

**CABINET MEMBER FOR ADULT SOCIAL CARE  
15th April, 2013**

Present:- Councillor Doyle (in the Chair); Councillors Gosling and P. A. Russell.

An apology for absence was received from Councillor Steele.

**H78. MINUTES OF THE PREVIOUS MEETING HELD ON 11TH MARCH, 2013**

Consideration was given to the minutes of the previous meeting held on 11<sup>th</sup> March, 2013.

Resolved:- That the minutes of the previous meeting held on 11<sup>th</sup> March, 2013, be approved as a correct record.

**H79. HEALTH AND WELLBEING BOARD**

The minutes of the meeting of the Health and Wellbeing Board held on 27<sup>th</sup> February, 2013, were noted.

**H80. ENABLING SERVICES QUARTERLY UPDATE**

The Enabling Services quarterly update report was submitted for information highlighting:-

Service Performance and Quality

- Carers Corner
- Direct Payments
- Brokerage
- Intermediate Care

Update on agreed Service Changes/Proposed Service Changes

- Rothercare
- Customer Feedback

Resolved:- (1) That the update be noted.

(2) That the Service give consideration as to how it communicated the complaints procedure and how to make complaints to customers

**H81. ASSESSED AND SUPPORTED YEAR IN EMPLOYMENT**

Consideration was given to a report on the implementation of the national Assessed and Supported Year in Employment (ASYE) scheme for Newly Qualified Social Workers (NQSWs).

In September, 2012, a new single sector-wide ASYE scheme had succeeded the existing newly qualified Social Worker scheme for Adults and Children's Services. ASYE aimed to ensure that NQSWs received consistent support in their first year of employment so that they were able to become confident, competent professionals. The most significant difference between the schemes was that the outcome for the NQSW was a pass or fail with those failing being unable to use the title of Social Worker. Successful completion was certificated by the College of Social Work.

The introduction of the ASYE scheme had raised a number of human resource management/development complexities for the Directorate which had required careful consideration before implementation.

An e-handbook had been devised to support the delivery of ASYE including protocols for supervisors and assessors to follow, defined roles and responsibilities for all those involved in ASYE and a planned training programme for both NQSWs and their managers.

The Guidance stated that all staff employed after September, 2012, who were within 2 years of qualification, should undertake ASYE. If workers were not eligible to undertake ASYE, the onus was on the employer to ensure that the Social Worker was able to meet the standards that would be expected of an ASYE.

Resolved:- That the implementation of Assessed and Supported Year in Employment across the Health and Wellbeing Department be approved.

## **H82. POLICE ASSISTANCE AND CONVEYANCE TO HOSPITAL FOR THOSE DETAINED UNDER THE MENTAL HEALTH ACT 1983**

Consideration was given to a report on the 2008 Mental Health Act Code of Practice, requiring local Social Services authorities, defined in Section 145(1) of the Mental Health Act 1983, the National Health Service and the Local Police Authority, to establish a clear policy for the use of the power to convey a person to hospital under Section 6(1) of the Mental Health Act.

The draft Policy and procedures outlined the roles and responsibilities of the Approved Mental Health professionals, the Ambulance Service, medical and/or other healthcare practitioners and Police who may be called upon to facilitate the conveyance of an individual to hospital, or in the case of Guardianship, an appropriate placement. The Policy was to support good joint working and minimise the distress that Service users, their family and friends could experience when admission was necessary.

The overall aim was to ensure that the person detained under the Mental Health Act 1983 was conveyed to hospital or alternative placement in an appropriate vehicle and in the most human way possible following an

assessment of their mental health needs by 2 doctors and an Approved Mental Health professional.

The Code of Practice also specified that the Policy should clearly identify what arrangements had been agreed with the Police should they be asked to provide assistance to the AMHPs and the Doctors and how that assistance would apply to minimise the risk of the patient causing harm to themselves and maximise the safety of everyone involved in the assessment.

Resolved:- That once finalised, the Policy be submitted to Cabinet for adoption by Council and the Cabinet Member for Health and Wellbeing for information.

### **H83. ADULT SERVICES REVENUE BUDGET MONITORING REPORT 2012-13**

Consideration was given to a report presented by the Finance Manager (Adult Services), which provided a financial forecast for the Adult Services Department within the Neighbourhoods and Adult Services Directorate to the end of March, 2013, based on actual income and expenditure to the end of February, 2013.

It was reported that the forecast for the financial year 2012/13 was an underspend of £490,000 against an approved net revenue budget of £71.445M.

The latest year end forecast showed a number of underlying budget pressures which were being offset by a number of forecast underspends:-

#### **Adults General Management and Training**

- A slight underspend mainly due to savings on postages and telephone charges

#### **Older People**

- A forecast overspend on In-House Residential Care, further increase in demand for Direct Payments and In House Transport.
- Offset by underspends within Enabling Care, independent Residential and Nursing Care, Community Mental Health, Carers' Services and slippage on Assistive Technology and recruitment to vacant posts within Assessment and Care Management together with Winter Pressures funding from Health
- Overall underspend on Rothercare due to slippage in Service Review including options for replacement of alarms
- General savings on premises and supplies and services due to moratorium on non-essential spend

### Learning Disabilities

- A forecast overspend on independent sector Residential Care budgets due to increase in clients and average cost of care packages plus loss of income from Health reduced by lower activity on respite care
- Underspend within Supported Living Schemes due to Continuing Health Care income, use of one-off grant funding and vacant posts
- Recurrent budget pressure on Day Care Transport reduced by underspend on In-House Day care due to vacant posts
- Increase in demand for Direct Payment over and above budget
- Forecast overspend in independent sector Home Care
- 3 new high cost placements in Independent Day Care
- Increase in Community Support placements
- Saving on premises costs and supplies and services as a result of the moratorium

### Mental Health

- Projected slight underspend on Residential Care budget and budget pressure on Direct Payments offset by savings on Community Support Services
- Minor overspends on employees' budgets due to unmet vacancy factor and use of agency staff

### Physical and Sensory Disabilities

- Continued pressure on Independent Sector Domiciliary Care, loss of Continuing Health Care funding for one client, increase in demand for Direct Payments and forecast overspend on Residential and Nursing Care offset by slippage in developing alternatives to residential provision
- Vacant posts within Resource Centre and Occupational Therapists
- Underspend on equipment and minor adaptations plus additional Winter Pressures funding
- Review of contracts with independent Day Care providers
- Forecast savings on contracts with Voluntary Sector providers

### Safeguarding

- Underspend on employee budgets due to vacant post plus additional forecast income from Court of Protection fees

### Supporting People

- Additional savings relating to a reduction in actual activity on a number of subsidy contracts
- Efficiency savings on subsidy contracts offset against Commissioning savings targets not reported within Adult Services

Total expenditure on Agency staff for Adult Services to the end of January 2013 was £375,818 (£2,937 off contract) compared with an actual cost of £308,020 (£1,974 off contract) for the same period last year. The main costs were in respect of Residential and Assessment and Care

Management staff to cover vacancies and sickness. There had been no expenditure on consultancy to date.

There had been £354,923 spent up to the end of February, 2013, on non-contractual overtime for Adult Services compared with expenditure of £292,238 for the same period last year.

Careful scrutiny of expenditure and income and close budget monitoring remained essential to ensure equity of Service provision for adults across the Borough within existing budgets particularly where the demand and spend was difficult to predict in a volatile social care market. A potential risk was the future number and cost of transitional placements from Children's Services into Learning Disability Services together with any future reductions in Continuing Health Care funding.

Regional benchmarking within the Yorkshire and Humberside region for the 9 month period ending December, 2012, showed that Rotherham remained slightly below average on spend per head in respect of Continuing Health Care.

Discussion ensued on the report with the following issues raised and clarified:-

- Supporting People – the underspend was due to actual performance of some of the providers being less than agreed budget.
- Agency and Consultancy – increase in the main due to cover for vacancies and sickness
- Non-contractual overtime – increase in the main due to cover for vacancies and sickness
- Any potential underspends should be passed to areas that were struggling to provide services

Resolved:- That the latest financial projection against budget for 2012/13 be noted.