TAMESIDE AND GLOSSOP

Care together

Tameside and Glossop Integrated Financial Position: M9 2016/17 Revenue & Capital Monitoring Statements at 31

December 2016 and projected outturn to 31 March 2017

14 February 2017

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Tameside and Glossop Clinical Commissioning Group





Section 1 - Care Together Economy Revenue Financial Position

Care Together Economy Revenue Financial Position

	Year to Date (M9)			Year End Forecast				Movement		
	<u>£000's</u>	<u>£000's</u>	<u>£000's</u>	<u>£000's</u>	<u>£000's</u>	<u>£000's</u>		£000's	£000's	
								Previous	Movement	
Description	Budget	<u>Actual</u>	Variance	Budget	Forecast	<u>Variance</u>		Month	<u>in Month</u>	
Tameside & Glossop CCG	284,385	285,484	(1,099)	384,790	386,126	(1,336)		(2,517)	1,181	
Tameside MBC	51,936	54,568	(2,632)	69,272	72,781	(3,509)		(3,371)	(138)	
Total Single Commissioner	336,321	340,052	(3,731)	454,062	458,907	(4,845)		(5,888)	1,043	
ICFT Deficit	(12,971)	(12,881)	90	(17,300)	(17,300)	0				
Total Wole Economy			(3,641)			(4,845)		(5,888)	1,043	

The overall financial position of the Care Together Economy has improved by \pounds 1.04m month on month reducing the projected year end deficit to \pounds 4.85m or 1.1% of the full year budget. The key driver of this improvement has been an improvement in the CCG QIPP of \pounds 1.2m. Key points to note are as follows:

Key Risks in Year End Forecast

- That the CCG QIPP doesn't deliver to current planned levels
- That the current level of Delayed Transfers of Care adversely impacts on the delivery of the Winter Plan with associated financial consequences

Planned Mitigations to Identified Risks

- Ownership of individual QIPP schemes together with rigorous monitoring will ensure delivery
- The Winter Plan reflects an integrated approach across the economy which is essential in managing delayed transfers of care (DTOCs) with implementation of the Home First transformation project critical to managing the level of DTOCs.

Original commissioner financial gap £21.5m. Still need to close £4.85m of this gap which is dependent on a proportion of amber and red schemes delivering in accordance with the optimism bias applied.

Mitigations to adverse variances contained in Year to Date Position

- Continued work to deliver improvement on the CCG QIPP position following submission of recovery plan.
- Continued work to deliver and identify further savings as part of the TMBC QIPP.
- Diligent efforts in striving to deliver the savings target in full. Significant risk attached to this.
- The final year settlement agreed with ICFT has mitigated any risk for the rest of the year including any caused by winter pressures.

The CCG figure quoted in table 1 differs from that reported to NHS England in the Non ISFE return, due to the treatment of QIPP and timing of the recovery plan. This is to ensure consistency of reporting across the Integrated Commissioning Fund, for both CCG and Local Authority. This is presentational only and does not affect the underlying position. It has been agreed at Single Commissioning Board, that all financial gaps (including QIPP) should be treated as a deficit until the savings have been achieved (i.e., reported as green in QIPP/recovery plans). Please note that accruals are included within the year end projections for the Council and not within the year to date totals. The CCG projections include accruals with in both year to date and year end projection total.

Tameside & Glossop CCG

	Yea	r to Date (M9)			
	£000's	£000's £000's			
Description	Budget	Actual	Variance		
Acute	148,541	148,290	251		
Mental Health	21,694	21,688	6		
Primary Care	61,535	62,313	(778)		
Continuing Care	8,740	9,071	(331)		
Community	20,560	20,571	(11)		
Other	20,057	20,179	(122)		
QIPP					
CCG Running Costs	3,258	3,372	(114)		
CCG Sub Total	284,385	285,484	(1,099)		

	Year End		Move	ement	
<u>£000's</u>	<u>£000's</u>	£000's	<u>£000's</u>	<u>£000's</u>	
			Previous	Movement	
Budget	Forecast	Variance	Month	<u>in Month</u>	
197,343	197,575	(232)	121	(353)	
28,993	29,018	(25)	(55)	30	
81,655	82,754	(1,099)	(1,081)	(18)	
12,251	12,651	(400)	(386)	(14)	
27,493	27,511	(18)	39	(57)	
31,893	30,735	1,158	758	400	
	1,336	(1,336)	(2,517)	1,181	
5,162	4,546	616	604	12	-
384,790	386,126	(1,336)	(2,517)	1,181	

Overall there has been an improvement to the CCG's projected year end financial position of almost £1.2m in the projected year end variance.

It is important to note that the majority of this improvement is a result of non-recurrent means and includes:

- Green rated QIPP schemes (including the receipt of GM levy funding of £669k) which have increased again by £1.181m to £12.164m against a target of £13.5m. As a result a residual gap of £1.336m remains
- Other changes in the outturn position by directorate:
 - > Acute: Detailed breakdown of movements in acute providers is detailed separately
 - > Prescribing: A detailed report on the current prescribing position is detailed separately
 - Community Transfer of Telehealth saving to QIPP (£39k) and increase in overspend on Community IT (£18k)
 - Other: The first allocation of the Transformation funding from Greater Manchester Health & Social Care Partnership has been received. This is an allocation of £5.2m in M9 for the remainder of 16/17 out of the full funding of £23.2m. The funding is expected to be fully utilised across the economy before the end of the financial year in line with the approved Investment Agreement.

- The CCG has a plan to close this residual gap and has reported a post mitigation risk of zero to NHSE, but still work to do to implement this plan.
- Much of the gap is closed non recurrently therefore still work to close gap recurrently in future years.
- The final year settlement is currently being finalised with the ICFT to mitigate any risk for the remainder of the year including any caused by winter pressures.
- CCG planning to:
 - Deliver 1% surplus in 2016/17
 - ▶ Keep 1% of allocation uncommitted
 - Maintain Mental Health Investment Target (formerly parity of esteem)
 - Remain within running cost allocation

Recommendations

- Note the updated M9 YTD position and projected outturn
- Acknowledge significant savings required to close the long term financial gap

The CCG figure quoted in table 1 differs from that reported to NHS England in the Non ISFE return, due to the treatment of QIPP and timing of the recovery plan. This is to ensure consistency of reporting across the Integrated Commissioning Fund, for both CCG and Local Authority. This is presentational only and does not affect the underlying position. It has been agreed at Single Commissioning Board, that all financial gaps (including QIPP) should be treated as a deficit until the savings have been achieved (i.e., reported as green in QIPP/recovery plans)

Key Movements & Narrative: CCG

Acute Provider Drilldown

- **ICFT**: The year end settlement is currently being finalised which will mitigate against any overspend on budget.
- **Central Manchester**: Adverse movement of the full year forecast (£92k) due to recognising the reduction in readmissions
- Stockport: Adverse movement of the full year forecast (£23k) due to additional funding for RTT pressures (£60k). Underspends on Critical Care & Neuro rehab have partially offset this by £27k.
- **SRFT:** Adverse movement of Year To Date position due to Pain Management (£45k) and Outpatients (£15k).
- **UHSM:** Adverse movement of Year To Date position due to Outpatients (£25k) and Critical Care (£33k).

		Year to Date	
Provider	Budget	Actual	Variance
Provider	£000's	£000's	£000's
TFT	95,504	95,192	312
CMFT	16,796	17,463	(667)
SFT	8,965	8,301	664
UHSM	4,863	5,107	(244)
PAHT	3,024	2,916	108
SRFT	2,412	2,531	(119)
WWL	1,045	924	121
BOLT	60	60	()
Total	132,668	132,492	176

	Forecast	
Budget	Actual	Variance
£000's	£000's	£000's
126,575	126,575	()
22,280	23,150	(870)
11,969	11,138	831
6,568	6,813	(246)
4,029	3,865	164
3,226	3,468	(242)
1,409	1,258	151
80	80	
176,135	176,346	(212)

• **NWAS:** Additional £20k included in Year end forecast regarding PES based on a current Year to Date trend of over performance.

Acute ICFT Movement

- The year end position once finalised will take account of expected activity levels and provide certainty to both the ICFT and the CCG for 2016-17 year end.
- We continue to monitor activity trends and the below graph shows a marked increased in activity from October. This is due to an increased number of long length of stay discharges and emergency admissions which is in line with the national pressures recently reported.

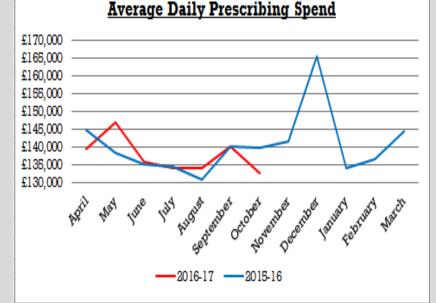


Key Movements & Narrative: CCG

Prescribing

- As reported last month a detailed review of prescribing costs identified an additional pressure on the budget of £757k. Along with a cross-year pressure identified earlier in the year this created a total pressure on the budget of £1m. The additional pressure was caused by an adjustment relating to the number of prescribing days in the year and an increase in volumes of 4.28% in T&G compared to 2.84% in GM and 2.08% nationally.
- Achieving the revised position is still going to be dependent on the successful implementation and continued adherence to a number of initiatives implemented by the Medicines Management Team especially those designed to reduce the numbers of repeat prescriptions and those that will identify cheaper alternative items.
- The latest full month's data has shown encouraging signs that the revised position will be attainable. The latest data shows there was a national and GM reduction in prescribing costs of 1.15% and 3.4% respectively. A T&G reduction of 5.7% in the same period is promising but this improved performance needs to be replicated every month in order to ensure no additional pressure is created in later months.
- Some of this reduction may be attributable to centrally controlled price changes in Category M items which resulted in 52% of items being subject to a price increase and 48% being subject to a price reduction. This is indicative of one of the variables that continue to make accurately forecasting the prescribing position difficult and results in a situation where this particular cost centre will be subject to a degree of volatility that others are not.

 Any savings that can be achieved should be noted in the context of an average daily spend on prescribing of around £130-140k. The figures below show the actual spend each day in T&G on prescribing and show the improved performance for the most recent month for which data is available but it also highlights the volatility of how the spending varies from month to month. In particular it highlights the impact on spend if there is a peak similar to December 2015.



 Any future pressure on the position can be mitigated by sustained efforts to reduce volumes and control spend. Delivering savings from QIPP in excess of current predictions could even lead to a reduction in the total spend on prescribing. It is an area that remains in need of a high level of focus.

Tameside MBC

	Yea	Year to Date (M9)			Year End				Movement		
	£000's	<u>£000's</u>	<u>£000's</u>		£000's	<u>£000's</u>	<u>£000's</u>		<u>£000's</u>	<u>£000's</u>	
									Previous	Movement	
Description	Budget	<u>Actual</u>	<u>Variance</u>		Budget	Forecast	<u>Variance</u>		<u>Month</u>	<u>in Month</u>	
Adult Social Care & Early Intervention	31,270	32,173	(903)		41,995	43,199	(1,204)		(1,336)	132	
Childrens Services, Strategy & Early Intervention	18,946	20,620	(1,674)		25,877	28,109	(2,232)		(1,914)	(318)	
Public Health	1,720	1,775	(55)		1,400	1,473	(73)		(121)	48	
TMBC Total	51,936	54,568	(2,632)		69,272	72,781	(3,509)		(3,371)	(138)	

Overall the TMBC year end forecast position has deteriorated by £138k since period 8 increasing the projected year end variance to c.£3.5m, 7.3% on the current year's net budget. An explanation of the movements and other background is provided below:

Children's Social Care

 Additional temporary social workers recruited to address caseload capacity (£0.5m), additional external residential and foster care placements (£0.6m), planned savings initiatives yet to be realised (£0.9m), additional minor variations (£0.2m).

Public Health

• Temporary resourcing of the Active Tameside capital investment prudential borrowing repayments is currently under consideration. The temporary resourcing arrangements will be replaced in future years via the recurrent savings achieved from a significant reduction to the annual management fee payable. Currently a borrowing repayment of £0.186m is included within the projected outturn estimate. This is partial offset by underspends elsewhere within Public Health.

Adult Social Care

- Changes to the regulations associated with the Better Care Fund has created a pressure of £1.12m
- CCTV The service has a projected deficit of £0.100m. A service review is underway in this area to reduce expenditure where appropriate. Updates will be provided in future reports.

Recommendations

- Note the updated M9 YTD position and projected outturn
- Acknowledge risk in relation to achieving balanced 2016/17 financial position

Tameside and Glossop Integrated Care NHS Foundation Trust

	Year to Date			Yea	cast		Movement		
							Prev	ious	Movement in
	Budget	Actual	Variance	Budget	Actual	Variance	Mo	nth	Month
Description	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'0	00s	£'000s
Income	152,244	154,755	2,512	202,785	205,645	2,860	205	5,137	(508)
Expenditure	158,174	161,164	(2,989)	210,707	214,254	(3,547)	213	3,749	(505)
EBITDA	(5,931)	(6,408)	(478)	(7,922)	(8,609)	(687)	(8	,609)	0
Net Deficit after									
Exceptional Costs	(12,971)	(12,881)	90	(17,300)	(17,300)	0	(17,	300)	0

Financial Position

- For the 9 months to December 2016, the ICO is delivering a deficit of £12.9m, broadly on line with plan.
- The year end forecast is for the planned £17.3m deficit, and assumes the following;
 - Delivery of the £7.8m Efficiency savings target
 - Delivery of the Tameside and Glossop CCG block contract
 - Small over performance on all associate PbR contracts
 - Financial and performance criteria for receipt of £6.5m Sustainability and Transformation funding (STF) is achieved.
 - £17.3m working capital/loan is received to fund the deficit position.
 - Agency expenditure does not increase significantly.

Key Risks to the Financial Position

- Increased expenditure on agency staffing.
- Additional unplanned expenditure due to winter pressures.
- Savings relating to transformation schemes delayed.
- Performance targets requiring unplanned expenditure to use the independent sector.

Key Information

 The Trust is appealing the reduction of STF funding relating to delivery of the A&E trajectory (c.£450k). If this is successful, the Trust's deficit will reduce by this amount.

The Financial Gap

Establishing the Financial Gap

- The current financial gap across the health and social care economy in Tameside & Glossop is estimated to be £70.2m by 2020/21.
- In 2016/17 the opening gap was £45.7m which consists of £13.5m CCG, £8m council and £24.2m ICO. Successful progress towards closing these gaps has been made throughout the year.
- The provider gap represents the underlying recurrent financial position at THFT. However, the Trust is in receipt of £6.9m sustainability funding in 2016/17 resulting in a planned deficit of £17.3m.
- Work is underway to identify future opportunities for savings and an updated position for 2017/18 and subsequent years will be presented after budget setting is completed in January 2017.

T&G Projected Financial Gap	2016-17 £'000	2017-18 £'000	2018-19 £'000	2019-20 £'000	2020-21 £'000
Tameside MBC	8,000	22,114	22,601	21,752	25,837
Tameside & Glossop CCG	13,500	22,485	22,083	22,209	18,547
Tameside FT (after CIP)	24,200	24,380	24,686	25,049	25,786
Economy Wide Gap	45,700	68,979	69,370	69,010	70,170

Closing the Financial Gap: CCG

• The CCG recovery plan submitted to NHS England which demonstrates initiatives which would allow the CCG to close the £13.5m 16/17 gap and deliver required surplus.

Summary of QIPP		20:	16/17		2017/18					
£'000s	R	А	G	Total	R	Α	G	Total		
PRIORITY 1 - Prescribing	0	0	0	0	1,123	1,393	0	2,516		
PRIORITY 2 - Effective Use of Resources / Prior Approval	0	0	0	0	0	1,500	0	1,500		
PRIORITY 3 - Demand Management	0	0	500	500	828	5,318	0	6,146		
PRIORITY 4 - Single Commissioning Function Responsibilities	0	0	553	553	0	486	523	1,009		
PRIORITY 5 - Back Office Functions and Enabling Schemes	0	0	0	0	500	1,000	0	1,500		
PRIORITY 6 - Governance	0	0	0	0	0	100	0	100		
Other Schemes in progress/achieved:	R	А	G	Total	R	Α	G	Total		
Neighbourhoods	0	0	459	459	0	74	681	755		
Primary Care	0	0	698	698	0	312	1,000	1,312		
Mental Health	0	0	232	232	500	0	232	732		
Acute Services - Elective	0	0	500	500	500	59	500	1,059		
Enabling Schemes to facilitate QIPP	0	0	0	0	0	1,682	0	1,682		
Technical Finance & Reserves	0	0	6,167	6,167	0	0	4,382	4,382		
Other efficiencies	0	0	3,054	3,054	4,388	0	28	4,416		
Grand Total:	0	0	12,164	12,164	7,839	11,923	7,346	27,108		
Including adjustment for Optimum Bias:	_	1	12,164	12,164	784	5,961	7,346	14,091		
10% of red rated schemes will be realised			12,104	12,104	704	3,301	7,340	14,051		
50% of amber rated schemes will be realised										
100% of green rated schemes will be realised										
100% of green fated schemes will be realised										
QIPP Target			I	13,500			[23,900		
Savings still to find assuming application of optimism bias:				1,336			[9,809		
Other Actions to close the gap in 2016-17 (to be confirmed)			I	1,336						
Outstanding QIPP at close of 2016-17:				0						

- Since last month all schemes are currently showing as green but there is still a gap of £1.336m
- Several schemes have been identified (rates reimbursement and reprofiling of the transformation fund) which will cover the gap and it is expected that all these schemes will produce the full benefits identified by the end of month 10.
- A number of QIPP schemes for 2016/17 are non-recurrent so work continues to identify schemes for 2017/18.

Recurrent vs Non Recurrent	2016/17	2017/18
Recurrent Savings	1,744	21,158
Red	0	7,011
Amber	0	11,683
Green	1,744	2,464
Non Recurrent Savings	10,419	5,950
Red	0	828
Amber	0	240
Green	10,419	4,882
Total	12,164	27,108

A more detailed breakdown of QIPP schemes is included as appendix A.

Closing the Financial Gap - TMBC

Scheme Detail	R	A	G	Total	Notes
Public Health			217	217	Planned reduction to the annual management fee payable to Active Tameside and additional incidental savings
- savings found					delivered within the service
Public Health			169	169	A reduction in the Community Services contract value has been agreed with Tameside ICFT
- savings found					
Public Health - additional			49	49	
resource (projected cost					
pressures)					
Public Health - reduction in			456	456	The capital financing figure in 16-17 has reduced due to a rephasing of works to reconfigure the Active Tameside
estimated capital financing					estate
repayments (Active Tameside)					
Public Health - negotiated			48	48	
reduction in Public Health					
Network subscription					
Public Health		442		442	
- savings still to find					
Adult Social Care -			3,908	3,908	
additional resource (projected					
cost pressures)					
Adult Social Care - saving			101	101	
found, reduction in Dowrie costs					
Adult Social Care	896			896	The Council is currently in the process of identifying further options to address the projected financial gap that is
- savings still to find					expected to arise during 2016/17. Updates will be reported within future monitoring reports.
Childrens Social Care			120	120	Reduction to inflationary increases that were projected to materialise during 2016/17.
- savings found					
Childrens Social Care -			1,215	1,215	
additional resource (projected					
cost pressures					
Childrens Social Care	379			379	
- savings still to find					
TOTAL	1,275	442	6,283	8,000	

Integrated Commissioning Fund 2016/17

	Yea	Year to Date (M9)				
	£000's	£000's	£000's			
Description	Budget	Actual	Variance			
Acute	148,541	148,290	251			
Mental Health	21,694	21,688	6			
Primary Care	61,535	62,313	(778)			
Continuing Care	8,740	9,071	(331)			
Community	20,560	20,571	(11)			
Other	20,057	20,179	(122)			
QIPP						
CCG Running Costs	3,258	3,372	(114)			
CCG Sub Total	284,385	285,484	(1,099)			
Adult Social Care & Early Intervention	31,270	32,173	(903)			
Childrens Services, Strategy & Early Intervention	18,946	20,620	(1,674)			
Public Health	1,720	1,775	(55)			
TMBC Sub Total *	51,936	54,568	(2,632)			
GRAND TOTAL **	336,321	340,052	(3,731)			

Year End					
£000's	£000's	£000's			
Budget	Forecast	Variance			
197,343	197,575	(232)			
28,993	29,018	(25)			
81,655	82,754	(1,099)			
12,251	12,651	(400)			
27,493	27,511	(18)			
31,893	30,735	1,158			
	1,336	(1,336)			
5,162	4,546	616			
384,790	386,126	(1,336)			
41,995	43,199	(1,204)			
25,877	28,109	(2,232)			
1,400	1,473	(73)			
69,272	72,781	(3,509)			
454,062	458,907	(4,845)			

Movement					
<u>£000's</u>	<u>£000's</u>				
Previous	Movement				
Month	in Month				
121	(353)				
(55)	30				
(1,081)	(18)				
(386)	(14)				
39	(57)				
758	400				
(2,517)	1,181				
604	12				
(2,517)	1,181				
(1,336)	132				
(1,914)	(318)				
(121)	48				
(3,371)	(138)				
(5,888)	1,043				

Better Care Fund

Tameside Better Care Fund

- Tameside Better Care Fund plan for 16/17 was approved by NHS England on 1 September 2016.
- Plan meets all requirements and funding has been released subject to spend being consistent with final approved plan.

All spend is			2016-17 budgets (£000's)		
•	Scheme name		CCG	TMBC	Total
monitored	Urgent Integrated Care Service		578	2,374	2,952
through the	IRIS		578	1,338	1,916
•	Larry Supported Discharge rearri			286	286
Integrated	Community Occupational Therapists			750	1,974
Care Fund	Localities		412	3,265	3,677
	and is being ICES (Joint Loan Store)				841
and is being					688
spent in the					2,148
•	Carers Support (in line with National				
following	Conditions of Care act related funding)		412	-	412
areas:	Carer Breaks (Adults)		412	-	412
	Primary Care (£5 per head for over 75's)		1,070	-	1,070
	Existing Grant - Disabled Facilities Grant		-	1,978	1,978
	Impact of New Care Act Duties				529
		982	-	982	
	Maintaining Services		-	4,801	4,801
	Mental health Services			2,450	2,450
	Adult Social Care - Community based				
	Services (Inc care Homes)			2,351	2,351
	Contingency		900	-	900
	Total		4,354	12,947	17,301
			Funded by (£000's)		
	NHS Tameside & Glossop CCG				15,323
	Central Funded Grants				1,978
	Total BCF Fund	\Box			17,301

Derbyshire Better Care Fund

- Derbyshire Better Care Fund for 16/17 has also been approved by NHS England.
- Plan meets all requirements and funding has been released subject to spend being consistent with final approved plan.

		Hosted by			
		DCC/Other			
Scheme name		CCG	CCGs	Total	
			£000's		
Community Home & Hospital					
Enhanced care team		-	23,138	23,138	
Reablement Services /					
Community services			18,287	18,287	
CDM & Discharge Ward			2,877	2,877	
Mental Health			1,974	1,974	
Primary Care		164	1,529	1,693	
Intergration Pump priming			8,051	8,051	
Maintaining Services		284	24,801	25,085	
Maintaining Eligibilty Criteria				-	
LCCTS		284		284	
Adult Social care			24,801	24,801	
Demographic pressures				-	
Total		448	57,519	57,967	
		Funded by (£000's)			
NHS Tameside & Glossop CCG				2,212	
Other CCGs and Central				55,755	
Total BCF Fund				57,967	

Risk and Other Issues

- The main financial risks within ICF are listed below
- Detailed registers which include further information about the risk and mitigating actions are reviewed by the Audit Committee. Copies are available on request.

Extracts From the Corporate Risk Registers	Probabilit V	Impact	Risk	RAG
The achievement of meeting the Financial Gap recurrently.	3	4	12	А
Over Performance of Acute Contract	3	4	12	А
Not spending transformation money in a way which delivers required change	2	4	8	А
Over spend against GP prescribing budgets	4	4	16	R
Over spend against Continuing Health Care budgets	2	3	6	А
Operational risk between joint working.	1	5	5	А
CCG Fail to maintain expenditure within the revenue resource limit and achieve a 1% surplus.	1	4	4	G
In year cuts to Council Grant Funding	2	3	6	А
Care Home placement costs are dependent on the current cohort of people in the system and can fluctuate throughout the year	4	4	16	R
Looked After Children placement costs are volatile and can fluctuate throughout the year	3	4	12	А
Unaccompanied Asylum Seekers	4	3	12	А
Care Home Provider Market Failure	3	5	15	R
Funded Nursing Care – impact of national changes to contribution rates	4	3	12	А

Continuing Health Care

• A full review is currently underway within the CCG to validate the current forecast. Once this has been completed a detailed review will be published if any significant variances to the forecast are identified.

Funded Nursing Care

- 40% increase in health contribution toward FNC cases has been agreed nationally. The assessment of the impact to the whole economy has been completed and the additional cost is estimated to be £189k.
- This is an interim change until December 2016 pending the outcome of a national review into FNC charges. There is an element of the rate for agency nursing staff (which could lead to a reduction of the rate in the future regional variation)

Transformation Funding

Transformation funding of £23.2m has been approved by Greater Manchester Health & Social Care Partnership. The Investment Agreement that will support the release of the funding been developed and was signed on 16th December 2016. The year 1 funding of £5.2m has now been made available to the economy. Section 2 - Care Together Economy Capital Financial Position

Tameside MBC

Scheme	Approved Capital Programm e Total	2016/2017 Allocation		re to 31 March	Outturn Variation	Scheme Comments
	£'000	£'000	£'000	£'000	£'000	
Childrens Services - In Borough Residential Prope	912	912	711	800	112	Purchase of 2 additional in-borough properties including associated property adaptations. An Edge of Care establishment is yet to be purchased
Public Health - Leisure Estate Reconfiguration	20,268	5,203	3,265	3,879	1,324	Active Dukinfield - The scheme is on budget with a confirmed opening date of 28th January 2017. Active Longendale (Total Adrenaline) - The scheme is on budget and opened on 19th November 2016. Active Hyde - Work due to start on site on February/March 2017 with completion scheduled for November/ December 2017. Denton Wellness Centre - Layout plans and development agreement being established. Facility to be completed late 2018. The programme total of all schemes includes the sum of £ 2.650 million which will be wholly financed by Active Tameside.
Adult Services - Disabled Facilities Grant - Adapta	1,978	1,978	905	1,500	478	
Total	23,158	8,093	4,881	6,179	1,914	