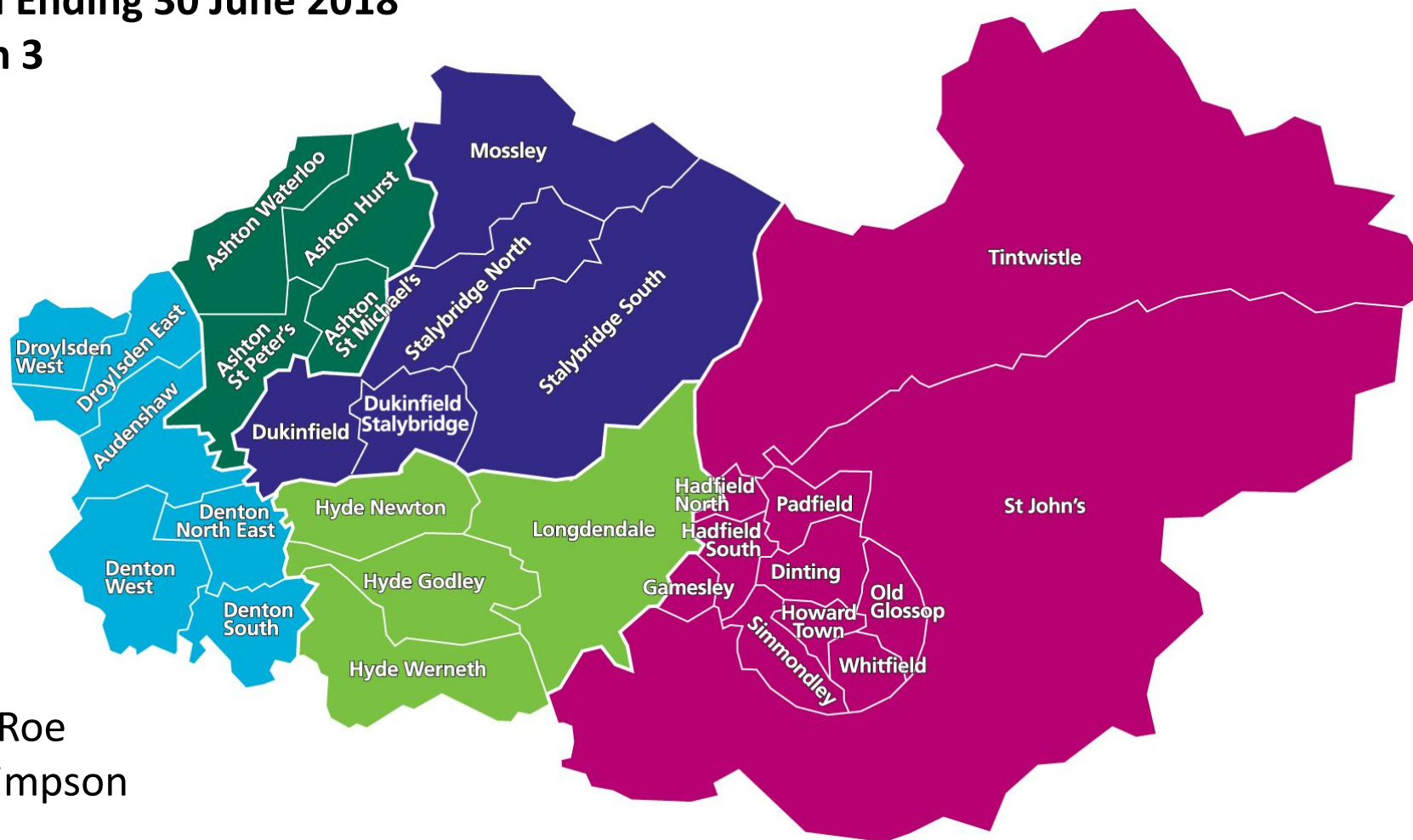


Tameside and Glossop Integrated Financial Position

financial monitoring statements

Period Ending 30 June 2018

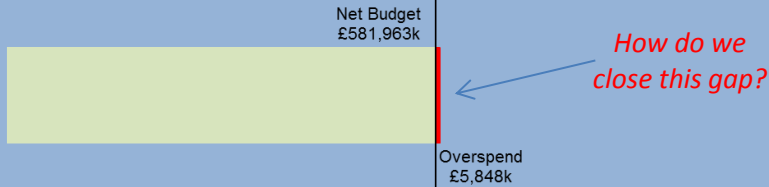
Month 3



Kathy Roe
Sam Simpson

Tameside & Glossop Integrated Economy Wide Financial Position

In 2018/19 the Tameside & Glossop economy still has a £5,848k financial gap to close



£10.9m

TEP Achieved

Savings realised in first quarter. 30% of the overall savings target for 2018/19.

£6.3m

Transformation Fund

Money available to spend in 18/19. Return sent to GMHSCP on 13th July showing all financial targets being met.

£4.4m

DTOC Funding

Non recurrent funding approved by SCB on 25th July.

£19.1m

ICFT Control Total

Agreement of Control Total by ICFT. Allowing access to sustainability funding and improved interest rates.

Message from the DOFs

In the first quarter of this year we have made meaningful progress toward the implementation of our Care Together vision. Across the economy as a whole we have realised £11m of savings and are on track to save £30m by the end of the year. Key achievements to date include:

- Ahead of trajectory for savings against Investment Fund
- Imminent agreement of ICFT financial control total
- RTT targets at met at ICFT
- Awarded HFMA finance team of the year
- In region of 320 individual savings schemes being pursued

However there is still significant financial risk in the economy, both this year and in the medium to long term. We recently submitted the latest 'roll up' to GMHSCP, this showed a 'do nothing' gap across health and social care of £101m by 20/21.

Even in a 'do something' scenario our plan showed a residual economy wide financial gap of £45m. Our economy must now come together and address this financial gap and rise to the challenge of implementing large scale transformational change that results in a clinically and financially stable system.

Over the next few months our priorities include:

- Continued negotiation with NHS Improvement in respect of our refreshed 5 year plan.
- Pursuit of capital funding to allow full implementation of our Care Together transformation programme.
- Relaunch of Targeted Efficiency Programme across the strategic commissioner to increase pace and scale of savings initiatives and continued focus on financial recovery plans for CHC and children's services.

Tameside & Glossop Integrated Commissioning Fund

- At the start of the year the opening ICF was £911m
- Budget movements since this (including transformation funding and PFI budget adjustments) have seen the gross value of the ICF increase to £950m
- After council income is taken into account the net value of the ICF is £582m.
- Detailed monitoring is done against this net position
- At present a £5.8m overspend is currently forecast against this net budget.
- The forecast outturn has improved since month 2 due to an improved TEP position, and additional income and savings in financing and corporate costs.

Forecast Position £000's	Forecast Position					Net Variance	
	Expenditure Budget	Income Budget	Net Budget	Net Forecast	Net Variance	Previous Month	Movement in Month
Acute	205,388	0	205,388	205,436	-48	23	-71
Mental Health	32,827	0	32,827	32,827	-1	0	-1
Primary Care	84,534	0	84,534	84,361	173	18	155
Continuing Care	14,569	0	14,569	17,552	-2,982	-2,990	8
Community	30,040	0	30,040	30,041	-0	-0	0
Other	22,915	0	22,915	20,057	2,859	2,949	-91
CCG TEP Shortfall (QIPP)	0	0	0	2,537	-2,537	-3,741	1,204
CCG Running Costs	5,175	0	5,175	5,175	0	0	0
Adults	82,590	-42,098	40,492	40,548	-56	-213	157
Children's Services	76,125	-29,112	47,013	50,255	-3,242	-3,215	-27
Individual Schools Budgets	127,944	-127,944	0	0	0	0	0
Population Health	16,353	-121	16,232	16,197	35	88	-53
Operations and Neighbourhoods	76,377	-25,998	50,379	50,861	-482	-765	283
Growth	45,153	-37,295	7,858	9,961	-2,103	-1,564	-539
Governance	97,679	-88,515	9,164	9,164	0	0	0
Finance & IT	5,839	-1,351	4,488	4,589	-101	0	-101
Quality and Safeguarding	355	-288	67	73	-6	0	-6
Capital and Financing	10,998	-1,360	9,638	9,225	413	0	413
Contingency	4,163	-6,823	-2,660	-3,388	728	729	-1
Corporate Costs	10,698	-6,857	3,841	2,339	1,502	0	1,502
Integrated Commissioning Fund	949,723	-367,761	581,963	587,811	-5,848	-8,681	2,833
CCG Expenditure	395,449	0	395,449	397,986	-2,537	-3,741	1,204
TMBC Expenditure	554,275	-367,761	186,514	189,825	-3,311	-4,940	1,629
Integrated Commissioning Fund	949,723	-367,761	581,963	587,811	-5,848	-8,681	2,833
A: Section 75 Services	308,841	-42,120	266,722	270,075	-3,354	-3,051	-303
B: Aligned Services	340,665	-99,118	241,547	243,255	-1,708	-5,191	3,483
C: In Collaboration Services	300,218	-226,523	73,694	74,480	-786	-439	-347
Integrated Commissioning Fund	949,723	-367,761	581,963	587,811	-5,848	-8,681	2,833

Note that while this report talks about the integrated economy wide position, it does not capture any Local Authority spend for residents of Glossop. All spend at Tameside & Glossop Clinical Commissioning Group, Tameside Metropolitan Borough Council and Tameside & Glossop Integrated Care Foundation Trust is captured. But no spend from Derbyshire County Council is included.

Tameside & Glossop Integrated Economy Financial Position

- Using the net ICF, the strategic commissioner is £13,898k overspent against profiled budgets 4at M3.
- By year end it is expected this will reduce to £5,848k.
- However in order to meet financial control totals this needs to reduced to zero. More work is required to identify and progress schemes to deliver these savings.
- The ICFT have an agreed a control total with NHSI . This means than an authorised deficit is in place.
- Current forecasts show this will be achieved.
- The economy wide deficit at year end is currently forecast to be £24,997k against a budget of £19,149k
- Savings of £5,848k are required to meet the economy wide target.

Forecast Position £000's	YTD Position			Forecast Position			Variance	
	Budget	Actual	Variance	Budget	Forecast	Variance	Previous Month	Movement in Month
Acute	50,489	51,189	-701	205,388	205,436	-48	23	-71
Mental Health	7,971	7,972	-1	32,827	32,827	-1	0	-1
Primary Care	20,050	19,906	143	84,534	84,361	173	18	155
Continuing Care	3,276	3,878	-603	14,569	17,552	-2,982	-2,990	8
Community	7,509	7,443	66	30,040	30,041	-0	-0	0
Other	7,513	6,427	1,085	22,915	20,057	2,859	2,949	-91
CCG TEP Shortfall (QIPP)	0	0	0	0	2,537	-2,537	-3,741	1,204
CCG Running Costs	993	984	9	5,175	5,175	0	0	0
Adults	10,123	11,573	-1,450	40,492	40,548	-56	-213	157
Children's Services	11,753	14,050	-2,297	47,013	50,255	-3,242	-3,215	-27
Population Health	4,058	8,119	-4,061	16,232	16,197	35	88	-53
Operations and Neighbourhoods	12,595	14,480	-1,885	50,379	50,861	-482	-765	283
Growth	1,965	4,912	-2,947	7,858	9,961	-2,103	-1,564	-539
Governance	2,291	2,752	-461	9,164	9,164	0	0	0
Finance & IT	1,122	1,511	-389	4,488	4,589	-101	0	-101
Quality and Safeguarding	17	81	-65	67	73	-6	0	-6
Capital and Financing	2,410	0	2,410	9,638	9,225	413	0	413
Contingency	-665	1,027	-1,692	-2,660	-3,388	728	729	-1
Corporate Costs	960	2,022	-1,061	3,841	2,339	1,502	0	1,502
Integrated Commissioning Fund	144,428	158,326	-13,898	581,963	587,811	-5,848	-8,681	2,833
CCG Expenditure	97,800	97,800	0	395,449	397,986	-2,537	-3,741	1,204
TMBC Expenditure	46,628	60,526	-13,898	186,514	189,825	-3,311	-4,940	1,629
Integrated Commissioning Fund	144,428	158,326	-13,898	581,963	587,811	-5,848	-8,681	2,833
A: Section 75 Services	66,442	70,714	-4,273	266,722	270,075	-3,354	-3,051	-303
B: Aligned Services	59,934	66,666	-6,732	241,547	243,255	-1,708	-5,191	3,483
C: In Collaboration Services	18,053	20,946	-2,893	73,694	74,480	-786	-439	-347
Integrated Commissioning Fund	144,428	158,326	-13,898	581,963	587,811	-5,848	-8,681	2,833
ICFT - post PSF Agreed Deficit	-7,069	-7,047	22	-19,149	-19,149	0		
Economy Wide In Year Deficit	-7,069	-20,945	-13,876	-19,149	-24,997	-5,848		

Tameside Integrated Care Foundation Trust Financial Position

Summary

- For the financial period to the **30th June 2018**, the Trust has reported a net deficit of c.£2.0m (Post PSF), which is c.£10k worse than plan.
- Cumulatively the Trust has reported a net deficit of c.£7.1m (post PSF), which is c.£22k better than plan.
- The Trust delivered c.£917k of savings in month, this is an overachievement against target by c.£0.3m in month and c.£0.7m cumulatively.
- To date the Trust has spent c.£2.1m on Agency spend, against a plan of £1.9m; based on this run rate, we spend within the agency cap of £9.5m.

Financial performance metric	Month 3			YTD			Outturn
	Plan (£000)	Actual (£000)	Variance (£000)	Plan (£000)	Actual (£000)	Variance (£000)	Plan (£000)
Pre PSF Normalised Surplus/(Deficit)	-£2,606	-£2,616	-£10	-£7,702	-£7,680	£22	-£23,370
Provider Sustainability Fund	£633	£633	£0	£633	£633	£0	£4,221
Post PSF Normalised Surplus/ (Deficit)	-£1,973	-£1,983	-£10	-£7,069	-£7,047	£22	-£19,149
Capital Expenditure	£202	£224	-£22	£724	£434	£290	£5,600
Cash and Equivalents	£1,220	£1,308	£88				
Trust Efficiency Savings	£647	£917	£270	£1,912	£2,650	£738	£13,000
Use of Resources Metric		3			3		4

Key risks

- **Control Total** – The Trust now has an agreed control for 2018/19 of c£19.2m, this assumes the Trust will be in receipt of the full Provider Sustainability fund and deliver the performance and financial requirements set by NHSI.
- **Provider Sustainability Fund** - The Trust must achieve its financial plan at the end of each quarter to achieve 70% of the PSF, the remainder is predicated on achievement of the A&E target for each quarter.
- **TEP** – The Trust is currently forecasting an underachievement against its in year TEP delivery of **c£1.7m** and recurrently of **c£2.4m**. **Failure to achieve TEP will result in the Trust not achieving its plan**. Work is on-going with Theme groups to develop high risk schemes and generate hopper ideas to improve this forecast position.
- **Loan Liability** - The Trust currently has a loan of **£75.4m** at the end of 2017/18. The Trust may be required to repay part of this liability in 2018. To do this the Trust would require a new loan, now the Trust has agreed a control total this now would be at the standard borrowing rate of 1.5%.

Strategic Commissioner Financial Position



£3,242k

Children's Services

Forecast overspend of £3.242 million due mainly to additional placement costs for Looked After Children, and pressures in Education.



£2,982k

Continuing Care

Growth in individualised packages of care remains the CCGs biggest financial risk with an overspend of £2,982k against core budgets.



£900k

Carillion

Facing significant cost pressures following the demise of Carillion due to fees being charged by the liquidator.



£800k

Airport Dividend

Forecast built into position based on actuals in 17/18. Dividend is not guaranteed, but forecast will be reviewed on receipt of interim dividend in December 2018

Individualised Commissioning



- Growth in the cost and volume of individualised packages of care is the amongst the biggest financial risks facing the Strategic Commissioner.
- Expenditure growth in this area was 14% in 2017/18, with similar double digit growth rates seen over the previous two years.
- Spend in T&G is significantly higher on a per capita basis when benchmarked against other CCGs in GM.
- A continuation of historic growth rates is not financially sustainable and should not be inevitable that T&G is an outlier against our peers.
- Currently forecasting £2,982k overspend in 2018/19 against core CHC budgets.
- A financial recovery plan is now in place, with the next detailed update due to be presented at Finance & QIPP Assurance Group in August.

Operations and Neighbourhoods



- Currently forecasting that budget will overspend by £482k.
- The new Car parking provision around the hospital on Darnton Road was expected to generate additional income of £500k per annum. Delays in the construction of the spaces has resulted in the non delivery of the saving in 2018/19 of £275k. There have been additional pressures of £207k due to waste disposal levy and construction costs

Children's Services



- The Council continues to experience extraordinary increases in demand for Children's Social Care Services, placing significant pressures on staff and resources. The number of Looked after Children has gradually increased from 612 at 31 March 2018 to 640 at 30 June 2018.
- Despite the additional financial investment in the service in 2017/18 and 2018/19, the service is projecting to exceed the approved budget by £2.990m; mainly due to additional placement costs £3.012m and other minor variations across the service below £0.050m (£22k).
- It should be noted that the 2018/19 placements budget was based on the level of Looked After Children at December 2017 (585) ; the current level at 30 June 2018 is 640; a resulting increase of 55 (9.4%). This should also be considered alongside the current average weekly cost of placements in the independent sector with residential at £3,628 and foster care £765.
- There are also pressures arising from increased demand for Special Education Needs Transport (£0.3m) and an increase in statutory work regarding Education Healthcare Plans (EHCP) Assessments (£0.3m), which is being partially offset by some savings in other areas.

Strategic Commissioner Financial Position

Growth Directorate

R

- Following the liquidation of Carillion the appointed liquidator PwC has been managing the contracts to enable the smooth transfer to other providers. The costs of this service were not budgeted for, and will continue to be incurred until everything is finalised. PwC are charging a weekly management fee which has increased significantly since period 2, and this is reflected in the deterioration of the forecast to a cost pressure of £0.9m. The Council is currently disputing this increase.
- Significant pressures are also being experienced in relation to loss of income resulting in a forecast overspend of £0.7m. Budgeted rental income is not being recovered due to the sale of assets and utilisation of assets for Council purposes, income from advertising is currently forecast to be less than budget, and income from Building Control and Development Control is currently forecast to be less than budget due to a reduction in numbers of applications.
- Non delivery of savings is also creating further pressures of £0.5m . The additional Services contract with the Local Education Partnership (LEP) was due to end at the end of October 2018, it was anticipated that savings as a result of a new provision would be achievable . As a result of the collapse of Carillion the existing contract with the LEP has been extended until July 2019 to enable a full review of the Service. Savings anticipated will therefore not materialise in 2018/19. In addition, the purchase of the Plantation Industrial Estate is no longer proceeding and the anticipated additional income will not be realised.

Acute

A

- Only 2 months of 18/19 activity data are currently available, making it difficult to establish trends in activity. We have seen are small pressures at some of the associate providers , but these do not pose a significant concern at this stage in the year.
- However overspend at Manchester FT is of more concern. There is a £300k overspend in the first two months of the year:
 - £169k of this relates to excess bed days and critical care, both areas where spend can be very volatile, driven by the discharge of high cost long length of stay patients.

- Other areas contributing to the pressures on the Manchester FT contract include macular (£86k pressure) and outpatients with an overspend of £115k. Time will tell if this is a non recurrent anomaly or part of a sustained trend, but in response to the YTD pressure the QIPP forecast for associate providers has been reduced by £300k to £1,000k.
- Underspend on independent sector contracts (mainly cataracts and musculoskeletal) offsets much of the associate provider pressure.

Capital Financing, Contingency and Corporate Costs

G

- £0.4m Capital Financing additional investment income - The 2018/19 budget did not include any budget for additional investment income relating to the Manchester Airport Investment approved by Executive Cabinet in February 2017 due to uncertainty around the timing of the investment. The forecast reflects the estimated additional interest now expected as a result of investment drawdowns in July and December 2018.
- £0.7m Contingency – Additional Adult Social Care grant income notified after the 2018/19 budget was set. The grant has been allocated to contingency pending decisions regarding utilisation.
- £1.5m Corporate Cost savings and additional income. Savings are anticipated on Pension Increase Act contributions (£0.3m) and the contribution to the Association of Greater Manchester Authorities (£0.4m). The projected level of income regarding the Manchester Airport dividend has been calculated in line with the dividend payments received during 2017/18, increasing forecast income by £0.8m. The dividend is not guaranteed and the forecast will be reviewed on receipt of the 18/19 interim dividend, due in December 2018.

Primary Care

G

- £590k released to TEP this month for prescribing, which relates to cross year benefit from higher than expected achievement against schemes in February and March.
- At time of writing we only have April data from 18/19, but early indications are encouraging and on the assumption the trend continues we will be in a strong position to bank further QIPP savings next month.

TEP – Targeted/Trust Efficiency Plan



£1,240k

Cross Year Benefit

Impact from 17/18 calculated and transacted. Combination of both pressures and benefits. Net effect is positive for the CCG position.



£300k

Associate Providers

Targets set on the basis of stopping all growth. YTD overspend (particularly on outpatients and critical care) has reduced expected TEP.



£313k

Facilities Management

Following collapse of Carillion the Local Education Partnership has been extended. Forecast savings from re-tendering this service will therefore be delayed.



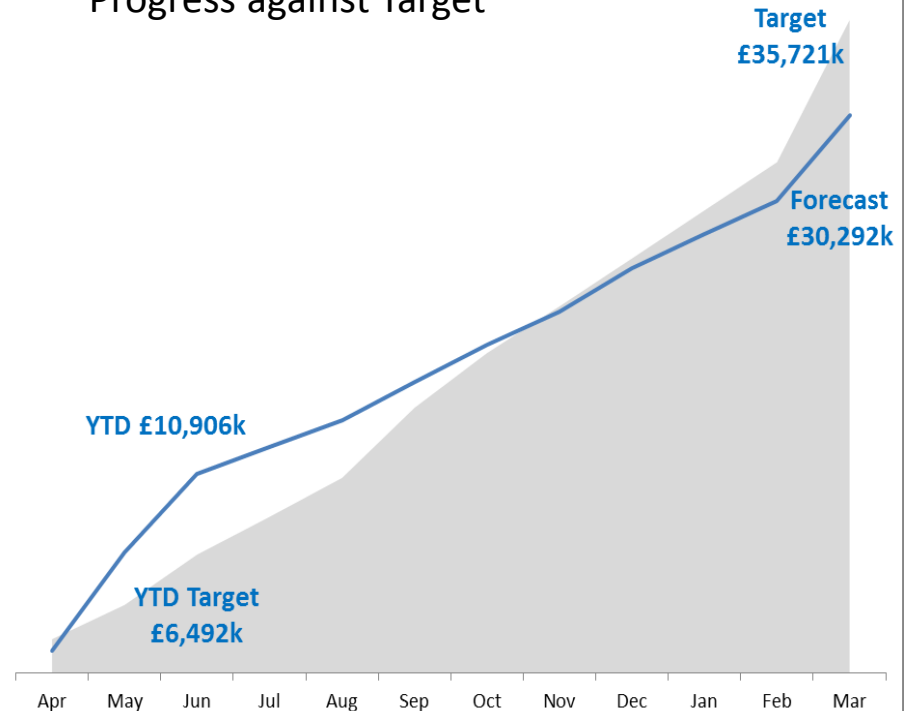
£130k

Nursing

Increase of £130k in expected savings for nursing within the ICFT, primarily driven by non recurrent savings on vacant posts.

- The economy wide savings target for 2018/19 is £35,721k:
 - Commissioner £22,919k (£19,800k CCG & £3,119k TMBC)
 - Provider £12,801k
- Against this target, £10,906k of savings have been realised in the first quarter, 30% of the required savings
- Expected savings by the end of the year are £30,292k, a shortfall of £5,429k against target.
- More work is required to identify new schemes and turn red and amber schemes green. As things stand we would need to fully deliver all of the amber rated schemes and half of the red rated schemes to fully close the gap.
- £17,828 (59%) of these savings are expected to be delivered recurrently
- A sample of the most significant changes over the last month are highlighted in the boxes above. Because of early realisation of non recurrent schemes, we are significantly ahead of the planned savings trajectory at M3, but unless new schemes are identified we still struggle to maintain this performance in the months to come.

Progress against Target



TEP – Targeted/Trust Efficiency Plan

Organisation	High Risk	Medium Risk	Low Risk	Savings Posted	Total	Opening Target	Post Bias Expected Saving	Post Bias Variance
CCG	2,330	7,672	5,595	7,599	23,196	19,801	17,263	(2,538)
TMBC	1,071	602	790	656	3,119	3,119	1,854	(1,265)
Strategic Commissioner	3,401	8,274	6,385	8,255	26,315	22,920	19,117	(3,803)
ICFT	2,111	1,903	6,622	2,650	13,285	12,801	11,174	(1,627)
Economy Total	5,512	10,176	13,007	10,906	39,600	35,721	30,292	(5,429)

Org	Theme	High Risk	Medium Risk	Low Risk	Savings Posted	Total	Opening Target	Post Bias Expected Saving	Post Bias Variance
CCG	Emerging Pipeline Schemes	2,150	35	0	0	2,185	3,274	233	(3,041)
	GP Prescribing	180	1,640	180	590	2,590	2,000	1,608	(392)
	Individualised Commissioning Recovery Plan	0	750	249	83	1,082	1,327	707	(620)
	Other Established Schemes	0	2,247	443	1,458	4,148	4,248	3,025	(1,223)
	Tameside ICFT	0	0	1,860	620	2,480	2,480	2,480	0
	Technical Financial Adjustments	0	3,000	2,863	4,848	10,711	6,472	9,211	2,739
CCG Total	2,330	7,672	5,595	7,599	23,196	19,801	17,263	(2,538)	
TMBC	Adults	213	272	12	200	697	697	369	(328)
	Growth	533	25	340	0	898	898	406	(492)
	Finance & IT	50	0	0	122	172	172	127	(45)
	Governance	0	0	129	25	154	154	154	0
	Childrens (Learning)	0	0	90	0	90	90	90	0
	Operations & Neighbourhoods	275	305	0	0	580	580	180	(400)
	Pop. Health	0	0	219	309	528	528	528	0
TMBC Total	1,071	602	790	656	3,119	3,119	1,854	(1,265)	
Strategic Commissioner Total	3,401	8,274	6,385	8,255	26,315	22,920	19,117	(3,803)	
ICFT	Corporate	0	169	437	360	966	1,100	966	(134)
	Demand Management	662	117	670	213	1,663	1,631	1,000	(630)
	Estates	89	50	232	65	436	450	347	(103)
	Finance Improvement Team	290	300	648	316	1,554	1,067	1,264	198
	Medical Staffing	375	348	0	24	747	1,103	372	(731)
	Nursing	321	66	644	324	1,355	1,250	1,034	(216)
	Paperlite	117	71	35	16	238	250	121	(129)
	Pharmacy	0	221	187	23	431	450	431	(19)
	Procurement	257	411	89	19	776	752	519	(233)
	Transformation Schemes	0	0	2,500	750	3,250	3,400	3,250	(150)
	Technical Target	0	150	131	44	325	0	325	325
	Vacancy Factor	0	0	1,048	496	1,544	1,350	1,544	194
	ICFT Total	2,111	1,903	6,622	2,650	13,285	12,801	11,174	(1,627)
Economy Total	5,512	10,176	13,007	10,906	39,600	35,721	30,292	(5,429)	

Mental Health – Deep Dive

Mental Health Investment Plan				
Source of Funding	2018/19 £000	2019/20 £000	2020/21 £000	2021/22 £000
Baseline budgets	41,389	42,290	43,739	44,626
GM MH Transformation Funding	219	438	438	0
Care Together Transformation Funding	187	280	280	93
Local Authority Transformation Funding	389	432	0	0
Total Source of Funds:	42,184	43,440	44,457	44,719

PH Investment Fund - Health and Wellbeing College	60	80	20	0
PH Investment Fund - Employment Support Workers	44	175	175	131
PH Investment Fund MH Key Workers	25	100	100	75
Self-management Education budget (CCG baseline)	27	27	27	27
Total Source of Funds including Public Health	42,340	43,822	44,779	44,952

Application of MH Funding	2018/19 £000	2019/20 £000	2020/21 £000	2021/22 £000
Committed MH Expenditure in Baseline Budgets				
Pennine Care FT core contract	23,341	23,574	23,810	24,048
Individualised commissioning	6,640	6,796	7,020	7,184
Prescribing	3,456	3,551	3,649	3,749
Other	4,954	5,472	5,421	3,822
Total Commitments:	38,391	39,393	39,900	38,803

Proposed New Mental Health Investment	2018/19 £000	2019/20 £000	2020/21 £000	2021/22 £000
Increasing access to MH support for children & young people	308	554	804	1,552
IAPT Plus/Psychological therapies	550	640	740	830
Early Intervention in Psychosis	180	350	450	450
Neighbourhood Developments	208	550	550	571
AMPH, Recovery	211	251	251	251
Mental Health Crisis	478	833	833	1,268
LD Transforming Care	200	200	200	200
Neurodevelopmental Adult	70	170	170	170
Dementia in neighbourhoods	134	275	275	275
Specialist Perinatal Infant MH	0	224	224	224
Health and Well-being College	60	107	107	107
PH Investment Fund MH Key Workers	25	100	100	75
MH Employment Support Workers	25	175	175	175
Total Proposed New MH Investment:	2,449	4,429	4,879	6,148
Grand Total of Proposed MH Expenditure/Investment:	40,840	43,822	44,779	44,951

Slippage/(Shortfall) in MH Funding:	1,500	0	0	0
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Footnote:

Additional MH Funding Approved January SCB over and above POE	1,777	1,950	1,844	3,329
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Update and Overview

GMHSCP have endorsed the GM MH finance sub group that is chaired by T&G CCG. The focus of this group is to oversee the delivery of the specific contracts, business intelligence and funding release across localities (including meeting the MHIS) across Greater Manchester CCGs, Local Authorities and Provider Trusts. This group is a formal subgroup of the GM CCG CFOs who will hold each other to account for the delivery in MH services.

Since the last update in October 2017, a number of agreements have been concluded. These are;

- Costing principals across the 5 core CCGs with Pennine Care have been agreed.
- CCGs agreed to support and fund the IG beds for quarter 4 of 17/18, of which £33k was T&G share.
- 12 IG beds at PCFT to be commissioned for a further 12 months until March 2019.
- PCFT agreed to credit all 121 Obs invoices relating to 2017/18, c£70k.
- The current investment plan (tabled to the left) does not include anything towards PCFT sustainability request. However the CCG has invested an additional £400k into the core contract for 121 Obs/Safer Staffing in 2018/19.
- Work is progressing between the CCG and LA for scoping all out of area placements and the categorisation of needs and local provisions
- Not all elements of the 5YFV have been approved and will be subject to further business case and SCB approval.
- LD Transforming Care – NHSE have confirmed that a new process is being developed, which will add some clarity around the criteria for eligibility, since the CCG had 2 cases for funding rejected.
- PCFT CQUIN 17/18 – The CCG is in the process of finalising the CQUIN performance with PCFT. As such monies due back are not included in the current financial position. There is likely to be a return to T&G of anything between £59k to £169k dependent on final reconciliations.

Mental Health – Deep Dive

QIPP Refresh

In January 2018 the MH investment plan went to SCB for approval to close the funding gap in order to meet the 5YFV and MHIS. The gap in 18/19 started at £1.7m which took the total additional recurrent investment into Mental Health to be £2.5m. Since then there has been significant delays in recruitment and delivery of service plans. As a result, the refreshed plans identify an in-year non-recurrent slippage of £0.6m. This has been moved to QIPP in Month 2 and is now banked. A further £0.4m towards QIPP is expected over the next couple of months on a non-recurrent basis and will be green rag rated with a further £1m QIPP in MH as amber.

Challenges and Risk

In order to deliver both the MHIS and 5YFV, there still remains a number of challenges and risks associated with the delivery of these plans. This includes, but is not exhausted to;

- Funding assumed over the next 4 years with long term recurrent commitments
- Recruitment
- Increasing access in line with national targets.
- Delivering community eating disorders access/waiting time standards.
- SLR (Service Line Reporting) Refresh is due and the unknown impact of this.
- Procurement and the ability to stimulate local markets
- National repatriation agenda and OOA placement. This should deliver longer term savings but could have short term financial pressures due to new estates/capital costs.
- Increasing evidence based outcomes in mental health.
- GM Crisis Care model and delivery

Key Priorities for 2018/19

GM MH Group - 5 Principal Objectives		RAG
1	Support commissioner & provider colleagues to deliver 5YFVMH objectives GMMH Investment Strategy for GM, including GMTF	G
2	Re-basing historic MH block contracts and unpicking historic cross-funding across 10 GM localities, including SLR and alignment of costs to service specs	R
3	Development of MH finance and activity schedules for GM MH contracts, ensuring compliance with NHS guidance	A
4	Vfm review of GM MH OOPs: (i) NHS organisations within GM, (ii) NHS org outside GM, and (iii) non-NHS/private sector orgs.	A
5	Support development of new payment & contract models for MH services across GM in line with guidance [discourages use of unaccountable block contracts and encourages models that rewards and incentivises providers, linking payment to quality and outcomes]	R

Recap and Overview

Mental Health Investment Standard – to ensure that as a minimum spend on MH grows at the same rate as allocation growth.

Five Year Forward View – which sets a series of targets and ‘must dos’ around provision of mental health services.

- The FYFV makes 58 separate recommendations to improve MH services across a number of priority areas.
- In order to meet these requirements, GMHSCP have set aside £52.2m of transformation funding to be spent across GM over the next 4 years:

£10.8m to fund:	£34.6m to fund:	£6.8m to fund
- Crisis Care - Integrated IAPT	- Liaison MH Core 24 - Perinatal & parent-infant MH model - Building capacity and resilience of communities - iThrive & MH workforce development - CYP crisis care	- Suicide prevention - Work & health across the life course - Dementia United - Health & Justice
£1.1m will be received by T&G to manage locally	To be managed at a GM level	To be managed at a GM level

- The locality has worked closely with GMHSCP to build an investment model which incorporates both baseline MH spend and additional investment required to meet the requirements of the FYFV. (See table on page 1)
- Further clarity is required around recurrent funding streams from 20/21 onwards, after the non recurrent transformation has been exhausted. There are rumours that funding will continue, in which case will bring down the investment gap that the CCG has funded.