

## Appendix 3

### Budget Strategy: Adults Services

#### Strategic Financial Context and Direction of Travel

Adult social care continues to deliver services through personalised care and support plans, prevention and supporting carers.

There are local and national developments that will have a significant impact on social care in the coming years, these include:

- Demographic changes in the population of Brighton and Hove with:
  - a reducing number of people aged over 65, but an increased proportion of people aged 85 plus with high and complex needs;
  - a growing number of young adults with a higher complexity of need including mental health, substance misuse and homelessness.
- Major changes in the legislation and funding of social care. The Care and Support Bill puts the 'safeguarding' of vulnerable adults into a legal framework. There are other aspects of the draft bill including well-being, advice and information, national eligibility criteria, portability of assessment, the support needs of broader communities and legal entitlement of informal carers. All these will place additional or enhanced responsibilities on the council's social care duty.
- Additional duties linked to the final outcomes of the Dilnot report and implementing a 'cap' on care costs. This will require the authority to keep care accounts for self funders and imposes a duty to assess self funders. This will place significant additional demands on social care services.
- Government proposals on Integration with Health. The Integrated Transformation Fund (ITF), detailed in the government's spending review, requires local authorities to work with key partners on delivering key performance targets. These include minimising delayed transfers of care, and admission avoidance. These will demand a greater level of integration regarding how care in the community is delivered.
- Increased public expectations regarding the quality of care against growing public concern about the actual quality of care.

A key focus in adult social care services has been on commissioning. The majority of care services have been contracted out to the private and voluntary sector. We have carefully considered the unit cost and the value for money that services offer through our Commissioning Programme. Aligned to this, over recent years a significant procurement programme has been

undertaken to improve value for money, including home care, community meals, and accommodation services.

Where services are still provided in-house we need to demonstrate the rationale for retaining these services, focusing on their effectiveness and efficiency, and how they complement other provision in the city. We have reduced our in-house provider service over the years where this has provided value for money opportunities, but still retain a significant level of provision in relation to people with a learning disability and have been taking opportunities to improve efficiency and deliver savings whilst sustaining service quality. Our in-house care management services have undergone a significant restructure alongside the council's 'workstyles' programme which has delivered efficiencies and savings against improved outcomes.

Charges to service users for services are made in accordance with the national Fairer Charging guidance and related regulations. Councils do have some element of discretion in relation to charges for community based services, and local charges are comparatively higher in relation to many services. There is limited scope therefore to increase charges further.

The success of our budget strategy so far has enabled the council to maintain eligibility criteria under Fair Access to Care at the current level – i.e. "substantial and critical" – rather than to tighten this further. This is important as it is likely the Care & Support Bill will set national criteria at this level.

## **Delivering the Corporate Plan**

### **Tackling inequality**

Adult Social Care services remain focused on supporting the most vulnerable people in the city, promoting independence to enable people to fulfil their potential. Working with colleagues in mental health services under Section 75 Health Act arrangements, we work and support people with the most complex needs in the city through a range of interventions from a clinical nature through to helping people get back to work.

Further work on options for supporting the homeless community and those in temporary accommodation are under development, and we are working with the Stronger Families, Stronger Communities teams.

We will work with colleagues to look at low level prevention services across the council to promote social and financial inclusion.

### **Engaging people who live and work in the city**

This year we held our first City Summit - a stakeholder event which brought together 80 representatives including those receiving services, informal carers and interested citizens. The event supported them to share their views on social care and identify the key areas they would like to see improved or developed. The event was supported by over 20 volunteer facilitators from across the council and the voluntary sector. In tandem with the event over 20 information stalls on local services were open to all. The event linked into the

production of our second annual Local Account (a public document that was based on the outcomes from user and carer surveys alongside performance information) and our involvement in the national Making It Real programme, a user led programme to promote genuine personalisation of services. We have developed an action plan in response to these events to enable a 'you said, we did' approach to this engagement.

There are also a range of regular forums with care providers across the city which promote a partnership approach, provide an opportunity to share best practice, enable commissioners to share their plans and ensure a dialogue on key issues.

Commissioners are working on producing a robust market position statement for the end of the year which will clarify to the sector and the public the areas we are planning to develop and those areas where we are looking to reduce our commissioning activity.

Annual surveys of service users and bi-annual carers' surveys are undertaken in line with national requirements; this information is benchmarked and used to inform service improvement and development.

All significant commissioning plans are informed by the views of people who use services.

### **Modernising the council**

Service redesign and business process improvements have delivered efficiencies. Opportunities for a joint approach to prevention with Public Health need to be explored and for there to be a more systematic approach to commissioning, procurement and contract management across Public Health, Communities, Housing and Children's Services.

### **Key Aspects of the Budget Strategy**

The budget strategy supports delivery of the Corporate Plan, however the financial position will require strengthened commissioning and integration with health partners, greater consistency in meeting statutory assessed needs and a continuing challenge to the value for money of all services. This will reduce the level of service received by some client groups where these are above statutory assessed needs but will ensure equality of service across client groups. Other approaches are:

- We will encourage people to take up personalised services, including the use of direct payments.
- We will review local service provision to enable people placed outside the city to have the opportunity to receive services locally, linked to a full understanding of the quality and cost of such services.
- We will continue to use our effective reablement and telecare services to support people to live at home, optimising their capacity to live

independently. We will also recommission community equipment services jointly with the NHS during 2014/15.

- We will work with the care sector on care home fees to inform decisions on levels of fees.
- We will continue to explore models for providing care, looking for opportunities that provide better outcomes and a more efficient service, both within the council and through other providers. For example, we will continue with the day services review and be clear about the role of in-house services within this. We will also explore other opportunities that the Care & Support Bill may offer to support our overall budget strategy.
- Similarly, we will explore the business case for our Able & Willing service and look to see if there are opportunities for this to become financially sustainable; if not, alternative options for re-providing this service will need to be considered.
- We propose to stop the non-statutory Employment Service and work with other providers in the city to ensure there is appropriate capacity and support into employment to meet the needs of people with a learning disability.
- We will work with other services such as Public Health and Communities to deliver wider efficiencies in the commissioning process using more innovative procurement vehicles such as the commissioning Prospectus approach. Through this work we will also seek to develop a co-ordinated approach to preventive services and promoting community involvement in the care and support of people with social care needs.
- We will sustain and keep under review the robust Care Governance arrangements that have been developed over the past 3 years to promote and assure ourselves of service quality. To date these have helped maintain service quality across the city.

Service Area: ADULTS SERVICES								
Service (including brief description)	Gross Budget £'000	Net Budget £'000	Total Establishment FTE	Description of Saving Opportunity	Impact on Outcomes / Priorities	Equalities Impact Assessment	Savings identified 2014/15 £'000	Full Year effect of 2014/15 savings £'000
<b>Adults Assessment</b>								
Learning Disabilities (LD)- Residential. Community Care Services provided by the Independent Sector to meet assessed needs.	13,797	12,693	n/a	Target all out of city placements with a purpose of bringing people back into supported living in the City. This will not only generate significant savings but it will reduce the risk of local places being taken up by other authorities where there is a possibility that the cost of care could later be passed to Brighton & Hove. Consider alternative models of care to include supported living.	Will deliver equality of levels of service across client groups by bringing expenditure on Learning Disabilities in line with other client groups.	EIA No. 1	1,270	1,270
Learning Disabilities(LD)-Home Care & Direct Payments. Community Care Services provided by the Independent Sector to meet assessed needs.	9,081	8,579	n/a	Implement Resource Allocation System (RAS), increase number of Direct Payments, achieve a 10% reduction on the budget by reviewing all care packages and ensuring only assessed needs are met.	Will deliver equality of levels of service across client groups by bringing expenditure on Learning Disabilities in line with other client groups.	EIA No. 2	730	730
Older People- Residential/Nursing( includes Older People with Mental Health needs ( OPMH)). Community Care Services provided by the Independent Sector to meet assessed needs.	22,211	10,254	n/a	Reduce number of placements and the Cost of Out of Area Placements. Ensure all appropriate funding is available through targeting following a review. Continue to promote reablement and telecare to support people to stay in their own homes longer and to reduce the number of admissions into residential and nursing care. Identify alternative housing solutions where possible.	Those assessed against eligibility criteria will still receive care. Location of services and funding streams may vary.	EIA No. 3	1,150	1,150

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<b>Service (including brief description)</b>	<b>Gross Budget £'000</b>	<b>Net Budget £'000</b>	<b>Total Establishment FTE</b>	<b>Description of Saving Opportunity</b>	<b>Impact on Outcomes / Priorities</b>	<b>Equalities Impact Assessment</b>	<b>Savings identified 2014/15 £'000</b>	<b>Full Year effect of 2014/15 savings £'000</b>
Adults with Mental Health-Home Care & Direct Payments. Community Care Services provided by the Independent Sector to meet assessed needs.	791	473	n/a	Meet assessed needs, increase Direct Payments and identify community based options.	Those assessed against eligibility criteria will still receive care. Location of services and funding streams may vary. These services are delivered jointly with Sussex Partnership Foundation Trust under S75 arrangements.	EIA No. 4	70	70
ALL COMMUNITY CARE-across all client groups. Fees for services provided by the Independent Sector	incl above	incl above	n/a	Limited inflation increases on fees in view of the levels of increase in the last two years and ensure comparable with other authorities; increase targeted on specific areas in the care sector.	Those assessed against eligibility criteria will still receive care. Location of services may vary.	EIA No. 5	1,000	1,000
S75 SPFT Assessment Services. Assessment and Review staffing	3,306	2,855	50.1	Service Redesign to increase effectiveness of Interventions. Review to meet statutory functions (including admissions under the Mental Health Act) and deliver savings to the community care budget.	Reduced management oversight of cases and spend.	Not needed	56	56
<b>Adults Assessment Total</b>							<b>4,276</b>	<b>4,276</b>
<b>Adults Provider</b>								
Resource Centres Older People (Craven Vale, Knoll House, Ireland Lodge (MH), Wayfield Avenue (MH))	4,961	2,717	139.3	Make best use of in-house capacity through minimising voids. Ensure full recovery of health costs.	No expected impact on outcomes provided that full cost recovery of health costs is achieved.	Not needed	150	300
LD Accommodation Services. (14 services)	4,630	3,707	121.7	Commence Phase 2 of LD accommodation plan. Close some houses and commission alternative services to meet statutory assessed needs.	Those assessed against eligibility criteria will still receive care. Location of services and funding streams may vary.	EIA No. 6	150	300

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Home Care. (6 services including Independence at Home)	4,416	3,813	131.2	There has been growth in service through joint funding of the Independence at Home services that offer respite services and maximise independence. The services provided at night and at New Larchwood offer a more traditional support service which is not part of the council core business. Can be provided by the independent sector.	The in-house service will focus on respite home care which maximises independence and reduces reliance on long term care. Services at New Larchwood and at night will be reviewed with a view to re-providing or stopping provision. Those who receive a service at night will continue to have assessed needs met but this may mean a change in the service provider. People living at New Larchwood will continue to receive services but this may be delivered by another provider.	EIA No. 7	150	150
Day Services-including LD day options and older people day services	2,005	1,782	64.8	Close some provision and commission alternative services to meet statutory assessed needs, maximise cost recovery/funding.	Service users will continue to receive a service during the day to meet their needs, and the assessed needs of their carers. The service may be different from the existing service, may be provided in another venue or through another provider within the voluntary sector.	EIA No. 8	300	300
Able & Willing (A&W) Supported Business	716	508	22.3	Plan to reduce the subsidy invested by the council in A&W by generating additional new business.	If the new business is not generated to balance the budget then this will result in the loss of some posts.	Not needed	125	250
Employment Support	223	223	6.0	Plan to reduce investment in the service by Adults Services. Investigate other opportunities in private and voluntary sector.	Impact on delivery of supported employment in the city.	EIA No. 9	50	100

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Provider Management	602	599	13.5	Review management and administration across the service and across localities.	Reduced management oversight of service.	Not needed	50	50
<b>Adults Provider Total</b>							<b>975</b>	<b>1,450</b>
<b>Commissioning &amp; Contracts</b>								
Contracts	2,504	2,239	n/a	Hold contracts at current prices as a result of procurement of home based services.	Opportunity through procurement to ensure contracts are outcome focussed.	EIA No. 5	85	85
Contracts Unit	365	319	7.2	Increase charges for non residential services above inflation.	Impact on service users through recovery of costs.	EIA No. 10	20	20
Commissioning	2,600	-1,872	20.0	Review non statutory services, fee assumptions and opportunities to combine with public health and communities in advance of grants prospectus.	Outcomes focussed approach remains.	EIA No. 5	20	20
<b>Commissioning &amp; Contracts Total</b>							<b>125</b>	<b>125</b>
<b>ADULTS SERVICES TOTAL</b>							<b>5,376</b>	<b>5,851</b>