on your HSCP's payroll cost;
- The HSCP's proportional share of the annual cost arising from the change in accounting treatment of pre 2010 pension costs as the non recurring funding generated from this change was used to provide non recurrent support to all service areas in 2016/17; and
- The HSCP's share of Office 365 costs based on the number of licences in use.

Meetings will be arranged before the end of the financial year to allow us to formalise the funding and processes that are required for 2023/24. In the meantime, this letter enables the HSCP to produce its financial plans for 2023/24.

Yours sincerely

**Fiona McEwan**

Assistant Director of Finance- Financial Planning & Performance  
NHS Greater Glasgow and Clyde

## Appendix 1 – Financial Allocation 2023/24 (based on month 10 figures)

Spend Categories		Glasgow Hscop
		£000s
Family Health Services		237,080
Fhs Income		(7,288)
<b>Family Health Services Budget (Net)</b>		<b>229,792</b>
Prescribing & Drugs		140,975
Non Pay Supplies		14,755
Pay		239,864
Other Non Pay & Savings		177,370
Other Income		(27,289)
<b>Budget - HCH incl Prescribing</b>		<b>545,675</b>
<b>Total Rollover budget - NET</b>		<b>775,467</b>
<b>Adjustments:</b>		
Non Recurring budget allocated to base		(4,450)
<b>Budget Eligible for HCH &amp; Prescribing uplift</b>		<b>541,224</b>
<b><u>Uplifts</u></b>		
Scottish Government allocation	2.00%	10,824
Uplift for pay 22.23 tbc		
Total Uplift		10,824
<b>Revised Budget</b>		<b>786,291</b>
<b><u>Set Aside</u></b>		
2022/23 Estimated Value		235,594
Uplift @ 2%	2%	4,712
<b>2023/24 Set Aside Value</b>		<b>240,305</b>

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**Appendix 5**

<b>Savings Proposals</b>	<b>Description</b>	<b>£millions</b>
National Insurance - Reduction to Employer Rate	The increase to the National Insurance Employer Rate introduced by the UK government in 2022 was reversed during 2022. The IJB had made budget provision for this as part of its 2022-23 budget. This budget is no longer required and is offered up as a saving.	-3.504
Removal of GP Costs Related to Care Homes - No Longer Required	This proposal relates to where a contract with a care provider has changed and specific medical services are no longer required. The service provided was time limited and service users were supported through this. Patients in care homes will continue to have access to their own GP. Specific medical services will continue, where needed, at a number of care homes across the City, with an option to increase in response to any strategic developments.	-0.333
8% Reduction in Non Pay Budgets Across A Range of Services	A review of non pay budgets has identified a saving of 8% which can be achieved across a range of services.	-0.813
Ceasing Treatment Foster Care Service Payments Following End of Contract	<p>The IJB agreed a number of years ago to stop providing the treatment foster care service. This has been complex due to various legal and HR challenges.</p> <p>Legal and HR teams are concluding the arrangements to make final termination payments to the remaining treatment foster carers. The carers have not been caring for any children under this scheme for a considerable period and this is now an administrative arrangement to bring the scheme to a close.</p>	-0.300

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<b>Savings Proposals</b>	<b>Description</b>	<b>£millions</b>
Reduction in Move On Addictions Budget	This reduction is proposed and is reflective of current service demand and is reflective of an underspend in this budget.	-0.050
Review of Management Structures - Specialist Children Services - Service Manager	An additional service manager was recruited when this service transferred to Glasgow City IJB. This post is no longer required.	-0.090
8% Reduction in Planning and Strategy Team Costs	A review of the Planning and Strategy Team has identified the potential to reduce the structure by 1 FTE.	-0.069
Review of Learning and Development Staffing Structure	Following a reduction in the need and demand for SVQ training, it is proposed to reduce the structure to reflect this. This will result in a reduction of 2 FTE.	-0.111
Review of Commissioning Staffing Structure	A review of the commissioning management structure has identified the potential to reduce the management structure by 1 FTE.	-0.070
Review of Catering Arrangements in Borron Street	It is proposed to undertake a review of the provision of a catering offering at Blair Court which will include revisiting the current cafe arrangement, exploring alternative provision such as enhanced vending options or alternative provider, or withdrawing provision altogether.	-0.060
Reduction in Staffing - Management Structures	A review of the HSCP management structure has been undertaken and it is proposed to remove the post of Chief Officer Strategy and Operations which is currently vacant.	-0.151
Reduction in Staffing - Administration	A review of administration has identified the potential to reduce administration posts by 6 FTE.	-0.180

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<b>Savings Proposals</b>	<b>Description</b>	<b>£millions</b>
Increase Charges to Service Users by 5%	Fees and charges should be subject to annual increases each year to reflect the inflationary increases which are experienced to the cost of delivering services which are subject to charges. Inflation has been running and is expected to run at a level which is far greater than 5%. It is recognised that increasing charges for full cost recovery would be detrimental during the cost of living crisis, however it is felt that some element of recovery of additional costs should be pursued. As is normal, these fees and charges will be subject to financial assessment, where this is relevant.	-0.080
2% Uplift on Service Level Agreements	Service Level Agreements with external agencies are subject to annual increases, normally broadly in line with the Scottish Government uplift received by Health Board's. This saving applies a 2% uplift across all SLA's.	-0.180
Additional Income from Learning and Development Activities	The HSCP generates income as a result of supporting student placements in the HSCP. This saving reflects both an increase in the number of placements and an increase in the income now being recovered per student.	-0.040
Income Maximisation - Recovery of Client Contributions	Finance Services is responsible for financial assessments and income recovery for the Health and Social Care Partnership. This increase in income budget reflects the success of this team in recovering outstanding income.	-0.200
Increase Client Contributions for Non-Residential Services	The client contribution policy is based on "ability to pay". This means that a service user is financially assessed, and after applying agreed deductions (such as housing costs), 50% of the remaining income is taken as a	-1.725

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<b>Savings Proposals</b>	<b>Description</b>	<b>£millions</b>
	contribution towards support. This proposal is to increase this contribution to 75% of assessed remaining income.	
Reduction in Community Pharmacy Contractor Costs Due to Roll Out Of Buvidal	The roll-out of buvidal as part of MAT standards, has resulted in a cost reduction associated with Community Pharmacy contractor fees.	-0.300
Transforming the Balance of Care (Childrens and Families) - Care Packages	Children's Services will continue to implement the transformational agenda and the aspirations of the Promise, in alignment with a further strengthening of GIRFEC. The ongoing objective is to shift the spend from funding placements out with the City and reinvest in early intervention and prevention approaches. This builds on the success of the transformation agenda over the last 6 years of the HSCP, where the numbers of children and young people in formal care (residential and foster care) have been reduced by 50%. This saving will target a further reduction of Out of Authority placements by 5 and reduction in purchased fostering placements by 10.	-1.600
Transforming the Balance of Care (Children and Families) - Staffing	<p>The transformation strategy in Children's Services commenced in 2016. The cornerstone of the strategy was to reduce the number of children in out of authority care, and in care generally, and invest in early help and support to families to prevent them reaching a point of crisis, with the associated risk that families cannot cope, and children are accommodated.</p> <p>The number of case holding staff has also reduced over this time, this saving builds on this work and will result in the reduction of 7 FTE.</p>	-0.400

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<b>Savings Proposals</b>	<b>Description</b>	<b>£millions</b>
Review of Sign Language and Interpreting Service (SLIS) and Sensory Impairment (SI)	<p>SLIS provides interpreting services, translating, communicating and signed supported services across Social Work and other Council Services. The Sensory Support Service provides support to the sensory impaired population in the City by undertaking assessment of need, provision of training and aids/adaptations and are a preventive service to enable and maximise independence. This includes those experiencing:</p> <ul style="list-style-type: none"><li>• Deaf, deafened and have hearing loss</li><li>• Blind and have vision loss</li><li>• Deafblind</li></ul> <p>Work will be undertaken to review these services to ensure they are efficient as possible. There are currently 17.96 WTE delivering these services.</p>	-0.100
Health and Social Care Connects - Reduction in Staffing - Social Work	<p>This proposal will see the development of a new Health and Social Care Connect service in Older People and Adult services. The target is to reduce throughput of referrals to frontline community teams by 50%. The consequence of this will be a resultant reduction in the requirement for staffing. This will result in a reduction of 8.77 FTE.</p>	-0.500
Cease Delivery of Autism Resource Centre	<p>Adult Services are no longer going to be funding the ARC (which is also part funded by Education). Children and Families wish to take this service over, Education funding will transfer to them and the balance is a saving for Adult Services.</p>	-0.070

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Savings Proposals	Description	£millions
Intermediate Care - Reduction of 15 beds	<p>Intermediate Care is a step down model of hospital discharge based on purchased care home places organised in units of 15 beds where long-term social work assessment and rehabilitation are combined. Current plans assume an intermediate care capacity of 75 beds. Reducing intermediate care commissioned care home placements to 60 across Glasgow City would enable realisation of savings of up to £0.6M.</p> <p>Given intermediate care is an integral hospital discharge pathway, any reduction increases the risk of delayed discharge. This in part reflects the importance of local provision of intermediate care across the city.</p>	-0.600
Decommissioning Children Affected by Parental Addiction Services	<p>A review of the CAPA has identified that this service model is not aligned with the aspirations of GIRFEC and the Promise and is often perceived as in conflict with the wider service ethos and transformational agenda. Traditionally the service has been used to safeguard children through evidencing parental sobriety, often creating an oppositional dynamic with families, as opposed to getting alongside families to change power dynamics and support meaningful change.</p> <p>It is proposed to decommission this service and replace it with commissioned services which are aligned to a strength based approach working alongside families to deliver meaningful change.</p>	-0.350

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<b>Savings Proposals</b>	<b>Description</b>	<b>£millions</b>
Reduction to Purchased Care Home Budgets	<p>The purchased care home budget is the largest in Older People's Services at £93m. It is used to fund placements in independent sector care homes assessed as requiring residential or nursing care. It is a key enabler of hospital discharge and a common support for those in the advanced stages of dementia.</p> <p>A budget reduction in the number of care home places purchased by the HSCP is proposed and aligns with reduced demand for purchased care home placements during the pandemic. Demand in this sector has not recovered to pre-pandemic levels with lower admissions to care homes than our planning assumptions.</p> <p>Although a budget reduction is possible, this represents a real risk if demand recovers and will result in service users being wait listed if demand exceeds future budget levels.</p>	-2.000
Reduction to Staffing Across all Community Health Teams including Management and Administration	<p>This proposal is to reduce the community and inpatient health workforce budget by 1.1%. A whole system approach will be used to review staffing in all services and across all tiers including management and administration. This equates to 56 FTE and it will have a detrimental impact on a range of services delivered including:-</p> <ul style="list-style-type: none"> <li>• Health Visiting</li> <li>• District Nurses</li> <li>• Family Nurse Partnership</li> <li>• Immunisation Team</li> <li>• Health Improvement</li> </ul>	-3.794

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Savings Proposals	Description	£millions
	<ul style="list-style-type: none"> <li>• Mental Health</li> <li>• Addiction</li> <li>• Prison Healthcare</li> <li>• Psychological</li> <li>• Sexual Health</li> <li>• Homelessness</li> <li>• School Nursing</li> <li>• Care Home Teams</li> <li>• Continence Services</li> <li>• Rehab Services</li> </ul> <p>Plans need to be further refined to enable impacts on individual services to be assessed, however it is anticipated that these reductions will have an adverse on services, all of which are already working at maximum capacity dealing with unprecedented demand levels. This saving will result in either patients being wait listed for services or where appropriate services withdrawn completely.</p>	
Reduction in Mental Health Commissioning Contract	<p>The IJB approved £1.440m to deliver on enhanced community services for service users with a learning disability and services users with severe and enduring mental health. This budget was to allow the development of new commissioned resources to support those service users who are significantly delayed in hospital and who require bespoke packages of care.</p> <p>In order to deliver savings an 8% reduction is proposed in this budget which will reduce purchasing capacity by £115,000. This reduction will result in a reduction of the number of placements/services to be commissioned.</p>	-0.115

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<b>Savings Proposals</b>	<b>Description</b>	<b>£millions</b>
	The reduction in funding will see a reduction in support to vulnerable service users and their families/carers. We will not be able to provide packages of support to 10 service users by reducing this current budget.	
Reduction in Self Directed Support Budget (Adults and Older People)	This proposal will reduce the Self Direct Support Budget by 2% across Adult and Older People's services. This will have a direct impact on the provision of care to vulnerable adults and older people. People who have been assessed in critical need will not be able to receive a social care package of support. This will affect approximately 73 service users per year who will require to wait to receive a package of support. This wait could be 13 months. There will be no availability of funding to provide packages of care for young people with complex needs who are transitioning to adult services. This proposal does not take into consideration the 6% increase in demand for self directed support packages of care. This will have serious implications for the health and well being of these service users and their families with an increased risk of defaulting into NHS services including acute care.	-2.339
Reduction in Older People Day Care Services to Monday to Friday Only	It is proposed to reduce service provision in 4-day care units for older people from 6/7day services to Mon-Friday only. This will impact on 8 service users. These service users will be offered services at other times. This will result in a reduction of 8 FTE.	-0.259
Review of Purchased/In-House Supported Living Service	This saving will see a review of purchased/in-house supported living service. This saving represents a net saving and recognises that alternative care arrangements	-0.292

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Savings Proposals	Description	£millions
	<p>will be required to be put in place. This will impact on 35 service users.</p> <p>This saving will impact on service users right to personal choice and the right to get the right support in the right place at the right time. It will also reduce the IJBs ability to fully meet current performance levels in relation to hospital discharge.</p>	
Reduction in Care at Home and Mainstream Home Care Services	<p>Glasgow City Care at Home service delivers approximately 93,000 visits every week. The service operates 7 days a week, 365 days a year. During these visits the 2,800 highly trained and skilled home carers deliver a range of support services to ensure people are enabled to live well at home and manage the daily tasks of living whilst maximising their independence and personal choices.</p> <p>To achieve the budget savings target, the total hours available within the service would then need to be reduced by 3,200 hours per week and maintained introducing a cap in service at this level. This would introduce an unmet need managed by a waiting list of approximately 300 rolling vulnerable citizens.</p> <p>The waiting list would require a one in one out approach for a package of care, 62% of this list would be from hospital discharges, this would detrimentally impact on the current discharge model in place with Acute facilitating 4 hr discharge.</p>	-0.901

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Savings Proposals	Description	£millions
	Care at Home services are also forecasting a 7% increase in service users from Oct 2022 to March 2023 this increase would not be accommodated and shall further impact on any waiting lists for unmet need.	
<b>Total Savings Identified</b>		<b>-21.576</b>

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