## REVENUE BUDGET 2019/22 SERVICE – Inpatient Mental Health EXECUTIVE SUMMARY 11<sup>th</sup> September 2019

		Expenditure Pressures
	Expenditure Pressure & Impact Analysis	2019/20 £000
1	2018/19 Unmet Savings Target	
	In 2016/17 NHS Tayside applied a significant % savings target to all services including those devolved to the HSCP's. Since then the IPMH service has been working to identify efficiency savings plans to reduce this legacy budget gap. Progress has been made but a balance of £292k remains.	292
2	Pay uplift pressures	
	For 2019/20, the anticipated cost of pay award increases.	559
3	Angus 7 Day Enhanced Home Treatment	
	In January 2018 a commitment was provided as part of the Mental Health and Learning Disability Redesign Programme approved by P&K Integration Joint Board to fund £350K to enable a seven day home treatment service to be developed in Angus. This was described as essential to redress the imbalance in community provision following the move of Mulberry ward from Stracathro to Carseview Centre (under organisational change process).	170
	Half of the funding is required in 2019/20 to support the implementation of the home treatment service in Angus North to cover 7 days. There will require to be further budget provision of £180k in 2020/21 to implement the service to South Angus.	

		Expenditure Pressures
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4	Police Triage and Crisis Care	
	Police Triage	
	The police triage service commenced in January 2017. The purpose of the service is to support police who are dealing with a suspected mental health incident. The persons are initially triaged via a telephone consultation, assessing the needs and assisting the police in their decision making. This multi-agency approach intends to provide a more timely intervention by mental health professionals where required, and avoiding unnecessary detentions in police stations and hospitals.	155
	In 2017 this service was implemented with no budget (3.0 WTE Band 6 staff) Non recurring funding was identified in 2018-19 from the Scottish Government Mental Health Innovation fund. This income has been confirmed again on a non-recurring basis from the Scottish Government and has been included in the Income and Budget Settlement Section below. It is not clear yet whether this 'recurring non-recurring' funding will be made recurring from 2020/21.	
	<b>Crisis Care</b> Increased staffing requirement due to capacity and demand has remained unfunded for a number of years (equivalent to 3.0 WTE staff in a team of 34.5 WTE covering Tayside-wide Crisis Care and Dundee Home Treatment).	138
5	Organisational Change – Protection & travel costs	
	'No-detriment' protection costs for staff that moved from in-patient wards in Mulberry to community teams in Angus, following move of Mulberry ward to Carseview Centre and excess travel costs for staff relocated to Carseview. Under HR policy, this will continue for 4 years (From April 2019).	50

	Expenditure Pressure & Impact Analysis	Expenditure Pressures 2019/20 £000
6	Medical Locum Premium Costs	~~~~
	It is widely recognised that there is a national shortage of General Adult Psychiatry Consultant posts and we have been unable to recruit to vacant posts. Locally, the current workforce shortages within General Adult Psychiatry services are impacting significantly on the ability of clinical teams across Tayside to provide safe and effective care for patients across all parts of the system, including inpatient services, crisis care and home treatment services and community services.	1,700
	As of August 2019, there are 8.85 WTE Substantive Consultant grade staff in post against a WTE budget of 23.6. This represents a vacancy rate of 63%.	
	In order to keep hospital and community services running there are 12 WTE Locum Consultants/Specialty Doctors in post (51%) with a 2WTE vacancy. There are a number of services with no substantive Consultant Psychiatrists increasing the number of services that are fully dependent upon Locum Agency Consultant to 9.	
	This is the main driver of the In Patient Mental Health and Learning Disability cost pressure.	
	Premium costs for Medical Locum staff have increased in 2019 due to a 20% VAT charge now being added to costs with effect from Feb 2019. Furthermore over 2019 a further 6 consultants have left the service with a further retiral expected in November.	
	This compares to an overspend in 2018/19 of £1092k, with 8.8 wte locums being in post in March 2019.	

	Expenditure Pressure & Impact Analysis	Expenditure Pressures 2019/20 £000
7	Nursing establishment – Learning Disabilities	
	<ul> <li>Within the learning disability service there are three key drivers impacting on the use of supplementary staffing and therefore increasing costs over budget:-</li> <li>Registered Nurse vacancy (11.4 WTE)</li> <li>High levels of sickness absence</li> <li>Patient acuity and complexity requiring additional staff</li> </ul> This pressure is considered to non-recurring with a range of measures being taken to reduce the requirement for supplementary staffing.	362
8	Senior Management / Quality Improvement Cost pressures Investment is required in the management structure to ensure sufficient leadership capacity. In addition, investment in a quality improvement team is deemed essential to embed a culture of continuous improvement across Inpatient Services. (4.5 WTE). This is offset by savings of £81k from the management restructure set out at Saving No. 2 below.	367
	TOTAL PRESSURES	3,793

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		Net Saving
	Saving / Impact Analysis	2019/20 £000
1	Admin Restructure Various posts currently vacant. Review of admin function across the service with budgets to be realigned and restructured which is anticipated to release £50k on recurring basis and £136k on an in year basis. Current vacancies and staffing skill-mix will result in the additional in-year underspend however the majority require to be filled to support service delivery.	186
2	Senior Management restructure	
	Removal of surplus posts / budgets following restructure of senior management and net removal of 1.0 WTE post. This offsets the wider investment in senior management as set out at Cost Pressure No. 8 above.	81
3	Non Pay Spend efficiencies	
	General review of non-pay budgets to remove surplus spend and underutilised budgets across all wards and teams. This is standard budget housekeeping.	100
4	Temporary merger of GAP Rehabilitation Wards Murray Royal Hospital (MRH)/Workforce redesign	
	In the 2018/19 Financial Plan for Inpatient Mental Health Services approved by the IJB, savings of £148k were agreed from the redesign of rehabilitation beds in Amulree ward in MRH. This recognised that whilst 16 beds were open and operational, staffing establishment was in place for 20 beds. These savings were realised in line with the approved plan and reduced the unmet savings target to be carried forward to 2019/20 (Cost Pressure 1).	

		Net Saving
	Saving / Impact Analysis	2019/20 £000
	Thereafter in late 2018 a contingency decision was taken by NHS Tayside to merge Amulree Ward with Rannoch Ward on a temporary basis due to a sustained difficulty in recruiting nursing staff and ensure safe patient care. The temporary merger reduced the overall requirement for nursing staff by 5.94 WTE. This has given a short term financial benefit in 2019/20 of £250k. Whilst discussions are now progressed around a sustainable bed model for rehabilitation beds moving forward. There has been no reduction in beds as a result of this short term action with 22 beds fully operational.	250
	Aside from the contingency merger above, the service have taken the opportunity to review the overall workforce requirements and skill mix opportunities within the inpatient rehabilitation service. Effective workforce planning and redesign is essential across all services to ensure responsiveness to the changing shape and scale of available workforce. Overall recurring savings of £300k are deliverable form the review and redesign of the nursing workforce (equivalent of 10.56 WTE). This is proposed as a recurring saving recognising that even when the future of rehabilitation beds on MRH is agreed; these workforce savings will be sustained.	300
5	Temporary Merger of Learning Disability Beds Strathmartine	
	In summer 2019 as a result of sustained nursing staff shortages, a contingency decision was taken to merge wards on the Strathmartine site. This was a temporary consolidation based on available staffing. This is a short term contingency plan to ensure provision of safe care to patients. A short term financial benefit from reduced requirement for supplementary staffing has been realised of £200k which offsets Cost Pressure No 7 above,	200
6	Ward Redesign: Carseview/Mulberry	
	Following the approval of the Inpatient Mental Health Redesign Programme by Perth & Kinross IJB, the transfer of beds from Mulberry ward in Angus to Carseview Hospital in Dundee has now been	220

		Net Saving
	Saving / Impact Analysis	2019/20 £000
	effected on a permanent basis. A full review of nursing staffing has been undertaken including review of skill mix. The nursing staff requirement in the newly established GAP ward is lower than the staffing required for the stand alone Mulberry ward due to economies of scale from centralisation. The reduction of 8.21 WTE and the associated saving of £220k was fully anticipated within Inpatient Mental Health Redesign Business Case.	
7	Saving No 7 General Adult Psychiatry Acute Admissions MoredunWard	
	The Mental Health and Learning Disability Service Redesign Programme approved by the IJB agreed to the reduction in beds within Moredun from 26 to 22 beds. This has lead to a reduction in 4.39 WTE and this saving was anticpated as part of the Programme.	203
	SUB-TOTAL SAVINGS	1,540

Budget Settlement & Income	Budget Settlement & Income Benefit/ (Reduction) 2019/20 £000
Impact of Indicative 2019/20-2021/22 Recurring Budget Settlement NHS Tayside	
Share of 2.57% baseline uplift funding	577
Mental Health Outcomes Framework (non-recurring)	
Non-recurring funding from in-year Scottish Government allocation for 19/20 to support Community Police Triage posts	155
TOTAL BUDGET SETTLEMENT / INCOME	732
Overall Gap	1,521