

## WEST DUNBARTONSHIRE COUNCIL

### Report by the Director of Community Health and Care Partnership

Community Health and Care Partnership Committee: 20 February 2013

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**Subject: Financial and Capital Works Report for the period ended 31 December 2012 (NHS)**

#### **1. Purpose**

The report provides an update of the overall revenue position of the CHCP and of the CHCP's Capital Programme for 2012/13 year to date (NHS only).

#### **2. Recommendations**

The Committee is asked to note the content of the Financial and Capital Works Report for the period ended 31 December 2012.

#### **3. Background:**

#### **4. Main Issues:**

##### **4.1 Board Financial Planning for 2013/14**

Although the Board's Financial Plan – and therefore the overall savings target - for 13/14 has yet to be finalised, it is expected to be in the region of £30m-£35m. It was reported to the CHCP Committee at its November 2012 meeting that the assessment of Partnership savings potential from system-wide redesign work would have resulted in a shortfall which would require to be allocated to CHPs for savings at local level. It is now anticipated that the system-wide savings will be sufficient and no local target will be set. Furthermore, it has been accepted that the savings already made in the Musculoskeletal ('MSK' Physio) service, which West Dunbartonshire CHCP hosts for the Board, are already sufficient and so no further savings will be required in the current 4-year period.

##### **4.2 Revenue Position 2012/13**

West Dunbartonshire CHCP's (NHS-only) revenue position reported for the period ended 31 December 2012 was £5,000 underspent.

Overspending on the specialist care package for which the CHCP took responsibility in 2010/11 and on community equipment and continence expenditure are being offset by underspending within Physio, Planning & Health Improvement expenditure and within Adult Mental Health Community Services

The summary position is reported in the table below, with further comments on the significant variances highlighted in section 4.3 of this report. An additional detailed breakdown of individual costs at care group level is reported in Annexe 1 of this report.

The CHCP is forecasting a breakeven position for the full year.

	<b>Annual Budget</b>	<b>Year to Date Budget</b>	<b>Year to Date Actual</b>	<b>Variance</b>
	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>
Pays	24,679	18,126	18,019	107
Non Pays	53,720	39,665	39,767	( 102)
	78,399	57,791	57,786	5
Less Income	(4,789)	(3,255)	(3,255)	0
Net Expenditure	<b>73,610</b>	<b>54,536</b>	<b>54,531</b>	<b>5</b>

### 4.3 Significant Variances

Comments on significant issues are noted below:

- **Mental Health – Adult Community Services** recorded an underspend of £32,000. This occurs as a result of vacancies within the Primary Care Mental Health Team, and also within Rehab Services. An exercise to reallocate budget between Adult and Elderly services is still being considered.
- **Mental Health – Elderly Services** reported an overspend of £22,000. This occurs mainly within Inpatient Nursing. As noted above, work is on the rebalancing of the overall Mental Health budgets between Adult and Elderly is being considered.
- **Health & Community Care** reported an overspend of £90,000. As noted above in section 4.2, this has occurred within a number of different areas: the CHCP's share of a specialist care package commenced last financial year has contributed £120,000 to this overspend year to date. In addition, there are cost pressures within Community Equipment, offset by an underspending within the NHS GGC Physiotherapy service, as a result of current vacancies
- **Planning and Health Improvement** reported an underspend of £67,000. This is a result of the secondment of the Health Improvement manager and maternity leave.
- **Hosted Services** reported an underspend of £8,000, where the Integrated Eye Service continues to show a small underspend.

#### 4.4 Capital Programme 2012/13

- Formula Capital

The Partnerships Formula Capital Allocation report provides capital funding for the CHCP of £216,000. This includes an acceleration of the 13/14 formula capital allocation. In addition, a further allocation of £40,000 has been provided for additional Healthcare Environment Inspectorate ('HEI') type expenditure, giving a total allocation of £256,000

The local Capital Planning Group has identified the following priorities and the Board's Capital Planning team are now taking these forward.

<b>Project</b>	<b>Allocation (£000)</b>
Replacement windows, Addictions Building, Dumbarton Jt Hospital	25
Demolition of Lodge House	20
Refurbishment of clinic rooms in DHC	20
To refurbish seminar room as used for clinic space in DHC	10
Refurbish one podiatry room DHC	10
Refurbish one DSR room in DHC	5
Refurbish of 4 clinical rooms at CHC	40
Replacement of windows at CHC	20
Replacement of flooring waiting areas in CHC	10
Refurbish one public toilet in each of CHC and DHC	7
Physio depts in DHC and CHC	5
Corridor doors in the long corridor in the Glenarn ward	10
Partition in the filing area for health visitors 2 rooms in CHC	34
Dumbarton Joint Hospital HEI works	40
<b>Total</b>	<b>256</b>

#### 5 **People Implications**

5.1 There are no people implications arising from this paper.

#### 6 **Financial Implications**

6.1 Other than the financial position noted above, there are no financial implications of the budgetary control report.

## **7 Risk Analysis**

- 7.1** The main financial risks to the ongoing financial position relate to currently unforeseen issues arising between now and the financial year-end. Any significant issues will be reported to future Committee meetings.

## **8 Equalities Impact Assessment (EIA)**

- 8.1** No significant issues were identified in a screening for potential equality impact of this report.

## **9 Consultation**

- 9.1** This report is for information only and relates only to the NHS element of the CHCP, with no requirement for consultation.

## **10 Strategic Assessment**

- 10.1** This report provides an update on the CHCP's revenue and capital position (NHS only) and does not seek to affect the Council's main strategic priorities.

Keith Redpath  
Director.

**Person to Contact:** Jonathan Bryden, Head of Finance - Clyde CHPs (0141 842 6230)

**Appendix :** Financial Statement 1 April to 31 December 2012

**Background Paper:** None

**Wards Affected:** All

**Annex 1**  
**West Dunbartonshire Community Health Partnership**  
**Financial Year 1 April 2012 to 31 December 2012**

	<b>Annual Budget</b>	<b>Year to Date Budget</b>	<b>Year to date Actual</b>	<b>Year to date Variance</b>	<b>% Variance</b>
	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>	
<b>Expenditure</b>					
Mental Health (Adult Community)	4,334	3,315	3,283	32	0.97%
Mental Health (Elderly)	3,078	2,306	2,328	( 22)	(0.95%)
Addictions	1,938	1,502	1,502	0	0.00%
Learning Disabilities	580	435	433	2	0.46%
Health & Community Care	10,216	7,213	7,303	( 90)	(1.25%)
Children & Families	4,462	3,325	3,331	( 6)	(0.18%)
Planning & Health Improvement	1,285	803	736	67	8.34%
Family Health Services (FHS)	23,937	17,939	17,939	0	0.00%
Prescribing	16,789	12,374	12,374	0	0.00%
Executive & Admin, Accommodation costs & Other	1,952	1,471	1,457	14	0.95%
Resource Transfer	7,371	5,542	5,542	0	0.00%
Hosted Services	1,099	653	645	8	1.23%
Change Fund	1,358	913	913	0	0.00%
	78,399	57,791	57,786	5	0.01%
<b>Income</b>	<b>(4,789)</b>	<b>(3,255)</b>	<b>(3,255)</b>	0	0.00%
<b>Net Expenditure</b>	<b>73,610</b>	<b>54,536</b>	<b>54,531</b>	<b>5</b>	<b>0.01%</b>

*Members should note that NHS GG&C financial convention of reporting underspends as positive variances (+) and overspends as negative variances (-) has been adopted for all financial tables within the report.*