



# Department of Health & Social Care

## Department Financial Plan 2024/25

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## 1. Executive summary

The Department is responsible for setting health and social care priorities and developing strategy, policy and legislation as well as acting as the Island's Health and Care regulator. It then commissions Manx Care under a mandate to deliver a comprehensive range of health and social care services. This model will be entering its 3<sup>rd</sup> year and separates policy making and assurance from operational service delivery.

One of the visions within Our Island Plan is 'An Island of health and wellbeing' where residents have high levels of physical and mental wellbeing, access to a comprehensive, high quality, and fully integrated health and social care system, and are able to live long, healthy and fulfilling lives. Ensuring that the DHSC and Manx Care are sufficiently funded is vital to this being achieved.

Historically, the DHSC in its previous form has struggled to meet its budget for many years, with supplementary votes being required year on year (£68m for the 8 years to 2021-22). In the prior 2 years, Manx Care's operational overspend after eligible fund claims has been £8.8m in 2022-23, which is down from £9.4m in 2021-22. From the current year, and unlike most Departments, DHSC/Manx Care has an agreed funding formula which was identified in Sir Jonathan Michael's (SJM) final report (April 2019).

Subsequent work by KPMG on the SJM report arrived at an increasing the growth rate annually as follows; from 3.03% in 2022-23, 3.08% 2023-24, 3.12% 2024-25, 3.17% 2025-26 and 3.22% 2026-27. 3.12% has been used in for the 2024-25 Financial Plan.

The current Pink Book for the Manx Care Mandate assumes for 2024-25 the rates of 2% CPI, 3.01% growth and 2% for CIP resulting in a net budget of £312.085m, an increase £9.386m on current year £302,975m (3.01%). However, the funding formula applied in discussion within this paper for 2024-25 is CPI growth (assumed to be 4%) plus 3.12% growth "demographic, non-demographic and healthcare specific price pressures" (SJM Report) less the Cost Improvement Programme (CIP) target which was previously proposed at 2% for 2023-24.

For 2024-25 the Department is seeking a net budget of £320m which is a net increase of £42.7m on the provisional 2024-25 Pink Book target as shown in Table 1, Option 1

|   | Pink Book               |                       |                              |                   | Option 1                           |                              |                                     | Option 2   |                              |                                     |
|---|-------------------------|-----------------------|------------------------------|-------------------|------------------------------------|------------------------------|-------------------------------------|--|------------------------------|-------------------------------------|
|   |                         |                       |                              |                   | 6% Pay & 4% Non-Pay to DHSC budget |                              |                                     | Funding Formula CPI (4%) + growth (3.12% MC fig) - efficiencies (2%) |                              |                                     |
|   | 1                       | 2                     | 3                            | 4                 | 5                                  | 6                            | 7                                   | 8  | 9                            | 10                                  |
| DHSC Operational Budget by Category       | Annual Budget 2023-24 £ | Annual Budget 2024-25 | Year on Year Budget Change £ | Percentage Change | 6% Pay and 4% Non-Pay              | Sum of Annual Budget 2024-25 | Sum of Year on Year Budget Change £ | Funding Formula  | Sum of Annual Budget 2024-25 | Sum of Year on Year Budget Change £ |
| Income                                    | (117,300)               | (119,646)             | (2,346)                      | 2.00%             | 4.00%                              | (121,992)                    | (4,692)                             | 5.12%  | (123,306)                    | (6,006)                             |
| Payroll                                   | 3,309,005               | 3,375,185             | 66,180                       | 2.00%             | 6.00%                              | 3,507,545                    | 198,540                             | 5.12%  | 3,478,426                    | 169,421                             |
| Infrastructure Expenses                   | 2,525                   | 2,576                 | 51                           | 2.02%             | 4.00%                              | 2,626                        | 101                                 | 5.12%  | 2,654                        | 129                                 |
| Supplies & Services                       | 359,369                 | 366,556               | 7,187                        | 2.00%             | 4.00%                              | 373,744                      | 14,375                              | 5.12%  | 377,769                      | 18,400                              |
| Agency & Contracted Services              | 223,210                 | 227,674               | 4,464                        | 2.00%             | 4.00%                              | 232,138                      | 8,928                               | 5.12%  | 234,638                      | 11,428                              |
| Grants etc.                               | 6,911,724               | 6,911,724             | 0                            | 0.00%             | 4.00%                              | 7,188,193                    | 276,469                             | 5.12%  | 7,265,604                    | 353,880                             |
| <b>Total Expenditure</b>                  | <b>10,805,833</b>       | <b>10,883,716</b>     | <b>77,883</b>                | <b>0.72%</b>      | <b>4.61%</b>                       | <b>11,304,246</b>            | <b>498,413</b>                      | <b>5.12%</b>   | <b>11,359,092</b>            | <b>553,259</b>                      |
| <b>Total Net Income &amp; Expenditure</b> | <b>10,688,533</b>       | <b>10,764,070</b>     | <b>75,537</b>                | <b>0.71%</b>      | <b>4.62%</b>                       | <b>11,182,254</b>            | <b>493,721</b>                      | <b>5.12%</b>   | <b>11,235,786</b>            | <b>547,253</b>                      |

| Manx Care                                 | Pink Book          |                    |                  |              | Manx Care Estimate |                    |                   | Funding Formula CPI (4%) + growth (3.12% MC fig) - efficiencies (2%) |                    |                   |
|---|--------------------|--------------------|------------------|--------------|--------------------|--------------------|-------------------|--|--------------------|-------------------|
| Income                                    | (15,368,000)       | (15,830,577)       | (462,577)        | 3.01%        |                    | (16,669,000)       | (1,301,000)       | 5.12%  | (16,154,842)       | (786,842)         |
| Payroll                                   | 197,639,000        | 203,587,934        | 5,948,934        | 3.01%        |                    | 229,510,000        | 31,871,000        | 5.12%  | 207,758,117        | 10,119,117        |
| Infrastructure Expenses                   | 1,822,000          | 1,876,479          | 54,842           | 3.01%        |                    | 2,212,000          | 390,000           |  | 1,915,286          | 93,286            |
| Transport Expenditure                     | 5,095,000          | 5,248,360          | 153,360          | 3.01%        |                    | 6,905,000          | 1,810,000         |  | 5,355,864          | 260,864           |
| Supplies & Services                       | 13,740,000         | 14,144,100         | 413,574          | 3.01%        |                    | 23,699,000         | 9,959,000         | 5.12%  | 14,443,488         | 703,488           |
| Agency & Contracted Services              | 97,902,648         | 100,849,518        | 2,946,870        | 3.01%        |                    | 106,502,000        | 8,599,352         |  | 102,915,264        | 5,012,616         |
| Grants etc.                               | 2,144,000          | 2,208,534          | 64,534           | 3.01%        |                    | 2,230,000          | 86,000            |  | 2,253,773          | 109,773           |
| <b>Total Expenditure</b>                  | <b>318,342,648</b> | <b>327,914,925</b> | <b>9,582,114</b> | <b>3.01%</b> |                    | <b>371,058,000</b> | <b>52,715,352</b> | <b>5.12%</b>   | <b>334,641,792</b> | <b>16,299,144</b> |
| <b>Total Net Income &amp; Expenditure</b> | <b>302,974,648</b> | <b>312,084,348</b> | <b>9,119,537</b> | <b>3.01%</b> |                    | <b>354,389,000</b> | <b>51,414,352</b> | <b>5.12%</b>   | <b>318,486,950</b> | <b>15,512,302</b> |

|                  |              |              |           |  |  |              |  |  |              |  |
|------------------|--------------|--------------|-----------|--|--|--------------|--|--|--------------|--|
| NI Contributions | (53,607,167) | (45,564,821) | 8,042,346 |  |  | (45,564,821) |  |  | (45,564,821) |  |
|------------------|--------------|--------------|-----------|--|--|--------------|--|--|--------------|--|

|                        |                    |                    |                  |  |  |                    |                   |  |                    |                   |
|------------------------|--------------------|--------------------|------------------|--|--|--------------------|-------------------|--|--------------------|-------------------|
| <b>DHSC Net Budget</b> | <b>260,056,014</b> | <b>277,283,597</b> | <b>9,195,074</b> |  |  | <b>320,006,433</b> | <b>51,908,073</b> |  | <b>284,157,915</b> | <b>16,059,555</b> |
|------------------------|--------------------|--------------------|------------------|--|--|--------------------|-------------------|--|--------------------|-------------------|

\* National Insurance (NI) Contributions are set by the SSD and so for comparability, the total in Column 3 ignores the NI change.

Table 1.

Excluding the Manx Care Mandate, the DHSC operational 2024-25 Pink Book target for DHSC is £10.764m (excluding NI Contributions and including the £6.9m revenue reserve 'the reserve'). This is a 0.72% increase on current year £10.689m and will face cost pressures for both payroll and other non-pay related expenditure. Payroll for example and assuming a 6% increase in the current year, anything above 2% in 2024-25 would leave a shortfall; e.g. a 6% increase in 2024-25 would leave a shortfall of c£130k on the 2024-25 Pink Book target. For non-pay expenditure the 2024-25 pressures include the ongoing external quality regulation costs including follow up Care Quality Commission (CQC) inspections that were conducted over autumn 2022 and for which the first year were met from the Health Care Transformation Fund. Related ongoing costs are anticipated c£600k p.a. Other pressures relate to a number of new programmes in the Island Plan as listed in Section 6, for which there is no funding in place for implementation and delivery of them.

It is for these reasons that the Department's own operational financial plan considers 2 options away from the Pink Book target, see Table 1 below. The first **Option 1** is estimated inflation of 6% to pay and 4% which results in a net increase of £494k on the current year and an **increase of £418k on the 2024-25 Pink Book target**. **Option 2** applies the funding formula as earlier discussed which adjusts for estimated inflation of 4% (CPI), 3.12% growth and 2% for CIP. This would provide additional budget of £547k on the current year and an **increase of £472k on the 2024-25 Pink Book target**. Excluding the reserve payroll makes up 88% of the budget, leaving £468k non-pay budget; of which c£225k is grant funding allocated to 3<sup>rd</sup> party social care organisations. This leave very little scope to make any significant savings. The recommended option is Option 1, estimated inflation as this will close the pay gap and provide towards the implementation of initial quality regulation and other Island Plan strategies.

For Manx Care, the financial plan presented 2 Options, two that move away from the Pink Book target, discounting it as it is only £6.3m more than the 2022-23 actual operational costs of £305.8m (excluding internal fund claims) and also much lower than the projected spend of £330.1m in the current year (Manx Care June 2023 (Q1) accounts).

The lower section of Table 1 provides, **Option 1** an annual budget of £354.389m and based on 2024-25 service delivery. This is an increase of £51.4m on the current year and only **£42.3m on the 2024-25 Pink Book target**. This option addresses funding pressures of c£62m (including cumulative annual budget shortfall) offset by £18.7m (CIP (£6m), inflationary income increase (£460k) and mitigations (£13.1m) that include additional CIP (£3.3m), new income (£1.8m), assumed use of the DHSC reserve (£5.5m) and Health Care Transformation use (£2.4m)). Manx Care are confident that this level of funding will avoid a 2024-25 overspend position.

Manx Care's **alternative option** is not presented in Table 1, but is the phasing in the full funding of £424.3m identified in the SJM report with the first year the same as Option 2 and for years 2 and 3 (2025-26 and 2026-27) equal uplifts of £34.935m p.a. (assuming inflation at 2%). **Total cost over the three years above the 2024-25 Pink Book at £137.109m**. This model is in line with the funding projection for 2026-27 of £450m and the recommended 3-5 year plan "*Funding, based on agreed need, should, over time, move from the current annual budget allocation to a 3-5 year financial settlement for health and care services on the Island*". The SJM Report clearly laid out the plan to improve the system. All of his 26 Recommendations were accepted by Tynwald. Funding pressures were identified in the Financial Plan for 2023-24 but funding was not available and at the time so they remain and continue to grow. The Department is in support of a multi-year plan being set but will work with Manx Care to fully understand further year requirements.

A further option, **Option 2** has been modelled in Table 1 for illustration that applies **funding formula**. This would provide an annual budget of £318.5m, which is £15.5m more than the current year but only a **£6.4m increase on the 2024-25 target**. This would be **insufficient considering the current year's estimate** is £330.1m (£27.2m overspend) with a current unmitigated sum of £22.3m after reserve use assumptions. It would also not address the cumulative prior year's funding pressures.

The recommended option is Option 1, 2024-25 service delivery as this will close the funding gap and seeks to eliminate overspend as a start for the first year. The Department will work closely with Manx Care on managing funding against priorities.

## 2. Background

In 2022-23 the Department identified and delivered cost saving within its Payroll (£884k) and reserve (£1.233m) budgets, however this surplus was absorbed by Manx Care's overspend. For the current year, through the implementation of similar cost savings the forecast is to deliver a small surplus of c£600k; £550k of which relates to Payroll vacancies. This surplus will not be possible for 2024-25 as the relatively new Department is now fully embedded and all post will be recruited to.

Legal and tribunal costs of £3.349m to Q1 have been incurred concerning the recent high profile tribunal and for which the Department is progressing a claim to the Legal Cost Reserve for. These costs have been removed from the reported actual financial position pending a decision of their reimbursement.

Manx Care’s May 2023 management accounts are projected to spend £330.1m which is **£27.2m over budget** and £24.3m above 2022-23 actual spend (£305.8m). The overspend arises from a combination of pay award pressure, contract price increases, prior year shortfalls and additional safe staffing. Manx Care’s current migrations assume £4.9m of the reserve funding held by DHSC, reducing the net forecast overspend to £22.3m.

Table 2 provides the current yearend forecast.

| Department of Health & Social Care     |                      |                 |                 |                 |                 |                 |
|--|----------------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| Financial Summary as at 30th June 2023 |                      |                 |                 |                 |                 |                 |
| Table 1<br>£000                        | Current Year to Date |                 |                 | Full Year       |                 |                 |
|  | Actual               | Budget          | Variance        | Forecast        | Budget          | Variance        |
| <b>Summary by Expense Type</b>         |                      |                 |                 |                 |                 |                 |
| 1 - Income                             | (55)                 | (29)            | 25              | (117)           | (117)           | -               |
| 2 - Payroll                            | 652                  | 827             | 175             | 2,759           | 3,309           | 550             |
| 3 - Infrastructure Expenses            | 1                    | 1               | (0)             | 3               | 3               | -               |
| 4 - Transport Expenditure              | -                    | -               | -               | -               | -               | -               |
| 5 - Supplies & Services                | 137                  | 90              | (47)            | 309             | 359             | 50              |
| 6 - Agency & Contracted Services       | 229                  | 223             | (5)             | 223             | 223             | -               |
| 7 - Grants etc.                        | -                    | -               | -               | -               | -               | -               |
| <b>Sub-total Operational</b>           | <b>963</b>           | <b>1,112</b>    | <b>148</b>      | <b>3,177</b>    | <b>3,777</b>    | <b>600</b>      |
| NI Contributions                       | (12,679)             | (13,402)        | (722)           | (53,607)        | (53,607)        | -               |
| Contingency Fund                       | -                    | -               | -               | 1,922           | 6,912           | 4,990           |
| <b>Total DHSC</b>                      | <b>(11,716)</b>      | <b>(12,290)</b> | <b>(574)</b>    | <b>(48,509)</b> | <b>(42,919)</b> | <b>5,590</b>    |
| Manx Care Mandate                      | 87,308               | 75,744          | (11,564)        | 330,174         | 302,975         | (27,199)        |
| <b>Grand Total</b>                     | <b>75,592</b>        | <b>63,453</b>   | <b>(12,138)</b> | <b>281,665</b>  | <b>260,056</b>  | <b>(21,609)</b> |

Table 2.

Manx Care’s current year Cost Improvement Plan (CIP) work has delivery of £11m savings which are in excess of the 4.5m target. However, already one third in to the year and so far £1m achieved it is likely that only the target will be achieved in year, reducing overspend to c£15.7m. This sum has been provided in the monthly management accounts and discussed at recent COG meetings.

DHSC Reserve - From 2023-24 £6.5m of contingency funding was awarded to the Department’s revenue budget to allow for meeting unplanned costs that would have otherwise resulted in a supplementary vote. This sum had an inflationary uplift in the current year to £6.912m.

For 2022-23 Manx Care made yearend claims to the reserve of £5.275m for items such as high cost patients £3.724m, after care packages, increased motorsports related costs and winter pressures. The £1.233m remainder of the sum was offset to reduce Manx Care’s overspend.

For the current year, to June 2023 Manx Care have a total of £4.99m of reclaim bids that it is yet to present to the Department.

The Department for 2024-25 seeks place an amount of funding from the revenue budget each year into a standalone fund, similar to the Healthcare Transformation Fund, whereby any surplus can be carried over, giving the department greater flexibility when allocating funds for certain projects/initiatives over a number of years rather than just in-year. It would also preserve an average level of funding for fluctuation for high cost patients (e.g. 2023-24 £3.724m and 2024-25 forecast is £1.5m). The idea would be to then ‘top up’ the fund from future allocated revenue budget. The Department is keen to explore how it could acquire delegations to have greater control over the fund in a similar way that DFE manage the Financial Assistance Scheme.

### **3. Overview of funding assessment**

Referred to in Section 1, the Department is required to commission service reviews on an ongoing basis. Cost to date have been funded out of the Transformation Fund, however, in the future there will need to be a DHSC revenue budget allocated for this.

Manx Care is statutorily mandated to deliver a comprehensive range of health and social care services. The 2024-25 Mandate is still under discussion but its ambitions are included in the recommended funding option. This option will address costs pressures as outlined in order of priority:

#### **Priority 1 - Unavoidable Cost Pressures £39.2m**

These largely include pay awards (6% assumed) for current and next year (£15m), current year and 2024-25 cost pressures (£10.8m + £3.8m)), inflationary adjustments (£6.2m) and other committed costs.

#### **Priority 2 – Statutory / Compliance Requirements (£3.6m)**

Legal and statutory compliance requirements primarily around meeting Information Governance requirements and responding to the CQC (Care Quality Commission) Inspection reports

#### **Priority 3 – Mandate Requirements £3.9m**

These include introduction of NICE TAs (drug standard), development and provision of Advocacy services, reducing delayed transfers of care from acute and social care settings, reporting on 18 week Referral to Treatment (RTT) performance, further developing wellbeing hubs and developing an autism service.

#### **Priority 4 – Core Service Delivery £11.8m**

These cost pressures relate to gaps in service delivery and performance that have been identified in order to perform the core services to expected standards. They include increasing the standards in Maternity & Women's Health services, increase in social care staffing in Adult Learning Disability, Residential & Dementia Care settings, to address increased demand in Children and Adolescent Mental Health Team and Children's Respite, Safeguarding and Mental Health Supported Living provision, demand increase in cancer services as a result of waiting lists and resource to implement business change.

#### **Priority 5 – Enhanced Service Delivery £1.6m**

This focuses on proactive investment in Mental Health professionals, a restructure of our Ambulance Service to support the growing demand for the service and ensure fast response times to incidents, investment in digital Histopathology technology to provide greater resilience and capacity in the service, expansion of our Clinical Psychology Health Liaison Service, development of an adult ADHD service, as well as further investment in the Cancer & Diagnostics service to support the 2 week wait target.

#### **Priority 6 – Additional Service Delivery £986k**

Provision of additional services above the minimum to meet current and expected demand. Primarily, the funding would be used to expand the range of activities offered to those service

users in the Adult Learning Disabilities system, thus improving their quality of life and expanding our Manx Care Advice and Liaison Service (MCALS) and Patient Engagement activities.

#### **4. Cost and savings analysis**

The Department's has a small operational budget of £3.8m, of which £3.3m (87%) is employee costs. In the current financial year the Department is monitoring vacancies to deliver a £550k CIP. Outside of this, cost savings opportunities are limited. The reserve sum is anticipated to be fully utilised by Manx Care claims and some external quality regulation cost with any remaining budget offsetting against the projected Manx Care overspend.

Manx Care has a full CIP programme in operation and has been developed in conjunction with Mersey Internal Audit Agency (MIAA) which sets out the CIP plan for a number of years. In 2022-23 £9.9m of savings were delivered against a target of £4.3m but mainly served to hold the funding pressures in check rather than significantly reduce overspend. As provided in Section 2, Manx Care's current year Cost Improvement Plan (CIP) work has delivery of £11m savings which are in excess of the 4.5m target. Savings to Q1 are £1m.

Income growth - £2.26m of inflationary (£460k) new income (£1.8m) is factored in to Manx Care's financial plan. For DHSC, from 2025-26 new legislation that requires around 900 establishments to register could deliver c£1.8m, however this will be offset by around half in the first year to allow for drafting and infrastructure costs.

Expected internal fund transfers - The claim to the legal cost reserve in excess of £3.3m has been referred to in Section 2. In addition to this the Department makes an annual claim to the Medical Indemnity Fund for uninsured negligence claims, the cost in 2022-23 was £1.1m and the forecast for 2023-24 is £2.5m. Other approved items are currently estimated at £616k are from the Healthcare Transformation Fund.

Project Development Fund (PDF) – The Department has 5 items for progression to the fund that will largely be in the current year. Those are:

- Radcliffe Villas £28k
- Extension to Path Lab, Noble's Hospital £20k;
- Replacement of Snaefell GP Surgery £25k
- Central Ambulance Station £25k
- Rivers Suite, Geddyn Reesht, Manannan Court £15k
- Cummal Mooar c£50k

## 5. Summary of expected benefits and risks

The investments outlined in this paper are considered essential to create a firm baseline from which the Healthcare system can grow and develop so that it can provide the kind and quality of healthcare provision envisioned in the Island Plan.

They will create a system that is well governed and can meet all of its compliance and statutory requirements that will allow it to be fully accountable and fully support delivery against the Sir Jonathan Michael Recommendations, the Economic Strategy, Island Plan and the Mandate.

They will also allow Manx Care to continue to progress against its key strategic aims:

- Improving patient safety
- Creating a positive working culture
- Improving financial health
- Promote and achieve greater integration across health and care services

It also supports the DHSC's longer term priorities:

- Supporting care at home and in our community
- Sustained development of integrated and co-ordinated primary, secondary and community care services

The Pink Book level of funding, particularly for Manx Care of £312m is already far from the current year's forecast of £330.2m. The impact of a reduced funding envelope would have a grave implications for the Department and Manx Care's ability to deliver against either the mandated objectives or the requirements of the Island Plan.

Reduced funding would necessitate reversing much of the investment made in the past 2 years in governance (such as Data, Performance, Risk, Business Change, Emergency Planning, Health and Safety & Information Governance) as well as service delivery (such as Safeguarding, Intermediate Care, Associate Medical Directors, Clinical Domain Leads) and safe staffing levels (ED, Cancer, Midwifery, Mental Health & Nursing).

Furthermore, measures such as reducing the number of operational theatres and wards and curtailing elective activity would also be necessary. Care packages will need reviewing with a view to curtailing to minimum requirement only.

Many of these measures would not only have an enormous impact on the quality of services provided to patients, it would undo all of the good work and progress that has so far been made. It would also have a significant impact on the ability of Manx Care to recruit and retain staff.

It would undo the beneficial effects of significant investments made in both Transformation and Restoration & Recovery and indeed would prevent further progress against Sir Jonathan Michaels' 26 Recommendations.



## 6. Total funding request

|                        | 2024/25<br>funding from<br>Pink Book | Anticipated<br>additional<br>income/cost<br>savings | Additional<br>cost pressures<br>identified | Net position<br>2024/25 |
|------------------------|--------------------------------------|---|--|-------------------------|
| Income                 | 45,685                               |   | 2  | 45,687                  |
| Employee costs         | 3,375                                |   | 133  | 3,508                   |
| Infrastructure costs   | 3                                    |   | 0  | 3                       |
| Transport costs        | 367                                  |   | 7  | 374                     |
| Supplies & services    | 228                                  |   | 4  | 232                     |
| Other                  | 318,996                              | 19,623  | 62,204                                     | 361,577                 |
| <b>Net expenditure</b> | <b>277,284</b>                       | <b>19,623</b>                                       | <b>62,346</b>                              | <b>320,007</b>          |

Therefore the DHSC's total funding request for 2024-25 is £320m which is a **net increase of £42.7m on the provisional 2024-25 Pink Book target**. This includes an inflationary increase to the Department's budget and for Manx Care an underfunding and cost pressure solution whilst delivering on cost improvement and additional income plans which all will minimise the risk of future overspending.

The level of funding requested will allow the Department to fulfil its responsibilities in setting health and social care priorities and developing strategy, policy and legislation as well as acting as the Island's Health and Care regulator whilst supporting Manx Care to deliver its services to a desired level and standard, avoiding overspend and the need for supplementary vote.

### Other Items of Note

New Strategies - The Department also wishes to highlight that it currently has a number of new programmes in the Island Plan that the development of which will be met from existing resources, but for which there is no funding in place for implementation and delivery of them. The programmes are Strategy for the Long Term Provision of Care, Mental Health & Children's Mental Health Strategy, Carer Strategy and Young Carer Strategy and National Autism Strategy. It could be possible to meet these year one costs from the reserve sum, however after Manx Care's bids there will likely be little residual and so a need to seek funding from internal funds may be required.

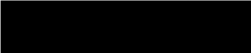
In addition to the revenue budget Manx Care is progressing for Department approval a paper for Phase 3 of the Restoration & Recovery programme which is currently funded from the Contingency Fund.

The Department would also like to flag that Council are considering the Health and Care Transformation function and team transferring into DHSC and so are working with Cabinet Officers and Treasury on the implications for the fund and budget transfer.


## 7. Approvals

- Approval of the document by DFO, AO/CO and Minister

### Designated Finance Officer

|            |   |
|------------|---|
| Name:      | Natalie Leung   |
| Title:     | Finance Business Partner  |
| Date:      | 08/08/2023  |
| Signature: |  |

### Accountable Officer/Chief Officer

|            |   |
|------------|---|
| Name:      | Julie King  |
| Title:     | Interim Chief Officer   |
| Date:      | 15/08/2023  |
| Signature: |  |

### Minister/Chair

|            |   |
|------------|---|
| Name:      | Lawrie Hooper MHK BSC (Hons) MRES ACA   |
| Title:     | Minister  |
| Date:      | 15/08/2023  |
| Signature: |  |