

Agenda Item 7

2022/23 Finance Update



Falkirk Integration Joint Board

10 June 2022

2022/23 Finance Update

For Noting

1. Executive Summary

- 1.1 This report provides a high-level summary of the current 2022/23 financial position including consideration of new and emerging risks.
- 1.2 A net overspend of £0.053m is reported for the first month of the financial year, reflecting ongoing pressures within set aside and primary care services. Several new and emerging risks have been identified at this early stage in the financial year including Social Care Provider sustainability, non-pay inflationary pressures, increased demand in terms of complex care and ongoing uncertainty regarding Covid-19 related costs.
- 1.3 In addition, the report outlines a number of forthcoming investment opportunities to support a shift in the balance of care through innovative use of recurring funding allocated to enhance Mental Health Services and support winter pressures as announced in the previous financial year, together with the underspend against the Falkirk Community Hospital (FCH) following the closure of wards 1 to 4 due to fire related health and safety issues.

2. Recommendations

The Integration Joint Board is asked to:

- 2.1 Note the year to date overspend of £0.053m reported as at 30 April 2022.
- 2.2 Approve the breakdown of the payments to Falkirk Council and NHS Forth Valley as per the Directions provided at appendix 1.
- 2.3 Agree in principle to reinvest a proportion of the FCH pay budget underspend to augment community based services, with a detailed business case to be presented at a future meeting.
- 2.4 Note the high level Mental Health and Wellbeing in Primary Care Service plan that will be submitted to the Scottish Government and that regular progress updates to be provided to the IJB going forward.

3. 2022/23 Financial Position

- 3.1 The 2022/23 annual budget currently amounts to £262.512m (comprised of

£226.964m in respect of the integrated budget and £35.548m in respect of set aside).

- 3.2 In line with previous years, further budget increases are expected in the coming months due to a due to a number of outstanding funding allocations which remain subject to national negotiation and/or Scottish Government approval (including agreed contract uplifts for independent Family Health Service contractors and NHS agenda for change pay awards). In the meantime, the payments to Falkirk Council and NHS Forth Valley have been updated to reflect the current annual budget (see Directions at appendix 1).

4. Year to Date Financial Performance

- 4.1 A net overspend of £0.053m is reported for the first month of the financial year. This is comprised of a £0.155m overspend against the set aside budget which is partly offset by a £0.103m underspend against the integrated budget as summarised in table 1 below.

| 2022-23 Budget Annual £m | TABLE 1: 2022-23 financial performance | 2022-23 Budget April £m | 2022-23 Actual April £m | Underspend/ (Overspend) April £m |
|-----------------------------------|---|----------------------------------|----------------------------------|---|
| 35.548 | Large Hospital Services | 3.032 | 3.188 | (0.156) |
| 78.667 | Primary Healthcare Services | 5.913 | 6.156 | (0.243) |
| 107.491 | Social Care Services | 8.958 | 8.958 | 0.000 |
| 40.806 | Community Healthcare Services | 3.516 | 3.170 | 0.346 |
| 262.512 | Total | 21.419 | 21.472 | (0.053) |
| | | | | |
| 35.548 | Set Aside | 3.032 | 3.188 | (0.156) |
| 226.964 | Integrated Budget | 18.387 | 18.284 | 0.103 |
| 262.512 | Total | 21.419 | 21.472 | (0.053) |

- 4.2 Key performance issues relating to the month 1 position reflect ongoing workforce pressures within set aside (particularly within A&E and various inpatient specialties including rehab and Specialist Mental Health Services). With respect to the integrated budget, overspends continue to be reported against the General Medical Services budget and the Primary Care prescribing budget. Breakeven is assumed in respect of Social Care at this point.
- 4.3 Several new and emerging risks have been identified at this early stage in the financial year, including Social Care Provider sustainability, non-pay inflationary pressures (specifically in relation to energy costs, fuel price rises and other supply chain issues), increased demand in terms of complex care (including increasing numbers of children who will transition to adult services during 2022/23 and beyond) and ongoing uncertainty regarding the level and duration of Covid-19 related costs. Note that the Scottish Government have confirmed that a letter will be issued imminently to clarify expectations and accountability in relation to Covid costs and funding.

- 4.4 In order to address Social Care Provider sustainability challenges, contractual rates for 2022/23 have been increased to include a pay and non-pay inflationary uplift. The rate uplift reflects full implementation of the Scottish Government's adult social care pay policy (whereby staff employed in direct care roles must be paid a minimum of £10.50 per hour) and also provides a contribution towards increased non-pay costs such as business insurance, utilities, and fuel. Whilst this has been welcomed by local providers, there is ongoing concern in relation to the scale of the cost of living and inflationary pressures currently being experienced. The position will be kept under close review.

5. Investment opportunities

- 5.1 There are significant investment opportunities during 2022/23 to shift the balance of care, deliver transformational change and support our ongoing post pandemic recovery

Winter Pressures

- 5.2 Significant recurring investment was announced last year as part of a national funding package to address winter pressures and support longer term improvement in service capacity across the health and social care system. This funding is designed to increase multidisciplinary team working and capacity, provide a further pay award for all adult social care staff employed in direct care roles, support interim care arrangements and enhance staff wellbeing. Proposals are being worked up for certain elements of the funding and further detail will be presented to the IJB in due course. A summary of the current status of the winter pressures funding is outlined in the table below:

| Description | £m |
|---|-------|
| Recruitment of additional Health Care Support Workers – target of 1000 across Scotland (Falkirk share is 29). Recruitment is underway and staff will be employed across reablement services and end of life care. | 0.848 |
| Multi-disciplinary team working – recruitment of additional MDT staff to support with social work and care assessment, hospital-to-home and rapid response in the community to support discharge from hospital and to ensure that people can be cared for as close to home as possible, reducing avoidable admissions to hospital. Detailed proposals to be worked up. | 1.131 |
| Staff wellbeing (note this is non-recurring funding) – to fund practical support for staff including access to hot drinks, food, and other measures to aid access to rest and recuperation, as well as additional psychological support. Note that an element also relates to independent Contractors/Providers (proposals for GPs, Community Pharmacists & Opticians have already been | 0.174 |

| Description | £m |
|---|---------------|
| agreed, options being worked up for Dentists and Social Care Providers). | |
| Interim Care (note this is non-recurring funding) to enable patients currently in hospital to move into care homes and other community settings, on an interim basis (6 weeks), to ensure they can complete their recovery in an appropriate setting. Contracts with 2 independently operated care homes are already in place and a Service Level Agreement with a local GP Practice to provide medical cover is also in place. | 0.579 |
| Care at Home – to increase capacity in care at home community based services to fulfil unmet need and deal with the current surge in demand and complexity of individual needs, also helping to ease pressures on unpaid carers. Funding is to be spent on expanding existing services, TEC or approaches to preventing care needs from escalating, such as intermediate care, rehab etc. Proposals to be worked up. | 3.517 |
| Adult Social Care Pay Policy – allocation has already been fully utilised to implement the pay award with effect from 1 st April 2022. | 5.040 |
| Social Work Workforce - to provide additional Social Work workforce capacity within local authorities. Proposal is being worked up by the Chief Social Work Officer. | 0.622 |
| TOTAL | 11.911 |

Mental Health and Wellbeing in Primary Care Services

- 5.3 Significant funding has also been earmarked in respect of Mental Health and Wellbeing in Primary Care Services (MHWPCS) following the Minister for Mental Wellbeing and Social Care's announcement in December 2021. Further correspondence has since been issued to IJB Chief Officers, NHS Chief Executives, Local Authority Chief Executives and Community Planning Partnerships from the Minister setting out detailed proposals to on how to develop and implement the MHWPCS policy. This confirmed that MHWPCS should include multi-disciplinary teams within Primary Care settings to provide assessment, advice, support, and some levels of treatment for mental health, distress, or wellbeing. It is intended that the approach will build on the good work that is already underway through Action 15 Mental Health Strategy funding and the Primary Care Improvement Funds.
- 5.4 An expectation was set that the MHWPCS will increase the mental health workforce in primary care settings by 1000 additional staff, across Scotland by 2026. This will include ensuring that every GP practice has access to a Link Worker to support mental wellbeing.

5.5 The associated Local Planning Guidance sets out expectations in relation to the formation and implementation of the model which requires the establishment of local planning groups, the development of plans, and the implementation of MHWPCSs

5.6 In February 2022, a further letter was received, confirming the anticipated maximum funding allocation for Falkirk Health and Social Care Partnership as follows:

| | |
|----------|---------------|
| 2022/23: | £277,046.83 |
| 2023/24: | £553,229.68 |
| 2024/25: | £1,115,675.06 |

5.7 The February letter confirmed that the funding will be issued to Integration Authorities to support the establishment of multi-disciplinary MHWPCS teams, within GP clusters or localities.

5.8 Since that time, an initial planning group has been established in line with the requirements of the planning guidance. The initial approach to planning has been on a pan-Forth Valley basis, mirroring the approach taken for the Primary Care Improvement Plan work. This does not preclude Falkirk HSCP from progressing a partnership wide planning process in the future. It is anticipated that as the process develops the planning group will evolve to include a wider range of representation including third sector and experts by experience.

5.9 The planning group includes a range of stakeholders, including representation from both partnerships, from mental health services and primary care services.

5.10 The planning group has proposed to adopt a “hybrid model” to implement the MHWPC service which allows for flexibility based on population need, rurality and resource. (Other options available include an “embedded” model where the service is within the GP setting and dedicated to that practice for patient care, or “alignment” model where the service is aligned to a cluster or group of GP practices.)

5.11 The guidance also requires the following:

- Individuals should be able to access the MHWPC service without the need for a referral from a GP or other medical professional
- MHWPC services should make use of appropriate digital approaches to self-help and supported management to complement the provision of the service and make it more accessible
- People who require urgent mental health care should be able to find pathways that are easy to access, quick and responsive at the earliest possible point.

5.12 The Steering Group have developed a high-level plan which will be submitted to the Scottish Government and is summarised below:

- A “hybrid” MHWPC service will be developed at locality level across the area, complementing the PCIP developed Primary Care Mental Health Practitioner model already embedded in general practice and setting the basis for future primary care mental health and wellbeing services which will support people registered with GP practices at a locality level.
- The service will be needs led and will be available to all age groups.
- The model will interface closely with community assets and wider community based mental health and wellbeing services promoting and facilitating wellbeing at a community level.
- Additional staff will be employed including:
 - Primary Care Mental Health Nurse Practitioners – the existing 22.6 FTE across Forth Valley will continue to be funded by PCIF and Action 15 Funding. This team will be scaled up by 8 FTE (in Falkirk) over the next few years.
 - Link Workers – this will provide ongoing funding to embed our current 3 fixed term link worker posts (during this financial year) and will support the 4 Link Workers funded through PCIP funding from the end of this financial year. Funding will be used to scale up the Link Worker provision over the next 2 – 4 years to between 1FTE per 10,000 and 1FTE per 15,000 population. This will result in 11 FTE Link Workers being available to support Falkirk communities. One or more of the Link Workers will be designated as Senior Link Workers to provide supervision and debriefing support.
 - Link Worker Coordinator – 0.5 FTE
 - Programme Manager and Admin support – shared across both partnerships.
- The evaluation plan for the programme will be co-designed in line with key posts being recruited to and will include the involvement of key stakeholders

FCH underspend

- 5.13 The Board will be aware that wards 1 to 4 at FCH have been closed for some time in response to fire related health and safety risks. The staff from these wards were temporarily redeployed to other service areas, initially for a period of 6 to 9 months. However, subsequent premises investigations by the NHS Board identified that the scale of the work required to address the fire risk means that it is not feasible to reopen the closed wards. It was also recognised that the wider Masterplan and redevelopment of FCH is not expected to be operational for several years, therefore longer-term arrangements required to be put in place for all FCH staff currently on temporary redeployment.
- 5.14 To this end, an options appraisal exercise was carried out by a range of stakeholders including management staff from AHP, Community Hospital, FHSCP Chief Nurse, HR, and staff side colleagues. The options appraisal identified a preferred option to offer all temporary redeployed staff opportunities for ongoing professional development within permanent vacancies across Falkirk HSCP and NHS Forth Valley.
- 5.15 The preferred option has now been agreed at the recent HSCP SLT and the NHS ELT as well as at the HSCP Joint Staff forum and the NHS Area

Partnership Forum. Work is now underway with individual staff, managers, HR, and staff side to engage with individual staff to settle people into permanent positions.

- 5.16 The potential recurring saving generated from permanent redeployment of the FCH staff into budgeted vacancies in other service areas is in the region of £2.100m. At present, these savings contribute to the overall financial position, offsetting overspend pressures in areas such as primary care prescribing. As such, the extent to which savings could be released is linked to progress with savings delivery and the impact of other service redesign. However, the net saving does present a unique opportunity to accelerate a shift in the balance of care by reinvesting an element of these savings in other community-based services. This would be a practical approach in light of future demand projections, linked to ongoing demographic change as people are living longer into old age, often with multiple long-term conditions which require more complex multidisciplinary care and support. We can already evidence an 18% increase in the number of people receiving a community care assessment and it is clear that major transformational service change is required to increase capacity and explore alternatives.
- 5.17 Board members will be aware that current demand for Packages of Care is unprecedented with a significant backlog. If we are not able to support these individuals at home, there is a risk that they will deteriorate and may access the system via unscheduled care much earlier than if we had been able to support them. In addition, 2021/22 will see the highest ever number of bed days occupied by delayed discharges recorded for Falkirk HSCP. Historically Care Homes was the biggest contributor for Delays but since the pandemic delays for Packages of Care and “Awaiting assessment to be completed” rank highest. This requires a whole system approach including additional resource in the community and intermediate care facilities.
- 5.18 Reinvesting an element of the FCH underspend in other community services will ensure care is provided in the right place and at the right time to support people to remain in, or to return to their community during episodes of care, and also to support transfers of care between the community, acute hospital and other bed based care including:
- a range of Reablement approaches,
 - enhanced AHP input in community hospitals and care homes
 - Investment in community nursing and end of life care
 - Increase capacity for care at home
 - Support transfers of care across the system including discharge without delay
 - Investment in partnership with third sector to extend community supports
 - Prevention including work underway for care pathways e.g. respiratory, diabetes

Such re-investment will inform the bed based requirements of the future Falkirk Community Hospital redesign project and must be considered within the context of future cost and affordability requirements for the FCH redevelopment.

- 5.19 The Board are asked to agree in principle to the reinvestment of a proportion of the FCH staff budget to augment community base services and request officers to develop a proposal for consideration at a future IJB meeting.

6. Conclusion

A net overspend of £0.053m is reported for the first month of the financial year. This reflects ongoing pressures within set aside and primary care services. It is difficult to provide a robust assessment of the likely year end outturn at this early stage. A detailed review of the forecast for the year will be undertaken on receipt of the quarter one results.

It is recognised that there are significant investment opportunities during 2022/23 to shift the balance of care and support our ongoing post pandemic recovery.

Resource Implications

Resource implications are considered in the main body of the report.

Impact on IJB Outcomes and Priorities

The report presents the total integrated budget available to deliver the IJB's strategic priorities and delivery plan outcomes during 2022/23. It is vital that priorities and outcomes are delivered on sustainable financial basis.

Directions

Amendments to the Directions to reflect the 2022/23 budget as at 30 April are attached at appendix 1.

Legal & Risk Implications

There are no legal implications arising from the report recommendations. Financial sustainability remains high risk on the IJB's risk register. There are number of key risks pertinent to 2022/23 in particular due to:

- The scale of the funding gap and our ability to identify and deliver recurring efficiency savings.
- the use of non-recurring funding to support the financial position and/or reliance on annually negotiated risk sharing arrangements with partners (longer term risk sharing is to be addressed as part of the outstanding review of the integration scheme).
- New risks emerging in year are reported under section 4 of the report.

Consultation

This report has been drafted through engagement and information sharing with colleagues in Falkirk Council and NHS Forth Valley.

Equalities Assessment

There are no equality implications as a direct result of the report recommendations.

7. Report Author

7.1 Jillian Thomson, Chief Finance Officer

8. List of Background Papers

8.1 None

9. Appendices

Appendix 1: Directions Log

PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

DIRECTION TO FALKIRK COUNCIL

Direction for Financial Year 2022/23

1. The Integration Joint Board has the authority to make decisions in respect of services commissioned from Falkirk Council (“the Council”). The Integration Joint Board directs the Council in terms of section 26 of the Public Bodies (Joint Working) (Scotland) Act 2014 to carry out each of the functions listed in Annex 2 of the Integration Scheme (“the functions”), subject to the following conditions:-
 - (a) the functions will be carried out consistent with the existing policies of the Council and any relevant decisions of the Council in relation to its revenue budget;
 - (b) the functions will be carried out in a manner consistent with the strategic plan; and
 - (c) no material change will be made to policies (for example eligibility criteria) or service provision (for example Discharge to Assess services) within the functions (with the exception of the function under section 24 of the Local Government and Planning (Scotland) Act 1982) unless agreed by the IJB.
 - (d) any material change to policies or service provision as outlined in (c) must be initiated and discussed through the Leadership Group (agreed by the IJB on 7 October 2016)
2. The IJB will make a payment to the Council of £107.492m to carry out the functions (see appendix A)
3. This direction will remain in force until revoked in full or part by the IJB.

Falkirk Integration Joint Board
10 June 2022

PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

DIRECTION TO FORTH VALLEY HEALTH BOARD

Direction for Financial Year 2022/23

1. The Integration Joint Board has the authority to make decisions in respect of services commissioned from Forth Valley Health Board (“the Health Board”). The Integration Joint Board directs the Health Board in terms of section 26 of the Public Bodies (Joint Working) (Scotland) Act 2014 to carry out each of the functions listed in Annex 2 of the Integration Scheme (“the functions”), subject to the following conditions:-
 - (a) the functions will be carried out consistent with the existing policies of the Health Board and any relevant decisions of the Health Board in relation to its revenue budget;
 - (b) the functions will be carried out in a manner consistent with the strategic plan; and
 - (c) no material change will be made to policies (for example reablement strategies) or service provision (for example patient pathways) within the functions unless agreed by the IJB.
 - (d) any material change to policies or service provision as outlined in (c) must be initiated and discussed through the Leadership Group (agreed by the IJB on 7 October 2016)
2. The IJB will make a payment to the Health Board of £119,473m to carry out the functions (see Appendix A). This includes £1.928m of funding in respect of the former Integrated Care Fund and Delayed Discharge which will be allocated by the IJB in line with the agreed Partnership Funding governance process. In addition, the Health Board will make use of the sum of £35.548m set aside in relation to Large Hospital Services.
3. The Health Board will pass through £10.206m of Integration Funding to Falkirk Council in line with Scottish Government allocations (note this has still to be uplifted for 2022/23 and is expected to increase to £10.410m).
4. This direction will remain in force until revoked in full or part by the IJB.

Falkirk Integration Joint Board
10 June 2022

Appendix A

| FALKIRK IJB DIRECTIONS SUMMARY 2022-23 | | | | | |
|--|--|------------|-------------|------------------|--------------|
| Ref no | Description | Function | Budget | Direction to | IJB Approved |
| 22-23 SA 01 | Accident and Emergency Services | Set aside | £10,413,583 | NHS Forth Valley | Pending |
| 22-23 SA 02 | Inpatient Hospital Services General Medicine | Set aside | £3,941,279 | NHS Forth Valley | Pending |
| 22-23 SA 03 | Inpatient Hospital Services Geriatric Medicine | Set aside | £6,288,106 | NHS Forth Valley | Pending |
| 22-23 SA 04 | Inpatient Hospital Services Rehabilitation Medicine | Set aside | £1,781,913 | NHS Forth Valley | Pending |
| 22-23 SA 05 | Inpatient Hospital Services Respiratory Medicine | Set aside | £2,231,382 | NHS Forth Valley | Pending |
| 22-23 SA 06 | Inpatient Hospital Services Psychiatry of Learning Disability | Set aside | £1,556,496 | NHS Forth Valley | Pending |
| 22-23 SA 07 | Palliative Care (Hospital Based) | Set aside | £1,375,060 | NHS Forth Valley | Pending |
| 22-23 SA 08 | Mental Health Inpatient Services | Set aside | £7,959,779 | NHS Forth Valley | Pending |
| 2022/23 OP MGT | Partnership Management | Integrated | £92,170 | NHS Forth Valley | Pending |
| 22-23 I OP 01 | District Nursing Services | Integrated | £5,602,860 | NHS Forth Valley | Pending |
| 22-23 I OP 02 | Community Nursing Services | Integrated | £0 | NHS Forth Valley | Pending |
| 22-23 I OP 03 | Community Addiction Services | Integrated | £4,034,146 | NHS Forth Valley | Pending |
| 22-23 I OP 04 | Community Based AHP Services | Integrated | £7,603,172 | NHS Forth Valley | Pending |
| 22-23 I OP 05 | Public Dental Service | Integrated | £1,209,530 | NHS Forth Valley | Pending |
| 22-23 I OP 06 | Services provided outwith a hospital in relation to geriatric medicine | Integrated | £1,187,306 | NHS Forth Valley | Pending |
| 22-23 I OP 07 | Palliative Care (delivered in Community) | Integrated | £90,318 | NHS Forth Valley | Pending |
| 22-23 I OP 08 | Community Learning Disability Services | Integrated | £1,153,245 | NHS Forth Valley | Pending |
| 22-23 I OP 09 | Community Mental Health Services | Integrated | £8,411,988 | NHS Forth Valley | Pending |
| 22-23 I OP 10 | Continence Services | Integrated | £215,133 | NHS Forth Valley | Pending |
| 22-23 I OP 11 | Services Provided by health professionals to promote public health | Integrated | £1,407,480 | NHS Forth Valley | Pending |
| 22-23 I OP 12 | Community Hospitals (recurrent budget) | Integrated | £6,673,786 | NHS Forth Valley | Pending |
| 22-23 I OP 13 | Resource Transfer | Integrated | £1,196,356 | NHS Forth Valley | Pending |
| 22-23 I OP 14 | Joint Partnership Agreements | Integrated | £1,928,418 | NHS Forth Valley | Pending |
| 22-23 I OP 15 | Partnership Funds (ICF/ Delayed Discharge / Bridging) | Integrated | £0 | NHS Forth Valley | Pending |
| 22-23 I OP 16 | Integration Fund Pass Through Funding | Integrated | £0 | NHS Forth Valley | Pending |
| 21-22 I UN 01 | Primary Medical Services (GMS) | Integrated | £24,708,895 | NHS Forth Valley | Pending |
| 21-22 I UN 02 | General Dental Services (GDS) | Integrated | £10,167,277 | NHS Forth Valley | Pending |
| 21-22 I UN 03 | General Ophthalmic Services (GOS) | Integrated | £3,134,298 | NHS Forth Valley | Pending |
| 21-22 I UN 04 | General Pharmaceutical Services (GPS) | Integrated | £38,370,210 | NHS Forth Valley | Pending |
| 21-22 I UN 05 | GP Out of Hours Services | Integrated | £2,286,577 | NHS Forth Valley | Pending |
| 21-22 I ASC 01 | Care at Home | Integrated | £46,510,000 | Falkirk Council | Pending |
| 21-22 I ASC 02 | MECS/Telecare/Telehealth | Integrated | £1,179,000 | Falkirk Council | Pending |
| 21-22 I ASC 03 | Housing Aids & Adaptations/Equipment/Improvement grants | Integrated | £1,936,000 | Falkirk Council | Pending |
| 21-22 I ASC 04 | Garden Aid | Integrated | £489,000 | Falkirk Council | Pending |
| 21-22 I ASC 05 | Residential Care | Integrated | £36,671,000 | Falkirk Council | Pending |
| 21-22 I ASC 06 | Sheltered Accommodation/Housing with Care | Integrated | £1,453,000 | Falkirk Council | Pending |
| 21-22 I ASC 07 | Community Mental Health | Integrated | £688,000 | Falkirk Council | Pending |
| 21-22 I ASC 08 | Respite Care | Integrated | £1,809,000 | Falkirk Council | Pending |
| 21-22 I ASC 09 | Carers | Integrated | £1,488,000 | Falkirk Council | Pending |
| 21-22 I ASC 10 | Assessment & Care Planning | Integrated | £7,579,000 | Falkirk Council | Pending |
| 21-22 I ASC 11 | Day Care Services | Integrated | £4,426,000 | Falkirk Council | Pending |
| 21-22 I ASC 12 | Community Learning Disability | Integrated | £522,000 | Falkirk Council | Pending |
| 21-22 I ASC 13 | Adult Support & Protection | Integrated | £331,000 | Falkirk Council | Pending |
| 21-22 I ASC 14 | Sensory Team & Resource Centre | Integrated | £546,000 | Falkirk Council | Pending |
| 21-22 I ASC 15 | Voluntary Organisations | Integrated | £1,058,000 | Falkirk Council | Pending |
| 21-22 I ASC 16 | Advocacy | Integrated | £151,000 | Falkirk Council | Pending |
| 21-22 I ASC 17 | Joint Loan Equipment Store | Integrated | £451,000 | Falkirk Council | Pending |
| 21-22 I ASC 18 | Management & Support Costs | Integrated | £205,000 | Falkirk Council | Pending |

£262,512,763

Total Budget

Set Aside Budget £35,547,597 14%

Integrated Budget £226,965,166 86%

£262,512,763

Directions

NHS Forth Valley £155,020,763 59%

Falkirk Council £107,492,000 41%

£262,512,763

Funding Contribution

NHS Forth Valley £177,178,296

Falkirk Council £85,334,467

£262,512,763