



Item No: 7

Meeting Date: Wednesday 28th August 2024

Glasgow City Integration Joint Board

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

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Integration Joint Board 2024-25 Budget Update including Community Health Services within Children and Families

Purpose of Report:

This report will provide an update on the revenue budget for Glasgow City Integration Joint Board for 2024-25 following approval of the budget by the IJB on 20 March 2024 and the update presented on 15 May 2024.

Background/Engagement:

The IJB agreed the 2024-25 budget on [20 March 2024](#) with an update presented on [15 May 2024](#). This report agreed community health savings of £3.160m. A gap of £1.547m remains to be delivered in 2024/25. It was agreed that this remaining gap would be the subject of a further report to the IJB in relation to the savings options for the Hospital at Home Service and a review of community health services within Children and Families.

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 ☒

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Recommendations:	The Integration Joint Board is asked to: a) note the contents of this report; b) consider the community health savings for children and families of £0.772m of which £0.512m will be delivered in 2024-25; and c) approve community health savings for children and families of £0.772m of which £0.512m will be delivered in 2024-25; and d) note the remaining balance of £1.035m will be the subject of a separate report in relation to the hospital at home service.
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Relevance to Integration Joint Board Strategic Plan:

This report forms part of the revenue budget approved by the IJB for 2024-25 and considers 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:

Reference to National Health & Wellbeing Outcome(s):	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.
Personnel:	There has been significant investment in the workforce which supports delivery of Health and Social Care over the last five years with an increase of 11% in the health workforce and 7.7% increase in the social care workforce. The challenging financial climate has required savings options to be considered which will result in a reduction in staffing. This report highlights savings options which will result in a reduction of 9.85 FTE in Health services, bringing the total to 82.45 WTE (1.65%) including the savings agreed in March.
Carers:	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. It is prudent to assume that savings proposals will have some impact on carers across the city.
Provider Organisations:	None.
Equalities:	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

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	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 require full Equality Impact Assessments these will be done as proposals are developed and finalised. The equality considerations of the proposals within this report can be accessed on our website. https://glasgowcity.hscp.scot/equalities-impact-assessments
Fairer Scotland Compliance:	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.
Financial:	Financial implications are detailed throughout this report.
Legal:	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.
Economic Impact:	Not applicable at this time.
Sustainability:	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 IJB agreed as part of the budget report in March to use the impact of additional savings as a result of budget smoothing to increase General Reserves in 2024-25. It is currently forecast that the IJB will end 2023-24 with a General Reserve of £5.7m. Including the impact of the budget smoothing this will increase to £15.3m. This would represent 0.9% compared to the targeted 2% for General Reserves.

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	Holding General Reserves significantly below the 2% target level represents a significant risk to the IJB with concerns already being expressed by external audit. 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. For 2024-25 this will include the risks which still exist in relation to financial volatility especially in relation to homelessness, prescribing, pay settlements and funding arrangements for 2024-25. It will also help to support the implementation of the significant savings programme and the wider budget strategy which is required to be delivered. 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.
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Sustainable Procurement and Article 19:	Not applicable at this time.
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Risk Implications:	Delays in agreeing the final savings for the IJB will impact on the IJBs ability to achieve financial balance in 2024-25 and will require recovery plans to be put in place which will impact on all services. The volatility of the drugs supply market, demand for services, cost of living crisis, acceleration of home office decisions 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 financial risk will be monitored during 2024-25 and reported through the financial performance reports to the IJB and IJB Finance, Audit and Scrutiny Committee. 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.
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Implications for Glasgow City Council:	None.
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Implications for NHS Greater Glasgow & Clyde:	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	☐
2. Glasgow City Council	☐
3. NHS Greater Glasgow & Clyde	☒
4. Glasgow City Council and NHS Greater Glasgow & Clyde	☐

1. Purpose

- 1.1. This report will provide an update on the revenue budget for Glasgow City Integration Joint Board for 2024-25 following approval of the budget by the IJB on [20 March 2024](#) and the update presented on [15 May 2024](#).

2. Background

- 2.1. The IJB agreed the 2024-25 budget on 20 March 2024 with an update presented on 15 May 2024. This report agreed community health savings of £3.160m. A gap of £1.547m remains to be delivered in 2024/25. It was agreed that this remaining gap would be the subject of a further report to the IJB in relation to the savings options for the Hospital at Home Service and a review of community health services within Children and Families.

3. Community Health Savings – Children and Families

- 3.1 The IJB in May agreed a saving in Children and Families for Health Visiting of £0.507m with a maximum reduction of 8 WTE Health Visitors. The Children and Families Service have taken an opportunity to revisit this proposal when developing their balance of savings. This has resulted in a reduction of the number of posts being reduced in health visitors and a change in the grading mix which has reduced the overall saving. Alternative proposals have been developed below to meet the overall gap.

Service	WTE	Saving £000s	24-25 £000s	25-26 £000s
Health Visiting Teams – Reduction	7.31	369	295	73
Maternal and Infant Nutrition – Reduction	1.00	57	29	29
Childsmile – Reduction	0.60	21	20	2
School Nursing – Reduction	1.86	104	100	4
Homeless Families Team - Disinvestment	7.08	305	153	153
Additional Funding Secured 24-25		422	422	0
TOTAL	17.85	1,279	1,019	260

Already Approved by the IJB	8.00	-507	-507	0
Additional Savings to be Approved	9.85	772	512	260

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- 3.2 Staff are working to minimise the impact of the savings described above. We have planned that the savings will be identified from the usual health visitor turnover commensurate with the anticipated fall in the birth rate. Based on pre-covid figures there was a turnover of 2.5 health visitors per month. Post covid the figures are approximately 2 per month. The Caseload Weighting Tool will be run in Autumn and will provide evidence of current workload and demand. It will identify areas of acute pressure in the city so that rebalancing of the workforce can be achieved to minimise the risks associated with the reduction of staff across the city.
- 3.3 The disinvestment in homeless health visiting team has been identified as there is no longer a need for a dedicated team and staff can be redeployed into localities and services to families can be delivered in communities through existing teams. The service acknowledges the complexity of homeless families and steps have been taken to reduce risk by augmenting our investment in family support services for the under 5's. Further, we are about to embark on a test of change incorporating Glasgow Helps into locality joint support teams to reduce the burden on health visiting staff allowing them to focus on the universal pathway. Health visitors have direct access to the Section 22 budget to reduce family poverty and alleviate stress.
- 3.4 The remaining reduction in staffing proposed will be delivered from a reduction in staffing due to natural attrition as a result of vacancies, retirements or work life balance requests. As above we will deploy the caseload weighting tool across the service to minimise impact. This exercise will include support staff. We aim to minimise the impact on the staff group where possible. The HSCP has invested in family support services which should minimise the risk to vulnerable families.
- 3.5 Temporary additional funding has been secured in 2024-25 and will be used to minimise the impact of the savings in the first year, allowing for the review of the caseload weighting tool, the development of additional support pathways (including via Joint Support Teams and Glasgow Helps), and reducing the administrative burden of applying for grants and financial support which has been highlighted in engagement events with health visitors.
- 3.6 EQIA assessments are included at the link below:
[Equalities Impact Assessments | Glasgow City Health and Social Care Partnership \(hscp.scot\)](https://hscp.scot/equality-impact-assessments)
- 3.7 The savings will result in an additional reduction of 9.85 FTE in Health services, bringing the total to 82.45 WTE (1.65%) including the savings agreed in March.
- 3.8 This will leave a remaining balance of £1.035m which will be the subject of a separate report in relation to the hospital at home service.

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4. Recommendations

4.1 The Integration Joint Board is asked to:

- a) note the contents of this report;
- b) consider the community health savings for children and families of £0.772m of which £0.512m will be delivered in 2024-25; and
- c) approve community health savings for children and families of £0.772m of which £0.512m will be delivered in 2024-25; and
- d) note the remaining balance of £1.035m will be the subject of a separate report in relation to the hospital at home service.



Direction from the Glasgow City Integration Joint Board

1	Reference number	280824-7
2	Report Title	Integration Joint Board 2024-25 Budget Update including Community Health Services within Children and Families
3	Date direction issued by Integration Joint Board	28 August 2024
4	Date from which direction takes effect	28 August 2024
5	Direction to:	NHS Greater Glasgow and Clyde Only
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 2024-25
8	Full text of direction	NHS Greater Glasgow and Clyde is directed to implement the savings of £0.772m as outlined in this report.
9	Budget allocated by Integration Joint Board to carry out direction	The budget for 2024-25 is as delegated to NHS Greater Glasgow and Clyde and Glasgow City Council in the March IJB Report.
10	Performance monitoring arrangements	The budget will be monitored through standard budget monitoring arrangements.
11	Date direction will be reviewed	1 April 2025