

## TRAFFORD COUNCIL

**Report to:** Executive  
**Date:** 26<sup>th</sup> November  
**Report for:** Information  
**Report of:** The Executive Member for Finance and the Corporate Director of Finance and Systems

### **Report Title:**

Transformation Fund

### **Summary:**

The purpose of this report is to provide members with an overview and forecast position as at the end of the March 2019 on the transformation Fund across the Locality.

### **Recommendation(s)**

#### **It is recommended that:**

- a) the Executive note the report.

### **Contact person for access to background papers and further information:**

Helen Zammit, Joint Finance Transformation Lead, Extension: 4321

Background Papers: None

Relationship to Policy Framework/Corporate Priorities	Value for Money
Financial	Whilst funding is carried forward into future years, where appropriate, to meet expenditure, there is an impact on the achievement of benefits in year as a result of delays in the implementation of schemes. The latest position with regards to spend and benefits on the transformation fund will be included in future budget monitoring reports.
Legal Implications:	None arising out of this report
Equality/Diversity Implications	None arising out of this report
Sustainability Implications	The cost pressures have been built into the budget gap for future years for those schemes, as set out in the transformation fund, that are to continue.
Resource Implications e.g. Staffing / ICT / Assets	Not applicable
Risk Management Implications	Not applicable

Health & Wellbeing Implications	None arising out of this report
Health and Safety Implications	Not applicable

**Other Options**

Not Applicable

**Consultation**

Not Applicable

**Reasons for Recommendation**

Not Applicable

**Finance Officer Clearance** .....HZ.....

**Legal Officer Clearance** .....DS.....



**CORPORATE DIRECTOR'S SIGNATURE** ..... .....

# TRANSFORMATION FUND

## 1. INTRODUCTION AND BACKGROUND

- 1.1 The Trafford system was awarded £22m in October 2017 from the Greater Manchester (GM) £450m Transformation Fund which is delegated to Greater Manchester Health & Social Care Partnership (GMHSCP) by NHS England.
- 1.2 This investment is to help secure a sustainable health and social care economy by 2021, in order to build a strong foundation for delivery of Trafford's vision for 2031. The investment aims to put in place:
- An integrated organisation for Trafford Council and NHS Trafford Clinical Commissioning Group (CCG)
  - A new model of care for community health, primary care and social care services, to underpin Trafford's Local Care Alliance (LCA) which will also be established, designed and developed
  - An optimised offer from the Trafford Co-ordination Centre (TCC)
  - Care Complex which will provide coordinated care for people who are at risk of developing conditions, or exacerbating existing conditions, and allow us to proactively manage them in intermediate care facilitating their onwards journey home.
  - A range of enabling activity e.g. workforce development, estates redesign, communications and engagement.
- 1.3 This work will support all Trafford's residents and GP registered population, with interventions specifically targeting those people in the borough with poorer health outcomes and the inequalities and performance issues that need to be tackled.
- 1.4 The £22m is pump priming money which is predicated on the basis that benefits will be achieved over this time period, which can then be reinvested to fund expenditure both within that time period and beyond. The benefits are also expected to exceed on going expenditure and therefore contribute towards reducing the overall gap in funding envisaged by the Trafford locality.
- 1.5 In addition to pump priming monies the Council and the CCG also agreed to provide £10.6m of match funding giving an overall fund value of £32.6m.
- 1.6 Over the four years of the fund, costs were estimated to be £52m funded from GMHSCP (£22m), match funding (£10.6m) and recycled benefits (£19.4m). The overall estimated value of benefits over this four year period was £72m.
- 1.7 The following table sets out at a high level how the expenditure of £52m and associated annual recurrent benefits of £25.7m is split between the Council and the CCG.

Establishment	Expenditure Over the 4 Years £m	Funding of Expenditure				Annual Recurrent Benefits by 20/21 £m	Annual Recurrent Net Costs by 20/21 £m	Net Recurrent Benefits by 20/21 £m
		GMHSCP £m	Match funding £m	Benefits £m	Total £m			
Council	15.9	6.2	6.0	3.7	15.9	7.7	3.3	4.4
CCG	34.4	14.1	4.6	15.7	34.4	18.0	7.4	10.6
Joint	1.7	1.7			1.7			
<b>Total</b>	<b>52.0</b>	<b>22.0</b>	<b>10.6</b>	<b>19.4</b>	<b>52.0</b>	<b>25.7</b>	<b>10.7</b>	<b>15.0</b>

## 2. ALLOCATION OF FUNDING TO SCHEMES

2.1 The fund is made up of 2 main areas, with 9 workstreams within these areas as outlined below:-

### Area: New Models of Care - work streams:-

- Preventative
- Planned
- Urgent/Specialised
- Domiciliary
- Commissioning
- Provider Development

### Area: Integrated Health and social Care – work streams:-

- Urgent Care
- Adults & Children's Social Care
- Community Care

2.2 Within these work streams there are 22 schemes (appendix a provides a brief description of them) and the tables below outline, by organisation, the schemes together with their funding and annual recurring benefits.

### Council

Scheme	Expenditure Over the 4 Years £m	Funding of Expenditure				Recurrent Benefits by 20/21 £m	Recurrent Net Costs by 20/21 £m	Recurrent Benefits by 20/21 £m
		GMHSCP £m	Match funding £m	Benefits £m	Total £m			
Urgent Care - Discharge to Assess Bed Facility	2.74	0.83	1.50	0.41	2.74		0.41	(0.41)
Urgent Care - Social Work Capacity to Improve Flow in Hospitals	0.92	-	0.77	0.15	0.92		0.02	(0.02)
Urgent Care - Discharge to Assess and Process Improvements	0.16	-	0.14	0.02	0.16			
Adult's and Children's Social Care	3.74	1.72	1.27	0.75	3.74	7.65	0.73	6.92
Homecare	6.94	3.63	0.92	2.39	6.94		2.16	(2.16)
Programme Management	1.15	-	1.15	-	1.15			
Enablers	0.25	-	0.25	-	0.25			
<b>Total</b>	<b>15.90</b>	<b>6.18</b>	<b>6.00</b>	<b>3.72</b>	<b>15.90</b>	<b>7.65</b>	<b>3.32</b>	<b>4.33</b>

## CCG

Scheme	Expenditure Over the 4 Years £m	Funding of Expenditure				Annual Recurrent Benefits by 20/21 £m	Annual Recurrent Net Costs by 20/21 £m	Net Recurrent Benefits by 20/21 £m
		GMHSCP £m	Match		Total £m			
			funding £m	Benefits £m				
Cancer Screening LES Payments	0.05	0.05		-	0.05			
Prevention Workstream Administration	0.07	0.07		-	0.07			
Primary Care Mental Health and Wellbeing Service	2.50	0.94		1.56	2.50	0.01	0.79	(0.78)
Medicines Optimisation Team	2.36	0.61	0.60	1.15	2.36	4.05	0.63	3.42
Care Workforce	4.79	1.27		3.52	4.79	4.97	1.78	3.19
TECHT (Domiciliary MDT)	7.25	2.63	0.40	4.22	7.25	2.86	2.12	0.74
Quality and Outcomes Framework	0.40	0.20		0.20	0.40	1.24		1.24
Clinical and Change Resource	0.71	0.52		0.19	0.71			
Provider Leadership Capacity	0.23	0.23		-	0.23			
Quality and Outcomes Framework	0.18	0.16		0.02	0.18	1.26		1.26
GP Transitional Relief	0.30	0.18		0.12	0.30			
New Organisational Form	0.82	0.82		-	0.82			
Training Costs	0.57	0.57		-	0.57			
Urgent Care - Community Enhanced Care	1.85	1.04		0.81	1.85			
Urgent Care - Ascot House	9.06	3.04	3.60	2.42	9.06	3.62	2.10	1.52
Home Care	2.22	0.76		1.46	2.22			
Programme Management	1.07	1.07		-	1.07			
<b>Total</b>	<b>34.43</b>	<b>14.16</b>	<b>4.60</b>	<b>15.67</b>	<b>34.43</b>	<b>18.01</b>	<b>7.42</b>	<b>10.59</b>

## Joint

Scheme	Expenditure Over the 4 Years £m	Funding of Expenditure				Annual Recurrent Benefits by 20/21 £m	Annual Recurrent Net Costs by 20/21 £m	Net Recurrent Benefits by 20/21 £m
		GMHSCP £m	Match		Total £m			
			funding £m	Benefits £m				
Programme Management	0.52	0.52			0.52			
Enablers	1.14	1.14			1.14			
<b>Total</b>	<b>1.66</b>	<b>1.66</b>	<b>0.00</b>	<b>0.00</b>	<b>1.66</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>

2.3 From the table above it can be seen that not all schemes will deliver benefits, and that in some instances costs will exceed benefits. However overall there was expected to be a net recurrent benefit of £15.0m.

## 3. FINAL OUTTURN POSITION 2017/18

### 3.1 Expenditure

The final position for the schemes in 2017/18 was an underspend of £4.3m of which £3.3m was carried forward into 2018/19. Not all was to be funded by transformation fund/match funding; £1m was to be met from recycled benefits.

### 3.2 Funding

The actual expenditure of £4.6m is funded from GMHSCP (£2.3m) and match funding (£2.3m).

### 3.3 Benefits

The benefits to be realised from these schemes in 2017/18 was £7m but due to delays in a number of the schemes the benefits realised was £2.7m an underachievement of £4.3m. The impact of under achieving on benefits is that underspends to be met by recycled benefits cannot be carried forward and each organisation has to find alternative means of bridging the gap, be it

through one-off funds which may require repaying back the following year or alternative savings.

There is currently a review taking place on benefits and it has been identified that due to local agreements in place with providers and changes to the recording of activity that the basis used within the transformation bid needs to be reworked. This is currently taking place and will have an impact on the initial benefits that it was estimated could be achieved.

3.4 The table below outlines the position for each organisation and appendix B provides the detail be scheme for 2017/18

Organisation	Expenditure				Funded by			Benefits		
	Budget £'000	Actual £'000	Variance £'000	Cfwd £'000	GMHSCP £'000	Match Funding £'000	Total £'000	Target £'000	Actual £'000	Variance £'000
<b>Council</b>	3,156	1,713	(1,443)	1,285	317	1,396	1,713	2,653	2,586	(67)
<b>CCG</b>	5,253	2,814	(2,439)	1,556	1,914	900	2,814	4,347	152	(4,195)
<b>Joint</b>	545	80	(465)	465	80	0	80	0	0	0
<b>Total</b>	<b>8,954</b>	<b>4,607</b>	<b>(4,347)</b>	<b>3,306</b>	<b>2,311</b>	<b>2,296</b>	<b>4,607</b>	<b>7,000</b>	<b>2,738</b>	<b>(4,262)</b>

#### 4. Latest Position 2018/19 - Period 6 End of September

##### 4.1 Expenditure

Based on the budget monitoring for the first 6 months of this year, the year-end forecast is an underspend of £7.2m, of which £2.8m will be carried forward into 2019/20. Not all was to be funded by transformation fund/match funding; £4.4m was to be met from recycled benefits.

4.2 The reasons for the underspend are mainly as a result of delays in the implementation of some schemes whilst options or requirements are fully scoped out (eg homecare), or rolled out on a wider scale (eg TECHT). There is also a pause in other schemes (eg provider development work stream) whilst they are being reviewed. This position is being closely monitored to understand the implications on the benefits associated with the schemes currently experiencing delays.

##### 4.3 Funding

The actual expenditure of £10.2m is funded from GMHSCP (£6.0m) and match funding (£4.2m).

##### 4.4 Benefits

The benefits to be realised from these schemes was £16.6m but due to reasons outlined in paragraph 4.2 and the potential impact of local agreements in place with providers and changes to the recording of activity (currently being reviewed) the benefits forecast to be realised is £10.3m an underachievement of £6.3m. The impact of under achieving on benefits is that underspends to be met by recycled benefits cannot be carried forward and each organisation has to find alternative means of bridging the gap, be it through one-off funds which may require repaying back the following year or alternative savings.

4.5 The table below outlines the position for each organisation and appendix C provides the detail by scheme.

Organisation	Expenditure				Funded by			Benefits		
	Revised Budget £'000	Forecast £'000	Variance £,000	Cfwd £'000	GMHSCP £'000	Match Funding £'000	Total £'000	Target £'000	Forecast £'000	Variance £'000
<b>Council</b>	5,799	4,276	(1,523)	289	1,282	2,994	4,276	5,882	5,996	114
<b>CCG</b>	10,537	5,355	(5,182)	2,038	4,110	1,245	5,355	10,710	4,251	(6,459)
<b>Joint</b>	1,141	651	(490)	490	651	0	651	0	0	0
<b>Total</b>	<b>17,477</b>	<b>10,282</b>	<b>(7,195)</b>	<b>2,817</b>	<b>6,043</b>	<b>4,239</b>	<b>10,282</b>	<b>16,592</b>	<b>10,247</b>	<b>(6,345)</b>

## 5. Summarised position

5.1 Due to the nature of the funding being over a 4 year period the table below sets out the forecast position over the 2 year period to the end of 2018/19 for each organisation and appendix D provides the detail by scheme.

Organisation	Expenditure				Funded by			Overall Benefit		
	Revised Budget £'000	Forecast £'000	Variance £,000	Cfwd £'000	GMHSCP £'000	Match Funding £'000	Total £'000	Target £'000	Forecast £'000	Variance £'000
<b>Council</b>	7,640	5,989	(1,651)	289	1,599	4,390	5,989	8,535	8,582	47
<b>CCG</b>	14,234	8,169	(6,065)	2,038	6,024	2,145	8,169	15,057	4,403	(10,654)
<b>Joint</b>	1,221	731	(490)	490	731	0	731	0	0	0
<b>Total</b>	<b>23,095</b>	<b>14,889</b>	<b>(8,206)</b>	<b>2,817</b>	<b>8,354</b>	<b>6,535</b>	<b>14,889</b>	<b>23,592</b>	<b>12,985</b>	<b>(10,607)</b>

### 5.2 Expenditure

At this stage there is forecast to be an underspend of £8.2m by the 31<sup>st</sup> March 2019, of which £2.8m will be carried forward. Not all was to be funded by transformation fund/match funding; £5.4m was to be met from recycled benefits.

### 5.3 Funding

The actual expenditure of £14.9m will be funded from GMHSCP (£8.4m) and match funding (£6.5m).

The overall forecast funding remaining from GMHSCP is £13.6m with match funding of £4.1m. The table below sets this out by organisation and appendix E provides the detail by scheme:-

	Funding Remaining		
Organisation	GMHSCP £'000	Match Funding £'000	Total £'000
Council	4,581	1,610	6,191
CCG	8,136	2,455	10,591
Joint	929	0	929
<b>Total</b>	<b>13,646</b>	<b>4,065</b>	<b>17,711</b>
Utilised	8,354	6,535	14,889
Remaining	13,646	4,065	17,711
<b>Total</b>	<b>22,000</b>	<b>10,600</b>	<b>32,600</b>

#### 5.4 Benefits

The benefits to be realised from these schemes was £23.6m but due to delays and reworking of their basis as mentioned previously the benefits forecast to be realised is £13.0m an underachievement of £10.6m. The impact of under achieving on benefits is that underspends to be met by recycled benefits cannot be carried forward and each organisation has to find alternative means of bridging the gap, be it through one-off funds which may require repaying back the following year or alternative savings.

#### 6. **RECOMMENDATIONS**

The Executive is asked to note the contents of this paper.



### **Administration**

Additional administration support to identify and call those patients who have not attended cancer screening appointments and to sign post those at risk of developing diseases such as diabetes, atrial fibrillation and heart failure to appropriate support in primary care.

### **Cancer screening LES Payments**

Additional LES payments for bowel and breast cancer screening, replicating the successful scheme in Trafford for cervical cancer screening which has made Trafford the highest performing CCG in the North of England

### **Primary care mental health and wellbeing service**

To enhance and compliment the current service by providing more primary and community focussed services.

### **Medicines Optimisation team**

To undertake medicines reviews and to review systems and processes for ordering, stocking and administering medicines. The team will support care homes, GP practices and community pharmacies and there will be dedicated support for mental health.

### **Care Workforce**

Plan to deliver an urgent care system which will provide safe alternatives to A&E when crises occur. The aim is to move activity from a secondary setting to primary care by providing more outpatient services in the community, such as clinics, procedures and diagnostics.

### **TECHT (Domiciliary MDT)**

Create a dedicated multi-disciplinary team for patients who are house-bound or in residential and nursing care.

### **Quality and Outcomes Framework**

A set of clear quality outcome standards to be defined for the Trafford single system to take the form of a quality dashboard and a clearly defined performance framework set against smart outcomes.

### **Provider Development**

This is currently under review and includes:-

- Clinical and Change Resource
- Provider Leadership Capacity
- Quality and Outcomes framework
- GP Transitional Relief
- New Organisational Form

### **Training Costs**

A key component of creating a successful new model of care to the very highest standards will be training.

### **Urgent Care & Home Care**

This aspect of the programme will redesign a range of services which currently support adults following hospital discharge or work to prevent admission following a health crisis. The services will be redesigned to ensure pathways and interventions have the greatest benefit. In addition, the home care market will be reviewed.

### **Adult and Children's Service**

In the Adults' service there is a focus on asset based assessment & support using the 3 conversations model, the premise of which is staff 'doing the right thing' for service users rather than be driven by the assessment process. In addition to this are the wholesale reassessment review and a review of all commissioned supported living provision across Trafford.

In the Children's service there is a focus on early help provision and wholesale caseload reviews to ensure children are in the most appropriate threshold for their circumstances and needs

### **Enablers**

To support the work above by providing flexibility so that new models of care can emerge; support local areas in their plans and ensure that the sector does stand in the way of the efforts to deliver new models of care in a more seamless and joined up way. These enablers include Human Resources, Communications & Engagement and Estates.

### **Programme Management**

To support the delivery of the programme.

CCG	Expenditure				Funded by			Benefits		
	Budget £'000	Actual £'000	Variance £'000	Cfwd £'000	GMHSCP £'000	Match Funding £'000	Total £'000	Target £'000	Actual £'000	Variance £'000
<b>Scheme</b>										
Administration	49		(49)	49			0			0
Cancer Screening LES Payments	71		(71)	71			0			0
Primary Care Mental Health and Wellbeing Service	165		(165)	0			0			0
Medicines Optimisation Team	332	30	(302)	0	30		30	1,419		(1,419)
Care Workforce			0	0			0	477		(477)
TECHT (Domiciliary MDT)	647	409	(238)	0	409		409	427	9	(418)
Quality and Outcomes Framework			0	0			0	298		(298)
Clinical and Change Resource	283	20	(263)	263	20		20			0
Provider Leadership Capacity	75	68	(7)	7	68		68			0
Quality and Outcomes Framework	35	20	(15)	15	20		20			0
GP Transitional Relief			0	0			0			0
New Organisational Form	379	50	(329)	329	50		50			0
Training Costs	123	2	(121)	121	2		2			0
Urgent Care - Community Enhanced Care	238		(238)	238			0			0
Urgent Care - Ascot House	2,265	2,180	(85)	85	1,280	900	2,180	1,726	143	(1,583)
Home Care	178		(178)	0			0			0
Programme Management	413	35	(378)	378	35		35			0
<b>Total</b>	<b>5,253</b>	<b>2,814</b>	<b>(2,439)</b>	<b>1,556</b>	<b>1,914</b>	<b>900</b>	<b>2,814</b>	<b>4,347</b>	<b>152</b>	<b>(4,195)</b>
<b>Council</b>										
Urgent Care - Discharge to Assess Bed Facility	571	560	(11)	11		560	560			0
Urgent Care - Social Work Capacity to Improve Flow in Hospitals	230	95	(135)	135		95	95			0
Urgent Care - Discharge to Assess and Process Improvements	31	16	(15)	15		16	16			0
Adult's and Children's Social Care	998	474	(524)	524	317	157	474	2,653	2,586	(67)
Homecare	632	65	(567)	409		65	65			0
Programme Management	624	503	(121)	121		503	503			0
Enablers	70		(70)	70		0	0			0
<b>Total</b>	<b>3,156</b>	<b>1,713</b>	<b>(1,443)</b>	<b>1,285</b>	<b>317</b>	<b>1,396</b>	<b>1,713</b>	<b>2,653</b>	<b>2,586</b>	<b>(67)</b>
<b>Joint</b>										
Programme Management	174	70	(104)	104	70	0	70			0
Enablers	371	10	(361)	361	10	0	10			0
<b>Total</b>	<b>545</b>	<b>80</b>	<b>(465)</b>	<b>465</b>	<b>80</b>	<b>0</b>	<b>80</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Grand Total</b>	<b>8,954</b>	<b>4,607</b>	<b>(4,347)</b>	<b>3,306</b>	<b>2,311</b>	<b>2,296</b>	<b>4,607</b>	<b>7,000</b>	<b>2,738</b>	<b>(4,262)</b>

CCG	Expenditure				Funded by			Benefits		
	Revised Budget £'000	Forecast £'000	Variance £,000	Cfwd £'000	GMHSCP £'000	Match Funding £'000	Total £'000	Target £'000	Forecast £'000	Variance £'000
<b>Scheme</b>										
Administration	54	0	(54)	54	0		0			0
Cancer Screening LES Payments	33	0	(33)	33	0		0			0
Primary Care Mental Health and Wellbeing Service	771	205	(566)	0	205		205	3	3	0
Medicines Optimisation Team	670	334	(336)	0	89	245	334	1,972	1,972	0
Care Workforce	1,273	605	(668)	0	605		605	2,106	281	(1,825)
TECHT (Domiciliary MDT)	2,179	1,037	(1,142)	0	937	100	1,037	1,953	821	(1,132)
Quality and Outcomes Framework	100	24	(76)	76	24		24	604	181	(423)
Clinical and Change Resource	214	0	(214)	214	0		0			0
Provider Leadership Capacity	152	86	(66)	66	86		86			
Quality and Outcomes Framework	70	0	(70)	70	0		0	566	0	(566)
GP Transitional Relief	105	0	(105)	105	0		0			
New Organisational Form	412	220	(192)	192	220		220			
Training Costs	358	77	(281)	281	77		77			0
Urgent Care - Community Enhanced Care	800	200	(600)	600	200		200			
Urgent Care - Ascot House	2,293	2,184	(109)	109	1,284	900	2,184	3,506	993	(2,513)
Home Care	576	144	(432)	0	144		144			
Programme Management	477	239	(238)	238	239		239			0
<b>Total</b>	<b>10,537</b>	<b>5,355</b>	<b>(5,182)</b>	<b>2,038</b>	<b>4,110</b>	<b>1,245</b>	<b>5,355</b>	<b>10,710</b>	<b>4,251</b>	<b>(6,459)</b>
<b>Council</b>										
Urgent Care - Discharge to Assess Bed Facility	1,200	1,160	(40)	40	377	783	1,160			0
Urgent Care - Social Work Capacity to Improve Flow in Hospitals	378	330	(48)	48	43	287	330			0
Urgent Care - Discharge to Assess and Process Improvements	63	61	(2)	2		61	61			0
Adult's and Children's Social Care	1,529	1,423	(106)	106	709	714	1,423	5,882	5,996	114
Homecare	1,908	613	(1,295)	61	153	460	613			0
Programme Management	596	566	(30)	30		566	566			0
Enablers	125	123	(2)	2		123	123			0
<b>Total</b>	<b>5,799</b>	<b>4,276</b>	<b>(1,523)</b>	<b>289</b>	<b>1,282</b>	<b>2,994</b>	<b>4,276</b>	<b>5,882</b>	<b>5,996</b>	<b>114</b>
<b>Joint</b>										
Programme Management	351	339	(12)	12	339	0	339			0
Enablers	790	312	(478)	478	312	0	312			0
<b>Total</b>	<b>1,141</b>	<b>651</b>	<b>(490)</b>	<b>490</b>	<b>651</b>	<b>0</b>	<b>651</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Grand Total</b>	<b>17,477</b>	<b>10,282</b>	<b>(7,195)</b>	<b>2,817</b>	<b>6,043</b>	<b>4,239</b>	<b>10,282</b>	<b>16,592</b>	<b>10,247</b>	<b>(6,345)</b>

**Summary 2017/18 to 2018/19**

**Appendix D**

CCG	Expenditure				Funded by			Overall Benefit		
	Revised Budget £'000	Forecast £'000	Variance £,000	Cfwd £'000	GMHSCP £'000	Match Funding £'000	Total £'000	Target £'000	Forecast £'000	Variance £'000
<b>Scheme</b>										
Administration	54	0	(54)	54	0		0	0	0	0
Cancer Screening LES Payments	33	0	(33)	33	0		0	0	0	0
Primary Care Mental Health and Wellbeing Service	936	205	(731)	0	205		205	3	3	0
Medicines Optimisation Team	1,002	364	(638)	0	119	245	364	3,391	1,972	(1,419)
Care Workforce	1,273	605	(668)	0	605		605	2,583	281	(2,302)
TECHT (Domiciliary MDT)	2,826	1,446	(1,380)	0	1,346	100	1,446	2,380	830	(1,550)
Quality and Outcomes Framework	100	24	(76)	76	24		24	902	181	(721)
Clinical and Change Resource	234	20	(214)	214	20		20	0	0	0
Provider Leadership Capacity	220	154	(66)	66	154		154			
Quality and Outcomes Framework	90	20	(70)	70	20		20	566	0	(566)
GP Transitional Relief	105	0	(105)	105	0		0			
New Organisational Form	462	270	(192)	192	270		270			
Training Costs	360	79	(281)	281	79		79	0	0	0
Urgent Care - Community Enhanced Care	800	200	(600)	600	200		200			
Urgent Care - Ascot House	4,473	4,364	(109)	109	2,564	1,800	4,364	5,232	1,136	(4,096)
Home Care	754	144	(610)	0	144		144			
Programme Management	512	274	(238)	238	274		274	0	0	0
<b>Total</b>	<b>14,234</b>	<b>8,169</b>	<b>(6,065)</b>	<b>2,038</b>	<b>6,024</b>	<b>2,145</b>	<b>8,169</b>	<b>15,057</b>	<b>4,403</b>	<b>(10,654)</b>
<b>Council</b>										
Urgent Care - Discharge to Assess Bed Facility	1,760	1,720	(40)	40	377	1,343	1,720	0	0	0
Urgent Care - Social Work Capacity to Improve Flow in Hospitals	473	425	(48)	48	43	382	425	0	0	0
Urgent Care - Discharge to Assess and Process Improvements	79	77	(2)	2	0	77	77	0	0	0
Adult's and Children's Social Care	2,003	1,897	(106)	106	1,026	871	1,897	8,535	8,582	47
Homecare	2,101	678	(1,423)	61	153	525	678	0	0	0
Programme Management	1,099	1,069	(30)	30	0	1,069	1,069	0	0	0
Enablers	125	123	(2)	2	0	123	123	0	0	0
<b>Total</b>	<b>7,640</b>	<b>5,989</b>	<b>(1,651)</b>	<b>289</b>	<b>1,599</b>	<b>4,390</b>	<b>5,989</b>	<b>8,535</b>	<b>8,582</b>	<b>47</b>
<b>Joint</b>										
Programme Management	421	409	(12)	12	409	0	409	0	0	0
Enablers	800	322	(478)	478	322	0	322	0	0	0
<b>Total</b>	<b>1,221</b>	<b>731</b>	<b>(490)</b>	<b>490</b>	<b>731</b>	<b>0</b>	<b>731</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Grand Total</b>	<b>23,095</b>	<b>14,889</b>	<b>(8,206)</b>	<b>2,817</b>	<b>8,354</b>	<b>6,535</b>	<b>14,889</b>	<b>23,592</b>	<b>12,985</b>	<b>(10,607)</b>

## Funding Remaining

Appendix E

CCG	Funding Remaining		
	GMHSCP £'000	Match Funding £'000	Total £'000
<b>Scheme</b>			
Administration	50	0	50
Cancer Screening LES Payments	70	0	70
Primary Care Mental Health and Wellbeing Service	735	0	735
Medicines Optimisation Team	491	355	846
Care Workforce	665	0	665
TECHT (Domiciliary MDT)	1,284	300	1,584
Quality and Outcomes Framework	176	0	176
Clinical and Change Resource	500	0	500
Provider Leadership Capacity	76	0	76
Quality and Outcomes Framework	140	0	140
GP Transitional Relief	180	0	180
New Organisational Form	550	0	550
Training Costs	491	0	491
Urgent Care - Community Enhanced Care	840	0	840
Urgent Care - Ascot House	476	1,800	2,276
Home Care	616	0	616
Programme Management	796	0	796
<b>Total</b>	<b>8,136</b>	<b>2,455</b>	<b>10,591</b>
<b>Council</b>			
Urgent Care - Discharge to Assess Bed Facility	453	516	969
Urgent Care - Social Work Capacity to Improve Flow in Hospitals	(43)	388	345
Urgent Care - Discharge to Assess and Process Improvements	0	63	63
Adult's and Children's Social Care	694	399	1,093
Homecare	3,477	36	3,513
Programme Management	0	81	81
Enablers	0	127	127
<b>Total</b>	<b>4,581</b>	<b>1,610</b>	<b>6,191</b>
<b>Joint</b>			
Programme Management	111	0	111
Enablers	818	0	818
<b>Total</b>	<b>929</b>	<b>0</b>	<b>929</b>
<b>Grand Total</b>	<b>13,646</b>	<b>4,065</b>	<b>17,711</b>

