

REPORT TO: East Lothian Integration Joint Board

MEETING DATE: 28 March 2024

BY: Interim Chief Finance Officer

SUBJECT: Budget Setting 2024/25

1 PURPOSE

1.1 This report sets out:

- The 2024/25 budget setting process and the work undertaken to date.
- A proposed balanced budget for the IJB based on a range of savings proposals.
- Noting that the IJB must set a balanced budget before the start of the new financial year.

2 RECOMMENDATIONS

2.1 Members are asked to:

- 2.1.1 Note the development of the 2024/25 budget setting process.
- 2.1.2 Note savings proposals described as Service Redesign which are presented for information.
- 2.1.3 Agree the proposals 4-8 that support the development of a balanced budget for 2024/25.
- 2.1.4 Agree to review the Integrated Impact Assessments (IIAs) as set out within the proposals.
- 2.1.5 Agree to set a balanced budget for 2024/25.

3 BACKGROUND

- 3.1.1 The IJB continues to develop its five-year financial plan and East Lothian IJB was presented with a paper at its December 2023 meeting indicating the financial challenges over the next five years. This projection was drawn up before the Scottish Government presented its 2024/25 budget proposals. The December paper indicated a financial gap in 2024/25 of £11.6m.

- 3.1.2 Given that the IJB must set a balanced budget prior to the start of the financial year it was clear that a significant range of savings proposals would be required to bring the 2024/25 back into balance. There are no alternative savings proposals available for consideration other than those outlined within this report. It is therefore the strong recommendation of officers that the 2024/25 Savings Programme is agreed in its entirety by the IJB.
- 3.1.3 If a balanced budget is not agreed by the IJB, a financial recovery plan would need to be developed immediately by the Chief Officer and it is likely that would place severe restrictions on any new expenditure.
- 3.2 Between the December 2023 forecast position for 2024/25 and the current forecast position for 2024/25 a range of revisions were undertaken. These were;
- a) The impact of the Scottish Government's 2024/25 budget settlement on the NHSL 2024/25 forecast (the health element of which is included in the IJB's own forecast). This increased the financial pressure in the health element of the IJB's budget.
 - b) The IJB Set Aside model was reviewed as was described in the 23/24 out-turn paper presented earlier at this meeting. This has the effect of reducing the Set Aside financial pressures within the IJB's 2024/25 forecast.
 - c) The Social care 2024/25 pressures have also been reviewed. There being two elements to the forecast 2024/25 position;
 - i) The underlying pressure as expressed through the projected overspend in 2023/24 of c. £2.8 million. This has fluctuated as the 23/24 out-turn forecast has been reviewed.
 - ii) Specific 2024/25 pressures (pay awards, inflationary increases, and an element for demography) have been reviewed. In the light of the application of additional funding to support the delivery of the Real Living Wage which improved the position along with the full year effect of the additional pay award funding received in 2023/24.

3.3 After these reviews the projected financial pressure for 2024/25 is;

Budget	Projected Gap £000's
Health Core	(3,034)
Health Hosted	(295)
Health Set Aside	(1,940)
Total Health	(5,269)
Social Care b/fwd from 23/24	(2,750)
24/25 Pressures	(2,794)
Total Social Care	(5,544)
Total	(10,813)

A summary of the movements between the five-year financial plan paper presented to the IJB at its December meeting and the table above is attached as **Appendix 4**.

- 3.4 Within the health budgets above the main financial pressures are due to staffing pressures, issues in relation to both the increased costs and demand for drugs both in the community services (GP Prescribing), and demand within the Set Aside services (Acute budgets) and from the continued high levels of demand with the community services.
- 3.5 The Social Care budget pressures are due to demand for Social Care services particularly around services for older people and people with Learning disabilities.
- 3.6 Having identified the financial challenge, Health and Social Care management teams have prepared a range of proposals that, if fully actioned, would bring the budget for 2024/25 back into a balanced position.
- 3.7 There are three categories of savings proposals that have been developed:
- a) **Grip and Control/Efficiency:** This is the review of all financial management and more rigorous examination of operational management of expenditure.
 - b) **Service Redesign:** This is a review of the method of service delivery with a view to reducing the costs.
 - c) **Proposals:** These are proposals which result in significant change in service delivery and likely to involve redesign which will have may impact on the IJB's Strategic objectives.
- 3.8 The IJB has had three finance workshops (held 30/1/2024, 27/2/2024 and 7/3/24 the last being a meeting of the SPG). These workshops have worked through the process of developing and preparing the savings

proposals which would be required to balance the 2024/25 position. These sessions involved a wide range of attendees including members of the IJB, HSCP managers and finance colleagues. Briefing packs and slides from these workshops were circulated to all IJB members.

3.9 The totality of the savings proposals currently proposed for 2024/25 are as follows:

Partner	G&C and Efficiency £000's	Service Redesign £000's	Proposals £000's
Health Core	2,484		2,046
Social Care	2,284	2,120	1,151
Sub Total	4,768	2,120	3,197
Health Hosted	494		
Health Set Aside	350		
Sub Total	844		0
Grand Total	5,612	2,120	3,197

3.10 For the purpose of setting a balanced budget for 2024/25, it is assumed that the Grip & Control and Efficiency Schemes will not impact on the IJB's Strategic Plan and therefore are available to support the financial pressures in 2024/25.

3.11 Also, it is assumed that the delivery of the services redesign proposals, these are described in **Appendix 2** will not impact on the IJB's strategic Plan.

3.12 Recognising that not one of the four Lothian IJB alone can resolve the Set Aside financial issues, East Lothian IJB will commit to work with the other three IJBs and NHS Lothian to support this position. The Set Aside pressure will not, therefore, be addressed in this budget setting position.

3.13 This leaves the following position:

	£000's	Notes
Gap (as above)	(10,813)	
Grip & Control and Efficiency	4,768	1
Service Redesign	2,120	
Adjustment for Set Aside	1,391	2
Outstanding Balance	(2,534)	

Notes.

1. This is the total of the Grip & Control and Efficiency schemes which have been developed by the HSCP management team. These are further analysed in **Appendix 1**. Detail behind the schemes developed by the management teams for the Hosted and Set Aside budgets are not currently available.

2. This is the net position of the IJB's hosted and Set Aside forecasts. That is the projected forecast less the Grip & Control and efficiency schemes developed by those management teams.

- 3.14 The remaining gap above (£2.5m) can be covered if the Proposals above are agreed and delivered. It is clear that these will not be fully delivered in year but if an appropriate amount can be delivered in-year then a break-even position is possible. The Proposals schemes are listed in **Appendix 2** and are described further in **Appendix 5**.
- 3.15 **Appendix 3** summarises this position and lays out a balanced financial position for the IJB for 2024/25 excluding the Set Aside position.
- 3.16 There is a significant risk in the delivery of the totality of the savings schemes laid out above and described in the appendices. A high-level review of the financial risks has been undertaken and this is laid out in **Appendix 2**.
- 3.17 **Risks and Mitigations.**

The IJB is working with the management teams to quantify, understand manage and mitigate the risks which are inherent in the budget setting process.

The key risk to the IJB relates to the requirement to agree a balanced budget. If this Savings Programme is not approved, it will not be possible to set a balanced budget and there will be an immediate requirement for the Chief Officer to bring forward a financial recovery plan, setting out the action required to deliver financial balance. This would severely restrict our ability to agree new expenditure which would likely present significant risk to services and outcomes for the people of East Lothian.

Financial Risks.

There is unquestionably a financial risk as part of the savings plans identified to support a balanced budget. There will also be risks around the delivery of the savings plans identified by the management teams that support the IJB's Hosted and Set Aside Budget and the IJB has identified a financial risk of c. £1.3m within the Set Aside budget for which it will require further schemes to be developed. Work continues to fully quantify the financial risk in the budget setting model and to prepare a further series of recovery plans if these are needed.

Operational Risks

Given that the totality of the financial pressures above are a mixture of underlying financial pressures and additional pressures that will develop in 2024/25 the operational challenge is significant. The management teams will have to deliver the services within the budgets available. There will be a further challenge on the financial management of the services to ensure that any variance from the financial plan (within the operational budgets) is identified and addressed timeously.

Strategic Risks

The IJB's role is to deliver its Strategic Plan and the development of this plan, and its implementation has taken a considerable amount of time. The IJB will have to ensure that these savings proposals do not have a significant impact on its strategic plan and will have to consider what Directions it should issue for 2024/25.

- 3.18 There are a range of further factors which the IJB will need to be cognisant of:
- a) The partners have set up appropriate processes to ensure the delivery of the savings programmes. East Lothian IJB needs to consider how it can apply further scrutiny to the saving proposals to ensure IJB can effectively monitor its budget 2024/25. Bridging actions if required
 - b) NHS Lothian are developing a policy of delivering an element of their efficiencies in year 'locally' and an element 'corporately'. Locally in this case being work delivered by the East Lothian Health and Social Care partnership. It will be important to recognise the role of all four Lothian IJBs in this process and further discussions with NHS Lothian colleagues are underway to clarify this.
 - c) The General Medical Services (GMS) budget for the GP practices has not yet been distributed by the Scottish Government. It is likely that further financial pressures will arise in this budget. It is important to note this is not built into the current forecast. When this information is available, any financial pressures will be quantified, and recovery actions developed.
 - d) East Lothian IJB needs to continue to develop its five-year financial plan. Indications from the December 2023 paper are that there are additional pressures over and above the pressures managed in 2024/25 that will reach into 2025/26 and beyond. East Lothian IJB will be required to develop further savings schemes to manage these pressures.

4 ENGAGEMENT

4.1 The IJB makes its papers and reports available publicly.

4.2 The issues in this report have been discussed with the IJB's partners.

5 POLICY IMPLICATIONS

5.1 There are no new policies arising from this paper, but new policies may have to be developed.

5.2 The recommendations in this report implement national legislation and regulations on the establishment of IJBs.

6 INTEGRATED IMPACT ASSESSMENT

- 6.1 Integrated impact assessments have been carried out on the appropriate savings schemes that support this budget proposal.
- 6.2 We have developed a cumulative impact assessment which looks at the vulnerable groups most impacted (positively or negatively) by the budget proposals and the estimated level of impact.
- 6.3 All IIA's are published here [IIAs for 2024 ELIJB Budget Proposals | East Lothian Council](#)

7 DIRECTIONS

- 7.1 Until the 2024/25 budget is agreed, the IJB is unable to issue directions. Agreement to these proposals may impact on the current directions and may require the issuing of new directions.

8 RESOURCE IMPLICATIONS

- 8.1 Financial – these are discussed above.
- 8.2 Personnel – None.
- 8.3 Other – None.

9 BACKGROUND PAPERS

- 9.1 IJB Finance papers: December 28th, 2023, Initial Five Year Financial Plan
- 9.2 IJB Finance Workshops – 30/1/2024, 27/02/24
- 9.3 SPG Finance Meeting - 7/03/24

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DATE	March 2024

Appendices

1. Summary of Grip and Control and Efficiency Schemes.
2. Summary of Major Service Redesign and Proposals and Risks Review.
3. Summary of 2024/25 Budget Proposal.
4. Movements between the opening financial forecast (as laid out in the paper to the December IJB) and the current position.
5. Details of Major Service Redesign and Proposal

Appendix 1 – Summary of Grip and Control and Efficiency Schemes.

No	Title	Lead	Value £000's	Theme
Grip & Control and Efficiency Projects				
1	ADL Contract	Lesley Berry	42	Financial Sustainability
2	Admin & Management Review	Laura Kerr	232	Financial Sustainability
3	AHP Workforce	Lesley Berry	97	Internal Service Redesign
4	Maximising Income	David Hood	284	Financial Sustainability
5	Community Equipment	Lesley Berry	326	Financial Sustainability
6	Community Nursing Workforce	Sarah Gossner	254	Internal Service Redesign
7	Prescribing	Jamie Megaw	899	Financial Sustainability
8	Primary care	Jamie Megaw	210	Internal Service Redesign
9	East Lothian Community Hospital	Gillian Neil	296	Internal Service Redesign
10	Mental Health Medicine	Guy Whitehead	69	Financial Sustainability
11	Supplementary Staffing	Lesley Berry	90	Financial Sustainability
12	Transport Review	David Hood	130	Financial Sustainability
13	Eskgreen	Gillian Neil	60	Financial Sustainability
14	Mental Health Workforce	Guy Whitehead	340	Internal Service Redesign
15	Commissioning	Guy Whitehead	369	Sustainable commissioning and pathways
16	Older People	Isobel Nisbet	222	Financial Sustainability

17	Primary Care Service Level Agreement	Jamie Megaw	38	Financial Sustainability
18	Care Homes	Isobel Nisbet	800	Sustainable Commissioning and Pathways
19	Enjoy Leisure	Lesley Berry	10	Financial Sustainability
Total Saving			4,768	

Themes Key

Sustainable commissioning and pathways	Strategic change programmes aimed at embedding new effective commissioning models and redesigning service pathways to improve outcomes for citizens.
Internal service redesign	Redesigning our models for internal services and teams to ensure effectiveness and best value.
Financial sustainability	Grip and control measures to deliver financial sustainability, or service/funding reductions to reduce costs.

Appendix 2 – Summary of Major Service Redesign and Proposals and Risks Review.

Partner	Type	Description	Recovery Value £000's	Financial Risk Rating
Health	Proposal	Belhaven: Inpatient Beds	1,064	Low
Health	Proposal	Edington: Inpatient Beds	834	Low
Health	Proposal	Link workers	148	Medium
Health Total			2,046	Low
Social Care	Service Redesign	Intensive Housing Management	300	Low
Social Care	Service Redesign	LD Care at Home Reviews	928	Medium
Social Care	Service Redesign	Crookston (Bridging Actions)	400	Medium
Social Care	Service Redesign	Internal Care at Home	492	Medium
Social Care	Proposal	Voluntary Organisations	51	Medium
Social Care	Proposal	Belhaven: Care Home Beds	362	High
Social Care	Proposal	The Abbey	738	High
Social Care Total			3,271	High
IJB Total			5,317	High

Appendix 3 – Summary of 2024/25 Budget Proposal.

Partner	Projected Gap	G&C and Efficiency	Service Redesign	Proposals Required 24/25	Gap: Surplus/(Shortfall)
	£000's	£000's	£000's	£000's	£000's
NHS (Core)	(3,034)	2,484	0	550	0
Social Care	(5,544)	2,284	2,120	1,140	0
Sub Total	(8,578)	4,768	2,120	1,690	0
Hosted	(295)	494	0	0	199
Set Aside	(1,940)	350	0	0	(1,590)
Sub Total	(2,235)	844	0	0	(1,391)
Grand Total	(10,813)	5,612	2,120	1,690	(1,391)

Appendix 4 – Movements between the opening financial forecast (as laid out in the paper to the December IJB) and the current position.

Type	December IJB Paper £000's	March IJB Paper £000's	Movements £000's	Notes
Core	(2,320)	(3,034)	(714)	Impact of SG Budget Settlement
Hosted	(93)	(295)	(202)	Impact of SG Budget Settlement
Set Aside	(3,000)	(1,940)	1,060	Impact of SG Budget Settlement & Revision of Set Aside Model
Social Care	(6,387)	(5,544)	843	Revision to 24/25 Financial Pressures
Totals	(11,800)	(10,813)	987	

Appendix 5 – Details of Major Service Redesign and Proposals.

No.	1	Savings Proposal:	Internal Care at Home	Lead:	Gillian Neil	
Proposal Summary (Scope)	<p>The internal Home Care Service has undergone a review, resulting in a restructuring and the implementation of the 'One Plan' case management system. The introduction of One Plan in late 2023, has significantly benefited the service by:</p> <ul style="list-style-type: none"> • Streamlining processes. • Centralising service user information in one place. • Improving communication with staff. • Improving compliance. • Enhancing visibility allowing improved care runs. • Generating time and cost savings. <p>Despite being a relatively new system, One Plan has already contributed to improved efficiency and compliance, resulting in greater productivity and availability of care.</p> <p>Recruitment remains a challenge, despite our efforts in implementing a vigorous recruitment program. Unfortunately, we have been unable to fill our current vacancies.</p> <p>This proposal is to further rationalise the service by offering current vacancies as a cost-saving measure. It is anticipated that by fully implementing the One Plan system, introducing a more robust integrated review process, and collaborating closely with intermediate services, we will be able to achieve improved efficiency and capacity despite a reduced workforce.</p>				Financial Impact	
	Forecast Savings for 24/25 (£k)	£492k				

Risks and impacts	<ul style="list-style-type: none"> • Ongoing risk that we are unable to retain staff, which will create ongoing vacancies and impact on delivery of service. • Impact on patient flow and delayed discharges if unable to sustain increased efficiency and capacity. • Risk of stress and upset if existing support arrangements change or reduce. • Positive impact that packages of care will be tailored to person’s actual need/outcomes, moving away from time and task model.
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No.	2	Savings Proposal:	Learning Disabilities – Care at Home & IHM	Lead:	Guy Whitehead
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Proposal Summary (Scope)	<p>Care at Home (CAH)</p> <p>This first savings proposal is for review of Care at Home provision, an integral part of <i>community transformation</i> where services have been supporting clients out of building based services.</p> <ul style="list-style-type: none"> • Yearly CAH review is a statutory requirement. Reviews ensure that people are receiving the right level of support to meet identified outcomes, and consequent resource commitment is correct. This saving will be achieved through review of the care offer to meet assessed needs, whilst ensuring clients are safe in the community. • Currently CAH review capacity within the Social Work Learning Disabilities (SWLD) team is 18 per month. Yearly reviews of all clients require an increase to 33 per month. This will be delivered by integrating the NHS Community Learning Disabilities Team with the SWLD team in John Muir House to share the review function and create review capacity. <p>Intensive Housing Management (IHM)</p> <p>This second proposal is to improve rate of application for Intensive Housing Management revenue.</p>	Financial Impact	
		<i>Forecast Savings for 24/25 (£k)</i>	<p style="text-align: center;">CAH £928k</p> <p style="text-align: center;">IHM £300k</p>

	<ul style="list-style-type: none"> IHM is a revenue stream for the Supporting Living sector that is effectively Enhanced Housing Benefit. IHM is DWP funded and delivered locally by housing benefit. Social landlords are eligible to apply on behalf of their tenants who need 'care, support and supervision'. We are working with <i>ELCAP</i> and <i>Places for People</i> (Social Landlord) to make applications for 28 supported people. This will ensure the level of care and support remains in line with assessed need whilst HSCP funding will be offset by predicted £300k IHM revenue. 		
Risks and impacts	<ul style="list-style-type: none"> Increasing rate of CAH review has potential to impact Community Learning Disability Team (CLDT) capacity to deliver care and therapy. Decreasing CAH could adversely impact clients and carers. Work will be required around defining policy to support clinicians in delivery of reviews. IHM proposal should have no adverse impact. 		

No.	3	Savings Proposal:	Crookston Care Home	Lead:	Gillian Neil
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Proposal Summary (Scope)	<p>Crookston, a purpose-built care home spanning three floors, was established in 2014. Presently, there's a strategic vision to transform it into a specialist unit which can meet the needs and outcomes of residents with more complex needs. Currently, such residents are either delayed in hospital as the specialist care and support is not available locally or they are placed in specialist facilities out of the area, where these placements typically incur higher costs. This proposed transformation aims to create a more cost-effective model, allowing the Integrated Joint Board (IJB) to provide care closer to home while improving the outcomes of both patients and their families.</p> <p>The comprehensive redesign process is estimated to span up to 12 months. Consequently, significant financial benefits are not anticipated in the immediate term. To address this, bridging actions have been identified to alleviate overall financial pressure within the IJB:</p> <ul style="list-style-type: none"> • Staffing Review: This assessment will focus on determining the necessary staffing profiles to deliver quality care efficiently. • Facilities Management Review: A thorough evaluation of current service level agreements will be conducted with the aim of reducing costs while maintaining standards. • Interim Bed Measures: An assessment of the bed base will be undertaken to ensure financial sustainability. This includes examining the number and types of beds available for operation. <p>These measures are intended to provide interim solutions while the full redesign of Crookston progresses, ensuring financial stability and maintaining the quality of care provided.</p>	Financial Impact	
		<i>Forecast Savings for 24/25 (£k)</i>	£400k

Risks and impacts	<p>Impact on Current Residents, Families, and Carers: The interim measures are not expected to have any adverse effects. For the strategic redesign, continuous support and communication will be provided to affected parties to ensure a smooth transition and address any concerns or needs they may have.</p> <p>Impact on Current Workforce: The interim bridging actions will guarantee the maintenance of a safe staffing level. Detailed modelling will be conducted to assess and determine the necessary skills and staffing requirements, thereby establishing the most cost-effective approach to delivering safe and high-quality care.</p>
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4	Savings Proposal:	Belhaven – Inpatient & Blossom House	Lead:	Gillian Neil
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Proposal Summary (Scope)	<p>Belhaven Hospital, located in Dunbar, was established in 1912 as a cottage hospital, providing vital medical services to the local community. Today, it offers Blossom House, an 11-bedded care home, 6 inpatient beds, vaccination clinics, and serves as a community hub.</p> <p>In 2022, water quality issues led to the temporary transfer of all residents and inpatients to East Lothian Community Hospital (ELCH). Although care home residents returned in January 2023, NHS inpatient beds remained closed due to workforce challenges, with patients still accommodated at ELCH.</p> <p>Blossom House, managed by NHS and registered with the Care Inspectorate, currently has capacity for 11 residents, although there are only 9 residents at present. 3 of these residents are self-funding and 6 are local authority.</p> <p>Belhaven faces challenges due to the outdated infrastructure not meeting care home and inpatient standards. Maintenance costs are increasing steadily, which are anticipated to increase.</p>	Financial Impact	
		Forecast Savings for 24/25 (£k)	<p>Total £1,426k</p> <p>Split NHS: £1,064k</p> <p>Social Care: £362k</p>

	<p>Additionally, security and fire hazards are being reported, posing risks to staff and residents, particularly during non-operating hours.</p> <p>The work around care home beds has been supported by significant research and engagement with communities. This work over the last 3 years is detailed here Planning older people's services East Lothian Council with the report Provisioning Strategy Project – Updated Background Data Report – January 2024</p> <p>The proposal is to:</p> <ol style="list-style-type: none"> 1. Permanently close both the care home and inpatient beds. 2. Relocate the community services currently based at Belhaven, due to the ongoing risk associated with fire hazards, security, and lone working. This will result in the full closure of the Belhaven site. 		
<p>Risks and impacts</p>	<ul style="list-style-type: none"> • Impact on the availability of beds within East Lothian, particularly within the Dunbar area. • Risk to reputation as historically care home closures have been met with resistance from councillors, staff, residents, families, and trade unions. • Impact on current residents, families, and the wider community. • Impact on the current workforce and risk that staff leave Belhaven prior to the closure date. • Risk to residents as it is recognised that these are older and frailer citizens and there is always a heightened risk to life when moving residents from one home to another. <p>Further detail on the risk, impact and mitigations are shown in Strategic Planning Group March 2024</p> <p>An Integrated Impact Assessment has been completed for this proposal and is available here: IIAs for 2024 ELIJB Budget Proposals East Lothian Council</p>		

No.	5	Savings Proposal:	The Abbey	Lead:	Gillian Neil
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Proposal Summary (Scope)	Financial Impact	
	<i>Forecast Savings for 24/25 (£k)</i>	£738k
<p>The Abbey is located within the grounds of a 15th-century convent and consists of an original building that has been expanded to incorporate additional bedrooms and living areas. The accommodation spans two floors and is accessible via a passenger lift and stairs to the upper levels. The facility comprises of 28 single rooms & 1 double room.</p> <p>The Abbey Care Home Building is no longer fit for the longer-term delivery of safe and effective care. Extensive work would be required if the building is to meet current care and safety standards and this level of refurbishment is not financially viable, especially as no capital funding is available. At present only 16 of the bedrooms feature an en-suite toilet and hand basin facilities. There is only one shower and 2 baths within the Abbey, which are shared between 29 residents, which provides inadequate showering/bathing facilities for the number of residents and does not fully comply with infection protection and control protocols.</p> <p>Over recent years, extensive maintenance has been necessary, and it is anticipated that further work will be needed in the future, and this was evidenced by the Care Inspectorate last inspection in April 2023 which was graded at level 3 (adequate).</p> <p>In December 2022, the Care Inspectorate issued an enforcement notice to Eskgreen Care Home in Musselburgh, citing substantial concerns about the condition of the building and the refurbishment upgrades required. This resulted in its closure in May 2023 and the residents were required to permanently re-locate to alternative care homes at pace. It is likely that the Abbey may find itself in a similar position in the future, therefore it is crucial that the Abbey adopts a proactive and planned approach to support residents to source alternative care home placements.</p> <p>The proposal is to permanently close the Abbey Care Home & existing residents will be supported to find alternative placements within East Lothian. The planned approach will likely take place towards the end of</p>		

	<p>summer, allowing residents to make an informed decision regarding where they would like to move to. The process or re-deployment of staff will also follow due process and some of their decision may impact the decisions made by residents.</p> <p>The work around care home beds has been supported by significant research and engagement with communities. This work over the last 3 years is detailed here Planning older people's services East Lothian Council with the report Provisioning Strategy Project – Updated Background Data Report – January 2024</p>		
<p>Risks and impacts</p>	<ul style="list-style-type: none"> • Risk to reputation as historically care home closures have been met with resistance from councillors, staff, residents, families, and trade unions. • Impact on the availability of beds within East Lothian. • Impact on current residents, families, and the wider community. • Impact on the current workforce and risk that staff leave the Abbey prior to the closure date. • Risk to residents as it is recognised that these are older and frailer individuals and there is always a heightened risk to life when moving residents from one home to another. <p>Further detail on the risk, impact and mitigations are shown in Strategic Planning Group March 2024 An Integrated Impact Assessment has been completed for this proposal and is available here: IIAs for 2024 ELIJB Budget Proposals East Lothian Council</p>		

No.	6	Savings Proposal:	The Edington	Lead:	Gillian Neil
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Proposal Summary (Scope)	<p>Established in 1903, The Edington has served the North Berwick community with various services over the years:</p> <ul style="list-style-type: none"> Initially providing access to 9 inpatient GP beds, later reduced to 7 due to COVID guidelines. Offering a nurse-led minor injuries service. Housing the North Berwick GP practice. Providing community services including MSK, CTAC, and vaccination appointments. <p>In response to COVID-19 challenges and significant workforce issues, a strategic decision was made in August 2021 by the East Lothian Hospitals Contingency Plan at Gold Command. This decision involved relocating staff and the bed capacity from the Edington to East Lothian Community Hospital (ELCH) in September 2021. Ward 6 was established within ELCH to accommodate these beds, optimising resources, and maintaining high-quality patient care.</p> <p>Through a robust review and redesign of community services, such as homecare and social work, it has been identified that patients can receive care and support within their own community. This approach enables the delivery of quality care in a more accessible and familiar setting, closer to home.</p> <p>The proposal is to not relocate patients back to the Edington, closing the beds permanently & permanently close the inpatient beds within Ward 6.</p>	Financial Impact	
		<p>Forecast Savings for 24/25 (£k)</p>	<p>£834k</p>
Risks and impacts	<ul style="list-style-type: none"> Impact on the availability of beds within East Lothian. Impact on current residents, families, and the wider community. Impact on the current workforce. <p>Further detail on the risk, impact and mitigations are shown in Strategic Planning Group March 2024 An Integrated Impact Assessment has been completed for this proposal and is available here: IIAs for 2024 ELIJB Budget Proposals East Lothian Council</p>		

No.	7	Savings Proposal:	Voluntary Organisations	Lead:	Laura Kerr
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Proposal Summary (Scope)	Proposed budget reduction to the 'Vol Org Commissioned Budget' and removal of non- recurring, reserves from the Carers Act funding 23/24.		Financial Impact	
	<p>In line with ELHSCP's Financial Recovery Plan, under the General Manager for Planning and Performance the 'Vol Org Budget' and the Carers Act Funding were considered and because of the strategic impact, the proposals need to be agreed by ELIJB. Both budgets are used predominately to commission community based, 3rd sector organisations to deliver both preventative and early intervention services in addition to supporting Carers to continue in their caring roles. The services are designed to prevent individuals escalating into more expensive crisis response services, including primary care and acute health services. This is particularly so for providers of Mental Health support where people are coming from health settings to continue their recovery in the community. The reductions proposed will see the 'Vol Org Budget' being reduced by 6% and the removal of the non-recurring reserves from the Carers Act Monies is also at 6 % of the total budget. The level of reduction and impact of such, has been discussed with each provider. The objective is to ensure the stability of the provider, ensuring these services can continue.</p>		Forecast Savings for 24/25 (£k)	£51k
	Recovery Plan	Note		
	Pink Ladies 1st	Reduction in number of workshops per annum which will have a direct effect on the numbers of vulnerable women able to access support. Implementation of waiting list.		
C A P S EARS Advocacy Service Partners In Advocacy	Independent advocacy services have received little to no uplifts for the past 5+ years. As a result, providers now primarily support individuals who require statutory intervention in relation to the Mental Health Care and Treatment Act or Adult Support and Protection Act. Non statutory support is often required to sit on a waiting list (2-4 weeks dependent on organisation and time of year). A recent needs assessment and engagement activity by the Independent Advocacy Steering Group (2023/24) highlighted the importance of independent advocacy and gaps in provision in East Lothian. This reduction will put further pressure on providers, increase			

	waiting lists and potentially result in the cessation of non-statutory and collective advocacy work entirely, this will remain under review.		
CHANGES Community Health Project	Provides significant mental health support and includes support in acute cases to prevent hospital admissions. The reduction will result in a longer waiting list for services, estimated at over 7 months.		
Deaf Action	Deaf Action have agreed to a £13k reduction from 01/04/24. Services will continue at the same level while discussions are ongoing around reshaping the service. An engagement event has been held with service users.		
Health In Mind	Contract ends 31/03/24. This contract is across all 4 Lothian HSCPs and is under negotiation currently. It may be that the saving cannot be realised if other partners are not able to support. Low level Mental health support.		
Sight Scotland	Scottish Government See/Hear Funds of £5163 will be set against this contract. The contract has been extended by 2 years and the service will be able to be delivered as per the contract with no impact on quality or outcomes		
Stepping Out	Reduction will have a direct impact on service users by reducing the number of groups and 1-1 sessions available. Waiting list to be implemented and reviewed.		
Volunteer Centre East Lothian	VCEL operate several practice and service fora as well as community events and the reduction in funding will mean that some will not take place. The changes will be agreed with HSCP. However, the staffing will not be affected, and the Locality team will continue to be in place at the same FTE.		
Royal Voluntary Service	% of Budget to support transport. This will have significant impact on the availability of transport, which has been identified as a key priority of residents through HSCP's Planning for an Older Population engagement sessions. This will result in a reduction in service and potential increase in charges for those using the service.		
Carers Act Monies	Funds were available to support development of a much-needed respite service, reducing partnerships potential to support carers breaks from caring at a time when pressure on carers is increased and national discussions continue on the 'right to a break' as proposed under the NCS. This would support a one-off saving but does not give a reduction in recurring budget.		

Risks and impacts	<ul style="list-style-type: none"> • The level of reduction and impact of such, has been discussed with each provider. The objective is to ensure the stability of the provider, ensuring these services can continue. • The savings applied, will result in a reduction in service and inevitable increase in waiting times for some of services. <p>Further detail on the risk, impact and mitigations are shown in Strategic Planning Group March 2024 An Integrated Impact Assessment has been completed for this proposal and is available here: IIAs for 2024 ELIJB Budget Proposals East Lothian Council</p>
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No.	8	Savings Proposal:	Primary Care Link Worker Programme	Lead:	Jamie Megaw
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Proposal Summary (Scope)	<p>The Primary Care Link Worker Services are a key programme aimed to reduce health inequalities and provide additional support for patients who present at GP practices with complex needs, either due to the complexity of their conditions or with challenges that relate to socio-economic circumstances. The main reasons for referral to the programme are loneliness and isolation, anxiety and depression, benefit support/advice, financial advice, and employment support. The programme provides structured sessions to achieve client outcomes and active signposting to other community support.</p> <p>The current programme budget is £275K. This is funded from the HSCP (£148K) and the Primary Care Improvement Fund (£127K).</p> <p>The programme requires retendering with a new provider operational from 1st October 2024. Savings are realised by:</p> <ul style="list-style-type: none"> • Reducing the budget to fund the programme from the 1st of October 2024. • This proposal is that the IJB remove up to £148K from the budget to contribute to the IJB's financial recovery plan. 	Financial Impact	
		Forecast Savings for 24/25	£148k

Risks and impacts

- That there is insufficient funding in the budget to provide a service accessible to all General Practice populations if the full £148K contributes to the financial recovery plan. Mitigations to reduce this risk include procuring one provider instead of the three currently (remove duplicated costs), redesigning the service model (location, accessibility, and mode of client contacts), and developing new pathways between General Practice and other available community support.
- That this widens health inequalities and increases avoidable costs to the health and care system.

Further detail on the risk, impact and mitigations are shown in [Strategic Planning Group March 2024](#)

An Integrated Impact Assessment has been completed for this proposal and is available here: [IIAs for 2024 ELIJB Budget Proposals | East Lothian Council](#)

