



PLANNING OUR FUTURE

CONSULTATION ON OUR BUDGET 2021/22

**What are your priorities for HSCP services and
how can we reduce our spending?**

January - February 2021

A&B | Transforming HSCP | Together

Argyll & Bute Health & Social Care Partnership

Budget Consultation 2021/22

Argyll and Bute Health & Social Care Partnership (HSCP) delivers a broad range of services to our communities, many of which are most used by very vulnerable people. Our vision is that people in Argyll and Bute will live longer, healthier, independent, happier lives and this underpins all that the HSCP does.

Our population is ageing, and this is happening faster than elsewhere in Scotland, so this gives us particular pressures and demands for Older People services. We have other pressing demands with treating long term health conditions like cancer, heart disease and stroke, for example, obesity is driving up demand for diabetes related services which now cost 9% of the total NHS budget in Scotland.

At the same time, the resources available to the HSCP are declining in real terms year on year. We cannot simply continue to provide the same services in the same ways. We have to find efficiencies, transform how we operate, and do less going forward. These are difficult choices, and there are no easy options left to reduce our spending. We would really value your views to help us make the best decisions that will affect all of our lives.

This consultation is about high level budget decisions and how we prioritise our investment in local services, when it comes to the impacts on services being delivered, we will carry out further detailed community engagement. This will include working with people who will be affected by these changes including patients, carers, our staff and partners to ensure we listen to and take into account their ideas and worries.

Thank you for taking the time to respond to this consultation.

Councillor Kieron Green

Chair, Integration Joint Board

What is an HSCP?

The Health and Social Care Partnership (HSCP) is an independent public body whose duties are laid out in Scottish law. It is a partnership between NHS Highland and Argyll and Bute Council who both contribute to its budget. In Argyll and Bute the HSCP is the organisation that plans the delivery of all of our health and social care services.

How is the HSCP funded?

HSCP receives money from both partners, NHS Highland and Argyll and Bute Council, each year. The amount that each partner pays is a decision taken by their own Boards.

The HSCP then has to live within the amount of money it has been given. This budget must be “balanced”; in other words, the HSCP cannot plan to overspend in its finances.

Setting the 2021/22 budget

The Integration Joint Board (IJB) is required to set a balanced budget for the Health and Social Care Partnership (HSCP) 2021/22 at its meeting on 31 March 2021.

Normally, by now, the IJB would have a clear idea of our funding from Argyll and Bute Council and NHS Highland. This year the Scottish Government has announced that it will set out its budget on 28 January 2021. This means that there is still considerable uncertainty about our budget because our partners do not yet know how much they will be receiving from Scottish Government.

The funding from the Council is currently anticipated to reduce reflecting our agreement to payback some of previous overspends, to the extent of £1.2m. They could reduce funding by up to a further 2% but we are not currently planning for this. NHS Highland is expecting an increase in funding from the Scottish Government of between 2 to 3% and intends to pass this on in full to the HSCP using the nationally agreed formula (NRAC). We are planning for an increase of 2.5% as the mid-point. Given what we know already, as of December 2020, we are predicting that on a like-for-like basis, we need to reduce our spending by around seven million pounds (£7m) next year.

Over recent years we have worked very hard to become more efficient. In the year 2020/21 alone we have reduced our spending by £6m. However, due to the Covid-19 pandemic, we have been on an emergency footing since March 2020, and that has meant that many transformational changes have not been made as fast as we originally anticipated, or have not been possible at all. We will carry forward in April to the new financial year £4.6m of previously agreed savings to be made next year. Together with the anticipated funding gap of £7.2m, this means that next year we must save 4% of our current annual budget, around £11.8m.

The total shortfall in the HSCP’s budget for 2021/22 is approximately £11.8m.

Changes which HSCP can, and cannot, make

Many of the demands on HSCP’s budget are not wholly within its control. These include, for example:

- Provision of services because the law requires them
- Providing services in a specific way because this is laid down in national guidance and standards
- Increased demand for healthcare because of demographic pressures, e.g. growing numbers of older people
- People have increasingly complex needs, which increases the cost of some care packages
- The cost of new drugs without these being fully funded
- Costs for GP out-of-hours services increasing due to new GP contracts
- Staff and supplier costs increasing on account of nationally agreed pay awards and the Scottish Living Wage
- Costs for services contracted through NHS Greater Glasgow & Clyde
- Services provided through nationally agreed GP, dentistry, pharmacy and optometry contracts

This means that the HSCP has relatively limited ways in which it can make savings.

There are 3 types of savings the HSCP can make:

- 1. Reducing overheads**
- 2. Reducing or cutting services**
- 3. Redesigning services to make them more efficient**

Reducing overheads

For the past 2 years there has been a far-reaching drive to cut overheads within the HSCP. The senior leadership team has continued to identify areas of overhead savings, but the reality is that after such an extensive cost-cutting exercise, there is now little potential for further significant cuts.

Reducing or cutting services

This is where we are proposing to offer less services, such as through limiting support we provide directly or contracting for fewer hours from our providers.

Changing how we work

Having less money in our budget means that we cannot continue to deliver our services in the same way as we have previously and changes are needed. Some of these changes are already due to be implemented in 2021/22 including:

- More technology used to support people at home, by allowing remote monitoring of conditions and consultations with trained staff, thus avoiding hospital visits and unnecessary admissions
- More care delivered at home and more support for carers (especially family and friends), so nursing and care home beds will be used for people with higher care requirements.

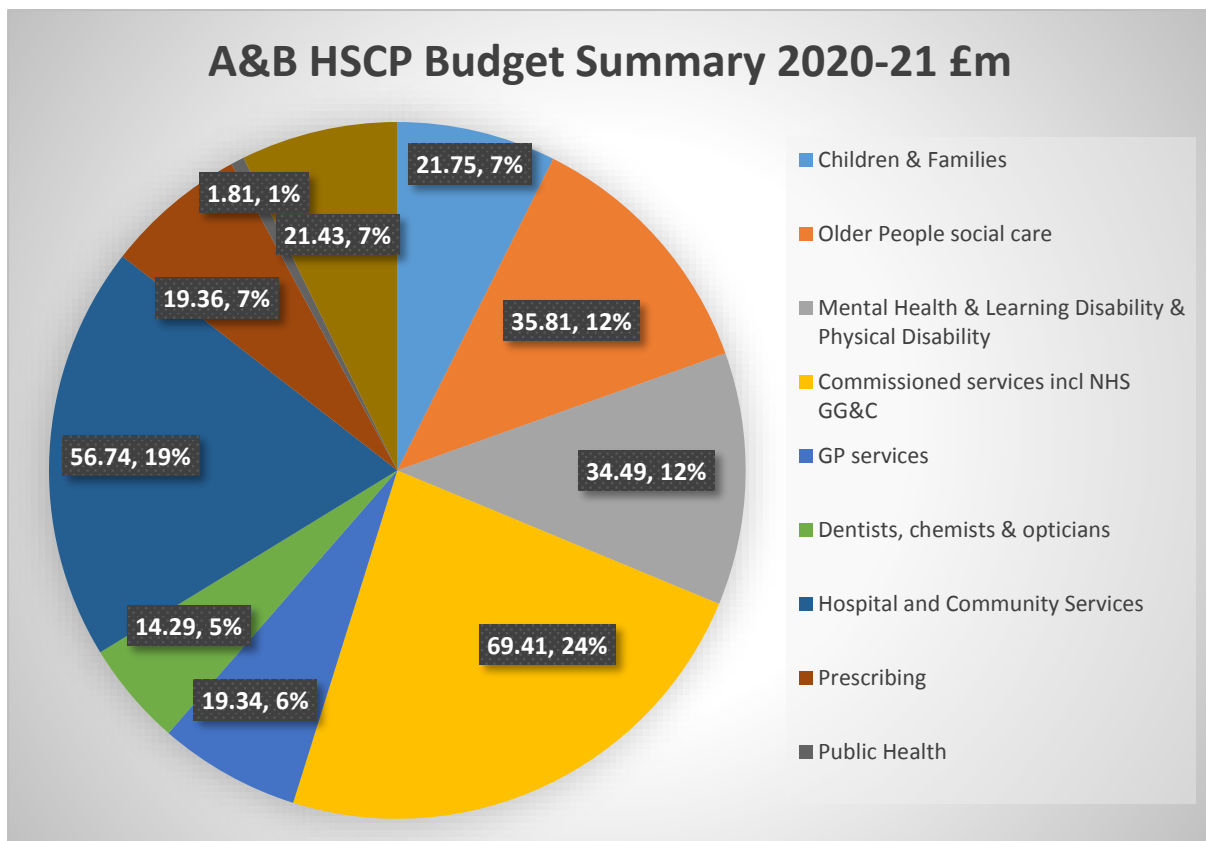
- Most hospital treatments will not require overnight stays, so that beds can be prioritised for those with continuous medical needs.

However, more now needs to be done to ensure we can provide high quality care within a reduced budget.

The HSCP's Senior Leadership Team has carefully reviewed all budgets to identify any areas where efficiencies can be made without adversely affecting quality and/or safety. There has been an ongoing effort throughout 2020/21 to restrict non-essential expenditure, for example, in-depth scrutiny of all vacancies.

We have identified new areas to stop spending of over £4.3m next financial year which will grow to £4.5m the following year. Some of these possible savings will potentially affect services you use and our staff. We want to know your views on these. We need to identify another £2.5m of savings and want your suggestions. We would like to know what matters most to you about HSCP services.

The diagram below shows a breakdown of how this year's budget of £278m is spent:



- The biggest area of spend is £65.6m on acute (specialist) services with NHS Greater Glasgow & Clyde. We also buy services worth £3.9m from other health boards.
- The second biggest area of spending is £56.7m on hospital based services. This includes our hospital in Oban (£17.3m), and our community hospitals and services in Campbeltown, Dunoon, Lochgilphead, Mull and Iona, Islay, and

Helensburgh. All community based services like community nursing and allied health professionals are included here.

- The third biggest area of spend of £35.8m on older people social care which includes care at home and care home placements.
- We spend £34.4m on Mental Health, Learning Disability and Physical Disability which includes both social care and NHS based services
- Children and families services cost £21.7m include fostering and adoption, hostels and children's houses, residential placements, child protection, children with disabilities, maternity services and school nurses, and justice social work.
- GP services cost £19.2m and these are largely set nationally with little ability for the HSCP to make efficiencies. The same applies to £14.3m costs for dentists, chemists and opticians.
- Management and corporate costs of £21.4m include services such as planning, finance, IT, estates, safety and quality and certain centrally held contingency budgets. After reductions to these budgets in recent years, there is little left to cut.

CONSULTATION QUESTIONS

Section 1: The role of the Health & Social Care Partnership in Argyll and Bute

1.	What for you is the most important role for the HSCP (Please tick one option only)	
	Deliver the services I use	
	Deliver services for the most vulnerable people in our communities	
	Help us all to live longer, healthier, independent, happier lives	
	Support local people to help others in our communities	
	Other (please tell us what)	

2	Which of these general service categories do you use most (Please tick one option only)	
	Children & Families Services	
	Older People Social Care	
	Mental Health, Learning Disability and Physical Disability Services	
	Greater Glasgow & Clyde hospitals and other services outside Argyll and Bute	
	GP Services	
	Dentists, Chemists & Opticians	
	Argyll & Bute local hospital and community services	
	Public health (immunisation, health screening and other health improvement activities)	
	Other (please tell us what)	

3	What other services do you use (Please tick any that apply))	
	Children & Families	
	Older People Social Care	
	Mental Health, Learning Disability and Physical Disability Services	
	Greater Glasgow & Clyde Hospitals and other services outside Argyll and Bute	
	GP Services	

Dentists, Chemists & Opticians	
Argyll & Bute local hospital and community services	
Public health (immunisation, health screening and other health improvement activities)	
Other (please tell us what)	

Section 2: Balancing our Budget

We need to reduce our spending by £7.0m next year but the following costs are not available for savings:

- GP, dentist and pharmacy contracts – set nationally
- Contract costs for the Mid Argyll Hospital

Plus some spending is very challenging to reduce:

- Contract for acute hospital services with NHS Greater Glasgow & Clyde where we expect these to be based on an inflation based uplift, due to Covid affecting usage data

4	In which 3 categories would you most support reductions to spending? (Please label your top 3 options as 1, 2, 3)	
	Children Services – fostering & adoption, looked after children	
	Maternity, Health Visitor and School Nursing services	
	Justice Social Work services	
	Care at Home and other community social care support packages	
	Residential care and nursing home placements	
	Mental health services	
	Disability support packages	
	Community hospitals (offered at Campbeltown, Dunoon, Islay, Mid Argyll, Mull, Rothesay)	
	Community services (Nursing, Occupational Therapy)	
	Acute (hospital) Services offered from Oban Lorn & Isles Rural General Hospital	
	Acute (hospital) services from NHS Greater Glasgow & Clyde	
	GP practices	
	Dentists, pharmacists and opticians	
	Public health screening & immunisation and other health improvement programmes (this would not affect the COVID vaccine programme which will be implemented in full)	
	Management & corporate including patient safety and quality of care	
	Other (please tell us what)	

5	Please indicate your top 3 priorities from these service areas (Please label your top 3 options as 1, 2, 3)	
	Children Services – fostering & adoption, looked after children	
	Maternity, Health Visitor and School Nursing services	
	Justice Social Work services	
	Care at Home and other community social care support packages	
	Residential care and nursing home placements	
	Mental health services	
	Disability support packages	
	Community hospitals (Campbeltown, Dunoon, Islay, Mid Argyll, Mull, Rothesay)	
	Community services (nursing, Occupational Therapy)	
	Acute Services offered from Oban Lorn & Isles Rural General hospital	
	Acute services from NHS Greater Glasgow & Clyde	
	GP practices	
	Dentists, pharmacists and opticians	
	Public health screening & immunisation and other health improvement programmes (this would not affect the COVID vaccine programme which will be implemented in full)	
	Management & corporate including patient safety and quality of care	
	Other (please tell us what)	

6 All of the HSCP's funding comes from NHS Highland and Argyll and Bute Council. In turn, the bulk of their funding comes from the Scottish Government. We know this funding will not be enough to cover all our service costs in the coming year. We have identified a number of savings that may affect the services you are used to accessing. These are listed in the table in Appendix 1 and we would like to hear your views on these options. (In addition we have identified £3.5m of operational savings from vacancies, underspends across a range of budgets, reduction in travel, and other efficiencies.)

If you have comments on the policy related savings options, please let us know

7	We need to identify more ways to bridge our estimated funding gap. If you have any other ideas about where we could save money please let us know here:

8 We understand that people worry about changes to services and how this might affect them and their families, however the need for change is imperative due to our financial situation. We are interested in what changes might be acceptable to you. Please let us know your views on the following service changes:

Option	Acceptable	Not sure	Not acceptable
More use of technology e.g. video facilities for appointments or electronic monitoring systems for people looked after at home – already used much more due to Covid social distancing requirements			
Reduce housing support services for learning disability clients ensuring this is based on level of need			
Shift from individual packages of care for Mental Health support to enabling model of group based care providing more peer support and social interaction			
Fewer local nursing home and care home facilities for older people in order to sustain and concentrate services in the remaining homes (occupancy levels are dropping)			
Fewer health visitors and school nurses			

Reduce community based day services for older people or people with learning disabilities and replace with a range of community based Third Sector services			
For clients who refuse a care home placement, Care at Home packages capped at £30k p.a. (equivalent to cost of residential care) with option for clients to cover costs above this level themselves			
More support for unpaid carers (family and friends) including short breaks / respite			
Improve utilisation of Oban hospital theatre capacity through patients travelling from North Highland or work transferred that is currently done from Glasgow hospitals (e.g. urology)			
Remove support for lunch clubs			
Reduce discretionary (non-contractual) support to voluntary organisations encouraging these to be self-funding			
Less support for patient travel escorts – stricter criteria to ensure we pay for escorts only when they are absolutely necessary			

9 Please let us know if the impacts of these changes are acceptable or not:

Impacts	Acceptable	Not sure	Not acceptable
More travel to specialist services			
Less in person face to face time with specialists			
Increased waiting times for care at home packages			
Care at home packages only for those with the highest level of care needs			
Family and friends doing more to support people living at home			
You taking more responsibility for your health and wellbeing and making healthy lifestyle choices to prevent health problems			

Section 3: About You

10	Age Group	
	Under 18	
	18-30	
	31-50	
	51-65	
	66-75	

76-85	
Over 85	

11	What is your gender	
	Male	
	Female	
	Transgender	
	Non-binary	
	Other	
	Prefer not to say	

12	Which area do you live in?	
	Helensburgh and Lomond	
	Oban, Lorn, and the Isles	
	Bute and Cowal	
	Mid Argyll, Kintyre, and the Islands	

13	Do you have dependents that you look after?	
	No dependents	
	Child or children under 18	
	Spouse or partner	
	Older relative(s)	
	Other adult(s)	

14	Are you a young carer, or a person being cared for by others, or disabled?	
	I am a Young Carer	
	I am cared for by others	
	I have a disability	

Many thanks for taking the time to respond to our questions. Your views are very important to us and will be taken into account in our budget planning. We will report your responses and the findings in various ways including Argyll and Bute Council's website and on social media.

Closing date for questionnaires: 19 February 2021