



Eich cyf/Your ref
Ein cyf/Our ref MA/EM/4258/21

21 December 2021

Dear Chairs,

This letter informs you of the issue of the 2022-23 allocation for health boards.

This allocation letter sets out the funding for your organisation for 2022-23. It should be used to develop plans to deliver against the priorities for 2022-23 set out in the NHS Planning Framework, and to continue to progress delivery of the vision set out in A Healthier Wales.

I expect you to ensure your organisation operates within the funding set out in this allocation letter, and any further notification of funding as referred to above. I will be holding you to account for the development and delivery of an agreed plan for 2022-23 and beyond that to reflect your statutory requirements and responsibilities. Please note that I will not be clearing the plans unless your health board has demonstrated how you will be developing models for regional cooperation across health board boundaries in order to clear the considerable backlog which has developed as a result of covid.

I will be kept apprised of progress on the above by my officials and through our regular meetings.

Yours sincerely,

Eluned Morgan AS/MS
Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol
Minister for Health and Social Services

Bae Caerdydd • Cardiff Bay
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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

Cyfarwyddwr Cyffredinol Iechyd a Gwasanaethau Cymdeithasol/
Prif Weithredwr GIG Cymru
Grŵp Iechyd a Gwasanaethau Cymdeithasol

Director General Health and Social Services/
NHS Wales Chief Executive
Health and Social Services Group



Llywodraeth Cymru
Welsh Government

Chief Executives – NHS Local Health Boards
Chief Executives – NHS Trusts
Chief Executive – HEIW
Chief Executive - DHCW

Our Ref: JP/JB/SB

21 December 2021

Annwyl Gyfaiil

DYRANIADAU BYRDDAU IECHYD 2022-23

Amgaeaf lythyr y Gweinidog i Gadeiryddion yn cyhoeddi'r dyraniadau cyllid ffurfiol ar gyfer 2021-22.

Mae'r dyraniad hwn yn pennu'r cyllid cychwynnol ar gyfer eich sefydliad ar gyfer 2022-23. Dylid ei ddefnyddio i ddatblygu cynlluniau i gyflawni yn erbyn y blaenoriaethau ar gyfer 2022-23 a nodir yn Fframwaith Cynllunio'r GIG, ac i barhau i symud ymlaen i gyflawni'r weledigaeth a nodir yn Cymru Iachach.

Rwy'n disgwyl i chi sicrhau bod eich sefydliad yn gweithredu o fewn y cyllid a nodir yn y llythyr dyrannu hwn, ac unrhyw hysbysiad pellach o arian fel y cyfeirir ato uchod. Byddwch chi'n atebol am ddatblygu a darparu cynllun a gytunwyd arno ar gyfer 2022-23 a thu hwnt i hynny i adlewyrchu eich gofynion a'ch cyfrifoldebau statudol.

Yours sincerely

Judith Paget CBE

CYLCHLYTHYR IECHYD CYMRU



Llywodraeth Cymru
Welsh Government

Dyddiad Cyhoeddi: 21 Rhagfyr 2021

STATWS: CYDYMFFURFIO

CATEGORI: CYLLID

Teitl: Dyraniadau Cyllid Bwrdd Iechyd 2022-23

Dyddiad Dod i ben / Dyddiad yr Adolygiad N/A

I'w weithredu gan:

Prif Weithredwyr

Cyfarwyddwyr Cyllid

Angen gweithredu erbyn:

Ar unwaith

Anfonwr: Julie Broughton

Enw(au) Cyswilt GIGC Llywodraeth Cymru :

Julie Broughton, Adran Cyllid, 03000 255747

Dogfennau amgaaedig: *Llythyr Dyraniad, tablau Cyllid a nodiadau esboniadol.*

2022-23

Health Board
Allocations

Health Board Allocation 2022-23

Introduction

1. This document details the Health Boards revenue allocations for 2022-23.
2. The allocation reflects the Minister for Health and Social Services' decisions about the distribution of resources to Health Boards.
3. This allocation is made under:
 - Section 174 of the National Health Service Act 2006 and the amounts payable to the Assembly in respect of depreciation charges under section 174(10). The powers are conferred directly on Welsh Ministers.
 - Section 70 of the Government of Wales Act 2006

Action

4. Health Boards are expected to develop robust plans to deliver against the priorities for 2022-23 set out in the NHS Planning Framework from within this allocation. This is an initial allocation and additional funding for key priorities will be allocated as appropriate when costs are confirmed. Funding for the following issues are being held centrally until the amounts required for 2022-23 are confirmed:
 - GMS and GDS contractor allocations are issued at this stage at 2021-22 recurrent levels.
 - Revenue funding for SIFT, Postgraduate Medical and Dental Education, Research and Development and PHLS will be issued as direct funding to the relevant health boards and NHS trusts. Depreciation funding for these funding streams is included in this allocation.
 - Allocations for accelerated depreciation, AME depreciation for donated assets and DEL and AME impairments will be issued as direct funding to the relevant health boards and NHS trusts. This also applies to any increases in depreciation related to approved schemes with confirmed strategic support.
 - Funding for the NHS Wales Shared Services Partnership will continue to be met from Welsh Government central budgets in 2022-23. Adjustments have been made in this allocation for agreed transfers (as set out in Table 3).
 - Funding will be held centrally within the Welsh Government NHS budget to recognise the impact of NICE mandated Advanced Therapeutic Medicinal Products.
 - Funding will continue to be held centrally to fund the costs of purchasing cystic fibrosis medicines Orkambi and Symkevi and to maintain access to Kalydeco.

- Funding for education and training investments in 2022-23 will continue to be provided directly to HEIW from the Welsh Government NHS budget.
- Funding for NHS pay awards in 2022-23 will be held centrally and allocated to employers once awards are made.
- Funding for ongoing national Covid responses, including mass vaccination, Test, Trace and Protect and the provision of PPE will be held centrally and allocated on actuals during 2022-23. Other Covid related costs will need to be met from the funding in this allocation.
- As in 2021-22, funding to cover the increased employers contribution for the NHS Pension Scheme will be held centrally.

GENERAL POLICY FRAMEWORK

Unified budgets

5. This document sets out the revenue allocation to health boards for 2022-23.
6. Health Boards are responsible for managing the totality of their budget, and making the best use of all available resources. The only restrictions to virements between different allocations relate to ring fenced HCCHS services (see Table B) the totality of the GMS contract and the elements of the Dental Contract (see Table C and F and the explanatory notes enclosed).
7. The 2022-23 allocation comprises:
 - Summary: Revenue
 - Hospital and community Health Service (HCCHS) and prescribing revenue discretionary allocation (tables A1, A2 and A3)
 - HCCHS protected and ring fenced Services (table B1)
 - HCCHS Directed Expenditure Allocations (table B2)
 - New General Medical Services Contract Allocation (table C)
 - Revenue Allocation for Community Pharmacy Contract (table E)
 - Revenue Allocation for Dental Contract (table F)
 - Memorandum Tables (tables 1 to 5)
 - Memorandum Table (DDRB)
8. For Hospital and Community Health Services (HCCHS) and prescribing costs, Health Boards are responsible for commissioning services for their resident population for

HCHS, with the exception of some cross border flows, (referred to in paragraphs below) and on the basis of registered population for the prescribing element. The GMS Contract allocation is issued on the basis of registered populations, and the Community Pharmacy allocation is issued primarily on the basis of numbers of scripts dispensed within Health Board areas

Equality Impact Assessments

9. You are reminded of the requirement to ensure you undertake integrated impact assessments of all major spending decisions, including the implementation of efficiency programmes.
10. Health Boards are reminded to ensure compliance with the Welsh Government Code of Practice for Funding the Third Sector, and the requirements of the Well-being of Future Generations (Wales) Act.
11. You should ensure that any changes in service provision are impact assessed to ensure the Welsh language is fully considered and you should keep a record of the cost in delivering the service in Welsh.
12. Health boards are reminded that any funding decisions take account of the population needs assessments for care and support needs that were published in 2017, as part of the requirements of the Social Services and Wellbeing (Wales) Act 2014.

HOSPITAL AND COMMUNITY HEALTH SERVICES AND PRESCRIBING REVENUE (HCHSP)

Recurrent discretionary allocation (Table A)

13. This provides the total discretionary funding available to Health Boards to fund hospital and community healthcare services and primary care prescribing costs. The distribution of the allocation is derived from the 2021-22 baseline, adjusted (Tables A2 (baseline adjustments – see notes for detail) and A3 (additional recurrent funding)) for new funding issued and additional agreed top sliced funding.
14. Health Board discretionary allocations have been increased by £150 million for core pressures for 2022-23. This equates to approximately a 2.8% increase on the recurrent discretionary allocation, ring fenced (excluding mental health and depreciation) and Directed Expenditure. A further £20m has been allocated to the ring-fence mental health allocation as outlined below. £10m funding has been held centrally to provide an equivalent increase for directly funded organisations, providing an overall increase of £180m core NHS funding.
15. This core funding increase is to provide NHS organisations with recurrent financial stability as medium term plans are developed and implemented. Along with expected efficiencies, which as a minimum should be set at levels being achieved in the current financial year, this increase should address the impact of the pandemic on underlying financial positions and provide support for new non-pay cost growth. The funding will also need to cover the increased employers National Insurance Contributions effective from April 2022.

16. 2021-22 Pay allocations (A4C/DDRB) have been included as per the mapping return percentages. A summary memorandum table has been included for information.
17. The 2021-22 allocation letter actioned top slices to fund specific developments, with funding being transferred to ring fenced allocations. This arrangement continues in 2022-23 with further adjustments for the next year or full year effect for paramedic banding and 111 rollout.
18. Health boards should continue to take action to reduce unnecessary and inappropriate prescribing and reduce waste.
19. The Welsh Government will continue to hold a budget for the difference between the cost of prescribing and the cost of dispensing (excluding (WP10 (HP) funding, as this was included in the 2016-17 supplementary allocation).

HCHS Ring Fenced Services (Table B1)

20. The second component of the HCHS allocation is the funding allocated for ring fenced allocations. There is no flexibility about the use of this funding, although Health Boards are free to invest additional funding in these services to meet national priorities. Health Boards are reminded that ring fenced funding cannot be deferred into future financial years.
21. Additional funding has been top sliced from the discretionary allocation and added to ring fenced funding for paramedic banding.
22. The DEL depreciation budget remains ring fenced and is a non-cash allocation. In year allocation adjustments will be considered on a case by case basis on a non recurring basis.
23. In year funding of £53.680 million has been added to the existing ring fenced Integrated Care Fund to create a new Regional Integration Fund, totalling £131.657 million (£50.000 million Transformation Fund/ £2.000 million previously allocated Safe accommodation for children with complex high end emotional and behavioural need/ £0.280 million previously allocated Transformation programme Engagement funding and £1.400 million previously allocated CYP Emotional Health & Wellbeing funding). Operational guidance of the fund will be issued by policy officials in the new year.
24. Previously confirmed funding of £170 million for Planned and Unscheduled Care Sustainability for 2022-23 onwards has been included.
25. Value-based recovery funding of £15 million has been added to the tables, to support NHS recovery over the medium term, with a focus on delivery of high value interventions that ensure improved outcomes for patients and support service sustainability and reducing waits for treatment. The Value in Health Centre and Finance Delivery Unit will provide support to local health boards to deliver the expected benefits from this funding. The £15m funding included in this allocation will also be supplemented with £5m held centrally Government to support the development of value based healthcare amongst NHS Trusts, further implementation in Health Boards dependent on the maturity of value based healthcare plans, and the overall system requirements to support value across NHS Wales.

26. As advised in paragraph 14, the £150 million uplift includes an equivalent 2.8% uplift on the ring fenced allocations (Table B1) (excluding Mental Health and Depreciation amounts) and the Directed Expenditure Analysis (Table B2).

HCHS Directed Expenditure (Table B2)

27. Additional allocations have been added to the Directed Expenditure table, for agreed items, such as further 111 top sliced rollout funding, AWTTC funding to Cardiff & Vale, historically paid on an in year basis, Cancer and Lymphedema Network funding, previously allocated to the NHS Collaborative and Workforce changes for both Cardiff & Vale and Swansea Bay.

Healthcare Agreements between Health Boards and with NHS Trusts

28. Health Boards and the Welsh Health Specialised Services Committee are expected to pass on an appropriate levels of funding for relevant non-pay inflationary cost increases and growth funding in the Healthcare Agreements for services provided by other Boards and NHS Trusts, equivalent to the additional funding provided to commissioners. With the exception of centrally funded services and any agreed in-year funding, Welsh Government will not be allocating funding for underlying pressures and new cost growth directly to provider organisations, as this is an appropriate requirement for commissioning organisations to discharge.

29. The financial values of Agreements should be confirmed promptly to enable provider organisations to confirm their Integrated Medium Term Plans. As we transition from all Wales Block contracts to locally determined arrangements, the deadline set for signing off LTA/SLA documents will be extended to the last working day of June 22, with arbitration cases, from both parties, set at the first working day in July 22. This will be confirmed in greater detail, with further updates regarding the wider issues contained in WHC/2019/014, in January 22. Organisations are to report on the status of obtaining signed agreements via the Financial Monitoring Return process.

PRIMARY CARE REVENUE

GMS Contract (Table C)

30. Contract negotiations have not been finalised for 2022-23. The GMS allocation is issued at this stage on the same basis as the current 2021-22 allocation.

31. A supplementary allocation will be issued when the 2022-23 contract agreement is confirmed.

Community Pharmacy Contract (Table E)

32. The allocation for 2022-23 is issued with a £3 million increase (including funding to Cardiff & Vale to support the development of National Patient Group Directions for community pharmacies by the Welsh Medicines Information Centre).

33. Details of the total contractual funding and the distribution of funding between core services, enhanced services, quality and workforce elements will be clarified after the allocation is issued.

Dental Contract (Table F)

34. Contract negotiations have not been finalised for 2022-23 in time for this document. The allocation has therefore been issued based on the 2021-22 final allocation with adjustments being made for the following recurrent changes:

- DDRB pay and expenses increase from 2021-22
- Additional access funding for 2022-23 (as per written statement 17 November 2021).

35. The allocation will be re-issued for 2022-23 when contract negotiations have been concluded, and agreement is given for a contractual uplift.

36. Health Boards are reminded that in terms of the ring fenced Dental Contract budget arrangements will continue as follows for the next year:

- for Health Boards without two consecutively approved IMTPs, the ring fence will continue for 2022-23;
- for those Health Boards with two consecutively approved IMTPs, the ring-fence is removed provided they continue to have their IMTP approved; and
- to continue to ring-fence the Designed to Smile and Gwên am Byth oral health improvement programmes for all Health Boards in 2022-23.

37. We will continue to monitor and review the expenditure analysis provided by Health Boards and we will make adjustments to ring fenced dental contract allocations should explanation on expenditure be considered inadequate.

OTHER ISSUES

Capital

38. The NHS infrastructure investment comprises strategic schemes delivered through the All Wales Infrastructure Programme. The investment includes land and buildings, but also other significant physical assets including vehicles, medical and Information Management Technology equipment. The infrastructure investment covers all healthcare settings including acute, primary and community care.

39. Significant pressures are anticipated against the capital programme for 2022-23 which will likely require difficult decisions to be made. Officials will continue to work with organisations in respect of funding for individual schemes in 2022-23. The largest scheme on site during 2022-23 will be the continuing redevelopment and modernisation works at Prince Charles Hospital.

40. In addition to the above, capital funding has also been approved for the continued delivery of the Primary and Community Care Pipeline across Wales as well as the continuing support for IM&T and diagnostic Programmes. All approved funding amounts are agreed with individual organisations based on scheme delivery profiles.

Mental Health

41. Mental health services will continue to be ring fenced in 2022-23. Compliance of individual organisations with the ring fencing requirement will be monitored on an annual basis. Any organisation whose expenditure on mental health services falls below the ring fenced quantum will be required to account for the shortfall in expenditure. Table 2 details the total amount of the mental health ring fence, shown by relevant allocation stream. This funding forms a floor, below which expenditure on core mental health services must not fall. This does not exclude mental health services from making efficiencies, but these savings must be re-invested in these services to meet cost increases and new developments.
42. £20 million has been added to the ring fenced mental health allocation in the LHB revenue allocation for cost growth uplift, which provides health boards with additional funding. This funding will contribute to funding unavoidable cost growth in mental health services.
43. Funding of £14.103 million has been transferred from central budgets for Call Helpline (£0.343 million), Veterans funding (£0.235 million), Mental Health Service Improvement fund (£5.925 million), Crisis Care funding (£4.000 million) and Specialist CAMHS (£3.600 million).
44. This increases the total mental health ring fenced allocation to £760.885 million in 2022-23. The detail is shown in Table 2 of the allocation, and the corresponding explanatory notes.

Infrastructure SIFT

45. Funding for infrastructure SIFT has been included as a Directed Expenditure Allocation. This funding must be used to support medical undergraduate education, and recipients of this funding will still be required to account for its use as part of the annual SIFT accountability agreements.

Substance Misuse

46. The substance misuse allocation remains ring fenced in 2022-23 and the table shows an agreed increase of £1 million. Funding will be withheld from Health Boards (HB) until confirmation is received from the Chair of the relevant Area Planning Board (APB) that the use of these resources complements the delivery of the Welsh Government Substance Misuse Delivery Plan 2019-22, this should happen no later than 30th June 2022. Welsh Government expects to see evidence of clear joint planning across the HB ring fence and the Substance Misuse Action Fund monies, with HBs taking due regard for their statutory duties and ensuring they contribute to areas of relevant pressures, including prescribing costs and meeting waiting list targets. Further detail is included in the explanatory notes accompanying the allocation.

Public Health (PHW), Health Education and Improvement Wales Special Health Authority (HEIW) and Digital Health and Care Wales (DHCW)

47. Core funding for the above bodies for 2022-23 are not being issued with this allocation. Separate funding letters will be issued from the policy leads.

Cross Border Financial Flows

48. To reflect cross border commissioning responsibility, Health Boards in Wales have been funded for English residents registered with their GPs and vice versa, in line with the Protocol agreed with the Department of Health.

49. The impact of the 2022-23 tariff on LHB plans will be considered once the tariff is published by NHS England.

Queries

50. If you have any queries about this Circular please contact Julie Broughton (0300 025 5747).

51. Further information surrounding specific policy issues and contact details are provided in the explanatory notes.

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Memorandum table: DDRB

Summary: Unified Budget Allocations - Total HCHS, Drug Prescribing and Primary Care Contracts Resource Limit 2022-23

	1	2	3	4	5	6	7	8
	2022-23 Recurrent HCHS and Prescribing Discretionary Allocation	2022-23 HCHS Ring Fenced Allocation	2022-23 Directed Expenditure	Total 2022-23 HCHS and Prescribing Revenue Allocation	2022-23 GMS Contract - Table C	2022-23 Community Pharmacy Contract - Table E	2022-23 Dental Contract - Table F	Total Revenue Resource Limit 2022-23
	£m	£m	£m	£m	£m	£m	£m	£m
Aneurin Bevan HB	1,003.775	233.247	16.969	1,253.991	102.026	32.831	30.941	1,419.789
Betsi Cadwaladr University HB	1,168.360	382.929	3.161	1,554.451	133.832	35.116	29.787	1,753.185
Cardiff and Vale University HB	717.263	190.443	20.685	928.390	75.532	23.303	27.605	1,054.830
Cwm Taf Morgannwg HB	798.933	198.869	2.574	1,000.376	78.842	28.052	22.229	1,129.499
Hywel Dda HB	670.919	168.751	1.527	841.197	73.081	21.869	18.735	954.882
Powys HB	233.431	61.454	4.496	299.381	34.101	5.046	6.745	345.272
Swansea Bay HB	646.906	195.866	9.754	852.526	65.069	21.867	22.497	961.959
Total	5,239.587	1,431.559	59.165	6,730.311	562.483	168.084	158.538	7,619.416

Table A1: Hospital, Community and Health Services and Prescribing (HCHSP) - Discretionary Allocation for 2022-23- £ million

	1	2	3	4
	2021-22 Recurrent HCHS and Prescribing Discretionary Allocation	Baseline Adjustments (Table A2)	Additional Recurrent funding (Table A3)	2022-23 Recurrent HCHS and Prescribing Discretionary Allocation
	£m	£m	£m	£m
Aneurin Bevan HB	961.602	(0.053)	42.227	1003.775
Betsi Cadwaladr University HB	1,117.251	(0.063)	51.173	1168.360
Cardiff and Vale University HB	685.303	0.122	31.837	717.263
Cwm Taf Morgannwg HB	763.824	(0.047)	35.156	798.933
Hywel Dda HB	641.566	(0.038)	29.391	670.919
Powys HB	224.588	0.086	8.757	233.431
Swansea Bay HB	616.924	(0.250)	30.232	646.906
Total	5,011.057	(0.244)	228.774	5239.587

Table A2: HCHSP Allocation 2022-23 Baseline Adjustments - (Column 2, Table A1)

	1	2	3	4	5	6	7	8	9
	In year: pay funding	Funding for Microprocessor Controlled Prosthetic Knees (MPK) for civilians	Local Optometric Adviser Role	Junior doctor rota management funding	DHCW Hosting SLA lost income	NHS Wales Shared Services adjustments (Table 3)	Additional top slice: paramedic banding (to ring fenced table B1)	Additional top slice: 111 service (to table B2)	Total Adjustments (Carried forward to Table A1, Column 2)
	£m	£m	£m	£m	£m	£m	£m	£m	£m
Aneurin Bevan HB		0.131	0.013	0.039	0.134	(0.022)	(0.299)	(0.050)	(0.053)
Betsi Cadwaladr University HB		0.156	0.013	0.053	0.156	(0.033)	(0.349)	(0.059)	(0.063)
Cardiff and Vale University HB	0.212	0.111	0.013	0.062	0.093	(0.125)	(0.209)	(0.035)	0.122
Cwm Taf Morgannwg HB		0.099	0.013	0.038	0.106	(0.026)	(0.238)	(0.040)	(0.047)
Hywel Dda HB		0.086	0.013	0.022	0.088	(0.018)	(0.197)	(0.033)	(0.038)
Powys HB	0.099	0.029	0.013	-	0.029	(0.009)	(0.065)	(0.011)	0.086
Swansea Bay HB		0.087	0.013	0.051	0.091	(0.255)	(0.204)	(0.034)	(0.250)
Total	0.311	0.700	0.091	0.267	0.697	(0.486)	(1.561)	(0.262)	(0.244)

-£1.823

£9.465 for 22-23, £15.460m for 22-
£7.904m for 21-22 23, £15.198m for
additional 21-22 (additional
£1.561m, to be £0.262m), added
added to Table B1 to Table B2

Table A3: Additional 2022-23 recurrent funding - (Column 3, Table A1)

	1	2	3
	Agenda for Change/DDRB Pay funding	Core uplift for 2022-23	Total Additional Recurrent funding (Carried forward to Table A1, Column 3)
	£m	£m	£m
Aneurin Bevan HB	13.448	28.779	42.227
Betsi Cadwaladr University HB	17.682	33.491	51.173
Cardiff and Vale University HB	11.800	20.037	31.837
Cwm Taf Morgannwg HB	12.265	22.892	35.156
Hywel Dda HB	10.422	18.969	29.391
Powys HB	2.514	6.243	8.757
Swansea Bay HB	10.642	19.590	30.232
Total	78.774	150.000	228.774

Table B1: HCHS Protected and Ring Fenced Revenue Allocations for 2022-23 £-million
 Amounts in the table below have been increased (core uplift applied to Table A3)

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	Learning Disabilities	Depreciation (Table 4 Column 1)	Mental Health Services (Table 2 column 8)	Renal Services	Palliative care funding	Paramedic banding	Clinical Desk enhancements	Genomics for Precision Medicine Strategy (inc new Genetic Tests)	Critical care funding (including WHSSC funding)	Critical care funding (EASC funding)	Organisation specific adjustment (non recurrent 3 year arrangement)	Treatment fund	Funding for Planned and Unscheduled Care Sustainability for 2022-23 onwards	Value based Recovery	Regional Integration Fund (incorporating previously allocated ICF)	Total 2022-23 HCHS Ring Fenced Allocation (carried forward to Summary Table)
	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m
Aneurin Bevan HB	13.800	30.462	110.604	9.492	1.325	1.731	0.105	1.068	1.849	0.425		2.992	32.023	2.878	24.492	233.247
Betsi Cadwaladr University HB	17.214	31.789	149.562	20.115	1.298	2.203	0.162	1.187	2.625	-	82.000	3.587	38.394	3.349	29.443	382.929
Cardiff and Vale University HB	0.488	19.745	111.062	6.934	0.702	1.265	0.075	0.803	4.670	0.348		2.213	22.618	2.004	17.516	190.443
Cwm Taf Morgannwg HB	-	27.879	106.085	9.069	0.665	1.405	0.082	0.897	1.521	0.288		2.439	26.103	2.289	20.145	198.869
Hywel Dda HB	8.663	20.097	86.593	6.655	0.708	1.220	0.086	0.678	1.178	0.281		2.031	21.742	1.897	16.921	168.751
Powys HB	7.494	4.468	31.304	1.876	0.264	0.510	0.047	0.228	0.024	0.049		0.703	7.518	0.624	6.345	61.454
Swansea Bay HB	22.904	21.196	96.850	8.662	0.377	1.130	0.064	0.723	1.263	0.309		2.033	21.601	1.959	16.796	195.866
Total	70.562	155.637	692.060	62.803	5.339	9.465	0.622	5.584	13.130	1.700	82.000	16.000	170.000	15.000	131.657	1,431.559

Added
 £1.561m
 for 22-23,
 to total
 £9.465m

Table B2 - HCHS Directed Expenditure Analysis
 Amounts in the table below have been increased (core uplift applied to Table A3)

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	
	Dental SFT	Mental Health CALL Helpline	Radiotherapy	Primary Care complaints	Infrastructure SFT	SFT, PHS, R&D and PG/DE Depreciation (exc. Yr/over)	Blood Disorders funding	Wales Analytical Prescribing Support Unit	Short Term Wheelchair loan	AMMSG	Welshtec	Blood Borne Virus treatment centre funding	Community Health Council funding	Low Vision Services Wales (LVSU) - housing	Eye Health Examination Wales (EHEW) - housing	Assistive Technology (Staff costs)	National Imaging Academy	Brecon Group register	WMSCEASCI	111 roll out	All Wales Specialist Paediatric Lymphedema Nurse	DAN 24/7 helpline	Genomics - Core Funding for AMWGS	Training of Medical Emergency Response Incident Teams (MERIT)	Medical Lymphedema funding	PH & W Coordinator Posts (MHIG)	Endometriosis Nursing post (MHIG)	Quality & Care	Valinda NHS Trust Child Operating Officer Post	AMTTC	Cancer Support SLAs from Wales Cancer Network	SLAs from Lymphedema Network	UWIC Dental Contract SLA	Swansea Graduate Entry scheme	Swansea Clinical Medical School	Total (carried forward to Summary table)	
	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	
Aneurin Bevan HB	-	-	-	-	0.663	0.021						0.153			0.060	0.055			15.460				0.025	0.064	0.040	0.051		0.057		0.273	0.047					16.969	
Betsi Cadwaladr University HB	-	0.314	0.199	-	1.080	0.595	0.030		0.280			0.306				0.067					0.150				0.079	0.061											3.161
Cardiff and Vale University HB	0.820	-	-	0.056	11.334	3.638	0.066	0.310		1.172	0.173	0.153				0.044		0.009				0.577			0.096	0.051		0.040	1.166	0.893	0.037	0.050					20.685
Cwm Taf Morgannwg HB	-	-	-	0.035	0.110	0.131						0.196				0.042	1.500		0.032						0.109	0.061		0.041		0.294	0.025						2.574
Hywel Dda HB	-	-	-	-	-	0.039						0.153		0.837		0.037									0.058	0.051		0.003		0.348							1.527
Powys HB	-	-	0.263	-	-	-						-	4.104			0.013									0.035	0.055		0.003		0.023							4.496
Swansea Bay HB	-	-	-	-	4.245	0.304						0.110				0.035				0.060					0.400	0.124	0.051	0.525	0.001		1.143			2.296	0.459		9.754
Total	0.820	0.314	0.462	0.091	17.432	4.728	0.096	0.310	0.280	1.172	0.173	1.071	4.104	0.837	0.060	0.293	1.500	0.009	0.032	15.460	0.060	0.150	0.577	0.025	0.464	0.541	0.383	0.525	0.145	1.166	2.974	0.108	0.050	2.296	0.459	59.165	

Additional
 £0.262m
 added
 from Table
 A2

Table C: Revenue Allocation for GMS Contract - £ million

	1
	Provisional allocation 21-22 and 2022-23
	£m
Aneurin Bevan HB	102.026
Betsi Cadwaladr University HB	133.832
Cardiff and Vale University HB	75.532
Cwm Taf Morgannwg HB	78.842
Hywel Dda HB	73.081
Powys HB	34.101
Swansea Bay HB	65.069
Total	562.483

Table E: Revenue Allocation for Community Pharmacy Contract - £ million

	1	2	3	4
	Final allocation 2021-22	2022-23 additional funding: support for the development of National Patient Group Directions	2022-23 additional contract funding	Allocation for 2022-23
	£m	£m	£m	£m
Aneurin Bevan HB	32.265		0.566	32.831
Betsi Cadwaladr University HB	34.457		0.659	35.116
Cardiff and Vale University HB	22.859	0.050	0.394	23.303
Cwm Taf Morgannwg HB	27.602		0.450	28.052
Hywel Dda HB	21.496		0.373	21.869
Powys HB	4.923		0.123	5.046
Swansea Bay HB	21.482		0.385	21.867
Total	165.084	0.050	2.950	168.084

Table F: Revenue Allocation for Dental Contract - £ million

	1	2	3	4	5
	Provisional allocation 2021-22	In year allocation: adjustment to Dental innovation Round 1 (Beaufort park)	In year allocation: DDRB Pay uplift	Dental access funding 22-23	Provisional allocation for 2022-23
	£m	£m	£m	£m	£m
Aneurin Bevan HB	29.489	-0.022	1.099	0.375	30.941
Betsi Cadwaladr University HB	28.265		1.077	0.445	29.787
Cardiff and Vale University HB	26.323		0.962	0.320	27.605
Cwm Taf Morgannwg HB	21.128		0.816	0.285	22.229
Hywel Dda HB	17.853		0.637	0.245	18.735
Powys HB	6.414		0.246	0.085	6.745
Swansea Bay HB	21.476		0.776	0.245	22.497
Total	150.947	-0.022	5.613	2.000	158.538

**Table 1: Substance Misuse Funding
(Memorandum table)**

	1	2	3
	2021-22 Substance Misuse Ring- Fenced Funding	2022-23 Increase	2022-23 Substance Misuse Ring- Fenced Funding
	£m	£m	£m
Aneurin Bevan HB	2.992	0.192	3.184
Betsi Cadwaladr University HB	5.787	0.223	6.010
Cardiff and Vale University HB	2.628	0.134	2.762
Cwm Taf Morgannwg HB	3.708	0.152	3.860
Hywel Dda HB	2.138	0.126	2.264
Powys HB	0.624	0.042	0.666
Swansea Bay HB	2.896	0.131	3.027
Total	20.774	1.000	21.774

Table 2 - Total Mental Health Ring Fenced

	1	2	3	4	5	6	7	8	9	10	11	12
	2021-22 Initial HCHS Ring-Fenced Allocation	In year change: CALL Helpline	In year change: Veterans Funding	In year change: Mental Health Service Improvement Funding	In year change: Mental Health Crisis Care Funding	In year change: Specialist CAMHS (sCAMHS)	Core uplift 2022-23	2022-23 Final HCHSP Ring Fenced Allocation	Primary Care Prescribing	GMS (QOF and ES)	Other Primary Care	2022-23 Total Mental Health Ring Fenced Allocation
	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m
Aneurin Bevan HB	104.068			1.319	0.754	0.678	3.785	110.604	7.757	0.784	3.874	123.019
Betsi Cadwaladr University LHB	141.453	0.343		1.581	0.903	0.813	4.469	149.562	9.240	1.297	5.557	165.656
Cardiff and Vale University HB	105.896		0.235	0.931	0.532	0.479	2.989	111.062	5.177	1.151	3.173	120.563
Cwm Taf Morgannwg HB	101.918			0.000	0.614	0.553	3.000	106.085	5.974	1.224	3.000	116.283
Hywel Dda HB	82.276			0.895	0.512	0.460	2.450	86.593	4.675	0.720	2.445	94.433
Powys HB	29.846			0.310	0.177	0.159	0.812	31.304	1.062	0.345	2.124	34.835
Swansea Bay HB	92.500			0.889	0.508	0.458	2.495	96.850	5.478	1.365	2.403	106.096
Total	657.957	0.343	0.235	5.925	4.000	3.600	20.000	692.060	39.363	6.886	22.576	760.885

Table 3 - Shared Services Funding/ top slice

Previous years hidden

	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	Total Shared Services Top Slice 2021-22	Recurrent Adjustment 2022-23 (Table A2)	
	Agenda for Change funding	Unit 13 Court Road residual funding of Cwmbran stores transfer	Bank/ Medical recruitment transfer CTM	IP5 funding	IP5 lab PSBA recurrent costs (transfer from PHW)	Data Analyst	Single Lead Employer support costs	Primary Care GP Adverts	Strategic Pay Modelling	Core Uplift 2021-22	All Wales Specialist Pharmacist	Support for Omnicell System	Modernisation of Procurement team	Additional Band 7 post	Estates Maintenance	Increase Employment Law Block Funding	NWSSP baseline SLA movement Velindre to DHCW	Transfer of all Wales Pharmacist post	2 National Clinical Lead posts (optometry)	Commercial access agreements for NICE and AWMSG approved medicines	GMPI Operational budget	NHS Redress running costs	CAGE funding	WIBSS Operational Costs	2022-23 Core Uplift	2021-22 Pay award funding	Total Shared Services Funding 2022-23			
	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m		
Aneurin Bevan HB		0.037														0.021												5.206	5.184	(0.022)
Betsi Cadwaladr University LHB																0.033												6.243	6.210	(0.033)
Cardiff and Vale University HB																0.036		0.089										5.449	5.324	(0.125)
Cwm Taf Morgannwg HB			0.077													0.026												3.754	3.728	(0.026)
Hywel Dda HB																0.018												3.968	3.950	(0.018)
Powys HB																0.009												1.010	1.001	(0.009)
Swansea Bay HB												0.028	0.125	0.052	0.031	0.019												6.735	6.480	(0.255)
NWIS																												(0.028)		
Welsh Government	0.790			1.100	0.003	0.049	0.277	0.063	0.110	1.217	0.074								0.077	0.250	0.760	0.052	0.084	0.272	1.795	1.395	34.970			
TOTAL	0.790	0.037	0.077	1.100	0.003	0.049	0.277	0.063	0.110	1.217	0.074	0.028	0.125	0.052	0.031	0.162	-	0.089	0.077	0.250	0.760	0.052	0.084	0.272	1.795	1.395	67.307			
Welsh Ambulance Services NHST																0.016												0.656		
Velindre NHST																0.010	(0.069)											0.527		
Public Health Wales NHST																0.009												0.436		
HEIW																0.012												0.000		
DHCW																0.014	0.069											0.000		
OVERALL TOTAL	0.790	0.037	0.077	1.100	0.003	0.049	0.277	0.063	0.110	1.217	0.074	0.028	0.125	0.052	0.031	0.223	-	0.089	0.077	0.250	0.760	0.052	0.084	0.272	1.795	1.395	69.030	31.878	(0.466)	

Table 5: Recurrent Primary Care Development funding (Already in discretionary baseline - not additional funding)

(Memorandum table)

Amounts in the table below have been increased (core uplift applied to Table A3)

	1	2	3	4	5	6	7	8	9	10	11
	IMTP and Workforce	Cluster funding	Additional Cluster funding added 2021-22	Pathfinders	Wet AMD	Inverse Care Law	Occupational Health for GPs	Programme manager funding	Funding for local communication activity in primary care	National Director and Strategic Programme Lead for Primary Care	Total Amount (Already included in discretionary baseline)
	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m
Aneurin Bevan HB	5.084	1.880	1.896	0.715	-	0.360	0.038	0.060	0.020	0.160	10.213
Betsi Cadwaladr University HB	5.648	2.210	2.236	0.840			0.045		0.020		10.999
Cardiff and Vale University HB	3.825	1.414	1.351	0.537			0.031		0.020		7.178
Cwm Taf Morgannwg HB	4.382	1.515	1.513	0.575	0.019	0.360	0.030		0.020		8.414
Hywel Dda HB	2.918	1.284	1.291	0.488	-		0.022		0.020		6.023
Powys HB	1.160	0.453	0.416	0.172	-		0.010		0.020		2.231
Swansea Bay HB	3.067	1.244	1.297	0.473			0.024		0.020		6.125
Total	26.084	10.000	10.000	3.800	0.019	0.720	0.200	0.060	0.140	0.160	51.183

HEALTH BOARDS REVENUE ALLOCATIONS 2022-23 – EXPLANATORY NOTES

Table A1: HCHSP: Discretionary Allocation

Column 1 – 2021-22 Recurrent Allocation

This column is carried forward from the 2021-22 Health Board Revenue Allocation.

Column 2 – Baseline Adjustments (Table A2)

These are adjustments to the discretionary HCHSP allocation, sub-totalled at Column 8, Table A2.

Column 3 – Additional Recurrent funding (Table A3)

This is the additional recurrent funding to the discretionary HCHSP allocation, sub-totalled at Column 3, Table A3.

Column 4 – 2022-23 Recurrent HCHS and Prescribing Discretionary Allocation (sum of Columns 1, 2 & 3)

This is the sum of Columns 1 to 3 and is the recurrent discretionary HCHSP allocation for 2022-23. It is carried forward to column 1 of the Summary table.

Table A1: Contact: Julie Broughton, Finance Directorate, 0300 025 5747

Table A2: Baseline Adjustments (Column 2, Table A1)

Column 1 – In year adjustment: Pay funding

This is the recurrent adjustment of the in year allocation adjustments actioned in 2021-22.

Column 2 – In year adjustment: funding for MPK for civilians

This is the recurrent adjustment of the in year allocation adjustment actioned in 2021-22.

Column 3 – Local Optometric Adviser Role

This is the recurrent adjustment of the in year allocation adjustment actioned in 2021-22.

Column 4 – Junior Doctor rota management funding

The adjustment transfers the responsibility of a contract held by Velindre University NHS Trust as hosts of NWSSP on an All Wales basis to HBs (from WG). NWSSP will invoice HBs in-year to recover these costs subject to agreed annual inflationary uplifts.

Column 5 – DHCW Hosting SLA loss of income

Funding issued in 21-22 has been allocated on a recurrent basis.

Column 6 - NHS Wales Shared Services adjustments (Table 3)

Agreed transfers between health boards and NHS Wales Shared Services.

Column 7 - Additional top slice: paramedic banding (to ring fenced table B1)

This relates to the agreed top slice of funding for paramedic banding from discretionary funding to ring fenced (see Table B1).

Column 8 - Additional top slice: 111 service (to table B2)

This relates to the agreed additional top slice of funding for 111 rollout from discretionary funding to directed expenditure (see Table B2).

Column 9 – Total Adjustments (Carried forward to Table A1, Column 2)

This is the total of columns 1 to 8, and is carried forward to Column 2 in Table A1.

Table A2: Contact: Julie Broughton, Finance Directorate, 0300 025 5747

Table A3: Additional recurrent funding (Column 3, Table A1)

Column 1 – Agenda for Change/ DDRB funding

This funding is issued to support 2021-22 A4C/ DDRB costs in line with agreed mapping distribution.

Column 2 – Core uplift for 2022-23

£150m is being allocated to meet cost pressures for 2022-23. This equates to approximately a 2.8% increase on the recurrent discretionary allocation, ring fenced (excluding mental health and depreciation) and Directed Expenditure. The HCHS funding is distributed using the needs-based allocation formula.

Column 3 – Total Additional Recurrent funding (Carried forward to Table A1, Column 3)

This is the total of columns 1 and 2, and is carried forward to Column 3 in Table A1.

Table B1: HCHS Protected and Ring fenced Revenue Allocations for 2022-23

This table details the amounts of the HCHS Allocation which remain ring fenced. This funding must be used for the purposes intended.

Column 1 – Learning Disabilities

This funding remains ring fenced in 2022-23 on the same basis as 2021-22.

Contact: Julie Broughton, Finance Directorate, Ext: 03000 255747 with queries on the overall distribution

Column 2 – Depreciation (Table 4 Column 1)

The depreciation budget remains ring fenced. For clarity, the depreciation ring fence includes the allocation made here as well as for any non-recurrent funding that is issued in-year to cover accelerated depreciation, DEL impairments and further support for strategic schemes and baseline pressures.

Contact: Andrea Hughes, Finance Directorate, 0300 062 5558

Column 3 – Mental Health Services (Table 2)

This funding remains ring-fenced in 2022-23 on the same basis as 2021-22, plus agreed additional funding.

Details are included in Table 2.

Contact: Julie Broughton, Finance Directorate, 0300 025 5747

Column 4 – Renal Services

This funding remains ring fenced in 2022-23 on the same basis as 2021-22.

Contact: Julie Broughton, Finance Directorate, 0300 025 5747

Column 5 – Palliative Care funding

This funding remains ring fenced in 2022-23 on the same basis as 2021-22.

Contact: Gareth Hewitt, 0300 025 0328

Column 6 – Paramedic banding

This funding remains ring fenced in 2022-23 on the same basis as 2021-22, plus agreed additional funding of £1.561 million.

Column 7 – Clinical Desk enhancements

This funding remains ring fenced in 2022-23 on the same basis as 2021-22.

Column 8 – Genomics for Precision Medicine Strategy (inc new Genetic Tests)

This funding remains ring fenced in 2022-23 on the same basis as 2021-22.

Health Boards will direct this allocation through WHSSC in support of the strategy for 2022-23.

Column 9 - Critical care funding (including WHSSC funding)

This funding remains ring fenced in 2022-23 on the same basis as 2021-22.

Column 10 – Critical care funding (EASC funding)

This funding remains ring fenced in 2022-23 on the same basis as 2021-22.

Column 11 - Organisation specific adjustment (non recurrent 3 year arrangement)

Agreed time limited ring fenced funding for Betsi Cadwaladr.

Column 12 – Treatment Fund

This funding remains ring fenced in 2022-23 on the same basis as 2021-22.

Column 13 – Funding for Planned and Unscheduled Care Sustainability for 2022-23 onwards

This is for the agreed £170m recovery funding, as per letter dated 5th October 2021.

Column 14 – Funding Value-based recovery

This is for the agreed £15m recovery funding.

Column 15 – Regional Integration Fund

In year funding of £53.680m has been added to the existing/ previously allocated ring fenced Integrated Care Fund of £77.977m to create a new Regional Integration Fund, totalling £131.657m. Additional funding:

- £50m Transformation Fund;
- £2m previously allocated Safe accommodation for children with complex high end emotional and behavioural needs;
- £0.280m previously allocated Transformation programme Engagement funding; and
- £1.4m previously allocated CYP Emotional Health & Wellbeing funding.

Column 16 - Total 2022-23 HCHS Ring Fenced Allocation

This is the summary of columns 1-15. This amount is taken forward to Column 2, Summary Table.

Table B2 – HCHS Directed Expenditure Analysis

This table details Directed Expenditure Allocations to specific health boards. These amounts are allocated for specific purposes which the health board provides on an agency basis. The amounts form part of the Health Boards resource limit, but are not part of their population-based funding total.

Contact: Julie Broughton, Finance Directorate, 0300 025 5747

Columns 1 to 29 - Various

These remain as Directed Expenditure Allocations in 2022-23 on the same basis as 2021-22.

Column 20 – 111 Rollout

An additional £0.262 million (top slice) has been added to Aneurin Bevan’s directed allocation for 111 rollout costs.

Column 30 – AWTTTC

This is the recurrent adjustment of the in year allocation adjustments actioned in 2021-22.

Column 31 –Cancer Support/ SLAs from Wales Cancer Network

This figure has been removed from the NHS Collaborative baseline and added to health board funding for 2022-23.

Column 32 – SLAs from Lymphedema Network

This figure has been removed from the NHS Collaborative baseline and added to health board funding for 2022-23.

Column 33 – UWIC Dental Contract SLA

This adjustment incorporates a legacy funding decision into C&VUHB baseline on a recurrent basis.

Column 34 – Swansea Graduate Entry Scheme

This adjustment incorporates a legacy funding decision into SBUHB baseline on a recurrent basis.

Column 35 – Swansea Clinical Medical School

This adjustment incorporates a legacy funding decision into SBUHB baseline on a recurrent basis.

Column 36 - Total 2022-23 HCHS Directed Expenditure Allocation

This is the summary of columns 1-35. The amount is taken forward to Column 3, Summary Table.

Contact for Table B2: Julie Broughton, Finance Directorate, 0300 025 5747

TABLE C: Revenue Allocation for GMS Contract (Ring fenced allocation)

The ring-fenced GMS contract allocation for 2022-23 has been allocated on the basis of the current 2021-22 allocation. The GMS contract funding envelope remains ring fenced, although Local Health Boards may invest discretionary funding in GMS Services.

There is no enhanced services cost floor. From a GMS contract perspective the concept of a floor for enhanced services investment and TSC monitoring ended in 2008. The allocations issued by Welsh Government to health boards for enhanced services are ring fenced within the GMS ring fenced envelope. Health boards are expected to provide enhanced services in line with the directions issued by Welsh Government.

A supplementary allocation will be issued when the 2022-23 contract agreement is confirmed.

Column 1 – Provisional allocation 2021-22 and 2022-23

Provisional GMS allocation for 2022-23. The amount is carried forward to Column 5, Summary Table.

Contacts for Table C: Julie Broughton, Finance Directorate, 0300 025 5747/ Helen Griffiths, GMS Policy, 0300 062 8221

TABLE E: Revenue Allocation for Community Pharmacy Contract

The allocation for 2022-23 is issued with a 2% increase to the community pharmacy contractual framework (CPCF) funding for 2021-22.

Details of the total contractual funding and the distribution of funding between core services, enhanced services, quality and workforce elements will be clarified after the allocation issued.

Column 1 – Final allocation for 2021-22

This column has been carried forward from the 2021-22 allocation letter.

Column 2 – 2022-23 additional funding: support for the development of National Patient Group Directions)

Additional funding agreed to Cardiff & Vale for the above.

Column 3 – 2022-23 additional contract funding

Additional agreed funding for 2022-23

Column 4 – Allocation for 2022-23

This is the total of columns 1 to 3. The amount is carried forward to Column 6, Summary Table.

Contact for Table E: Julie Broughton, Finance Directorate, 0300 025 5747

Natalie Proctor, Pharmacy policy branch 0300 061 5919

Andrew Evans, Chief Pharmaceutical Officer, 0300 025 9260

TABLE F: Revenue Allocation for Dental Contract

The Dental contract allocation for 2022-23 has been allocated on the basis of the final 2021-22 allocation (recurrent elements), with adjustments for recurrent changes for 2022-23.

A supplementary allocation may be issued when there is more clarity on the 2022-23 Dental pay and expenses agreement and detailed calculations available.

Column 1 –Provisional allocation 2021-22

This column has been carried forward from the 2021-22 allocation as set out in Table F.

Column 2 – In year allocation adjustment

Agreed in year adjustment (22-23 amount)

Column 3 – In year allocation (DDRB)

This column shows the full year effect of funding agreed in 2021-22

Column 4 – Dental access funding 22-23

This column shows the agreed funding for 22-23, as per written statement 17 November 2021

Column 5 – Provisional allocation for 2022-23

This is the total of columns 1 to 4 and is carried forward to Summary table (column 7).

Contact for Table F: Julie Broughton, Finance Directorate, 0300 025 5747/ Andrew Powell-Chandler, Dental, 0300 025 1689

MEMORANDUM TABLES

Table 1 – Substance Misuse Funding

The substance misuse allocation remains ring fenced in 2022-23 and the table shows an agreed increase of £1.000m. £21.774m funding will be withheld from Health Boards (HB) until confirmation is received from the Chair of the relevant Area Planning Board (APB) that the use of these resources complements the delivery of the Welsh Government Substance Misuse Delivery Plan 2019-22, this should happen no later than 30th June 2022. Welsh Government expects to see evidence of clear joint planning across the HB ring fence and the Substance Misuse Action Fund monies, with HBs taking due regard for their statutory duties and ensuring they contribute to areas of relevant pressures, including prescribing costs and meeting waiting list targets. Given the uplift in both HB ring fence and APB SMAF revenue your joint planning should focus on the reduction of waiting times and further enhancement of trauma informed services and support. HBs and APBs are reminded that the planning of both the HB ring fence and the APB SMAF revenue grant should be conducted in partnership and that the Welsh Government will expect this to happen in a timely manner. HBs and APBs should develop detailed spending plans with agreed performance and outcomes for all services before submitting this for approval by Welsh Government, these plans should have meaningful budget breakdowns and agreement for effective and transparent monitoring. Where HB request SMAF from the APB the rationale for this requirement over and above the ring fence allocation should be clearly outlined in the submission to the Welsh Government. For further information please refer to the APB SMAF revenue guidance.

Table 2 – Total Mental Health Ring-Fence

This table sets out the ring-fenced funding for mental health for 2022-23, which is at the 2021-22 levels, plus additional agreed funding transfers.

- Call Helpline funding (£0.343 million);
- Veterans funding (£0.235 million);
- Mental Health Service Improvement fund (£5.925 million);
- Crisis Care funding (£4.000 million);
- Specialist CAMHS (£3.600 million); and
- £20 million increase for core uplift for 2022-23.

Health Boards are reminded that this funding forms a floor, below which expenditure on core mental health services must not fall. This does not exclude mental health services from making efficiencies, but these savings must be re-invested in these services to meet cost increases and new developments.

Contact : Adult Mental Health – Sally Thompson – Ext: 029 2037 0397

Table 3 – Shared Services Funding

This table sets out the 2022-23 funding baseline for the hosted Shared Services organisation. The amounts shown against Health Boards have been top sliced from discretionary HCHSP allocations and will be held as a central budget within HSS and paid directly to the NWSSP.

Contact: Julie Broughton, Finance Directorate, 0300 025 5747

Table 4 – Depreciation funding

This table sets out the Depreciation funding for 2022-23.

Contact: Andrea Hughes, Finance Directorate, 0300 062 5558

Table 6 – Recurrent Primary Care Development Funding

This table reflects the recurrent primary care funding already included within the HCHSP discretionary baseline allocation (as at 21-22 levels).