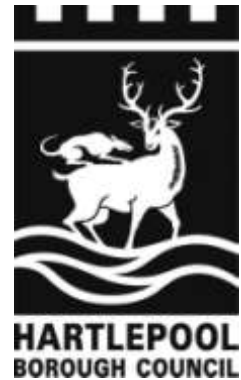


ADULT SERVICES COMMITTEE AGENDA



Thursday 1 December 2016

10.00 am

Committee Room B,
Civic Centre, Hartlepool

MEMBERS: ADULT SERVICES COMMITTEE

Councillors Hamilton, Morris, Richardson, Sirs, Tempest, Tennant and Thomas

1. **APOLOGIES FOR ABSENCE**

2. **TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS**

3. **MINUTES**

3.1 To receive the Minutes and Decision Record in respect of the meeting held on 3 November 2016 (*for information as previously circulated*).

4. **BUDGET AND POLICY FRAMEWORK ITEMS**

4.1 Savings Programme 2017/18 – Adult Services – *Director of Child and Adult Services*

5. **KEY DECISIONS**

5.1 Policy for Full Fee Payers Accessing Older People's Residential Care – *Director of Child and Adult Services*

6. **OTHER ITEMS REQUIRING DECISION**

No items.



7. ITEMS FOR INFORMATION

- 7.1 Strategic Financial Management Report – as at 30 September 2016 – *Director of Child and Adult Services and Chief Finance Officer*

8. ANY OTHER BUSINESS WHICH THE CHAIR CONSIDERS URGENT

FOR INFORMATION

Date of next meeting – Thursday 5 January 2017 at 10.00am in the Civic Centre, Hartlepool.



ADULT SERVICES COMMITTEE MINUTES AND DECISION RECORD

3 November 2016

The meeting commenced at 10.00 am in the Civic Centre, Hartlepool

Present:

Councillor: Steve Thomas (In the Chair)

Councillors: Lesley Hamilton, Carl Richardson, Sylvia Tempest and John Tennant

Also present:

Councillor Rob Cook
Louise Dauncey, North East Commissioning Support Unit
Judy Gray, Stella and Gordon Johnson - Healthwatch
Representatives
Frank Harrison – Years Ahead Forum
Members of the Public – Sue Little and Evelyn Leck

Officers: Jill Harrison, Assistant Director, Adult Services
Neil Harrison, Head of Service
Jeanette Willis, Head of Strategic Commissioning
Joan Stevens, Scrutiny Manager
Steve Hilton, Public Relations Officer
Denise Wimpenny, Principal Democratic Services Officer

37. Apologies for Absence

Apologies for absence were submitted on behalf of Councillors George Morris and Kaylee Sirs.

38. Declarations of Interest

Councillor Steve Thomas declared a personal interest as an employee of Healthwatch Hartlepool.

39. Minutes of the meeting held on 6 October 2016

Received.

40. Matters Arising from the Minutes

Min 32 – the Assistant Director advised that the site visit to the Centre for Independent Living scheduled for 29 November at 4.00 pm would be re-arranged to a later date as the site was not as close to completion as anticipated. Details of the visit would be confirmed at the next meeting.

Min 34 – In relation to a request at the last meeting that a letter be sent to the Secretary of State regarding ongoing pressures linked to Deprivation of Liberty Safeguards, the Assistant Director had drafted a letter and circulated to other Tees Valley Authorities to ascertain whether they wished to be party to the letter. Two local authorities had confirmed their agreement for the letter to be sent collectively on their behalves while responses were awaited from two other local authorities.

41. Scrutiny Investigation into Access to Transport for People with a Disability *(Audit and Governance Committee)*

Type of decision

Non-key

Purpose of report

To agree the recommendations of the Audit and Governance Committee's investigation into Access to Transport for People with a Disability.

Issue(s) for consideration

The Vice-Chair of the Audit and Governance Committee presented the findings, conclusions and recommendations, as set out in Appendix 1, of the Audit and Governance Committee following its investigation into Access to Transport for People with a Disability. The overall aim of the investigation had been to review the transport provision in Hartlepool for people with a disability to ensure that Hartlepool Borough Council was working within the principles of the Equality Act 2010.

Following today's meeting an action plan would be produced in response to the recommendations and reported to a future meeting of this Committee.

Following presentation of the report, the Chair took the opportunity to thank the Chair and Members of the Audit and Governance Committee, support staff and members of the public for their invaluable contribution to the investigation.

A lengthy discussion ensued during which personal observations/ experiences were raised in terms of the difficulties around the patient transport service and access issues for people with disabilities. A member of the public raised concerns as to why the hospital transport that was available following the closure of the Accident and Emergency Unit at Hartlepool Hospital had significantly reduced resulting in limited seats available to transport patients to hospital appointments. Various comments were made in relation to the potential reasons why the service had reduced. The Scrutiny Manager advised that the issues raised had been reflected in the recommendations within the report and would form part of the action plan which would be presented to this Committee in January.

The Chair provided assurances that the representations made to the Trust in terms of hospital transport would continue and highlighted that in addition to wheelchair accessibility problems the wider access issues for patients with general mobility issues had been included in the report. Clarification was provided in relation to the purpose of the hospital shuttle bus in response to a query raised.

The Chair made reference to potential further changes to services in the future, which may involve cuts in services at North Tees Hospital and have implications for Hartlepool. The need to consider transport provision to James Cook was also highlighted.

Decision

- (i) That the proposed recommendations, in response to the Audit and Governance Committee's investigation into Access to Transport for People with a Disability, be approved.
- (ii) That an action plan be formulated and presented to the Committee at its January 2017 meeting.

42. Hospital Discharge Update and Discharge to Assess: Presentation (*Director of Child and Adult Services*)

Type of decision

No decision required – for information

Purpose of report

The purpose of this presentation was to provide the Adult Services Committee with an update in relation to hospital discharges and delayed

transfers of care, and to make Members aware of developments in relation to 'Discharge to Assess'.

Issue(s) for consideration

The Assistant Director, Adult Services reported that in the period since the report to Adult Services Committee in February 2016 there had been increased national focus on hospital discharges due to an increase in delayed transfers and there had been a national mandate to introduce 'Discharge to Assess' models.

The Committee was provided with a detailed and comprehensive presentation outlining the situation in Hartlepool and the development of plans in relation to 'Discharge to Assess' models and focussed on the following:-

- Context
- National Performance
- Local Performance
- Data Recording Issue
- Factors Influencing Performance
- Discharge to Assess
- Local Approach
- Risks
- Next Steps

The Chair indicated that following discussions with the Assistant Director and Leader of the Council it was considered that the Discharge to Assess process should be monitored by the Health and Wellbeing Board and the Adult Services Committee be kept informed of developments for information purposes.

In response to a query in relation to how the Trust would address recruitment issues and the impact of Brexit, the Committee was advised that this was a national issue and that a number of NHS organisations were recruiting medical staff from overseas, often outside of Europe. The Assistant Director was unable to comment on any impact of Brexit on current arrangements.

The Assistant Director responded to issues raised in relation to the presentation. Clarification was provided on the intermediate care services currently available in the town as well as post discharge support arrangements for people living alone particularly the elderly and vulnerable. Members welcomed the development of a new 'Home from Hospital Service' that was being commissioned from the Better Care Fund. A member of the public shared examples of poor service provision within the Health Service which included concerns regarding the length of time an individual had waited for an ambulance, the limited number of staff working on wards and the impact on patients as a result.

A Member questioned what monitoring arrangements were in place to ensure patients were being adequately supported post discharge. The Assistant Director advised on the social care process and confirmed that intermediate care and reablement services were available to provide time limited support when people did not have ongoing social care needs. These services were part of the Better Care Plan and the wider agenda to better integrate health and social care services to achieve better outcomes for people.

Whilst the rationale for discharging patients from hospital as early as possible was acknowledged, reference was made to problems that had occurred associated with early discharge which had resulted in re-admission to hospital and a further operation for one individual. Clarification was sought in terms of whether a cost benefit analysis had been undertaken to determine the financial benefits of early discharge. The Assistant Director confirmed the national mandate to implement the 'Discharge to Assess' process and indicated that the aim of this approach was to reduce excess bed days and delayed discharges from hospital. She was not aware of any financial analysis that had been undertaken specifically in relation to discharge to assess but confirmed that there was evidence of the negative impact that a prolonged stay in hospital could have, particularly on older people. The Assistant Director also confirmed that the development of Discharge to Assess was being taken forward locally through a multi agency Steering Group with input from a range of partners within health and social care.

In concluding the debate, whilst the need to discharge individuals from hospital as quickly as possible was supported, the Chair emphasised the importance of such discharges being undertaken in a safe and managed way and commented on the potential risks associated with delaying assessment until post discharge. The importance of the 'Discharge to Assess' process being closely monitored was reiterated.

Decision

- (i) That the contents of the presentation, comments of Members as well as the potential implications for the Council be noted.
- (ii) That the 'Discharge to Assess' process be closely monitored by the Health and Wellbeing Board and this Committee be updated on developments for information purposes.

43. Annual Complaints, Compliments and Representations Report 2015/16 (*Director of Child and Adult Services*)

Type of decision

No decision required – for information

Purpose of report

To present the Annual Complaints, Compliments and Representations Report for the Child and Adult Services Department for the period 1 April 2015 to 31 March 2016.

Issue(s) for consideration

The Assistant Director presented the annual report, attached at Appendix A which summarised the complaints, compliments and representations received within 2015/16 and provided information to demonstrate the learning that had arisen from complaints and the actions implemented as a result.

In 2015/16, 66 compliments had been received in relation to Adult Services and examples of these were included in Appendix A. It was noted that 16 complaints had been received in 2015/16, 14 of which went on to be investigated which was a slight decrease on the previous year when 17 complaints had been received.

In response to a request for clarification in relation to how the figures compared to previous years, Members were advised that whilst the exact figures pre 2013/14 were not included in the report, the level of complaints over the last 8 years were relatively consistent. The Committee was pleased to note that Hartlepool's performance as a comparator with other north east regional local authorities remained good despite the impact of care home closures in this reporting period. A query was raised regarding the feedback process to which the Assistant Director outlined the feedback arrangements with service users as well as staff.

Decision

That the contents of the Annual Complaints Report for 2015/16 be noted and that the report be published online.

44. Personal Budget Framework: Presentation (*Director of Child and Adult Services*)

Type of decision

No decision required – for information

Purpose of report

To provide the Committee with a summary of the personal budget framework that operates within Adult Services.

Issue(s) for consideration

The Head of Strategic Commissioning, who was in attendance at the meeting, provided the Committee with a presentation outlining the current personal budget framework that operated within Hartlepool. The presentation focussed on the following:-

- The Direct Payment Act 1996
- Personal budgets introduced in Hartlepool in 2007
- Policy content
- Definition of a personal budget
- Why personal budgets?
- Anyone who is eligible for ongoing social care support from Adult Services in Hartlepool has a personal budget
- Framework is followed to allocate a personal budget
- Personal budget framework process
- How a personal budget can be deployed
- What has been achieved?
- What needed to change?
- Example of how direct payments had been utilised to assist with maintaining an individual's independence

The Chair reported that a copy of the presentation slides would be circulated following the meeting.

A query was raised in relation to how direct payments were monitored and the arrangements in place to prevent fraud. The Committee was advised that monitoring arrangements were in place to ensure that direct payments were spent appropriately and in accordance with CIPFA (Chartered Institute of Public Finance and Accountancy) guidance. Social care assessments were also carried out annually to review any changes in circumstances.

Decision

That the contents of the presentation be noted and presentation slides be circulated to all Members following the meeting.

45. Stakeholder Engagement Proposal: Transforming Care – Respite Services Review (*Director of Child and Adult Services*)**Type of decision**

No decision required – for information

Purpose of report

To inform the Adult Services Committee about the proposed engagement with stakeholders in relation to a review of health funded respite care for adults with a learning disability and complex needs, linked to the wider Transforming Care agenda.

Issue(s) for consideration

The Head of Service reported that the North of England Commissioning Support (NECS) had been requested to review existing respite care services for adults with a learning disability to ensure that these services appropriately met the needs of the population now and in the future.

Work would commence over the next few months to seek the views of people using services, their carers, providers and commissioners. A period of informal engagement would be conducted to help the CCGs to understand what respite services actually were provided to people with learning disabilities, their families and carers, what benefits were brought and what they felt worked well and not so well as well as what could be done to improve future services.

The CCGs would work with a Tees Valley Joint Overview and Scrutiny Committee and with members of the four Tees Local Authorities through the review. Members were referred to the proposed engagement activities as well as communication and engagement objectives, as detailed in the report.

A representative from the North East Commissioning Support Unit, who was in attendance at the meeting, responded to issues raised in relation to the report. Assurances were provided that work was ongoing to ensure the needs of children, young people and adults were being met. A Member raised concerns that care that had been observed in the learning

disability services a number of years ago had been poor and sought assurances that staff working in sectors of this type were adequately trained. The representative advised that performance monitoring processes were in place to highlight any areas of concern.

In response to concerns expressed that the review may potentially reduce current services, the Committee was advised that the purpose of the review was to understand the needs of the population, ensure needs were being met and to better understand the meaning of “respite”.

A member of the public expressed disappointment regarding the low level of provision in Hartlepool. The Assistant Director advised that whilst this issue focussed upon health funded respite provision, there was building based respite service in Hartlepool commissioned by Hartlepool Borough Council which supported a number of people with learning disabilities. Individuals were also supported to access different forms of respite utilising their social care personal budgets.

The Chair welcomed the review and was keen to receive feedback on the outcome. The Chair requested that following the outcome of the review, resources be made available to meet the level of need at a local level where possible.

Decision

- (i) The Committee noted the proposal to engage with stakeholders in relation to a review of health funded respite care for adults with a learning disability and complex needs.
- (ii) That the outcome of the review be reported to a future meeting of this Committee.
- (iii) That following the outcome of the review, resources be made available to meet the level of need at a local level where possible.

46. Housing and Technology Capital Fund for People with Learning Disabilities *(Director of Child and Adult Services)*

Type of decision

No decision required – for information

Purpose of report

The purpose of this presentation is to make the Adult Services Committee aware of the Housing & Technology Capital Fund for People with Learning Disabilities which was announced by the Department of Health in

September 2016.

Issue(s) for consideration

It was reported that the Department of Health had invited local authorities, working with their local partners to apply for funds from a capital fund of up to £25m capital split across the next two financial years for housing and technology to help drive sustainable housing solutions for people with learning disability in their area.

There was an identified need for sustainable housing solutions for people with learning disabilities in Hartlepool, primarily focused on young people moving into adult services and older adults with learning disabilities. A proposal had been submitted by the Council, in partnership with a preferred provider by the deadline of 24 October. It was envisaged that the outcome of the bid would be determined by the end of November following which an update would be provided to the Committee in due course.

A brief discussion followed during which the Assistant Director responded to queries raised in relation to the proposals and the type of housing and technological solutions that could be utilised. The Chair assured Members that any technological solutions would not replace direct face to face human contact.

Decision

That the Adult Services Committee note the contents of the presentation and receive an update regarding the outcome of the bid in due course.

The meeting concluded at 11.55 am.

P J DEVLIN

CHIEF SOLICITOR

PUBLICATION DATE: 10 NOVEMBER 2016

ADULT SERVICES COMMITTEE

1 December 2016



Report of: Director of Child and Adult Services

Subject: SAVINGS PROGRAMME 2017/18 – ADULT SERVICES

1. TYPE OF DECISION/APPLICABLE CATEGORY

1.1 Budget and Policy Framework.

2. PURPOSE OF REPORT

2.1 The purpose of this report is:

- to enable Members to consider the initial 2017/18 savings proposals relating to the Adult Services Committee's remit, to contribute towards achieving the overall savings requirement; and
- to set out proposals to achieve further savings in 2018/19 and 2019/20.

3. BACKGROUND

3.1 A comprehensive report on the 'Council Plan and Medium Term Financial Strategy – Capital and Revenue' was considered by Finance and Policy Committee on 28 November 2016. The report advised Members that as a Council we are ambitious for the Borough. Despite the fact that we continue to face unprecedented financial and demographic pressure it is important that we remain focused on securing the future prosperity and wellbeing of our residents. Whilst managing government funding cuts we need to remain committed to realising the potential of Hartlepool to be a place that is truly exceptional and use our unique spirit and assets to grow as a vibrant, dynamic and welcoming place to live, learn, work, play and invest.

3.2 The Council plan is currently being developed and will be based around six strategic priorities:

- Growing our economy, jobs and skills;
- Regenerating our town;
- Developing and promoting Hartlepool as a great place to live;
- Developing new services for people and communities;
- Better beginnings and better futures for our children and young people;
- Providing effective leadership based upon innovation and efficiency.

- 3.3 The report to Finance and Policy Committee reminded Members that Government funding for the Council will be reduced further over the next three years. As a result the proposed an approach to meeting the financial and demographic challenges is based on a three year strategic and financial plan that will deliver an improvement and efficiency programme focused on new ways of delivering services within and with communities; better integration of early help services to help people live healthier independent lives to reduce pressure on high cost services; and increasing income by promoting growth and a more commercial approach to traded services.
- 3.4 In relation the development of the five year capital plan the report to Finance and Policy Committee sought Members views on the Council's key regeneration and development priorities. Once these priorities have been approved a further report will be prepared detailing an investment strategy for delivering the capital plan, which will include identifying those areas where the Council will need to secure capital grant and external investment.
- 3.5 There will be a presentation at the start of the Committee meeting to provide an overview of the issues reported to Finance and Policy Committee which will provide the context and background for the issues detailed in this report.

4. BACKGROUND

4.1 Budget

The table below provides a high level breakdown of the 2016/17 budget:

	Expenditure £'000	Grant Income £'000	Other Income £'000	Net Budget £'000
Carers	180	(180)	0	0
Commissioning – Adults	5,081	(1,538)	(90)	3,453
Commissioning - Mental Health	2,712	(269)	(1,086)	1,357
Commissioning - Older People	21,962	(2,701)	(9,189)	10,072
Commissioning - Working Age Adults	12,443	(764)	(3,511)	8,168
Departmental Running Costs	208	0	0	208
Direct Care & Support inc. Telecare	1,637	(865)	0	772
Occupational Therapy Equipment	491	(119)	0	372
Care Management Teams	5,257	(1,324)	(36)	3,897
Standards, Engagement & Development	849	(174)	(42)	633
Working Age Adults - Day Services	1,236	0	(69)	1,167
Use of reserves for 16/17 shortfall in savings	0	0	(725)	(725)
Total Adults Budget	52,056	(7,934)	(14,748)	29,374

4.2 Outputs

Outputs achieved in adult services include:

- Over 5,900 people receive support from adult social care services.
- Approximately 1,900 carers had an assessment during the last year and received support to maintain their caring role.
- The number of people using telecare continues to grow with over 2,300 people currently being supported.
- People received over 5,200 pieces of equipment to help them stay at home and over 94% were received within 7 working days.

Areas where particularly positive outcomes have been achieved include:

- Over 95% of people who have ongoing needs and are eligible to receive a personal budget have their support provided through a personal budget and exercise choice and control over how their support needs are met.
- 94% of people who use services report that those services have made them feel safe and secure.
- Over 15% of adults with a learning disability are in paid employment (compared to a national average of 6%).
- Over 80% of adults with mental health needs in settled accommodation.
- 83% of service users reported that they had control over their daily life.
- 85% of carers received an assessment, advice or a carers service.
- 86% of people who use services reported that they find it easy to access information about services.
- 92% of people who access reablement services report that their goals are met at the end of their period of reablement.
- No delayed discharges from hospital attributable to adult services.

5. **APPROACH TO SAVINGS PROPOSALS**

5.1 Proposals to deliver savings in adult services in 2017/18 are set in the context of a three year strategy and reflect the overall approach adopted by the Corporate Management Team for identifying achievable savings and aiming to protect front line services, while recognising that not all areas can be protected in the current financial climate.

5.2 Within adult services, savings of £5,764,000 have been made over the last five years:

- 2012/13 £1,570,000
- 2013/14 £860,000
- 2014/15 £1,325,000
- 2015/16 £1,075,000
- 2016/17 £934,000

5.3 Reducing budgets by this level on an ongoing basis cannot be achieved without an impact on frontline services and on people who use adult services, although proposals have sought to minimise this impact as far as possible. It is inevitable that further savings proposals will have an

increasing impact on frontline services, as it is not possible to sustain current levels of service and performance with reducing budgets and increasing demands on services.

- 5.4 The departmental approach to identifying savings has been to focus on three key areas:-
- Reducing cost of high end demand through prevention, early intervention and reducing unit costs;
 - Integration and service re-modelling across functional areas; and
 - Increasing income.
- 5.5 All areas of spend have been reviewed under these headings, taking into account savings achieved in previous years and statutory responsibilities. Areas have been identified where savings could be achieved with least impact on front line services for local people.
- 5.6 Reducing demand is a high priority for the department and measures are being taken that are expected to impact on future demand. However, it will take time for prevention and early intervention to take full effect, especially with demographic pressures arising from an ageing population and an increasing number of adults with complex physical and learning disabilities.
- 5.7 The proposed savings for 2017/18 within adult services therefore focus primarily on reducing departmental running costs and efficiencies in back office functions, through integration and service re-modelling across functional areas, while longer term plans focus on service transformation, integration and meeting complex needs more cost effectively.
- 5.8 This approach has included consideration of requests for voluntary redundancy as part of the rolling process for Voluntary Redundancy requests. Vacant or fixed term posts have also been considered as part of the options for savings and while it is not possible to manage all of the savings in this way it has been an underpinning principle for 2017/18.
- 5.9 There is very limited scope to further increase income following the decision by Adult Services Committee in January 2014 to implement a revised Contributions Policy from April 2014 which requires people to contribute up to 100% of the costs of their support.

6. SAVINGS PROPOSALS 2017/18

- 6.1 The proposals for adult services will contribute £945,000 towards achieving the overall savings requirement over the next three years; £795,000 in 2017/18 and a further £150,000 in 2018/19.
- 6.2 In addition to the contribution to the overall savings target, there are ongoing financial pressures related to adult services that need to be managed over the next three years. There is increasing evidence across the country of increasing pressures on adult services, including pressure on authorities

from the financial challenges facing the NHS. An assessment of the local picture has been completed and indicates potential annual pressures over the next three years. These pressures are likely to be phased and by 2019/20 the recurring pressure could be up to £2,065,000. A specific reserve has been earmarked to manage these potential risks and if they materialise the reserve will only be sufficient to support the shortfall in the budget in 2017/18 and 2018/19. The combination of savings required to manage cuts, and savings required to manage financial pressures equates to £3,010,000 over the next three years.

The anticipated pressure of £2,065,000 is made up of:

- Forecast pressures in learning disability services of £1,100,000 associated with transitions from Children's Services;
- Budget pressures in mental health services of £100,000;
- A recurrent financial pressure in relation to Deprivation of Liberty Safeguards of £140,000 (the pressure to be managed by adult services has reduced from £340,000 to £140,000 with the balance of £200,000 covered from corporate funding from 2017/18); and
- Base budget funding required to offset the use of reserves to meet departmental savings targets in 2016/17. £934,000 of departmental reserves was used in 2016/17 to meet the savings target. £209,000 was been secured recurrently from the Better Care Fund to address pressures in adult services, leaving a balance of £725,000 to be identified from departmental budgets.

6.3 The Child and Adult Services Department is also seeking to manage demand to reduce costs and further work is required to assess the pressures and the scope for achieving demand management savings. For planning purposes it is anticipated that for 2017/18 the increased demand can be accommodated with the existing available budget and by using part of the reserve. The position for future years is less certain and a further update will be provided when the position is clearer.

6.4 In light of the lead in time to achieve longer term savings from demand led budgets, it is proposed that the required savings are phased over the three years as shown in the table below. Strategies to manage pressures are detailed later in the report with estimated savings identified below.

	17/18 £'000	18/19 £'000	19/20 £'000	Total £'000
Savings	795	150	0	945
Management of Pressures				
• Review of Housing Related Support (Phase 2)	0	215	0	215
• Transforming Adult Services (Demand Management)	0	785	1,065	1,850
	795	1,150	1,065	3,010

6.5 The 2017/18 savings proposals for adult services are as follows:-

6.6 Review of Standards, Engagement and Development Team

6.6.1 The Standards, Engagement and Development Team works across Child and Adult Services and undertakes the following functions:

- Workforce Development;
- Complaints;
- Public Information;
- Standards Development and Quality Assurance;
- Service User Engagement; and
- Youth Participation.

6.6.2 The services have been managed in different parts of the department previously but were brought together to form a cohesive team managed by the department's Principal Social Worker in April 2016.

6.6.3 Following the team being brought together, a review of the functions has been undertaken to consider the role of the team across the department as a whole, and identify areas of where efficiencies can be achieved from changes in working practices and procedures. In the light of this review, a restructure is proposed that will achieve savings of £190,000 against both pay and non pay budgets.

6.7 Review of Departmental Running Costs and Non Pay Budgets

6.7.1 The budget for Departmental Running Costs (including budgets for the Director of Child & Adult Services, Departmental Admin and a range of non pay costs) sits within the adult services budget.

6.7.2 A review of all non pay budgets within Departmental Running Costs has been undertaken which has identified a number of areas where budgets have been set based on historic spend, but have not been fully committed in recent years. This review has identified savings of £115,000.

6.7.3 It is proposed that an inflation freeze is implemented for all non pay budgets (excluding contracts that include annual inflationary uplifts). For adult services this will achieve a saving of £60,000.

6.7.4 The departmental administration resource has been reviewed and it has been determined that the level of support can be reduced to realise a saving of £25,000.

6.7.5 The User Property & Finance team is now able to generate income linked to charging for administration of appointments. This has been supported by the implementation of new IT systems, which were funded through social care capital funding, and will generate annual income of £20,000.

6.7.6 Total savings to be realised from the review of Departmental Running Costs and Non Pay Budgets are: £220,000.

6.8 Review of Pay Budgets

- 6.8.1 All pay budgets, particularly those associated with back office services, have been reviewed and savings have been identified, predominantly linked to vacant posts and a request for Voluntary Redundancy.
- 6.8.2 A departmental salary abatement target of £250,000, which accounts for vacant posts and incremental drift across the department, was introduced from April 2016. This has been closely monitored and it is proposed that the target can be increased by a further £50,000 from April 2017. This may only be a short term proposal as, when officers move through the pay grade towards the top of their pay scale, the ability to contribute towards this target will reduce, but is dependent upon staff turnover and recruitment. The continued ability to meet this target will be reviewed regularly and any shortfall against achieving this target in the future will be addressed as part of future savings proposals.
- 6.8.3 A review of pay budgets linked to service reviews and improved efficiency of systems has identified four posts that can be deleted with minimal impact on frontline services. Two of these posts are currently vacant and one is linked to a request for voluntary redundancy. Deleting these four posts would create a saving of £150,000.
- 6.8.4 Additional funding was identified by the Better Care Fund Pooled Budget Partnership Board to maintain adult services in 2017/18. This has enabled a saving of £60,000 to be realised from adult services budgets.
- 6.8.5 Total savings to be realised from the review of Pay Budgets, Vacant Posts and Voluntary Redundancy Requests are: £235,000.

6.9 Review of Preventative Services and Housing Related Support

- 6.9.1 A review of preventative services and housing related support is underway which is expected to deliver further savings from commissioned services.
- 6.9.2 Preventative services are being reviewed to identify potential duplication or opportunities to commission services more effectively. This review will include consideration of introducing a charge for the telecare service, as one of the only services provided within adult services at no cost to the user.

There are risks associated with charging for preventative interventions, as this approach can deter people from using these services, meaning that their needs can escalate more quickly and there is an increased requirement for more costly, intensive interventions.

Any change to current contribution arrangements also has implications for the User Property & Finance Team as the requirement to undertake financial assessments would increase, so this would need to be considered against any potential increase in income that could be achieved.

6.9.3 A further report on this issue will be considered by Adult Services Committee in March 2017 with any agreed change implemented from 1 October 2017 following consultation with current users of the service.

6.9.4 Housing related support was historically funded through the ring-fenced Supporting People Grant, which has been allocated through base budget funding for the last five years with significant cuts applied over that time.

An in depth review of all housing related support services was undertaken in 2011 which identified savings of £1,043,000 – an amount which enabled the cuts to be managed and also identified savings in excess of the cuts, which contributed £275,000 towards the 2012/13 savings target for adult services.

2010/11 Funding	-	£3,985,000	
2011/12 Funding	-	£3,443,000	(cut of £542,000 / 13.5%)
2012/13 Funding	-	£3,218,000	(cut of £226,000 / 6.6%)

6.9.5 Further reviews have since been undertaken which have identified additional savings from extra care housing and a contribution to housing related support has been secured from the Better Care Fund to maintain social care services. Efficiencies have also been achieved on an ongoing basis when services have been re-commissioned through tendering processes. As a result, the budget for housing related support has continued to reduce and the budget for 2016/17 is £2,480,000.

6.9.6 The housing related support budget funds a range of services that support people with additional needs to live independently and maintain a tenancy, either in long term or short stay accommodation. As an example, there is a service for people with mental health needs that supports people for up to two years, usually following a hospital stay or an exacerbation of their condition. The aim of the service is to support people through their recovery and rehabilitation, so that they can hopefully access employment and return to mainstream housing without support.

6.9.7 The current housing related support budget covers a number of areas that sit outside of adult services, but the budget has historically sat within this area. The spend can be broken down as follows:

- Older People £1,000,000
- Learning Disability £300,000
- Mental Health £100,000
- Housing Services £200,000
- Young People £450,000
- Homeless / Offenders £330,000
- Alcohol £100,000

6.9.8 A further review of housing related support services that impact on adult services is being undertaken with the aim of achieving an additional saving on the current spend of £1,400,000. The most significant element of this review will involve the range of services currently commissioned from the

Thirteen Group which includes Homecall (community alarms), floating support and housing related support for older people.

- 6.9.9 It is anticipated that the review of preventative services and housing related support within adult services will realise part year savings in 2017/18 of £150,000 with the full year effect (£300,000) achieved in 2018/19.

7. CONTEXT FOR ACHIEVING SAVINGS IN 2018/19 AND 2019/20

- 7.1 Over 80% of the gross budget for adult services is spent on demand led services, primarily residential placements and packages of support delivered in the community. In order to continue reducing spend on adult services, it is therefore essential that plans are implemented that aim to reduce this spend.

- 7.2 Reducing demand is very challenging in the context of people living longer, an increasing prevalence of dementia and increasing numbers of working age adults with complex learning and / or physical disabilities, as well as more people experiencing mental health issues. Demand management principles focus on behavioural change and preventing demand, whereas the focus in adult services focuses to a degree on delaying and reducing care needs in older people, but has a far greater emphasis on how eligible assessed social care needs (which often can't be prevented) are met in the most cost effective way possible. For this reason, the programme of work in adult services for the next three years is referred to as Transforming Adult Services rather than demand management.

- 7.3 The approach is focused primarily on the two biggest areas of spend for the department: older people and learning disabilities.

7.4 Older People

- 7.4.1 In line with national trends, there are increasing numbers of older people in Hartlepool, which creates additional demands on services. The table below summarises projected population growth of over 65s by 2030.

Population - over 65s	2015	2020	2025	2030
People aged 65-69	5,400	5,100	5,700	6,500
People aged 70-74	3,800	5,000	4,800	5,300
People aged 75-79	3,400	3,300	4,400	4,200
People aged 80-84	2,600	2,700	2,700	3,700
People aged 85-89	1,400	1,800	2,000	2,000
People aged 90 and over	700	900	1,300	1,600
Total population 65 and over	17,300	18,800	20,900	23,300
Increase on 2015 level		8.7%	20.8%	34.7%

Source: POPPI (Projecting Older People Population Information System)

This demonstrates growth of 34% in over 65s by 2030, with the highest percentage increase relating to people aged 90 and over, where an increase

of 129% is expected. While an increase in life expectancy is to be celebrated, it also needs to be recognised that many people who live longer have multiple long term conditions and need significant levels of support.

- 7.4.2 Strategies have been in place in relation to older people's services for some time that aim to reduce reliance on more intensive and costly services, such as high cost care packages in the community and residential care placements, and this work is now captured within the Better Care Fund (BCF) plan and the BCF work streams focused on preventing avoidable admissions to hospital and / or residential care. These plans have historically included investment in assistive technology / telecare and extra care housing and development of reablement services that support people to regain their independence following an illness or hospital stay. There is evidence that these strategies have been successful in constraining demand for services as the number of permanent admissions to residential care reduced in 2015/16 compared to the previous year. However, it should be noted that packages of support in the community are not necessarily more cost effective as people can require a significant level of support in their own homes to maintain their safety and independence.
- 7.4.3 Work undertaken by iMPower to look at potential for demand management in adult services included a Service Effectiveness Review of preventative services which identified that services were performing well in terms of outcomes for people and cost effectiveness, although there was some potential duplication between services, which is currently being explored further (see 6.9.2). This piece of work also reviewed admissions to residential care and the services that were provided to people prior to an admission and found that generally people were very well supported to remain independent in the community, with a range of services and options available to prevent or delay permanent admission to a care home. The key recommendations from the iMPower work related to:
- Increasing demand for primary preventative services; and
 - Redesigning and integrating the front door to health and adult social care.
- These recommendations are being taken forward via BCF work streams.
- 7.4.4 The challenges associated with making savings in services for older people are not unique to Hartlepool. The recent King's Fund report 'Social Care for Older People: Home Truths' (September 2016) identified that:
- the social care system is struggling to meet the needs of older people after six consecutive years of cuts to local authority budgets and nationally, the social care funding gap is expected to be between £2.8bn and £3.5bn by 2020.
 - many social care providers are surviving by relying increasingly on people who can fund their own care, with those dependent on local authority contracts in real difficulty. This is an issue which has an impact locally as the majority of people who receive support (approximately 75%) are not able to fund their own care. Home care providers are facing acute workforce shortages and are in a critical condition, threatening to undermine policies to support people at home.

- Access to care depends increasingly on what people can afford – and where they live – rather than on what they need. This favours the relatively well off and well informed at the expense of the poorest people, who are reliant on an increasingly threadbare local authority safety net – especially if they live in areas where local authorities have been least able to sustain spending levels – and who are at a higher risk of declining quality and provider failure.
- The situation for older people has been compounded by pressures in the NHS. Cuts to social care should not be viewed in isolation from overstretched general practice and community nursing. Under-investment in primary and community NHS services threatens to undermine the policy objective of keeping people independent and out of residential care.

The report concludes that ‘the funding outlook for the next five years looks bleak’ and states that ‘the potential for most local authorities to achieve more within existing resources is very limited and they will struggle to meet basic statutory duties’.

- 7.4.5 Actions being taken nationally to partly address this situation include the introduction of the Social Care Precept from April 2016 and the proposal to allocate additional Better Care Fund resources directly to Local Authorities. The additional Better Care Fund is phased over three years; £100m in 2017/18, a further £700m in 2018/19 and a further £800m in 2019/20.

The Government has recognised that the Social Care Precept will raise less income in more deprived communities than it will in more affluent areas and will seek to address these imbalances by targeting the additional Better Care Fund to those areas which benefit least from the Social Care precept.

While the recognition of pressures in this area is positive the amount of funding raised from the Social Care Precept and the additional Better Care Fund does not address the scale of cuts in core funding over the last six years and further cuts over the next three years.

The impact of the Social Care Precept for Hartlepool in 2016/17 was the generation of additional income from Council Tax of £655,000. This resource is required to meet the additional pressures created by the introduction of the National Living Wage, which has had a significant impact on providers of care homes and home care. It is anticipated that increases in the National Living Wage over the next three years will effectively commit additional income raised from future Social Care Precepts.

- 7.4.6 It must be recognised that there is a degree of volatility associated with the older people’s budget which is influenced by a range of factors beyond the Council’s control. This includes factors such as the National Living Wage, national and regional work to review the fair cost of care and changes in income from financial contributions depending on the financial circumstances of people who are being supported.

- 7.4.7 There is also a degree of volatility associated with NHS funding as some older people receive fully funded NHS Continuing Health Care (CHC) or an NHS contribution towards a jointly funded package of care and this funding is subject to review and change if needs increase or decrease over time.
- 7.4.8 Nationally mandated change to hospital discharge arrangements, such as the requirement to introduce 'discharge to assess' approaches and trusted assessors, may also have a financial impact on the Council, as outlined in the presentation to Adult Services Committee in November 2016.

7.5 Learning Disabilities

- 7.5.1 The fact that people with learning disabilities are living longer, along with increasing aspirations of people with learning disabilities and their families / carers, is celebrated by the Council, and supported through an increased focus on access to training, education and employment and a range of accommodation options. Longer life expectancy and greater independence of adults with learning disabilities does however create financial pressures, as adults with learning disabilities are less likely to live in outdated institutional settings or live with their parent carers throughout adulthood, and are more likely to be supported to live independently in the community.
- 7.5.2 The table below shows the age profile of adults with learning disabilities supported by the Council and highlights that almost 50% of people with learning disabilities known to the Council are over 50, with 20% over 60. The changing age profile in this area creates some different challenges as older people with learning disabilities can have complex needs and co-morbidities.

AGE	F	M	Total	%
a - 18-29	16	29	45	14%
b - 30-39	25	41	66	20%
c - 40-49	22	36	58	18%
d - 50-59	50	45	95	29%
e - 60-69	20	26	46	14%
f - 70+	9	12	21	6%
Grand Total	142	189	331	100%

- 7.5.3 Work has been undertaken to identify the number of known cases that are approaching transition to adulthood in the next three years. Based on current information, and a range of assumptions about long term package costs and potential NHS contributions to complex care packages, estimated numbers for the next three years are as follows, with an estimated pressure of £1,200,000:

Year	Expected Transitions	Indicative Costs
2017/18	19	£565,000
2018/19	7	£220,000
2019/20	18	£335,000

- 7.5.4 In addition to the financial pressure associated with the introduction of the National Living Wage, which is being managed using the additional income generated from the Social Care Precept, there is an additional pressure primarily related to providers supporting people with learning disabilities as the cost of overnight support has increased linked to National Minimum Wage Regulations and case law. A significant proportion of adults with learning disabilities require overnight support in their own homes or within supported living settings due to their needs and vulnerabilities and this has created an additional financial pressure within the learning disability budget.
- 7.5.5 The work undertaken by iMPower to identify potential opportunities to better manage demand, reported that 20% of people with learning disabilities accounted for 59% of the spend, which reflects the fact that some people have highly complex needs and require very high intensity interventions and specialist services to meet those needs. The report also identified potential to improve forward planning for young people approaching transition to adult services, with an increased focus on promoting independence.
- 7.5.6 The Transforming Care Programme has been implemented in response to concerns that were initially raised through the Winterbourne View scandal, and is focused on reducing the number of people with learning disabilities and complex needs who are supported long term in NHS funded beds. The number of people from originating from Hartlepool that need to move from NHS provision into the community is small, but the costs associated with those individuals are significant, with an average package of care in the community costing over £200,000. This is due to the very complex needs of the individuals concerned and the level of specialist support required.
- Although initial guidance indicated that there should be no financial impact on Local Authorities as a result of the Transforming Care Programme, with 'dowries' identified by the NHS to meet ongoing social care needs of these people, Local Authorities in the region, and nationally, are concerned at the lack of clarity regarding funding arrangements and the potential for costs to be transferred from the NHS to Local Authorities. The estimated financial risk associated with the ten individuals in Hartlepool who are expected to move over the next three years could be up to £1.8m if it was determined that costs were shared equally between the NHS and Local Authorities. This potential pressure has not been included in the projected pressures in adult services over the coming three years at this stage, as the situation regarding funding for these individuals is still the subject of national discussion, but may need to be taken into account once the position is clearer.
- 7.5.7 As highlighted in previous years in relation to savings, it is very challenging to reduce costs for people who have existing packages of care unless there is evidence of a reduction in their assessed level of need, as the Council has

a statutory duty to meet assessed need. A reduction in assessed need is difficult to evidence when the majority of people that are supported by the department have an ongoing need or condition which is likely to result in increasing support needs over time.

The approach that is being taken in relation to existing packages of support involves an in depth review of needs and the support provided at the point the package is subject to an annual review. This approach needs to be managed very sensitively as there is potential for judicial review if people receiving support or families / carers perceive that the Council is not meeting statutory duties in relation to meeting assessed eligible needs and providing adequate resources in order for needs to be met. There is also a risk of increased complaints and approaches to Elected Members from people affected by this approach, and it is important that such issues are managed in a very consistent way to avoid miscommunication or precedents being set.

- 7.5.8 There is a significant degree of volatility associated with the learning disability budget, which is influenced by a range of factors beyond the Council's control. This includes national policy directives such as the Transforming Care agenda and the introduction of the National Living Wage. There is also a major impact on the budget from transitions, changes to NHS contributions to packages of care and deaths.
- 7.5.9 Under the NHS Continuing Health Care (CHC) Framework, the NHS meets the entire cost of care for individuals who meet the criteria for fully funded NHS CHC. The NHS also contributes to a number of jointly funded packages where people are assessed as having a combination of health and social care needs. As needs change and are re-assessed, there is potential for NHS contributions to increase or decrease and funding decisions are often subject to challenge. It is impossible to accurately predict the financial impact for the Council of such decisions, but individual cases are monitored and forecasts made based on trends from previous years.
- 7.5.10 In 2009/10 NHS resources were granted to Local Authorities to meet the needs of former resettlement cases through the 'Learning Disability Transfer'. This transfer was based on an agreed list of individuals who had previously been resettled from long stay hospitals to be supported in the community. The expectation at the point the transfer was made was that, as individuals died, resources would be retained by Local Authorities and used to contribute to the support costs of other individuals with similar needs. In Hartlepool, the Learning Disability Transfer was approximately £2,000,000. In the years since the transfer, a number of people have died and this has freed up an element of funding to support new packages of care. The potential for this funding to be released to support transitions costs is clearly very unpredictable and cannot be relied on, but this funding has helped to support the management of pressures in previous years.

8. PROPOSALS TO ACHIEVE SAVINGS IN 2018/19 AND 2019/20

8.1 Further to the review of housing related support within adult services outlined in section 6.9, a second phase cross-departmental review will be undertaken to identify further savings to be achieved from housing related support spend on housing services, services for young people, support for homelessness and offenders and support for people with alcohol dependency. The budget for these areas is £1,080,000 so a saving of 20% would be £215,000. Further work is needed to assess whether this is achievable, the impact and risks. This review may identify some additional savings that can be achieved in 2017/18 which will support the in year management of departmental pressures, with the full year impact contributing to management of pressures on a recurrent basis from 2018/19 onwards.

8.2 Approach to Transforming Adult Services

The Local Government Association's Adult Social Care Efficiency Programme (2016) concluded that: *'The challenges over the next few years are immense. Indeed, some councils are beginning to believe that they cannot make the level of savings required without putting their basic services for vulnerable people at risk. They would argue that a combination of increasing demographic pressures (which they can manage down no further) and rising costs (which have been held down for too long), added to the fact that they have taken all of the efficiency actions they believe possible, means they can cut no further.'*

In this national context, and in light of the issues outlined earlier in this report, managing further cuts to adult services budgets in 2018/19 and 2019/20 at the level required is potentially unachievable, and making any further savings is incredibly challenging without putting vulnerable adults at risk. Although this is undoubtedly the case, practical steps are being taken to try and constrain spend, and achieve savings wherever possible:

8.2.1 Work is underway through the BCF to prevent avoidable admissions to hospital and residential care. This work is focused on doing everything possible across primary care, community services and social care to maintain people in their own homes for as long as possible. A significant amount of work has already been done in this area and is having a positive impact. The number of permanent admissions of people aged 65 and over to care homes in 2015/16 was 119, a significant reduction when compared to the previous year, and the number of people supported in their own home by telecare services has increased over the last three years from 1,100 in March 2013 to over 2,170 at the end of March 2016.

Next steps in relation to admission avoidance, that have been agreed via the BCF plan and influenced by the iMPower recommendations, are:

- Further development of the Hartlepool Now website and app to provide people with information about local services and support.
- Work with the newly created Care Co-ordinator roles within primary care.
- A review of first contact arrangements to develop an integrated response, that most effectively targets specialist health and social care resources.

- Education and training for care homes, including implementation of the National Early Warning Score approach which enables care home staff to identify when a person's health condition is deteriorating.

8.2.2 Funding for packages of care and support in the community is allocated using a Resource Allocation System (RAS). This generates an indicative allocation based on assessed needs which enables the person to plan how to meet their needs within the available resource. The indicative allocation is a starting point, and in some cases, particularly for people with learning disabilities and complex needs, additional funding over and above the indicative allocation is required in order to meet those needs. This is in part due to increasingly complex needs with some people requiring 1:1 support 24 hours a day and 2:1 or 3:1 staffing for certain interventions and activities, but is also influenced by market forces and costs of residential placements or supported living.

The RAS that has been operating in Hartlepool since 2007 has been reviewed and the following changes are proposed from April 2017 in order to try and reduce spend on non-residential care costs:

- Indicative allocations will still be based on the current point based system, but the amounts allocated will be reduced by 20% for new cases. This will not have an adverse impact on those people with the most complex needs, whose needs justify spend over and above the indicative allocation, but the lower starting point should encourage people with less complex needs to plan more prudently and as a result the average spend on non-residential care may reduce. It is not possible to estimate the saving that this will achieve, as the impact will be determined by the number of new referrals in 2017/18 and the proportion of those people whose needs can be met within the new RAS. Spend on new cases will be monitored throughout the year to capture any savings achieved.
- A new approach will be introduced in relation to transitions, with earlier consideration of the likely costs to adult services for people who are approaching the age of 18. As well as informing future commissioning plans, this approach will enable non-residential packages to be better managed for those aged 18-25 with increased allocations linked to significant life changes (e.g. leaving home or leaving education) rather than an adult indicative allocation automatically being provided at age 18.
- A new approach to contingency funding will be introduced. Currently personal budgets for people who choose to take a direct payment and employ personal assistants, are calculated based on the hourly rate paid to the person, plus on-costs with an element of contingency funding included in order to meet any unforeseen costs associated with sickness and / or redundancy. This approach fits with the ethos of personal budgets and reducing transactions with the Local Authority, but some individuals have been 'banking' this funding for a number of years and have not needed to use contingencies. This funding is being recovered on a non-recurrent basis in 2016/17 through an exercise to reconcile Direct Payments, so there is no detrimental impact or loss to the Council. Going forward, a different approach will be taken, with a Direct Payment Contingency reserve established within the department (created from

money recovered on a non-recurrent basis in 2015/16 and 2016/17). This reserve will be maintained to meet any unforeseen costs associated with Direct Payments, and payments to users of service will be reduced accordingly. This will avoid significant sums of money building up in service user bank accounts in the future and will result in some recurrent savings for the department. The level of saving cannot be quantified until the reconciliation exercise is complete, and there is a longer term risk that the departmental reserve is exhausted at some point in the future, leaving one-off costs to be managed in future years.

- 8.2.3 An Adult Resource Panel is in place to review all packages of support in the community where costs are higher than the indicative resource allocation or where an increase in the support package is proposed. As set out above, the basic premise of a resource allocation is that it must be based on assessed eligible needs and the resource provided must be sufficient to meet those assessed eligible needs. This, along with the fact that many packages of care have been in place and working well for many years, makes it very difficult to review and potentially reduce package costs for existing service users. There is more opportunity to look at meeting needs differently when new cases are being considered, and this primarily involves cases where young people are in transition to adult services.

A positive outcome of this approach has been the identification of potential savings linked to future commissioning intentions. Current provision for adults with learning disabilities has developed on a piecemeal basis over many years, much of it linked to former NHS resettlement programmes. While there is some very good provision available this does not necessarily meet current and anticipated future needs and there are opportunities to commission different models which could achieve savings in the medium to long term. This could include extra care for older people with learning disabilities and supported living opportunities with access to shared support.

- 8.2.4 Work is being undertaken to identify groups of people who may be able to share support or to live more independently if different service models are commissioned. It is recognised that this work will potentially be difficult to manage (involving people who use services, families and carers, providers and advocates) and may result in complaints, legal challenges and direct approaches to elected members. If this is the case, there will be need to be a consistent approach regarding how issues are responded to, to ensure that frontline staff are supported by senior management and elected members in achieving this objective, and to avoid setting any precedents.
- 8.2.5 There is very limited scope to further increase income from contributions of people using services following the implementation in April 2014 of a revised Contributions Policy requiring people to contribute up to 100% of the costs of their support, dependent upon their ability to pay for services. Additional income generated within the User Property & Finance Team has been identified and is included in the savings proposals for 2017/18.

In relation to NHS income, the savings proposals identified in 2015/16 and 2016/17 took into account use of NHS funding via the Better Care Fund to support and protect social care services which would otherwise be at risk. Services already funded from the Better Care Fund allocation include reablement services, telecare, transitional care beds, support for carers, low level services, support services and equipment for older people in their own homes and day services for people with dementia.

As outlined in 6.9.2 the potential to introduce charges for some preventative services that are not currently subject to a contribution will be considered as part of a separate review.

9. RISK IMPLICATIONS

- 9.1 There are a number of risks implicit in the delivery of any package of savings and it is important to recognise these as part of any decision making.
- 9.2 It is considered that the proposed 2017/18 savings can be delivered, although not without difficulty or some degree of risk. This can be managed in the coming year; however achieving these savings becomes more difficult each year.
- 9.3 There are risks associated with increasing the departmental salary abatement target as vacancies may not arise during the year or may be filled immediately and staff may move through the pay grades and reach the top of pay scale quicker than anticipated i.e. qualifications and experience based progression for Social Workers and Social Care Officers.
- 9.4 There are risks associated with the achievement of savings from housing related support spend as cuts will potentially result in some services being unsustainable. This then has potential to impact on other budgets as a loss of housing related support may mean that a person with eligible needs then requires a more costly service to meet those needs.
- 9.5 The risks associated with the proposed approach to achieve savings in 2017/18 and 2018/19 are significant in the context of previous savings and the volatility of budgets outlined in this report. Given the increasing demographic pressures from an ageing population and increasing numbers of adults with complex physical or learning disabilities there is a significant risk that demand will not reduce and may in fact increase. There are also risks that the cost of commissioning services to meet eligible assessed needs increases further linked work that is underway nationally in terms of fair cost of care for residential and domiciliary care. This may result in increased costs for services, even if demand can be constrained or reduced. It should also be noted that the Social Care Precept may not be sufficient to cover future pressures associated with uplifts to the National Living Wage, which would have a negative impact on the overall budget position as there is significant spend related to care homes, domiciliary care and personal assistants.

- 9.6 It is anticipated that the risks highlighted in relation to using these measures to help balance the 2017/18 budget are manageable. However, sustainability beyond 2017/18 will require careful management and if the proposed approach does not deliver the savings required on a sustainable basis, alternative savings proposals will need to be identified.

10. FINANCIAL CONSIDERATIONS

- 10.1 As highlighted in previous reports, failure to take savings identified as part of the Savings Programme will result in the need to make alternative unplanned cuts and redundancies elsewhere in the Authority to balance the budget.
- 10.2 The savings that have been identified have been assessed for their sustainability. As with all others parts of the Authority the sustainability of the savings required by the ongoing cuts which the Authority faces becomes increasingly difficult as the compound effect of savings impacts on services. It is not necessary to remind Members of the level of savings which have been delivered in previous years or those which are likely to be required in future years. The proposed savings have been identified as sustainable in light of the need to make ongoing changes to what is delivered. The principles that have been applied in determining the proposals have been linked to protecting front line services, savings being realised in respect of vacant posts where this can be managed, considering voluntary redundancy request and reflecting the pressures, both internal and external that the Authority needs to address to maintain effective governance arrangements.
- 10.3 As highlighted throughout the report, achievement of further savings to manage pressures in 2018/19 and 2019/20 will be incredibly challenging and will require carefully management. If this level of savings cannot be achieved alternative proposals will need to be identified for consideration.
- 10.4 The proposed savings for 2017/18 are summarised below along with estimated savings for 2018/19 and 2019/20 to manage pressures:

Service	Proposed Savings 2017/18 (£'000)	Proposed Savings 2018/19 (£'000)	Proposed Savings 2019/20 (£'000)
Standards, Engagement and Development Team	190	0	0
Departmental Running Costs and Non Pay Budgets	220	0	0
Review of Pay Budgets	235	0	0
Review of Prevention and Housing Related Support (Adult Services)	150	150	0
Review of Housing Related Support (Phase 2)	0	215	0
Transforming Adult Services (Demand Management)	0	785	1,065
TOTAL:	795	1,150	1,065

11. LEGAL CONSIDERATIONS

11.1 There are no legal considerations associated with this report.

12. CHILD AND FAMILY POVERTY CONSIDERATIONS

12.1 There are no child and family poverty considerations associated with this report.

13. EQUALITY AND DIVERSITY CONSIDERATIONS

13.1 By definition, all of the savings proposals in adult services will affect people who access adult services, including some of the most vulnerable groups within the town. This includes all those who are over eighteen and assessed as having eligible needs (older people, people with learning disabilities, sensory loss or a physical disability, people with mental health needs, people who have alcohol dependency or substance misuse issues and carers).

13.2 An assessment has indicated that none of the current proposals require an Equality Impact Assessment as the proposals will have limited impact on people accessing services and no disproportionate impact on people who share protected characteristics.

14. STAFF CONSIDERATIONS

14.1 There are staffing considerations associated with this report as the savings proposals for 2017/18 involve deleting vacant posts and hours, accepting one request for voluntary redundancy and deleting six posts, which will potentially result in six compulsory redundancies if current post-holders cannot be successfully redeployed.

14.2 Informal consultation with Trade Unions regarding staffing implications will be undertaken. Staff affected by the proposals will be informally notified and formal consultation will be undertaken in line with HR policies and procedures, if the proposals are accepted.

15. ASSET MANAGEMENT CONSIDERATIONS

15.1 There are no asset management considerations associated with this report.

16. CONCLUSIONS

16.1 The achievement of further savings in Adult Services is incredibly challenging due to known pressures, potential pressures that are not yet

quantified and the demand led nature of the service area. The proposals set out in this report to achieve savings of £945,000 (£795,000 in 2017/18 and a further £150,000 in 2018/19) are based on further efficiencies and service reviews, with an expectation that service delivery can be transformed in 2018/19 and 2019/20 to manage pressures of £2,065,000.

17. RECOMMENDATION

- 17.1 It is recommended that Members of the Committee note the content of the report and formulate a response to be presented to Finance and Policy Committee on 9 January 2017.

18. REASON FOR RECOMMENDATION

- 18.1 The proposals included in this report will contribute to the delivery of the savings and management of pressures over the next three years.

19. BACKGROUND PAPERS

- 19.1 The following background paper was used in the preparation of this report:-
Finance and Policy Committee - Medium Term Financial Strategy 2017/18 to 2019/20 (20 June 2016)

20. CONTACT OFFICER

Jill Harrison
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Hartlepool Borough Council

ADULT SERVICES COMMITTEE

1 December 2016



Report of: Director of Child and Adult Services

Subject: POLICY FOR FULL FEE PAYERS ACCESSING OLDER PEOPLE'S RESIDENTIAL CARE

1. TYPE OF DECISION/APPLICABLE CATEGORY

Key decision; Forward Plan Ref: CAS 059/16.

2. PURPOSE OF REPORT

2.1 The purpose of this report is to assess the impact of making amendments to the current policy regarding full fee payers accessing residential care. A change in approach is proposed which would mean that full fee payers would no longer enter placements under the Council's terms and conditions.

3. BACKGROUND

3.1 Currently older people requiring a placement in long term residential care, who have been assessed by Adult Services, are required to have a financial assessment under Charging for Residential Care Guidance (CRAG) to ascertain their ability to contribute to the costs of their care. Following this assessment a determination can be made as to their ability to pay the full cost of their care. If they are able to pay the full cost of care, current custom and practice allows the individual to enter into an individual agreement with the residential care provider under the Council's terms and conditions, including accessing the placement at the weekly fee rate agreed by the Council. The current contract with the Council states that any fees above the agreed Council rate can only be for additional benefit such as a larger room; these are called Top Up fees and are the responsibility of the individual to pay.

3.2 The Care Act (2014) introduced new responsibilities for Local Authorities in relation to market shaping. This includes promoting the efficient and effective operation of a market in services for meeting care and support needs. In performing this duty Local Authorities must have regard to the

importance of ensuring the sustainability of the market (in circumstances where it is operating effectively as well as in circumstances where it is not).

- 3.3 There is a national debate regarding the cost of care and the sustainability of the residential market based on fees paid by Local Authorities. There have been some providers who have considered investing in Hartlepool, bringing new developments and jobs and increasing care home capacity and choice, who have withdrawn planning applications stating the current fee structure as a reason.
- 3.4 There have been several representations to the Council recently from providers asking to be able to charge higher prices for individuals who fund all of their own care, as they do in other Local Authority areas.
- 3.5 A survey of the approach taken in other Local Authorities in the region has been carried out to understand what happens elsewhere. The responses are shown in **Appendix 1**, and highlight that the majority of Councils in the North East do not contract on behalf of individuals who can fully fund the cost of their own care. This means that providers who operate in other Council areas are able to charge differential rates and therefore secure more income for the overall running of their homes.

4. HARTLEPOOL POSITION - FULL FEE PAYERS

- 4.1 **Appendix 1** provides data on the current position for Hartlepool. Approximately 510 older people access permanent residential care on an annual basis, and approximately 28% are self funders. This means they have savings and/or capital above a threshold of £23,250 and are able to meet the full cost of their care home fees. Individuals often have capital in a mixture of disposal income i.e. cash in bank accounts and property. The Council operates the Deferred Payment Scheme as prescribed by the government, and individuals are never in a position where they have to sell their property to fund the cost of their care.
- 4.2 Of the 28% of self funders there are a number of individuals who choose not to advise the local authority of their financial position as is their right to do so. The assessment of average savings therefore does not include these individuals. The average level of savings that individuals have is approximately £85,000. Assuming a cost of £500 per week, this capital would support the cost of their care for approximately 3.27 years (this is exclusive of other income an individual may have, such as old age pensions and benefits). Should the cost of care for full fee payers increase to £700 per week (a reasonable assumption based on information from other local authority areas), the savings/capital would support the fees for approximately 2.34 years. These approximations are purely based on savings/capital above the threshold of £23,250 and do not take into account the other income streams mentioned above, which most individuals use to support meeting the costs of their care.

- 4.3 The average length of stay currently for full fee payers in Hartlepool is approximately 2.1 years.
- 4.4 **Appendix 1** also provides detail of the position taken by our regional colleagues, as referred to in 3.4. The data clearly demonstrates that Hartlepool is an outlier with regard to allowing a differential rate to be charged for full fee payers. Some Councils do give individuals the choice, but the majority support people to arrange their own care and manage that care directly with the provider.

5. PROPOSAL

- 5.1 It is proposed that from 1 February 2017 the current policy is amended to allow providers of residential care for older people to contract and negotiate fees directly with full fee payers.
- 5.2 This change in approach will apply only to full fee payers moving in to residential care from that date onwards. There will be no impact on current care home residents who will continue to access placements based on existing terms and conditions.
- 5.3 This proposed change will help to address the concerns of current providers about the financial sustainability of their homes, and will also make Hartlepool more attractive for potential new developers who are interested in entering the care home market.

6. RISK IMPLICATIONS

- 6.1 There are significant risks associated with availability of sufficient care home places for older people. If places are not available within Hartlepool for older people assessed as requiring residential or nursing care, there will be an increasing use of out of area placements in order to meet needs. Lack of care home placements also impacts on delayed transfers of care (delayed discharges from hospital) with people who are medically fit staying in hospital because their home of choice is not available.
- 6.2 Whilst providers of residential care do not have the ability to charge differential rates to full fee payers and are unable to manage the overall financial risk of providing care in Hartlepool, it will remain difficult to attract new providers and increase capacity and choice for individuals.

7. FINANCIAL CONSIDERATIONS

- 7.1 There are potential financial implications associated with this issue. A change in policy will have the positive benefits of attracting new providers and creating a more sustainable care market but there is a risk that, if the funds of individuals run out more quickly than happens currently, some of

the costs of their care would fall to the Council to meet. Analysis provided at **Appendix 1** indicates this will be a low risk given the average length of stay is 2.1 years and, if the policy is changed, savings/capital alone will fund care for approximately 2.34 years on average.

8. LEGAL CONSIDERATIONS

8.1 There are no legal considerations associated with this report.

9. CHILD AND FAMILY POVERTY CONSIDERATIONS

9.1 There are no child and family poverty considerations associated with this report.

10. EQUALITY AND DIVERSITY CONSIDERATIONS

10.1 There are no equality and diversity implications associated with this report. Any change to the current policy will be applied equitably to all older people who require residential care.

11. STAFF CONSIDERATIONS

11.1 There no staffing considerations associated with this report.

12. ASSET MANAGEMENT CONSIDERATIONS

12.1 There are no asset management considerations associated with this report.

13. RECOMMENDATION

13.1 It is recommended that the Adult Services Committee agree to change the Council's policy for full fee payers who enter residential care homes for older people.

14. REASONS FOR RECOMMENDATIONS

14.1 The residential and nursing care market is at saturation point currently owing to recent home closures. In order to attract investment into the town to increase capacity and improve choice for individuals, and also maintain financial stability of current providers it is necessary to allow providers to maximise their income. Hartlepool Borough Council is currently an outlier in its custom and practice.

15. CONTACT OFFICER

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FULL FEE PAYERS IN HARTLEPOOL**Hartlepool Data Analysis**

Average number of older people in permanent residential care	510	
Average number of individuals who pay full cost of care	140	28%
Average number of individuals who are non-disclosed	38	28%
Average level of savings	£85,000	
Average length savings will support costs based on £500pw	3.27 years	
Average length of stay	2.1 years	
Average length savings will support costs based on £700pw	1.7 years	

(Figures exclusive of personal income which is taken into account and most individuals utilise for their cost of care)

Regional Picture

Authority	If assessed as self-funding would they contract privately with the care home or be placed under LA terms and conditions and price?	If private, does the LA still maintain a care management role? *
LA1	LA terms & conditions	Can request an assessment
LA2	Contract privately	No
LA3	Choice of either option	No
LA4	Contract privately	Can request an assessment
LA5	Contract privately	No
LA6	Contract privately	No
LA7	LA terms & conditions	No
LA8	Contract privately	No
LA9	Choice of either option	Can request an assessment
LA10	Contract privately	No
LA11	Contract privately	No
LA12	Contract privately	No

* All Local Authorities have a care management role should there be a safeguarding issue, regardless of funding arrangements.

ADULT SERVICES COMMITTEE

1 December 2016



Report of: Director of Child and Adult Services and Chief Finance Officer

Subject: STRATEGIC FINANCIAL MANAGEMENT REPORT - AS AT 30 September 2016

1. TYPE OF DECISION/APPLICABLE CATEGORY

For Information.

2. PURPOSE OF REPORT

- 2.1 The purposes of the report is to inform Members of the 2016/17 Forecast General Fund Outturn, 2016/17 Capital Programme Monitoring and provide details for the specific budget areas that this Committee is responsible for.

3. BACKGROUND AND FINANCIAL OUTLOOK

- 3.1 As detailed in the Medium Term Financial Strategy Report (MTFS) submitted to the Finance and Policy Committee on 30th June 2016 the Government will implement further cuts in funding for Councils up to 2019/20. Over the next 3 years (2017/18 to 2019/20) this means a further grant cut of £9.8m. An MTFS update report was submitted to Finance and Policy Committee on 28th November 2016 which informed Members of changes in the overall budget deficit and which confirms that the Council still faces an extremely challenging financial position over the next 3 years.
- 3.2 In view of the ongoing financial challenges the Corporate Management Team will continue to adopt robust budget management arrangements during 2016/17 and as detailed in section 5 it is becoming increasingly difficult to manage the annual budget. This position will need to be managed carefully over the remainder of the financial year, particularly over the winter period where some services face their highest demand and therefore cost of providing services.

4. REPORTING ARRANGEMENTS 2016/17

- 4.1 The availability and reporting of accurate and up to date financial information is increasingly important as future budget cuts are implemented and one-off resources are used up.
- 4.2 The Finance and Policy Committee will continue to receive regular reports which will provide a comprehensive analysis of departmental and corporate forecast outturns, including an explanation of the significant budget variances.
- 4.3 To enable a wider number of Members to understand the financial position of the Council and their service specific areas each Policy Committee will receive a separate report providing:
- a brief summary of the overall financial position of the Council as reported to the Finance and Policy Committee;
 - the specific budget areas for their Committee; and
 - the total departmental budget where this is split across more than one Committee. This information will ensure Members can see the whole position for the departmental budget.

5. SUMMARY OF OVERALL COUNCIL FINANCIAL POSITION

- 5.1 An assessment of the forecast outturn has been prepared to reflect expenditure incurred to date and forecast to be incurred in the second half of the financial year. As Members will be aware from previous years, significant elements of the Council's budget are demand led and affected by expenditure over the winter months, including care costs in relation to older people and winter maintenance. The outturn forecasts will be closely monitored and regular updates will be reported to Finance and Policy Committee. The forecasts need to be considered in the context of the complexity of managing a gross General Fund budget of £213m and a net budget of £86m.
- 5.2 The latest report submitted to the Finance and Policy Committee on 28th November 2016 anticipated that the best case forecast outturn for departmental budgets is an over spend of £0.470m and the worst case is an over spend of £1.090m. The range reflects seasonal and demand led factors.
- 5.3 The position in relation to corporate budgets is more positive and a net under spend of £0.540m is forecast. This is after earmarking £1.8m to fund future priorities, including capital investment. Detailed proposals for using this money will be included in the 2017/18 Medium Term Financial Strategy report to be considered at a future meeting of the Finance and Policy Committee, before detailed proposals are referred to full Council.
- 5.5 After reflecting the above factors the overall forecast position for departmental and corporate budgets is a best case potential net under spend of £0.121m, or a worst case over spend of £0.499m.

6. 2016/17 FORECAST GENERAL FUND OUTTURN – ADULT SERVICES COMMITTEE

6.1 The following table sets out the overall budget position for the Child and Adult Services Department. Budgets are managed at a Departmental level and therefore a summary of the Departmental position is provided below broken down by Committee, together with a brief comment on the reasons for the forecast outturn.

Budgets Managed by the Director of Child and Adult Services

2016/17 Budget	Description of Expenditure	September Projected Outturn Adverse/ (Favourable) Worst Case	September Projected Outturn Adverse/ (Favourable) Best Case	Comments
£'000		£'000	£'000	
30,103	Adult Committee	(323)	(558)	The projected underspend relates to current expected levels of expenditure and increased income from the CCG for jointly-funded packages, however the winter period may result in additional expenditure so the projection will be closely monitored and updated as the year progresses. In addition there are the unbudgeted costs of DoLS following the Supreme Court Judgement (which will be funded from within the overall outturn). There are a number of 'one-off' underspends arising from incremental drift, 2017/18 savings in advance and vacant posts which have now been filled. These are only temporary and not sustainable.
17,410	Children's Committee	1,623	1,478	The forecast over spend previously reflected higher levels of Looked After Children. This trend has continued during the year, including an increase in the number of high-cost, complex needs children being placed with Independent Foster Agencies and Residential Placements and an increase in Care Proceedings budgets.
47,513	Total Child & Adult	1,300	920	
Release of Departmental Reserves for 2016/17 Savings Shortfall				
(725)	Departmental Reserves required to fund shortfall in 2016/17 savings.	0	0	This reflects the usage of departmental reserves which are required to fund the shortfall in the 2016/17 savings.
-	Adult Services - Release of DoLS Reserve	0	0	DoLS costs are to be funded from within the overall outturn to protect the specific DoLS reserve.
(725)	Release of Specific Reserves Total	0	0	
46,788	Total Child & Adult - Net of Reserves	1,300	920	

6.2 Further details of the specific budget areas this Committee is responsible for are provided in **Appendix A**.

6.3 The projected outturn represents a net underspend of between 1% (worst case scenario) and 1.8% (best case scenario) of the Adult Services budget. This underspend consists of a number of 'one-off' or non-sustainable underspends mainly relating to 2017/18 savings in advance (Departmental Running Costs and Workforce Planning and Development), vacant posts which have been, or are in the process of being, filled and incremental drift within the Social Work staffing budgets.

6.4 These underspends have enabled the DoLS budget pressure to be funded from within the overall outturn position and therefore protect the specific DoLS reserve.

6.5 Budget pressures remain within Mental Health and Learning Disability Services arising from an expected increase over the coming years in the number of users with complex needs requiring significant care and support packages and an increase in the number and complexity of users transitioning from Children's Services.

7. CAPITAL MONITORING 2016/17

- 7.1 The 2016/17 MTFS set out planned capital expenditure for the period 2016/17 to 2017/18.
- 7.2 Expenditure against budget to the 30th September 2016 for this Committee is summarised in the following table and further details are provided in **Appendix B**.

Department	2016/17 Budget including Future Years	2016/17 Budget	2016/17 Actual to 30/09/16	2016/17 Remaining Expenditure	2016/17 Re-phased Expenditure	2016/17 Total Expenditure	2016/17 Variance from Budget Adverse/ (Favourable)
	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Adult Services	4,003	4,003	531	3,472	0	4,003	0
Total	4,003	4,003	531	3,472	0	4,003	0

8. CONSIDERATIONS / IMPLICATIONS

Financial Considerations and Risk Implications	Covered in detail in Sections 3 to 7
Legal Considerations	None
Child and Family Poverty Considerations	None
Equality and Diversity Considerations	None
Staff Considerations	None
Asset Management Considerations	Covered in detail in Section 7

9. CONCLUSIONS

- 9.1 An updated assessment of the forecast 2016/17 budget outturn has been prepared, reflecting expenditure to date and forecast over the remainder of the year. The current forecasts indicate a best case net underspend of £0.121m and a worse case overspend of £0.499m. A significant number of these forecasts relate to seasonal services where higher levels of activity and expenditure occur over the winter months. The forecast outturn position will be managed carefully over the remainder of the year and regular updates reported to the Finance and Policy Committee.
- 9.2 In the event of a year-end overspend this will either be funded from the General Fund Reserve or by reducing the resources earmarked for Capital priorities. The position will continue to be monitored and the final outturn report to Finance and Policy Committee will recommend a strategy to address a year end underspend if this occurs.

10. RECOMMENDATIONS

10.1 It is recommended that Members note the report.

11. REASONS FOR RECOMMENDATIONS

To update the Members on the Committees forecast 2016/17 General Fund Revenue budget outturn and provide an update on the Capital Programme for 2016/17.

12. APPENDICES

Appendix A attached.
Appendix B attached.

13. BACKGROUND PAPERS

Strategic Financial Management Report – as at 31 July 2016 to Adult Services Committee 6 October 2016.

14. CONTACT OFFICERS

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ADULT SERVICES

Appendix A

REVENUE FINANCIAL MONITORING REPORT FOR FINANCIAL YEAR 2016/17 as at 30th September, 2016

Approved 2016/2017 Budget £'000	Description of Service Area	September		Director's Explanation of Variance
		Projected Outturn Variance - Adverse/ (Favourable) Worst Case £'000	Projected Outturn Variance - Adverse/ (Favourable) Best Case £'000	
Adult Committee				
0	Carers & Assistive Technology	0	0	
3,435	Commissioning & Adults General	(15)	(15)	
1,358	Commissioning-Mental Health	140	140	This reflects an increase in the number of service users over the last 12 months and has been identified as an on-going budget pressure.
10,072	Commissioning-Older People	(240)	(240)	Historic budget pressures have been funded from the Better Care Fund (BCF) as part of the programme to reduce care home and hospital admissions. The projected underspend relates to current expected levels of expenditure and increased income from the CCG for jointly-funded packages, however the winter period may result in additional expenditure so the projection will be closely monitored and updated as the year progresses.
0	Deprivation of Liberty Standards (DoLS) - Pressure	337	337	This relates to the unbudgeted costs arising from the Supreme Court Judgement which has resulted in a 1600% increase in activity. The costs are to be funded from within the overall outturn.
8,168	Commissioning-Working Age Adult	0	(155)	
216	Complaints & Public Information	0	0	
482	Departmental Running Costs	(100)	(100)	These mainly relate to under spends across various supplies and services budgets reflecting early achievement of 2017/18 savings.
751	Direct Care & Support Team	(200)	(230)	A staffing restructure to enhance Telecare services will commence from Autumn 2016 therefore this underspend reflects the part year effect of the changes not yet being implemented.
403	LD & Transition Social Work	(10)	(10)	
2,568	Locality & Safeguarding Teams	(225)	(275)	Underspend mainly relates to new posts created within Teams (which have now been filled) and incremental drift with some early achievement of 2017/18 savings. Social Workers and Social Care Officers are on career grades which results in a range of bandings depending on qualifications and experience. Budgets are set prudently to reflect payment at the top of scale and the underspend reflects the fact there have been a number of new workers appointed at the lower end of the scale resulting in a short term saving of up to £10k per worker. A departmental salary abatement target was created as part of the 2016/17 budget savings proposals and this underspend is in addition to this target. The position is not sustainable as workers will move up the salary scales as they gain more experience.
715	Mental Health Services	(40)	(40)	
372	OT & Disability Equipment	70	70	Current usage and expenditure is higher than budgeted.
409	Workforce Planning & Dev	(40)	(40)	
1,154	Working Age Adult Day Services	0	0	
30,103	Adult Committee Sub Total	(323)	(558)	
(725)	Departmental Reserves required to fund shortfall in 2016/17 savings.	0	0	
0	Release of Departmental Reserve for DoLS	0	0	DoLS costs are to be funded from within the overall outturn to protect the specific DoLS reserve.
29,378	Adult Committee Total (after release of reserves)	(323)	(558)	

ADULT SERVICES
PLANNED USE OF RESERVES

Appendix A

The above figures include the 2016/2017 approved budget along with the planned use of Departmental Reserves created in previous years.
 The details below provide a breakdown of these reserves

Approved 2016/2017 Budget £'000	Description of Service Area	Planned Usage 2016/2017 £'000	Variance Over/ (Under) £'000	Director's Explanation of Variance
Adult Committee				
50	CCG LD Transformation Funding	50	0	
725	Departmental Reserves to Fund 16/17 Savings Shortfall	725	0	
58	Demand Management - Adults (BCF Demand Review)	58	0	
337	Deprivation of Liberty Safeguards (DoLS)	337	0	
50	BCF Project Management	50	0	
50	Demand Management - Adults (Modern Apprentices)	50	0	
31	Care Bill Implementation	31	0	
1,301	Adult Committee Total	1,301	0	

ADULT SERVICES**APPENDIX B****CAPITAL MONITORING REPORT PERIOD ENDING 30TH SEPTEMBER 2016**

Project Code	Scheme Title	BUDGET		EXPENDITURE IN CURRENT YEAR					Type of Financing	2016/17 COMMENTS
		A	B	C	D	E	F	G		
		2016/17 and Future Years Budget £'000	2016/17 Budget £'000	2016/17 Actual as at 30/09/16 £'000	2016/17 Expenditure Remaining £'000	Expenditure Rephased into 2017/18 £'000	(C+D+E) 2016/17 Total Expenditure £'000	(F-B) 2016/17 Variance from Budget £'000		
Adult Committee										
7234	Chronically Sick and Disabled Persons Adaptations	309	309	11	298	0	309	0	MIX	
8108	Centre for Independent Living - New Build	3,694	3,694	520	3,174	0	3,694	0	MIX	
	Adult Committee Sub Total	4,003	4,003	531	3,472	0	4,003	0		

Key

RCCO Revenue Contribution towards Capital
MIX Combination of Funding Types
UCPB Unsupported Corporate Prudential Borrowing
SCE Supported Capital Expenditure (Revenue)

GRANT Grant Funded
CAP REC Capital Receipt
UDPB Unsupported Departmental Prudential Borrowing
SPB Supported Prudential Borrowing