

TAMESIDE AND GLOSSOP

**Care** together

# Tameside and Glossop Integrated Financial Position

2016/17 Revenue & Capital Monitoring Statements

Period Ending 28 February 2017 (Month 11) &  
Projected outturn to 31 March 2017

11 April 2017

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Tameside and Glossop  
Integrated Care  
NHS Foundation Trust

 **Tameside**  
Metropolitan Borough

# **Section 1**

**Care Together Economy**

**Revenue Financial Position**

# Care Together Economy Revenue Financial Position

Organisation	Year to Date			Year End Forecast			Movement	
	Budget £'000s	Actual £'000s	Variance £'000s	Budget £'000s	Actual £'000s	Variance £'000s	Previous Month £'000s	Movement in Month £'000s
Tameside & Glossop CCG	347,863	347,863	-	384,899	384,899	-	-	-
Tameside MBC	61,425	65,039	(3,614)	69,272	73,283	(4,011)	(3,650)	(361)
<b>Total Single Commissioner</b>	<b>409,288</b>	<b>412,902</b>	<b>(3,614)</b>	<b>454,171</b>	<b>458,182</b>	<b>(4,011)</b>	<b>(3,650)</b>	<b>(361)</b>
ICFT Deficit	(15,712)	(14,838)	874	(17,300)	(14,500)	2,800	-	1,000
<b>Total Whole Economy</b>			<b>(2,740)</b>			<b>(1,211)</b>	<b>(3,650)</b>	<b>639</b>

The overall financial position of the Care Together Economy has improved by c £0.6m month on month, reducing the whole economy projected year end deficit to £1.21m as at 28 February 2017. This remaining deficit comprises an improvement of £2.8m for the ICFT and a deficit of £4.0m at TMBC. The CCG has now fully met its QIPP target of £13.5m in 2016-17 but this has mainly been as a result of non recurrent means as highlighted last month..

## Key Risks in Year End Forecast

- The outcome of difficult negotiations with local Care Home Providers relating to Funded Nursing Care tariff increases.
- 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

- 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.

*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.*

The outstanding commissioner gap for 2016-17 is £4.011m which is in respect of TMBC services. It is important to note that although the CCG QIPP target has been met in 2016-17, only £1.7m was delivered recurrently and £11.6m was as a result of non recurrent funding which creates additional pressures for 2017-18 and a 2017-18 QIPP target of £23.9m.

## Mitigations to adverse variances contained in Year to Date Position

- The diligent efforts commenced in 2016-17 as part of the CCG Recovery Plan will continue at pace and scale to transform services, manage demand and facilitate the delivery of financial efficiencies.
- Continued work to deliver and identify further savings as part of the TMBC QIPP.
- The final year end settlement which is in the process of being agreed with the ICFT will mitigate any risk for the rest of the year including the risk regarding winter pressures.

# Tameside & Glossop CCG

Description	Year to Date			Year End Forecast			Movement	
	Budget £'000s	Actual £'000s	Variance £'000s	Budget £'000s	Actual £'000s	Variance £'000s	Previous Month £'000s	Movement in Month £'000s
Acute	180,486	180,929	(443)	197,310	197,836	(526)	(125)	(401)
Mental Health	26,533	26,475	58	28,993	28,894	99	2	97
Primary Care	74,968	74,804	164	81,655	82,387	(732)	(899)	167
Continuing Care	11,081	11,415	(334)	12,251	12,628	(377)	(396)	19
Community	25,187	25,195	(8)	27,493	27,544	(51)	(51)	0
Other	25,615	25,039	576	32,019	31,097	922	836	86
QIPP					0	0	0	0
CCG Running Costs	3,993	4,006	(13)	5,178	4,513	665	633	32
<b>CCG Total</b>	<b>347,863</b>	<b>347,863</b>	<b>-</b>	<b>384,899</b>	<b>384,899</b>	<b>0</b>	<b>0</b>	<b>0</b>

At the end of month 11, there has been an improvement to the CCG's projected year end financial position and the 2016-17 QIPP target of £13.5m has been met albeit mainly as a result of non recurrent funding. Work is on-going at pace and scale to deliver savings to contribute to the 2017-18 QIPP target .

Changes in the outturn position by directorate:

- **Acute** : Details provided on a separate slide.
- **Prescribing** : A detailed report on the current prescribing position is provided later in this report.
- **Community** : There is a pressure of £25k on the forecast as a result of 2 patients placed in St Ann's Hospice as they required specialist care which could not be provided locally. The duration of the individual placements is under continual review by the Nursing & Quality Directorate and these patients will be repatriated to local services as soon as it is clinically safe to do so.  
There is also a further increase in the overspend on Community IT by £9k.
- **Other** : The £5.2m allocation in respect of the Transformation Funding for 2016-17 has been received to support the implementation of service transformation and facilitate the delivery of recurrent savings. This is being closely monitored to ensure the funding is spent in line with plans.

- The CCG has met the £13.5m QIPP target in 2016-17 but as the majority has been met non-recurrently, this creates additional pressure in 2017-18.
- Diligent efforts continue at pace and scale to transform services and deliver recurrent financial benefits.
- A year end settlement is in the process of 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 M11 YTD position and the diligent efforts undertaken to meet the 2016-17 QIPP target.
- Acknowledge the significant recurrent 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)*

# CCG Key Movements & Narrative

## Acute Provider Drilldown – Notable movements :

- **Central Manchester:** Adverse movement of the full year forecast (£215k) driven by 2 high cost patients (£160k) and Rehab (£55k).
- **Stockport:** Improvement in year to date forecast of £22k due to an underspend in stroke activity. This is partially offset by an increase in Elective (£31k) for Trauma & Orthopaedics and Non elective (£32k) for Urology.
- **UHSM:** Adverse movement of year to date position (£86k) due to Critical care services.
- **SRFT:** Improvement in the year to date position of £8k due to a trend of underspending in stroke activity.
- **Pennine Acute:** Adverse movement of the full year position (£66k) driven by Elective Ophthalmology (£23k)
- **ICFT:** An agreed end of year settlement is being finalised which will mitigate against any overspend on budget.

Description	Year to Date			Year End Forecast		
	Budget £'000s	Actual £'000s	Variance £'000s	Budget £'000s	Actual £'000s	Variance £'000s
ICFT	115,863	115,863	0	126,575	126,575	0
Central Manchester	20,404	21,481	(1,077)	22,280	23,444	(1,164)
Stockport	10,917	10,174	743	11,968	11,113	855
South Manchester	5,932	6,327	(395)	6,568	6,907	(339)
Pennine Acute	3,675	3,603	72	4,029	3,921	108
Salford	2,945	3,074	(129)	3,226	3,452	(226)
WWL	1,276	1,146	130	1,409	1,245	164
Bolton	73	72	1	80	72	8
<b>CCG Total</b>	<b>161,085</b>	<b>161,740</b>	<b>(655)</b>	<b>176,135</b>	<b>176,729</b>	<b>(594)</b>

## Acute Referrals Analysis

- ICFT GP Referrals are down by 8.9% compared to the same period last year (April – Jan), whereas Other referrals have increased by 0.6%.
- The main areas of reduction in GP referrals are shown in the table below

GP Referrals to Tameside & Glossop ICFT				
Specialty	2016/17		% Change	Reduction in number of referrals
	2015/16	FOT		
NEUROSURGERY	159	100	-37%	-59
VASCULAR SURGERY	1,043	708	-32%	-335
ENT	4,215	3,036	-28%	-1,179
GENERAL SURGERY	1,568	1,196	-24%	-372
NEPHROLOGY	274	218	-20%	-56
RHEUMATOLOGY	1,145	930	-19%	-215
TRAUMA & ORTHOPAEDICS	4,798	4,009	-16%	-789
OPHTHALMOLOGY	2,807	2,393	-15%	-414
UROLOGY	2,681	2,368	-12%	-313

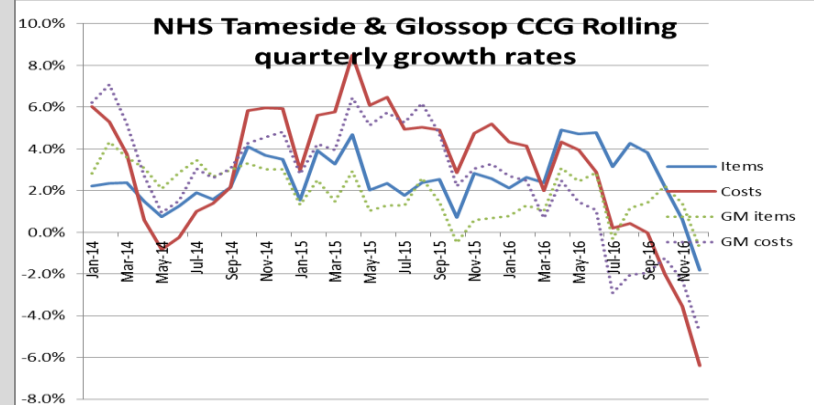
- The main areas where Other referrals have increased are shown in the table below :

Other Referrals to Tameside & Glossop ICFT				
Specialty	2016/17		% Change	Increase in number of referrals
	2015/16	FOT		
OPHTHALMOLOGY	638	804	26%	166
RESPIRATORY MEDICINE	855	1,067	25%	212
TRAUMA & ORTHOPAEDICS	3,514	3,995	14%	481
RHEUMATOLOGY	135	152	13%	17
GERIATRIC MEDICINE	142	160	12%	18
DERMATOLOGY	264	282	7%	18

# CCG Key Movements & Narrative

## Prescribing

- As reported previously a detailed review of prescribing costs identified an additional pressure on the budget of £757k which, along with a cross-year pressure identified earlier in the year, created a total pressure of £1m. Savings have previously been reported relating to the costs of Scriptswitch licences and higher than expected rebates being received.
- There has been a further reduction this month of £180k in the outturn position caused primarily by a lower than anticipated prescribing cost in December, which appears to be as a result of the increase usually seen at this time of year not materialising. A degree of caution must still be noted as it may be that the usual annual pressure has been delayed into later months this year.
- The initiatives implemented by the Medicines Management Team are showing positive signs of success as shown in the chart opposite. However it is still uncertain whether the improved performance will continue and this is crucial as the QIPP target for Quarter 4 is £50k per month higher than plans in the third quarter. It is critical that the improved performance is replicated every month to ensure no additional pressure is created in later months.
- It has been identified that where a reduction in usage of certain drugs has been achieved, there is often an increase applied in the prices meaning little impact is seen in overall costs for those drugs. This is indicative of prescribing being difficult to forecast as it is subject to so much volatility.
- Any future pressure on the position will be mitigated by sustained efforts to reduce volume prescribing where Tameside and Glossop are identified as being a significant outlier.
- Prescribing is an area that has been subject to a high level of focus and stringent monitoring throughout 2016-17 and this will continue in 2017-18.



## Ongoing work

Other areas of important work currently underway comprise:-

- Annual Report and Accounts. Timelines have been agreed, and work is underway to ensure we meet all deadlines.
- 2016/17 Commissioning Improvement Scheme. In the process of informing practices of indications of potential savings achieved, and performance targets.
- Primary care benchmarking exercise. We are leading on this work across GM. A report will be presented to the next meeting.
- Continued efforts to support phase 2 QIPP schemes. A further update of the CCG recovery plan must be submitted to GM by 31st March 2017.
- CHC and FNC forecast and planning. This area of expenditure is a particular high risk for both the CCG and the Local Authority. Working with the CHC team, to ensure databases are robust for financial forecasting. Fluctuations regarding potential price increases in this area have made planning more difficult and it is imperative that an accurate baseline to assess any potential pressures or savings is established.

# Tameside MBC

Description	Year to Date			Year End Forecast			Movement	
	Budget £'000s	Actual £'000s	Variance £'000s	Budget £'000s	Actual £'000s	Variance £'000s	Previous Month £'000s	Movement in Month £'000s
Adult Social Care & Early Intervention	37,782	38,850	(1,068)	41,995	43,160	(1,165)	(1,237)	72
Childrens Services, Strategy & Early Intervention	23,543	26,089	(2,547)	25,877	28,723	(2,846)	(2,413)	(433)
Public Health	100	100	-	1,400	1,400	0	-	-
<b>TMBC Total</b>	<b>61,425</b>	<b>65,039</b>	<b>(3,614)</b>	<b>69,272</b>	<b>73,283</b>	<b>(4,011)</b>	<b>(3,650)</b>	<b>(361)</b>

Overall the TMBC year end forecast position has deteriorated by £0.361m since period 10 increasing the projected year end variance to c.£4.01m, 6.5% on the current year's net budget. An explanation of the movements and other background is provided below:

## Children's Social Care

- There have been further increases in the cost of Looked After Children Placements and agency staff recruitment which has led to a deterioration in the financial position of £0.361m since the previous reporting period.

## Public Health

- The above figures include provision for a borrowing repayment of £0.186m. This is offset by incidental savings across Public Health contracts and associated overheads.

## Adult Social Care

- The improved position at period 11 is due to a reduction in Direct Payment costs due to an increased forecast clawback from service users.

## Recommendations

- Note the updated M11 YTD position and projected outturn
- Acknowledge the risk in relation to achieving balanced 2016/17 financial position

# Tameside and Glossop ICFT

Description	Year to Date			Year End Forecast			Movement	
	Budget £'000s	Actual £'000s	Variance £'000s	Budget £'000s	Actual £'000s	Variance £'000s	Previous Month £'000s	Movement in Month £'000s
Income	185,225	189,971	4,746	202,785	210,439	7,654	209,181	1,258
Expenditure	192,864	196,816	(3,952)	210,707	216,186	(5,479)	215,981	(2,232)
Earnings before interest, taxes, depreciation and amortisation	(7,639)	(6,845)	794	(7,922)	(5,747)	2,175	(6,800)	(974)
Net Deficit after Exceptional Costs	(15,712)	(14,838)	874	(17,300)	(14,500)	2,800	(15,500)	1,000

## Financial Position

- For the 11 months to February 2017, the ICFT is delivering a deficit of £14.8m, £0.9m better than plan.
- The year end forecast is for the planned £14.5m deficit, which is a £2.8m improvement on the plan. This is driven by;
  - Delivery of the £7.8m Efficiency savings target
  - Successful appeal for Q3 and Q4 STF associated with the A&E trajectory.
  - Matched STF for delivery of an improved deficit against plan.
  - Delivery of the Tameside and Glossop CCG block contract
  - Small over performance on all associate PbR contracts
  - Delivery of agency expenditure within the NHSI cap.

## Key Risks to the Financial Position

- Increased expenditure on agency staffing.
- Performance targets requiring unplanned expenditure to use the independent sector.

## Key Information

- The Trust has successfully appealed the reduction of STF funding relating to delivery of the A&E trajectory for Q3, and is forecasting the Q4 appeal will be successful.
- Due to the timing of the receipt of any additional cash, a short term uncommitted loan has been agreed to fund the deficit.



# The Financial Gap

## Establishing the Financial Gap

- The current financial gap outlined below 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. Progress towards closing these gaps has been made throughout the year.
- The provider gap represents the non-recurrent financial position for the ICFT. The Trust is forecasting receipt of £ 8.3m of sustainability and transformation funding in 2016/17 resulting in a forecast year end deficit of £14.5m.
- A detailed savings tracker is currently being developed to include an economy wide position of progress made in bridging the financial gap. This will comprise a variety of informative dashboards which will be used to track progress and highlight any areas of concern and risk. This will be presented to the next meeting.

<b>T&amp;G Projected Financial Gap</b>	<b>2016/17 £'000s</b>	<b>2017/18 £'000s</b>	<b>2018/19 £'000s</b>	<b>2019/20 £'000s</b>	<b>2020/21 £'000s</b>
Tameside MBC	4,011	22,114	22,601	21,752	25,837
Tameside & Glossop CCG	-	22,485	22,083	22,209	18,547
ICFT (after CIP)	14,500	24,380	24,686	25,049	25,786
<b>Economy Wide Gap</b>	<b>18,511</b>	<b>68,979</b>	<b>69,370</b>	<b>69,010</b>	<b>70,170</b>

# Closing the Financial Gap - CCG

- The CCG recovery plan submitted to NHS England demonstrated initiatives which would allow the CCG to close the £13.5m 2016/17 gap and deliver the required surplus.

Summary of QIPP £'000s	2016/17				2017/18			
	R	A	G	Total	R	A	G	Total
<b>PRIORITY 1</b> - Prescribing	0	0	0	0	1,123	1,393	0	2,516
<b>PRIORITY 2</b> - Effective Use of Resources / Prior	0	0	0	0	0	745	755	1,500
<b>PRIORITY 3</b> - Demand Management	0	0	500	500	828	1,634	3,684	6,146
<b>PRIORITY 4</b> - Single Commissioning Function	0	0	553	553	0	542	467	1,009
<b>PRIORITY 5</b> - Back Office Functions and Enabling	0	0	200	200	500	1,000	0	1,500
<b>PRIORITY 6</b> - Governance	0	0	0	0	0	100	0	100
<b>Other Schemes in progress/achieved:</b>	R	A	G	Total	R	A	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	4,191	4,191	3,688	0	1,340	5,028
<b>Grand Total:</b>	0	0	13,500	13,500	7,139	7,540	13,041	27,720

Including adjustment for Optimism Bias:

-	-	13,500	13,500	714	3,770	13,041	17,525
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10% of red rated schemes will be realised

50% of amber rated schemes will be realised

100% of green rated schemes will be realised

**QIPP Target** 13,500 23,900

Savings still to find assuming application of optimism bias: 0 6,375

**Outstanding QIPP at close of 2016-17:** 0

- Since last month all schemes are now showing as green and the gap for 2016/17 is nil.
- A number of QIPP schemes for 2016/17 are non-recurrent so work continues to identify schemes for 2017/18.

Recurrent v Non Recurrent	2016/17 £'000s	2017/18 £'000s
Recurrent Savings	1,744	21,770
Red	-	6,311
Amber	-	7,300
Green	1,744	8,159
Non Recurrent Savings	11,756	5,950
Red	-	828
Amber	-	240
Green	11,756	4,882
<b>Total</b>	<b>13,500</b>	<b>27,720</b>

# Closing the Financial Gap - TMBC

Service	Savings Area	Detail	2016/17			
			R	A	G	Total
<b>Public Health</b>	Savings found	Planned Reduction to annual management fee payable to Active Tameside and other incidental savings			659	659
		Reduction in Community Services contract value - agreed with ICO			169	169
	Additional resource (projected cost pressures)			49	49	
	Reduction in estimated capital financing repayments	Reduction in capital financing costs in 2016/17 due to rephasing of works to reconfigure Active Tameside estate			456	456
	Negotiated reduction in Public Health Network subscription				48	48
	<b>sub total Public Health</b>			-	-	<b>1,381</b>
<b>Adult Social Care</b>	Additional resource (projected cost pressures)				3,908	3,908
	Savings found	Reduction in Dowrie costs			101	101
	Savings still to be found	The Council is currently in the process of identifying further options to address the projected financial gap that is expected to arise during 2016/17. Updates will be reported within future monitoring reports.	896			896
	<b>sub total Adult Social Care</b>			<b>896</b>	-	<b>4,009</b>
<b>Childrens Social Care</b>	Savings found	Reduction to inflationary increases that were projected to materialise during 2016/17.			120	120
	Additional resource (projected cost pressures)				1,215	1,215
	Savings still to be found	The Council is currently in the process of identifying further options to address the projected financial gap that is expected to arise during 2016/17. Updates will be reported within future monitoring reports.	379			379
	<b>sub total Childrens Social Care</b>			<b>379</b>	-	<b>1,335</b>
<b>TOTAL</b>			<b>1,275</b>	-	<b>6,725</b>	<b>8,000</b>
Including adjustment for Optimism Bias			128	-	6,725	<b>6,853</b>
10% of red rated schemes will be realised						
50% of amber rated schemes will be realised						
100% of green rated schemes will be realised						
<b>QIPP Target</b>						<b>8,000</b>
<b>Savings still to be found after accounting for optimism bias</b>						<b>1,148</b>



# Better Care Fund

## Tameside Better Care Fund

- Tameside Better Care Fund plan for 2016/17 was approved by NHS England on 1 September 2016.
- The plan meets all requirements and funding has been released in accordance with the final approved plan.
- All expenditure is monitored through the ICF.
- 2017-18 guidance for BCF has not yet been received.

Scheme name	2016-17 budgets (£000's)		
	CCG	TMBC	Total
<b>Urgent Integrated Care Service</b>	<b>578</b>	<b>2,374</b>	<b>2,952</b>
IRIS	578	1,338	1,916
Early Supported Discharge Team		286	286
Community Occupational Therapists		750	1,974
<b>Localities</b>	<b>412</b>	<b>3,265</b>	<b>3,677</b>
Telecare/Telehealth	174	667	841
ICES (Joint Loan Store)	238	450	688
Reablement Services		2,148	2,148
<b>Carers Support (in line with National Conditions of Care act related funding)</b>	<b>412</b>	<b>-</b>	<b>412</b>
Carer Breaks (Adults)	412	-	412
<b>Primary Care (£5 per head for over 75's)</b>	<b>1,070</b>	<b>-</b>	<b>1,070</b>
<b>Existing Grant - Disabled Facilities Grant</b>	<b>-</b>	<b>1,978</b>	<b>1,978</b>
<b>Impact of New Care Act Duties</b>	<b>-</b>	<b>529</b>	<b>529</b>
<b>Integration Pump Priming</b>	<b>982</b>	<b>-</b>	<b>982</b>
<b>Maintaining Services</b>	<b>-</b>	<b>4,801</b>	<b>4,801</b>
Mental health Services		2,450	2,450
Adult Social Care - Community based Services (Inc care Homes)		2,351	2,351
<b>Contingency</b>	<b>900</b>	<b>-</b>	<b>900</b>
<b>Total</b>	<b>4,354</b>	<b>12,947</b>	<b>17,301</b>
	<b>Funded by (£000's)</b>		
NHS Tameside & Glossop CCG			15,323
Central Funded Grants			1,978
<b>Total BCF Fund</b>			<b>17,301</b>

## 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.

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

# Risk and Other Issues

- The main 2016-17 financial risks within the Integrated Commissioning Fund are listed below.
- Detailed registers including further information on risk and mitigating actions are regularly reviewed by the Audit Committee. Copies are available on request.
- IR35 – With effect from 6 April 2017, the legislation associated with employing ‘off payroll’ workers will change. This has a potential financial risk due to a reduction in the availability of ‘off payroll’ workers which could lead then to higher related costs if they are subsequently employed by the Economy.

## 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 16 December 2016. The year 1 funding of £5.2m has now been made available to the economy and it is expected that this money will be fully accounted for in 2016-17.

Extracts From the Corporate Risk Registers	Probability	Impact	Risk	RAG
Not spending transformation money in a way which delivers required change	2	4	8	A
Over spend against GP prescribing budgets	4	4	16	R
Over spend against Continuing Health Care budgets	2	3	6	A
Operational risk between joint working.	1	5	5	A
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	A
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	A
Unaccompanied Asylum Seekers	4	3	12	A
Care Home Provider Market Failure	3	5	15	R
Funded Nursing Care – impact of national changes to contribution rates and potential legal challenge	4	3	12	A
IR35 – the potential impact of reduced availability of ‘off payroll’ workers from 6 April 2017 and the increased cost impact if they are subsequently employed by the Economy.	4	3	12	A

## **Section 2**

**Care Together Economy**

**Capital Financial Position**

# Tameside MBC

Scheme	Approved Capital Programme Total £'000s	Approved 2016/2017 Allocation £'000s	Expenditure to Month 11 £'000s	Projected Expenditure to 31 March 2017 £'000s	2016/2017 Projected Outturn Variation £'000s	Comments
Childrens Services - In Borough Residential Properties	912	912	741	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	3,315	3,879	1,324	Active Dukinfield - The scheme is on budget and the new facility opened on 28th January 2017. Active Longendale (Total Adrenaline) - The scheme is on budget and opened on 19th November 2016. Active Hyde – Work commenced 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 - Adaptations	1,978	1,978	1,089	1,300	678	One of the three surveyors left the Council in Nov 2015, under voluntary severance thus in effect eliminating his post, prior to the unexpected national increase in DFG funds. This reduced capacity in the team by one-third. Capacity in the team is in the process of being increased.
<b>Total</b>	<b>23,158</b>	<b>8,093</b>	<b>5,145</b>	<b>5,979</b>	<b>2,114</b>	



# **Section 3**

## **GM Transformation Fund**

### **Progress Update**

# GM Transformation Funded Schemes

Scheme Description	Progress
Home First	Underway – delivering reduced length of stay
Digital Health	Underway – pilot commenced in March 2017
Neighbourhoods	Recruitment to some posts completed. Caseload reviews planned for April 2017
System Wide Self Care	Delivery commencing 1 April 2017 in Glossop. Tender to be launched 31 March 2017 for Tameside
Flexible Community Beds	Beds opened in November 2016
Home Care	In Development
Organisational Development	Underway
Estates	Underway