

NHS Board Accounts: 2014-15 questionnaire – NHS Ayrshire and Arran

Service development

1. Please give THREE examples of services that:

(a) you plan to develop in 2014-15 (territorial boards should list local service developments, rather than national programmes)

Service	Expenditure 2013-14 £million	Planned expenditure 2014-15 £million
Unscheduled Care (£2.15 million investment)	15.9	18.05
Additional nursing (£1.5 million investment)	154	155.5
Child and Adolescent Mental Health (£337,000 investment)	1.9	2.24

(b) you would like to develop if you had additional funding i.e. what is next on your list of priorities? (territorial boards should list local service developments, rather than national programmes)

Address increasing demand in –

Radiology capacity;
Heart failure service; and,
Medicine reconciliation.

(c) you plan to withdraw, restrict or reform in 2014-15 (please provide reason(s) and anticipated savings in 2014-15) (territorial boards should list local service developments, rather than national programmes).

Elderly mental health continuing care bed have low occupancy
therefore close some beds (£200,000);
Procurement review to ensure best value for money products used
(£500,000):
Prescribing efficiency (£2.5 million).

2. During 2014-15, do you plan to consult on the delivery of any specific services i.e. those resulting in significant service change? No

Preventative spending

3. What specific preventative health programmes are included in your budget plans for 2014-15? (please give details of planned NHS board expenditure **over and above any ring-fenced allocations** in 2014-15 compared with 2013-14 within the categories shown)

Programme area	Ring fenced allocation £000	Expenditure 2013-14 £000	Planned expenditure 2014-15 £000
Smoking prevention/cessation	665	773	913
Weight management (child/adult)	256	307	291
Childsmile	775	775	775
Keep Well	913	753	800
Maternal and infant nutrition	167	225	167
Blood borne virus prevention	419	359	419
Immunisation programmes	617	998	1,686
Screening programmes	109	209	269
Sexual health programmes	351	369	351
Drug and alcohol programmes	4,449	6,914	7,114
Other (please specify) – Hepatitis C	971	885	1,011

4. With regard to assessment of preventative spend programmes:

(a) What savings do you anticipate that these preventative spend programmes will deliver over the next 5-10 years (please provide specific examples)

- Early years investment on fissure sealing children's teeth should reduce decay and the need for fillings or extractions, however not yet quantified;
- AAA screening will prevent deaths, however, will increase vascular surgery costs;
- Rotavirus immunisation for infants should reduce paediatric admissions to hospital.

(b) Are the results of any such assessments reflected in your financial planning? (Please give any specific examples of how financial plans have been adjusted to reflect potential savings)

- The long term nature of most preventative spend means that cash

releasing savings related to these do not feature in the financial plan.

Change Fund / Integration Fund

5. With regard to the Change Funds:

(a) Please give examples of THREE services that will be funded using Change Funds in 2014-15? (please include details of Change Fund spending on these services in 2013-14 and 2014-15 and related outcomes)

Programme	Expenditure 2013-14 £'000	Planned expenditure 2014-15 £'000	Outcome measures	Progress on outcome measures
Intermediate Care and Enablement Service	766	766	Early discharges. Prevented admissions.	1,835 early discharges. 840 admissions prevented. 9,180 bed days saved between April and December 2013.
Care homes	483	299	Reduce emergency admissions	20% reduction
Respiratory	180	90	Early discharges Prevent admissions	2.8 day reduction Reduced from 72 to 40

(b) Have these programmes/services been evaluated? (If so, please provide details)

Respiratory has been evaluated, however ICES and care home still being evaluated.

(c) Do you plan to continue to fund these services in 2015-16 through the Integration Fund?

The criteria for the Integration Fund is not yet available therefore do not know what will be allowed.

6. Can you give examples of any specific services that you are developing with local authority and/or third sector parties as a result of the planned Integration

Fund (please provide details of the service, along with planned investment by each partner)?

The criteria for the Integration Fund is not yet available therefore do not know what will be allowed.

Reducing inequalities

7. What specific programmes are aimed at reducing inequalities? (please include details of THREE services in the format shown below)

Programme	Expenditure 2013-14 £'000	Planned expenditure 2014-15 £'000	Outcome measures	Progress on outcome measures
Child Healthy Weight Interventions	182	147	1,057 interventions by 31 March 2014	957 interventions in first half of 2013-14
Child Fluoride Varnish Application	775	775	60% of 3 and 4 year olds in most deprived areas receive two applications of fluoride varnish per year by 31 March 2014	For quarter 1 of 2013-14:- East Ayrshire = 42.2%, North Ayrshire = 39.2%, South Ayrshire = 33.3%.
Smoking Cessation	773	913	3,544 successful one month quits for people residing in the 40% most deprived data zones from April 2011 to March 2014.	4,856 quits by December 2013.

Backlog maintenance

8. Please provide details of the THREE main actions in 2014-15 that will address backlog maintenance, providing:

(a) details of the action (investment/disposal etc.);

1. Investment through the Estates Formula Allocation for replacements.
2. Demolition of old pavilions and build of new North Ayrshire Community Hospital in Irvine.
3. Disposal of surplus premises.

(b) planned expenditure/receipts from this action in 2014-15; and

1. The Estates Formula Allocation in 2014/15 will amount to £3.8m, plus £0.750m for ward refurbishment and £0.278m for infrastructure improvement – a total expenditure of £4.828m.
2. The full business case for £46m investment in a new hospital in Irvine goes to Scottish Government Capital Investment Group in April 2014.
3. Disposal proceeds in 2014-15 of £3.6m

(c) the impact this will have on your overall level of backlog maintenance (high/medium/low risk)

1. This planned expenditure on high priority clinical and other replacements, should reduce the overall level of backlog maintenance by around £2.8m (medium).
2. Backlog maintenance at ACH, Irvine has reduced significantly as pavilions have been demolished (high).
3. Backlog maintenance associated with disposals planned for 2014-15 (low).

(d) what proportion does your planned spending on backlog maintenance in 2014-15 represent of your total capital budget?

1. The planned total formula capital expenditure of £4.828m in 2014-15 on estates projects will equate to 37% of the total capital resources of £13.09m.
2. Not applicable, as new hospital built through Non-Profit Distributing model of private finance.
3. Capital receipts rather than spend.

Brokerage

9. (a) Did you have any brokerage in 2013-14?

£2m carried forward for specific projects to 2014-15 :

- Change Fund = £500,000
- Detecting Cancer Early = £455,000
- Health Improvement ring fenced = £200,000

(b) If YES, was this brokerage anticipated at the start of the accounting period or did the requirement emerge during the year?

The £2m carry forward to 2014-15 was agreed in the Local Delivery Plan approved in March 2013.

10. (a) Do you anticipate the need for any brokerage in 2014-15?

£1m carry forward into 2015-16 in the Local Delivery Plan.

(b) If YES, how much would you anticipate requiring and for what purpose?

£1m for ring-fenced purposes similar to those listed at 9(b).

NRAC formula

11. What are your views on progress towards achieving NRAC parity?

Changes to data in NRAC meant that NHS Ayrshire and Arran moved from being £12.7m above parity in 2013-14 to being £1.8m below parity in 2014-15. This change resulted largely from census data which is only updated every ten years. Indicators of deprivation which are updated more regularly would result in more stability.

Equalities

12. Please provide up to THREE specific examples of how the use of an equality and diversity impact assessment has influenced budget decisions.

An equalities impact assessment was completed on the 2013-14 budget impact against “protected characteristics”. Investment prioritised by our Clinical Resource Group on a Child Protection Advisor was to ensure and equitable service was in place across the three council areas. There is also a significant investment (£415,000 in 2013-14) in prison healthcare in order to provide prisoners with equivalent health services as the rest of the population.

An investment of £300,000 (in addition to money transferring from Police Scotland) is being made in 2014-15 for the provision of healthcare in police custody.

Sustainable development

13. Please provide up to THREE specific examples of how the NHSScotland sustainable development strategy has influenced budget decisions.

£500,000 is in the capital plan for 2014-15 for biomass boilers and £1.3 m in 2015-16 for a wind turbine.

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