

CABINET MEMBER FOR ADULT, SOCIAL CARE AND HEALTH

**Venue: Town Hall, Moorgate
Street, Rotherham.**

Date: Monday, 19 May 2008

Time: 9.30 a.m.

A G E N D A

1. To determine if the following matters are to be considered under the categories suggested in accordance with the Local Government Act 1972.
2. To determine any item which the Chairman is of the opinion should be considered as a matter of urgency.
3. Apologies for Absence.
4. Minutes of the previous meeting held on 21 April 2008 (Pages 1 - 9)
5. Decent Homes
6. Outcome of Tender for Domiciliary Care Services (Pages 10 - 13)
7. Excluded Adults Employment Plan (Pages 14 - 26)
8. Representation on Outside Bodies (Pages 27 - 28)

The following items were considered as late items at the agreement of the Chairman:-

9. Adult Services Revenue Outturn Report 2007/08 (Pages 29 - 45)
10. Adult Services Capital Expenditure Outturn Report 2007/08 (Pages 46 - 49)
11. EXCLUSION OF THE PRESS AND PUBLIC
12. Turning Point/Day Programme - Petition (Pages 50 - 52)
13. Turning Point Building Futures - proposed Rotherham Service Development (Pages 53 - 56)

14. Date and time of next meeting:- 9 June 2008

CABINET MEMBER FOR ADULT, SOCIAL CARE AND HEALTH
Monday, 21st April, 2008

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

Apologies for absence were received from Councillors Doyle and Hodgkiss.

119. MINUTES OF THE PREVIOUS MEETING HELD ON 7 APRIL 2008

The minutes of the meeting held on 7 April 2008 were approved as a correct record.

120. MINUTES OF A REVIEW OF GUARDIANSHIP MEETING HELD ON 7TH APRIL, 2008

The minutes of the Review of Guardianship meeting held on 7 April 2008 were approved as a correct record.

121. COMMISSIONING STRATEGY

Kim Curry, Director of Commissioning and Partnerships, presented the submitted report which set out a radical change to the way the Council spend their money to meet the social care needs and improve the health, well-being and quality of life for people in Rotherham over the next 15 years.

The strategy had been developed to deliver the following aims:-

- To meet the challenges for social care in Rotherham that the Joint Strategic Needs Analysis (JSNA) identified
- To change the way money was spent through undertaking the steps in the Commissioning Framework
- To show the difference that we will make for the people in Rotherham by delivering a recurrent 3 year action plan

The strategy complemented the Joint Commissioning Strategy that had recently been agreed with the PCT which focussed on both health and social care services where it was critical to provide an integrated and joined up way to improve outcomes for customers. The areas of focus were:

- The management of long term conditions
- Intermediate care
- Older people with mental health problems

- Reducing hospital admissions from residential and nursing care

There were three key national policy drivers which shaped the development of the Commissioning Strategy. These were:

- Commissioning Framework for Health and Well-being (2006)
- The White Paper 'Our Health, Our Care, Our Say' (2006)
- The 'Putting People First' concordat (2007)

The local drivers were value for money and meeting the current and future needs.

Adult Social Care in Rotherham had been rated as a 'good' service with 'promising prospects' under the Commission for Social Care Inspectorate's new regime in 2007. It was not expected that any improvement would be made on this rating namely due to:

- Performance in relation to helping people to live at home had deteriorated
- An over reliance on high cost in-house services which did not provide value for money nor accord with a comprehensively modernised service.

Despite the Council providing financial commitment in the last five years, to helping people to live independently, they did not possess the resources required to fulfil current and future need.

Demographic Factors continued to put pressure on budgets. Adult Services and the PCT had undertaken a Joint Strategic Needs Analysis (JSNA) between March 2007 and January 2008 which outlined current and predicted health and well-being outcomes.

The JSNA informed the new Commissioning Strategy and highlighted the following:

- People want to remain healthy and in their own homes
- People want to do things for themselves
- To improve value for money and better outcomes we need to move away from direct provision to commissioning diverse services from a range of providers
- People want to influence and be involved in commissioning decisions
- People want access to a range of different services so they can make a personal choice about which care package would keep them independent.

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The action plan, which was appended to the report, set out how the actions arising out of the JSNA to improve outcomes would be implemented over the next 3 years and what these outcomes would be seeking to achieve.

Resolved:- (1) That the progress made and the continued development of the Commissioning Strategy be noted

(2) That the Joint Cabinet/CMT endorse the strategy

(3) That update reports be presented on a quarterly basis as the strategy continued to develop in response to national and local drivers

(4) That the report be presented to the Adult Services and Health Scrutiny panel for information.

122. CAPITAL BUDGET MONITORING REPORT 2007/08

Mark Scarrott, Service Accountant (Adult Services), presented the report submitted, to inform members of the anticipated outturn against the approved Adult Services capital programme for the 2007/08 financial year.

The capital monitoring report provided detail of the approved capital programme for the Adult Services department of the Neighbourhoods and Adult Services Directorate, actual expenditure for the period April 2007 and 31 March 2008 and the projected final outturn position for each scheme.

The approved 2007/08 capital budget for Adult Services had been revised to take account of slippage in a number of schemes since the last report. The main revision was in respect of the two new residential care homes which were experiencing some delays on completion. Actual expenditure to the end of March 2008 was £9.2m, with a number of invoices pending payment for actual work completed.

Members raised concerns about the potential cost pressures in relation to the new residential care homes and in particular the delay from Economic and Development Services (EDS), who project managed the scheme, in determining the extent of the potential additional costs. Members felt that the Director of EDS should be asked to report to the next meeting with an updated financial position.

Resolved:- (1) That the Adult Services forecast outturn for 2007/08 be received and noted.

(2) That a report be presented to the next meeting in relation to the potential additional cost pressures in respect of the two new residential care homes.

123. INDIVIDUAL BUDGETS FOR ADULTS WITH SOCIAL CARE NEEDS

Kim Curry, Director of Commissioning and Partnerships, presented the submitted report which set out proposed changes to the delivery of social care through individual budgets. Individual budgets would promote a much greater choice in services for people with social care needs and empower them to take decisions affecting their lives, giving them greater choice and flexibility in how their needs were met.

They were a relatively new concept and would require considerable preparation prior to implementation. It would include ensuring that service users, carers, staff, partner and provider organisations were signed up to and championing this approach in order to achieve a total transformation of the way services were provided and delivered.

Assessment and care management procedures and social work activity would need to be radically changed to make sure that everyone who was eligible for an individual budget was offered the opportunity to use on.

A pilot scheme called "In Control" had been implemented for Mental Health service users to manage their care and had proved very successful with 93 service users moving from a direct payment to an individual budget. This demonstrated the potential for other individuals living in Rotherham to benefit from this approach.

New management arrangements would be required to ensure individual budgets were implemented across all customer groups and it was proposed that an Individual Budgets Project Manager post be established. Details of the post were appended to the report. In addition it was proposed to reconfigure the existing staffing and support arrangements to achieve the roll out with minimal impact on customers.

A discussion and question and answer session ensued and the following issues were covered:

- What the difference was between direct payment and individual budget, for which a definition was given
- How the shift in care would affect the service user
- The need to ensure that a wide range of options were available.

Resolved:- That the report be received and the direction of travel endorsed.

124. NAMING OF NEW RESIDENTIAL HOMES

Shona McFarlane, Director of Health and Wellbeing, presented the submitted report which outlined proposed new names for the two new residential homes which were being built at Rawmarsh and Dinnington.

Each home required a name, to provide them with an official postal

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address, to enable a postcode to be allocated and to provide them with an identity in the locality.

The Cabinet Member, Ward members and the Dinnington St John's Town Council had been asked to consider the following names:

- Lord Hardy Court, Rawmarsh – in recognition of Peter Hardy, long standing MP in the Wentworth area
- Davies Court, Dinnington – in recognition of David Davies, Town Council Leader.

Both suggestions had been fully approved by all concerned.

Resolved:- That the recommended names for the new homes be approved.

125. SHIFTING THE BALANCE - UPDATE

Shona McFarlane, Director of Health and Wellbeing, presented the submitted report, outlined the plans to reshape domiciliary care services from a service which provided 60% of home care service in-house to one which provided 35% of services in-house. The plans would seek to maintain the quality of services while significantly reorganising the allocation of resources to create greater capacity with Neighbourhoods and Adult Services to provide support to people to help them live at home for as long as possible.

As part of the process, trades unions had been consulted with, through both the Strategic Consultative Committee and separate meetings which had been arranged to update and outline plans. Some problems had been experienced in getting the trades unions engaged, and whilst every effort had been made to arrange meetings to suit all representative availability, representation at meetings had been patchy and inconsistent. This had resulted in some messages not being fed through or messages being misinterpreted and had required follow up meetings to provide explanation.

The Shifting the Balance Steering Group was set up in January 2008 and met fortnightly. They co-ordinated the work of the sub groups detailed below:

- Weekly Impact Group
- Commissioning Group
- Reablement Team
- Communication Plan
- Turnaround Team
- Staffing Change Group

The Director of Health and Wellbeing outlined to members the purpose of each of the groups and their objectives.

Resolved:- (1) That the content of the report be noted

(2) That a further report be received outlining detailed plans

(3) That this report be presented to the Adult Services and Health Scrutiny Panel for information.

(THE CHAIRMAN AUTHORISED CONSIDERATION OF THE FOLLOWING 4 ITEMS IN ORDER TO PROCESS THE MATTERS REFERRED TO WITHOUT FUTHER DELAY)

126. REVENUE BUDGET MONITORING 2007/08

Mark Scarrott, Service Accountant (Adult Social Services), presented the submitted report which provided outturn position for the Adult Services Department within the Neighbourhoods and Adult Services Directorate for the financial year 2007/08 based on actual income and expenditure to the end of March 2008.

He reported that the forecast position for the year was now an anticipated underspend of £107,000. All management actions had been incorporated into the financial projections and additional underspends had been identified within Learning Disability services since the last report. This had been mainly due to further delays in residential placements and additional income received.

There were still underlying budget pressures within Domiciliary Care services, including a shortfall in income from charges against the approved budget plus pressures within Physical and Sensory Disabilities. This was mainly within residential care due to increased demand and an increase in the average cost of care packages.

The pressures had been reduced by:-

- Underspends in independent residential care and extra care housing within Older Peoples services
- Slippage in developing supported living schemes within Learning Disability Services and further additional income from continuing health care funding
- Achievement of management actions identified from budget performance clinics

Members asked whether it was likely that this figure would change again before the year end. The Service Accountant confirmed that as part of the corporate timetable the accounts for 2007/08 would be finalised within the next 2 weeks and following that the final outturn position would be available.

Resolved:- That the report be received and noted.

127. OCCUPATIONAL THERAPY SERVICES

Tom Sweetman, Innovations Manager, gave a presentation on Occupational Therapy (OT) Services.

He gave an overview of where the service was in relation to backlog which had been slowly deteriorating since October 2007 and as at March 2008 stood at 21 months.

He outlined action which had taken place to try to rectify the situation and these included:

- OT overtime made available across the entire service
- £29k contributed towards locum support/overtime
- Adaptations team working along OT's to develop assessment process
- Errors in SWIFT system – Cases showing as being in the backlog were not real cases – resulted in 200 being removed.
- Telephone assessments put in place
- 2010 provided support through "man in van"
- Home Improvement Agency – undertook minor fittings

All of the above assisted in reducing the number in the backlog from 1180 to 490, and the average wait currently was 6 months. It was hoped that by the end of April this figure would be down to 250.

The Innovations Manager then listed the suggestions for the way ahead. This included:

- A full review of OT assessment and delivery process was needed
- Records on SWIFT were not being closed by OT's but Neighbourhoods and Adult Services were.
- OT Services were still not at full staffing capacity but this was as a result of them awaiting the new Service Level Agreement
- The measures which were brought in to reduce the backlog needed to become the norm
- Mobile working
- Assessment Direct
- Establish Disability Living Centre to offer assessments and equipment.

Discussion and a question and answer session ensued and the following issues were covered:

- It was felt that the measures taken to remove the backlog of assessments were not sustainable in their current form
- The OT Service should not be highlighted as a distinct part of the

Joint Commissioning Strategy

- There was a need to undertake a market testing exercise to ensure that the Council receives better value for money
- The Director of Commissioning and Partnerships raised the risks to performance and the impact upon other elements of the Joint Commissioning such as Intermediate Care
- Members felt it necessary for the report and presentation to be presented to the Adult Services and Health Scrutiny Panel
- Concerns were raised about Decent Housing and members asked for an update report in relation to the current position to be brought to the next meeting
- Members asked for a letter to be sent to the PCT from the Chair setting out their wishes for future provision.

Resolved:- (1) That the council reaffirm its commitment to the Joint Commissioning Strategy, however the OT Service should not form a distinct part of the strategy

(2) That a market test be undertaken

(3) That a letter be sent to the PCT from the Chair

(4) That the report and presentation be presented to the next Adult Services and Health Scrutiny Panel

(5) That an update report be brought to the next meeting relating to the position on decent housing.

128. AGE CONCERN

At the request of Members an update was given in relation to Age Concern and their decision to cease day care provision.

Sam Newton confirmed that all the people who were receiving day care were currently being assessed to establish whether they still required care. She agreed to update members at a future meeting when everyone had been assessed.

129. LISTERDALE DAY CARE CENTRE

The Chair asked for an update on the proposed closure of care homes, and in particular Listerdale Residential Home and Day Care Centre.

The Director of Health and Wellbeing confirmed that no care homes would be closed until the two new residential care homes had been opened and were functional. Any day services that were situated within homes would be relocated prior to the home closing.

130. EXCLUSION OF THE PRESS AND PUBLIC

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Resolved:- That, under Section 100A(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in Paragraph 4 of Part 1 of Schedule 12A to the Local Government Act 1972, as amended.

131. MODERNISATION OF REVENUE AND PAYMENTS

Kim Curry, Director of Commissioning and Partnerships, presented the submitted report to inform members of the plan to commence discussions with Trade Unions and staff with the intention of transferring the Directorate's Revenue and Payments Team to RBT Revenue and Benefits.

This key objective of this transfer would be to improve the experience for users/carers/intermediaries by improving response times, removing duplication, establishing single points of contact, extending payment opportunities and enabling people to better manage their finance.

The main function of the Revenue and Payments team was outlined, together with the customer and business related benefits resulting from the transfer.

A discussion and question and answer session ensued and the following issues were covered:-

- Whether RBT would close cash centres and only use pay points
- The charges involved with using pay points

Resolved:- That the report be received and its content noted.

132. DATE AND TIME OF NEXT MEETING:- MONDAY 19 MAY 2008

ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS
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1.	Meeting:	Cabinet Member for Social Care and Health
2.	Date:	19th May, 2008
3.	Title:	Outcome of Tender for Domiciliary Care Services
4.	Directorate:	Neighbourhoods and Adult Services All wards affected

5. Summary

- 5.1 A tender exercise has been conducted, in line with the Council's financial regulations and standing orders, for 7 Domiciliary Care block contracts. These areas are coterminous with the Area Assemblies. It is proposed that the contracts are let to 4 companies. The contracts will run as described for a period of three years with an option to extend for a further two dependent upon their ability to demonstrate improved quality and performance outcomes.

6. Recommendations

- 6.1 That Cabinet Member receives and approves this report.**

7. Proposals and Details

7.1 In order to improve efficiency and capacity, the contract structure for Domiciliary Care (independent sector), was reviewed in 2007. Arrangements were subsequently made to tender for 7 block contracts. The blocks are based within the Area Assembly boundaries, and are for 3 years with an option to extend for up to 2 more years. The following split was made, based around activity in each area.

- Wentworth North 900 hours per week
- Rotherham North 900 hours per week
- Wentworth South 800 hours per week
- Rotherham South 800 hours per week
- Wentworth Valley 700 hours per week
- Rother Valley West 500 hours per week
- Rother Valley South 600 hours per week

7.2 In order to maintain a healthy market which can deliver the quantity and quality of services required now and in the future, and to reduce the risks associated with a small number of providers, it was agreed that no single provider should be awarded more than 3 contracts.

7.3 The web-based procurement system SCMS (Supplier and Contracts Management System) was utilised. This system is widely used by other Local Authorities and by RBT. The system improves efficiency and communication whilst dramatically reducing bureaucracy and paperwork.

7.4 21 companies expressed an interest and 16 submitted full tenders. An assessment process, assigning 50% of the score to price and 50% to quality, was applied and a shortlist of 6 was produced. These 6 companies were invited to attend to a selection panel consisting of 3 Commissioning and Contracting Officers, a senior Operational Officer and 2 members of the public invited to act as "Independent Advisors".

7.5 The panel agreed that the contracts should be offered to the following providers

- Wentworth North Nestor Healthcare (Medico)
- Rotherham North Careforce Group
- Wentworth South Careforce Group
- Rotherham South Careforce Group
- Wentworth Valley Allied Healthcare
- Rother Valley West Claimar Care Group PLC
- Rother Valley South Claimar Care Group PLC

7.6 Appropriate checks have now been completed regarding financial viability, Health and Safety and operational references.

- 7.7 A beneficial outcome of the review and tender process is that the independent sector domiciliary care market will be in a better position following this tender to accommodate the move towards a 65% (independent sector) 35% (in-house sector) split in the balance of home care provision which was approved by Elected Members in December 2007. As a result of the tender exercise one old block provider has not had their contract renewed (Aaren) with two new providers being awarded new contracts (Allied and Claimar). In addition, other unsuccessful bidders for contracts have decided to continue to work within Rotherham on a spot contract basis. These are CSCI registered providers, and will be monitored continually to ensure quality standards are continually improved. A fixed price for the financial year has been agreed with these spot providers and an annual uplift formula written into the contract. This arrangement offers flexibility whilst minimising risk.
- 7.8 As a result of this tender process the percentage of work with the independent sector will increase from around 40% to 65%. This will assist market stability by offering more guaranteed work to successful contractors. At the same time Rotherham MBC retains flexibility by keeping 25% or more work under spot contracts. These arrangements facilitate the development of a competitive and sustainable market by utilising a number of providers on a variety of contractual arrangements. This is recognised by CSCI as good practice.
- 7.9 The increased number of providers will improve prospects of attracting new workers into the sector. We are already seeing additional capacity coming into the sector since the contracts were provisionally awarded. This, combined with the efficiencies gained through the zoning of the block contracts, will bring the home care market in Rotherham into a position to deal effectively with future demand for the increased volume of business as modernisation and re-ablement progresses.

8. Finance

- 8.1 The annual value of the block contracts awarded is £3m. The prices negotiated with providers in Rotherham are amongst some of the lowest nationally.
- 8.2 One further advantage which has emerged is that savings have been made, through post tender negotiation, by offering adjacent areas to Careforce and Claimar in return for a reduction in the hourly tendered rate. These negotiations have resulted in a minimum saving of £12,500 on the original tender price.

9. Risks and Uncertainties

- 9.1 There is a risk that the independent sector is unable to develop sufficient capacity to take on additional service transfer. This is being mitigated through direct work with providers on recruitment and retention issues. Additionally, the utilisation of flexible spot contracts will help us to better manage performance and quality outcomes.
- 9.2 There is a risk of anxiety for service users when told that their provider is changing. Support will be offered through the Contracts Team. Service users can choose to move to self directed support.

10. Policy and Performance Agenda Implications

- 10.1 PAFC29 and C32 Numbers of People helped to live at home.
- 10.2 CSCI Outcomes Framework: Commissioning and use of Resources.
- 10.3 NI 136 People supported to live independently.
- 10.4 NI 179 Efficiency (cash releasing savings).

11. Background Papers and Consultation

- 11.1 Rotherham MBC Standing Orders and Financial Regulations.
- 11.2 Rotherham MBC Procurement Policy.
- 11.3 Rotherham MBC Adult Services Commissioning Strategy.
- 11.4 HM Government Measuring and Reporting VFM Gains.
- 11.5 Consultation with unions on 30th January, 19th March and 24th April.

Contact Name: Kim Curry, Director of Commissioning and Partnerships
Ext. 2308, kim.curry@rotherham.gov.uk

ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS

1	Meeting:	Cabinet Member for Adult Social Care & Health
2	Date:	19th May 2008
3	Title:	Excluded Adults Employment Plan
4	Directorate:	Neighbourhoods and Adult Services

5 Summary

The 2007 NAS Service Plan gave a commitment to the development of a Welfare to Work Strategy in place by March 2008. The terminology has been updated and the report now refers to an employment plan, in line with corporate initiatives. This report outlines progress and achievement made towards that objective and provides an action plan for the further delivery of the employment strategy throughout 2008/09.

6 Recommendations

- **Agree the content of this report**
- **Commit to the employment of people from excluded groups within NAS**
- **Request an update on achievement by March 2009**

7 Proposals and Details

The Service Plan 2007-10 gave a commitment to developing a Welfare to Work Strategy within Neighbourhoods and Adult Services in 2007/8. This has been updated and revised to come in line with corporate and more modern terminology – it is now to be known as an Excluded Adults Employment Plan. This report outlines the developments and actions that have been taken this year and provides a outline approach for the further and ongoing development of supporting disadvantaged and excluded individuals into employment.

Each of the services within Adult Services has a plan or strategy that identified employment as a key development activity. In the case of the Joint Learning Disability Service, they have in place a developed and recently revised Employment Strategy. In the case of older people and people with physical disabilities, their actions in relation to employment were embedded in the Opening Doors and Older People “Wellbeing in later Life”.

Some of the achievements that have been delivered through these plans include:

- Top band performance on employment of people with learning disabilities into work (paid and permitted earnings)
- People with learning disabilities employed as trainers, and as consultants in high profile and valued roles
- Service directory for people with physical disabilities produced in a range of formats.
- Delivery of training, with service user involvement, direct to employers.

The plans have been revised and brought together to form one plan for Neighbourhoods and Adult Services. This plan will be further developed over the next year, with the Head of Learning Disability Services taking a lead on its development and delivery across the whole of NAS, with the intention of persuading and influencing those who provide employment to recruit people from excluded groups. This will be more effective if undertaken across a corporate agenda, so a key action will be joining the RMBC Work and Skills Group, and tapping into the new working neighbourhoods programme aimed at tackling worklessness in the most deprived communities in the Borough.

8. Finance

There are no direct financial implications of this report although the action plan may be further developed and require resource considerations or seek opportunities to access the working neighbourhood fund..

9. Risks and Uncertainties

Employment of people from excluded groups remains a challenge, in an environment where employers can select from a wide range of candidates. A key part of the plan has to be engagement with employers and employer’s bodies. This is better achieved by taking a corporate approach, rather than each service area approaching employers on an individual basis. In addition, the council has to become a role model in this area, and fully commit to the ASH Scrutiny commitment of 2007 to employ 10 people with learning disabilities by 2010.

Potential risk that people may choose not to work. Carers in particular may find that their caring role is sufficiently demanding to preclude any consideration of employment. Services should have a positive view of employment and an awareness of the wider resources available to help achieve employment for people.

10 Policy and Performance Agenda Implications

Employment is a key determinant of **improved quality of life** – it affords the worker access to income, **improved economic well-being**, social contact, sense of purpose and increased self-esteem. It promotes independence and reduces reliance on provided services. Promoting employment should be a cross-directorate and corporate priority.

At present, Learning Disability, Mental Health and Physical Disabilities services are measured through the performance management framework on their ability to promote employment. Although the framework is in the process of change, employment is still seen as a key performance measure for local authorities.

11 Background Papers and Consultation

Valuing People Now
Putting People First
Improving the Life Chances of Disabled People

Contact Name: Shona McFarlane
Telephone: 01709 823928
E-mail: shona.mcfarlane@rotherham.gov.uk

Improving Employment Opportunities for People Excluded from Work

Introduction

It is now known that one of the key determinants to positive health is employment. Having a job brings with it a valued role, self esteem, income, social contacts, a goal in life and a sense of purpose. For too long, people who come into contact with social and welfare services have been excluded from the work place, denying disabled people and others the various opportunities afforded by work and denying the work place the range of experience, skill and aptitude that excluded, skill and aptitude that excluded groups have to offer.

Neighbourhoods and Adult services is committed to improving employment opportunities for people with learning disabilities, people with physical and sensory disabilities, people with mental health needs.

Each of these groups has developed its own plan to improve access to employment. In some cases - for example, people with learning disabilities - this has been very successful with over 140 people now in paid work (full time, part time and permitted earnings). We believe that more can be achieved and are seeking to work with service users, carers, colleagues, partner agencies and employers to make further strides towards equality of opportunity for excluded groups.

Service Specific Response

Responsibility for employment does not lie within the service area – it is a responsibility of all of us within the community. To provide a focus for work within each service user group, it is planned that each group should continue with, or develop its own service specific plans. This should be developed with the involvement of service users. A good example of this is the Employment Sub-Group of the Learning Disability Partnership Board.

Corporate Response

The Work and Skills Group, established in 2007 brings together all of the employment groups and employers into one forum. Rather than have each service specific group engage with and seek to influence employers, the Chamber of Commerce etc, the Work and Skills Group provides an ideal vehicle to undertake this task. There will be positive representation from Neighbourhoods and Adult Services on this group and the views, needs and aspirations of service users should be articulated through this group. This will be the main vehicle through which NAS representatives seek to influence to work of the corporate team, and employers, training schemes and other bodies. Tackling the key providers of employers and those most able to influence this agenda e.g. the Chamber of Commerce, as one body will improve prospects for employment of adults excluded from the mainstream of employment. This is preferable to each service area attempting to persuade, influence and work with these bodies alone.

Providing Leadership

The Council is a major employer in Rotherham. Disabled people are under represented in the work place. A key strand of this strategy will be to target and create opportunities for employment for people from a range of background and experiences. As a council, Rotherham Metropolitan Borough Council will benefit from the skills, talents and aspirations of excluded groups. In addition, the Council will be playing a key role in improving the quality of life and improving the life chances of excluded groups. The Council will also be, most importantly, providing leadership within the community and acting as a role model and pathfinder for other employers.

Employment, voluntary work, training and other opportunities

This strategy draws on the experience of other successful councils and expands on good practice in Rotherham. Technologies such as “job carving” – where a job is examined, spilt into component parts and reassembled to provide a role suitable for someone with learning disabilities will be implemented and developed.

We will work with partners to develop more voluntary opportunities, and seek to develop pathways from voluntary work into employment, building on people’s developing confidence, skill and improved self esteem.

Good practice within workforce development initiatives is to involve service users in the delivery of training of social care staff. This already occurs in some service areas. It is important that service users and carers who are involved with this training have their skills and experience recognised and accordingly rewarded. This principle has been developed by the Learning Disability Service who are working with the 3 other Beacon Councils to develop a new training package called “I’m a person too”. The pilot scheme, being developed by Speak Up in Rotherham, will involve people with learning disabilities as paid trainers. This scheme will be developed and sold nationally providing numerous opportunities for the employment of people with learning disabilities as expert contributors.

What will make a difference?

- Service user groups to develop specific strategies

This will recognise the contribution needs and requirements of each user group. It will build on national user specific guidance and create opportunities for engagement with the wider user group, including those who may not have considered that employment was for them.

- Engagement at a senior management level with the Corporate Work and Skills Group

This will ensure that NAS has effective representation on a broad based group. It will provide opportunities to persuade and influence employers and to engage Human Resources in developing effective routes in to employment in RMBC and other employers.

- Ambitious targets for employment of excluded groups within RMBC

RMBC will act as a role model to other employers and seek to influence other large employers such as the PCT and Foundation Trust to increase employment opportunities for excluded groups.

- Involvement of people who use services in the development of opportunities, strategies, task groups etc.

This will ensure that the strategies developed and actions taken are right for people. They will have a voice and a chance to take control in the development of opportunities.

We need to be bold and ambitious in seeking to improve life chances for people who use services. Having a disability or mental health problem should not exclude people from making a valuable contribution.

The aims of this strategy are underpinned by recent government policy and the CSCI Outcomes Framework.

Background and Context for the Employment Strategy in Rotherham

The current population of Rotherham is 248,175. Fifty eight per cent are people aged 16-59 years (traditional working age population). Of these, eleven per cent (16,950) are unemployed due to a disability or ill health. There are 820 adults with a learning disability known to our services. Of these, 83 people are currently in full/part time work, 57 are in permitted work positions and 33 are in voluntary positions. Thirty per cent of Rotherham's population are aged over 50 with an expected rise to forty per cent by 2021.

Neighbourhoods and Adult Services has committed to develop and implement a Strategy for Employment for Excluded Adults to improve employment opportunities for the above excluded groups as part of Strategic Objective 2 of the Service Plan 2007/10:- to promote health and reduce health inequalities by enabling wellbeing and strengthening partnerships with other agencies and communities.

The aim of this document is to outline the aims and approach that NAS should take in developing an ambitious and challenging strategy. We will aim to increase the number of people from excluded groups in sustainable employment. NAS can impact on this directly through making a commitment to widen recruitment practices, to provide opportunities to disabled people. However, this will not create sufficient opportunities on its own. The work that has been undertaken this year has concluded that the best method is to work corporately to influence and persuade Rotherham's employers that they are missing out on good quality and high performing employees by not looking to recruit from as wide an employment pool as possible.

While the work of the groups within Learning Disability Service, Physical Disability and Sensory Impairment, and other services, needs to continue, it has been clearly established that the main thrust of the work is about engaging with employers, and this can be done to best effect by participating in the corporate activity related to work and worklessness. NAS will develop a working group, which will feed into the corporate group and feed back into DMT regarding progress made. This group will have representatives from across NAS and will feed into the corporate group.

This work will contribute to the Alive, Achieving, Learning and Proud Priority Themes of Rotherham's Community Strategy and Corporate Plan and also links with the Fairness Cross Cutting Theme.

The strategy also contributes to key priorities for Rotherham's Local Area Agreement: - Economic Development and Enterprise which includes 'assisting those who are economically inactive, specifically on incapacity benefits, into work' and 'connecting local people and businesses to training, jobs and opportunities' and by 'reducing poverty by maximising income and to maintain in and enable people to enter employment' as part of the Healthier Communities and Older People priority.

This plan brings together the revised employability elements of the existing Strategy for Older People 'Wellbeing in Later Life', the Strategy for Physical Disability and Sensory Impairment 'Opening Doors' and the Learning Disability Employment Strategy, as well as linking with Rotherham Metropolitan Borough Council's Corporate Employment Plan.

The work that has already taken place has made some significant progress:

- Top band performance on employment of people with learning disabilities into work (paid and permitted earnings)
- People with learning disabilities employed as trainers, and as consultants in high profile and valued roles
- Service directory for people with physical disabilities produced in a range of formats.
- Delivery of training, with service user involvement, direct to employers.

These groups will continue in their current or in revised format, as there is a role for service user specific groups to address specific issues and to provide a service user specific response to key national strategies e.g. Valuing People. A NAS group will provide the overview and representation into the Work and Skills Group.

Aims and Objectives

The aim of this is to empower disabled and older people to reach their full potential within a culture of employment and enterprise. It will enable independence, achievement and success. We should also highlight the contribution that can be made to economic growth by the increased inclusion of these groups of people into the workforce plus the benefits to self esteem and the local community.

The Council encourages the recruitment of disabled people in-house and by partner agencies and local employers. It has a corporate approach to the development of work opportunities for disabled people and is focused on supporting all people to fulfil their potential, reduce local poverty and improve quality of life by helping people to achieve economic well being.

The Corporate Employment Plan aims to address community needs by breaking down barriers that prevent people accessing employment opportunities.

We need to work in partnership with people with disabilities and other agencies to improve opportunity and choice in employment. This will result in improving the quality of people's lives by promoting wellbeing and independence. We need to ensure there are effective communication links between people wanting employment, carers and stakeholders.

Older people make a significant positive contribution to the quality of life in Rotherham as volunteers, employees, carers and as community leaders. We will encourage older people to develop and achieve their full potential in their chosen careers, leisure, work and contributions to local life.

People with learning disabilities are one of the most excluded groups – Rotherham has a high number of people in employment, but needs to do more to ensure that especially young people, on transition from children’s services, are offered choice and opportunity to become more independent. Families and carers of young adults should be supported in order to encourage the transition to employment.

People with physical disabilities should be able to use national schemes such as Access To Work to provide them with the support they need to access employment. The Rotherham PDSI service has produced a useful resource pack for people to provide them with advice and guidance when seeking employment. This development needs to be built on to ensure more people are provided with this opportunity.

Carers have not traditionally received much support in terms of employment. Recently, Direct Payments and the provision of more flexible services have provided some support to enable carers to work. In addition, the Stepping Stones scheme provides support to carers when their caring role ceases, to enable them to be able to return to work. Flexible working arrangements, available through the largest employers in Rotherham (RMBC, PCT and NHS Hospital Services) enables the carer to request a change of hours they work, a change to the times they are required to work or to work from home. The revised plan should build on the recently published national Carer’s Strategy and the result of the Valuing People Now consultation process, to develop and deliver better support for carers seeking employment in future.

What can we do now?

- More people from excluded groups – people with learning disabilities, people with physical, visual and sensory impairments, older people and people with long term illnesses in meaning full paid employment, resulting in an improvement in their economic wellbeing and quality of life
- RMBC, Rotherham PCT and Rotherham Foundation Trust to act as role models and commit to improving their employment record in respect of disabilities
- RMBC to implement good practice in reviewing all vacant posts to establish whether relevant and meaningful posts can be created (using job carving and other techniques) can be created at no extra cost to the authority, but resulting in the employment of valued employees.
- Representation at Corporate level on groups and activities, where employers are engaged, to develop understanding of these issues and support employers to consider recruiting from a wider pool of people
- Training of employers in understanding the needs of people with disabilities and how their recruitment can be a positive experience for employee and employer

Cross Cutting Issues

(i) Maximising Income: - For many people the main route out of low income is through work. Strong links and partnership with the Department for Work and Pensions should be maintained in order to provide clear guidance and identify ways in which benefits can be protected in order to encourage people to sample work options. Employment opportunities need to be sustainable and progression should be actively encouraged. The use of Direct Payments should be optimised in order to support disabled people into employment.

(ii) Learning Opportunities: - We need to ensure that disabled and older people have the skills, experience and qualifications to access job opportunities. Training should be more accessible and transport and mobility issues addressed.

(iii) Discrimination: - We need to break down discriminatory barriers and minimise inequalities in training and in the workplace. We should support employers in their awareness of anti-discrimination legislation.

(iv) Communication:- – We need to make sure there are effective communication links between people wanting employment, carers, trainers and public, private, voluntary and community sectors. All services should be able to signpost people to appropriate work opportunities, contacts and information.

Action Plan

The Action Plan describes the main activities that will be taken forward, who is responsible for its delivery and timescales for completion.

It combines the overall aims and objectives for employment with appropriate elements from the existing strategies for Older People, People with Learning Disabilities, Adults with Physical Disabilities and Sensory Impairment and the Corporate Plan. The plan outlines the key activities that are required to improve employment opportunities for Rotherham. Over the next year, greater engagement and involvement with people with disabilities, older people, carers, and the wider community will enhance and develop this plan. A revised and more detailed plan will be delivered by March 2009.

ACTION PLAN – Framework for employment

Overall Aim:- To empower disabled people and older people to reach their full potential within a culture of employment and enterprise.

AIM 1. Enable independence, achievement and success through employment and highlight the contribution that can be made to local economy			
Objective	Action	Responsibility	Timescale
Establishment of Employment Strategy Task Group	1.1 Identify Appropriate Group Membership	Jackie Bickerstaffe Head of Learning Disability	May 2008
	1.2 Organise First Meeting/Agenda		June 2008
Link with Rotherham's Corporate Strategy and Working Neighbourhoods Steering Group (Objective 2 – to increase economic activity by concentrating activity on deprived neighbourhoods and groups).	1.3 Contact Lead Officer of Rotherham Employability Group.		March 2008
	1.4 Task Group member to attend future Rotherham Work and Skills Board meetings.		March 2008
	1.5 Engage Rachel Blake/Kathryn McHugh, Economic Strategy Officers, to attend Employment Strategy Task Group Meetings.		June 2008 meeting
AIM 2. Maximise income			
Objective	Action	Responsibility	Timescale
Maintain strong links with DWP to provide clear guidance and identify ways in which benefits can be protected.	2.1 Contact Disability Employment Advisors, JobCentre Plus through representative on the Partnership Board	Head of Learning Disability	May 2008
Provide advice, information and support on benefit issues related to employment for people with learning disabilities. <i>(LD Strategy Objective)</i>	2.2 Advice and information on benefit related issues provided to parents and carers (newsletter).	Learning Disability Service	Achieved
Improve the financial status of financially disadvantaged older people. <i>(OP Strategy Objective)</i>	2.3 Set up Joint Visiting Teams between RMBC and DWP in order to maximise welfare benefit take-up of older people.	RBT Revenues & Benefits & Doug Parkes, Revenue & Payments Manager	Joint Team established 2007

AIM 3. Ensure disabled and older people have the skills, experience and qualifications to access job opportunities			
Objective	Action	Responsibility	Timescale
Provide training, opportunities and support for employment. <i>(LD Strategy Objective)</i>	3.1 Establish employment opportunities within RMBC for people with learning disabilities.	Learning Disability Service/RMBC/ Employers/HR	Report on progress by October 2008
	3.2 Create additional permitted work experience opportunities.		Report on progress by October 2008
Scope potential for development of intergenerational projects with CYPS <i>(OP Strategy Objective)</i> .	3.3 Increase the number of intergenerational projects involving older people and their neighbourhood secondary school.	Head of Learning Disability	December 2008
	3.4 Encourage young people to volunteer to work with voluntary organisations providing services to older people.		
AIM 4. Break down discriminatory barriers and minimise inequalities in training and in the workplace			
Objective	Action	Responsibility	Timescale
Breaking down barriers that prevent people accessing employment opportunities. <i>(Corporate Employment Plan)</i>	4.1 Support employers in meeting the Disability Discrimination Act and other anti-discrimination legislation and being aware of their legal responsibilities. <i>(Corporate Employment Plan)</i>	Rotherham Chamber	Update required May 2008
	4.2 Support employers to better understand the business and social benefits of employing people from diverse communities. <i>(Corporate Employment Plan)</i>	Rotherham Employability Group	2008 – 2010
Identify and promote good employment practice <i>(LD Strategy Objective)</i>	4.3 Identify models of good practice in relation to employment of people with learning disabilities. Share across NAS	Learning Disability Service	Report to NAs group October 2008
	4.4 Design and promote information package for local employers.		October 2008
Provide training on employment recruitment	4.5 Identify existing materials and	Learning	Materials/resources

and selection of people with learning disabilities and training opportunities and support for employment. <i>(LD Strategy Objective)</i>	resources available for developing and delivering training.	Disability Service	identified and used to support development of training programme
	4.6 Design and deliver a rolling programme of awareness raising and training for local employers.		Achieved
	4.7 Develop and implement age discrimination scheme		
Promote effective strategies and good practice for employers	4.8 Job Carving and other methods to be promoted	All	
Encourage all service providers to be more aware of and sympathetic to older people's needs and aspirations. <i>(OP Strategy Objective)</i>	4.9 Through effective commissioning and contracting to ensure that all partner agencies promote equality through their employment practices, including adopting anti-discriminatory practices in recruitment, training and career development, and carry out monitoring to ensure fair outcomes.	David Stevenson, Strategic Commissioning Manager	Achieved

AIM 5. Develop and maintain effective communication links between people wanting employment, carers, trainers and public, private, voluntary and community sectors			
Objective	Actions	Responsibility	Timescale
Maintain strong links with partner agencies, groups and projects.	5.1 Ensure multi-agency representation on Employment Strategy Task Group.	Head of Learning Disability	
	5.2 Membership of Rotherham Employability Group.		Ongoing 6 weekly meetings
	5.3 To identify and implement a means of signposting people to appropriate work opportunities, contacts and information.	Head of Learning Disability/ Task Group	
	5.4 To produce a clear and up to date Guide of available employment, training and support.		
	5.5 Link with the DWP and ESF 'Key Worker Support Service' Provision		DWP Projects for 2008
	5.6 Link with DWP Community Outreach Engagement Programme South Yorkshire		
Maintain links with development and implementation of renewed Carers Strategy and identify opportunities to promote carer employment.	5.7 Engage with Vicky Brown & Monica Hudson, Carers Development Officer and possible attendance at Task Group meetings.	Head of Learning Disability	From May 2008
Support families and carers to encourage transition to employment (LD Strategy)	5.8 Provide information and advice sessions for parents and carers to raise understanding of government strategies related to employment and people with learning disabilities.	Learning Disability Service	Through Transitions Project, annually at key stage reviews

Rotherham Metropolitan Borough Council

Cabinet Member for Adult Social Care and Health

19 May 2008

REPRESENTATION ON OUTSIDE BODIES

To determine membership of Panels and Groups etc for 2008/2009

MONTHLY VISITS OF INSPECTION TO ADULT SERVICES ESTABLISHMENTS

All Members of the Adult Services and Health Scrutiny Panel

Senior Advisor, Adult Social Care and Health

Advisor, Adult Social Care and Health

Chair, Performance and Scrutiny Overview Committee

All other Members of the Council

RENEWAL OR DISCHARGE OF GUARDIANSHIP ORDER PANEL

Councillor Kirk, Cabinet Member for Adult Social Care and Health

Chair, Adult Services and Health Scrutiny Panel

Vice-Chair, Adult Services and Health Scrutiny Panel

CONTRACTING FOR CARE FORUM

Councillor Kirk, Cabinet Member for Adult Social Care and Health

Senior Advisor, Adult Social Care and Health

Chair, Adult Services and Health Scrutiny Panel

DOMESTIC VIOLENCE FORUM

Vice-Chair, Adult Services and Health Scrutiny Panel

Advisor, Adult Social Care and Health

The Mayor, Councillor G. A. Russell

Other Nominations determined by the Cabinet Member for Adult Social Care and Health – 2008 - 2009

Champion for Older People, Adult Protection and Vulnerable Adults

Councillor Hodgkiss

Champion for Carers

Councillor R. S. Russell

Champion for Learning Disabilities

Councillor P. A. Russell

Community Liaison Group for Wath Wood Hospital

Councillor Gosling

Learning Disabilities Partnership Board

Councillor P. A. Russell

Regional Forums of the National Executive of the Homecare Council
Councillor Doyle

R-DIS, Rotherham Disability Information Service
Councillor P. A. Russell

Rotherham Advice and Information Network – Board of Management
Councillor Jack

Rotherham Alcohol Advisory Service
Councillor Burton and Service Manager, Mental Health

Rotherham Women's Refuge
Councillors Jack and P. A. Russell

ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS
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1.	Meeting:	Cabinet Member for Adult Social Care and Health
2.	Date:	Monday 19 May 2008
3.	Title:	Adult Services Revenue Outturn Report 2007/08 All Wards Affected
4.	Directorate:	Neighbourhoods and Adult Services

5. Summary

To inform Members of the Revenue Outturn position for the Adult Social Services within the Neighbourhoods and Adult Services Directorate for the financial year 2007/08. The net Outturn for Adult Services shows an underspend of £209,699 against a net cash limited revenue budget of £63,255,905. This represents a variation of -0.33%.

6. Recommendations

That Members receive the 2007/08 Revenue Outturn Report for Adult Social Services, including the request for carry forward.

7. Proposals and Details

The 2007/08 approved cash limited budget of £63,255,905 includes an additional one-off budget allocation approved by Cabinet of £974,000 to address service pressures reported earlier in the financial year. Budget adjustments have also been made to take account of the additional cost of Job Evaluation/Single Status during 2007/08.

The net Outturn for the service for 2007/08 is £63,046,206. This results in an overall net underspend of £209,699 or -0.33%, an increase in the underspend of £102,415 compared with the last budget monitoring report largely due to a reduction in the overspend on older people's residential care and independent home care budgets and a further underspend on extra care housing.

The summary revenue outturn position for Adult Social Services is as follows:-

Head of Account	Budget	Outturn	Surplus (-) Deficit (+)	% Variation to Budget
	£	£	£	%
Older People	37,168,225	37,344,176	175,951	+0.47
Learning Disabilities	12,433,966	11,800,308	-633,658	-5.10
Physical & Sensory Disabilities	5,155,844	5,266,234	110,390	2.14
Mental Health	3,414,932	3,653,983	239,051	7.00
Head of Service/Policy & Performance	278,234	290,738	12,504	+4.49
Supporting People	93,676	93,676	0	0
Commissioning, Quality & Performance	4,711,028	4,597,090	-113,938	-2.42
Total	63,255,905	63,046,206	-209,699	-0.33

The main variations within each service area can be summarised as follows:

Older People

The main pressures during the year were an increase in demand for Domiciliary Services over and above budget due to demographic pressures and a shortfall against budget in income from charges due to a reduction in the number of clients paying towards the cost of the service after being financially assessed. There were also pressures on achieving a number of voluntary and community sector savings agreed as part of the budget setting process for 2007/08. There were also in year pressures on achieving a number of voluntary and community sector savings agreed as part of the budget setting process for 2007/08 which were reduced by the additional one-off budget allocation as part of the revised estimates process.

There were also underspends on independent sector residential care due to a net reduction in placements resulting from increased discharges over and above forecast and on Extra Care housing due to slippage on start up at Potteries Court.

Learning Disabilities

The overall underspend within the service is mainly as a result of delays in planned transition placements from children's services, increased income from Continuing Health Care funding and delays in the start up of new supporting living schemes due to difficulties in obtaining suitable accommodation.

Physical and Sensory Disabilities

The main pressures during the year were the increase in both number and cost of residential placements and an increase in demand for home care and direct payments. There were also in year pressures on achieving a number of voluntary and community sector savings agreed as part of the budget setting process for 2007/08 which were reduced by the additional one-off budget allocation as part of the revised estimates process.

Mental Health Services

The overspend within the service is as result of an increase in demand and cost of independent residential care placements and Direct Payments during the year. This overspend was reduced by the achievement of a number of efficiency savings including non recruitment to vacant posts and reviews on a number of service level agreements with providers.

Commissioning, Quality and Performance

The underspend on this area is a result of slippage on employee costs throughout the service and reduced one-off RBT ICT affordability charges.

In addition to the one-off budget allocation a range of management actions totaling £300,000 across Adult Services were implemented during the year from the monthly finance performance clinics.

8. Finance

The attached appendices show a summary of the overall Outturn against the approved budget (sheet 1), a detailed variance analysis for all main budget headings together with a comparison against the latest budget monitoring report projections for gross expenditure, gross income and net expenditure (sheets 2) and a brief description of the main reasons for variation from the approved budget (sheets 3).

The Cabinet on 9 April 2008 agreed a scheme for carry forward of balances on the council's revenue account to be applied to the 2007/08 outturn position. This means that £41,940 of the total underspend will be retained by Adult Services and carried forward into 2008/09 revenue budget.

9. Risks and Uncertainties

The outturn figures included in this report are subject to quality assurance work on the Statement of Accounts which will be undertaken during May/June 2008.

There were a number of recurrent budget pressures, demographic pressures within residential and home care and direct payments. These have been discussed as part of the budget setting process for 2008/09.

Additional funding has been allocated through the Medium Term Financial Strategy, which will reduce these pressures, however, some pressures may still remain and will be monitored closely during the year.

10. Policy and Performance Agenda Implications

The approved cash limited budget for 2007/08 has allowed existing levels of service to be maintained to support the most vulnerable people and continues to contribute to meeting the Council's priorities, in particular Alive, Safe and Proud.

11. Background Papers and Consultation

This report has been discussed and agreed with both the Strategic Director of Neighbourhoods and Adult Services and the Strategic Director of Finance.

Contact Name : Mark Scarrott, Service Accountant (Adult Services), Extension 2007, mark.scarrott@rotherham.gov.uk

DIRECTORATE: NEIGHBOURHOODS AND ADULT SERVICES

ADULT SERVICES SUMMARYRevenue Budget/Outturn Position 2007/2008

	£
1. Balances brought forward from 2006/2007 following decision of Cabinet (underspendings b/f '+': Overspendings b/f '-')	90,775
2. <u>ADD</u> Approved Cash-limited Budget for 2007/2008	60,465,089
3. <u>ADD</u> Supplementary Estimates <u>approved</u> in 2007/2008	974,000
4. <u>ADD/SUBTRACT</u> Virement from/to another Directorate/Service Unit <u>approved</u> in 2007/2008	1,726,041
	<hr/>
5. <u>RESOURCES AVAILABLE</u> 2007/2008 (1+2+3+4)	63,255,905
6. <u>NET ACTUAL OUTTURN</u> 2007/2008 (As reported to Members)	63,046,206
	<hr/>
7. (-) (+) Net under/overspend 2007/2008 (5-6)	-209,699
	<hr/> <hr/>
8. <u>REQUESTS FOR CARRY FORWARD INTO 2008/2009</u> (Please list below)	£
20% automatic carry forward - Cabinet Minute B201	41,940

DIRECTORATE: NEIGHBOURHOODS AND ADULT SERVICES

SERVICE UNIT: ADULT SERVICES - NET FIGURES

Revenue Outturn 2007/2008 - Variance Analysis : Net Expenditure

1.	2.	3.	4.	5.	6.
<u>Division of Service</u>	<u>Approved Budget</u>	<u>Latest Revenue Monitoring Report (21.04.08)</u>	<u>Actual Outturn</u>	<u>Under(-)/ Over(+)</u> spend	<u>Under/over spending as % of Budget</u>
	£	£	£	£	%
CQP					
Director of Social Care	129,676	53,517	53,509	-76,167	-58.74
Director of Commissioning	132,646	144,311	142,435	9,789	7.38
Management-Plan, W'force, Complaints	67,428	72,242	66,277	-1,151	-1.71
Policy, Planning & Research	238,551	223,607	225,144	-13,407	-5.62
Complaints	83,513	80,462	80,470	-3,043	-3.64
W'force, Planning, Dev & Training	570,964	537,964	502,294	-68,670	-12.03
Management - Perf, Info, Qual	43,151	27,129	45,751	2,600	6.03
Performance & Quality	240,752	240,752	238,045	-2,707	-1.12
Information Development	323,557	323,557	308,368	-15,189	-4.69
Business Unit Teams	1,952,240	1,938,918	1,961,575	9,335	0.48
Administrative Support	419,231	387,721	388,969	-30,262	-7.22
Adults Corporate Costs	509,319	567,297	584,254	74,935	14.71
Total CQP	4,711,028	4,597,477	4,597,090	-113,938	-2.42

SERVICE UNIT: ADULT SERVICES - NET FIGURES

Revenue Outturn 2007/2008 - Variance Analysis : Net Expenditure

1.	2.	3.	4.	5.	6.
<u>Division of Service</u>	<u>Approved Budget</u>	<u>Latest Revenue Monitoring Report (21.04.08)</u>	<u>Actual Outturn</u>	<u>Under(-)/ Over(+)</u> spend	<u>Under/over spending as % of Budget</u>
	£	£	£	£	%
Older People Services					
Assess & Care Management	3,372,985	3,273,681	3,275,024	-97,961	-2.90
Total Assessment & Care Management	3,372,985	3,273,681	3,275,024	-97,961	-2.90
Residential Care In House	4,721,127	5,187,087	5,132,594	411,467	8.72
N/Home Placements-Res.Care Independent	13,925,969	13,164,456	13,159,840	-766,129	-5.50
Total Residential & Nursing Care	18,647,096	18,351,543	18,292,434	-354,662	-1.90
Homecare In House	7,634,354	8,162,352	8,188,387	554,033	7.26
Meals In House	315,279	284,323	284,882	-30,397	-9.64
Other Services Independent	24,156	225,642	225,541	201,385	833.69
Homecare Independent	2,236,627	2,345,545	2,310,477	73,850	3.30
Total Care in Peoples Homes	10,210,416	11,017,862	11,009,288	798,872	7.82
Day Care In House	210,926	240,672	209,552	-1,374	-0.65
Day Care Independent	444,866	444,866	450,971	6,105	1.37
Total Day Care	655,792	685,538	660,523	4,731	0.72
Other Independent Services	501,835	469,930	469,765	-32,070	-6.39
Total Advice, Information etc.	501,835	469,930	469,765	-32,070	-6.39
Management & Admin Services	3,008,437	3,116,876	3,118,982	110,545	3.67
Total Management & Admin	3,008,437	3,116,876	3,118,982	110,545	3.67
Extra Care Housing	771,664	590,796	518,158	-253,506	-32.85
Total Extra Care Housing	771,664	590,796	518,158	-253,506	-32.85
Total Older People Services	37,168,225	37,506,226	37,344,176	175,951	0.47

SERVICE UNIT: ADULT SERVICES - NET FIGURES

Revenue Outturn 2007/2008 - Variance Analysis : Net Expenditure

1.	2.	3.	4.	5.	6.
<u>Division of Service</u>	<u>Approved Budget</u>	<u>Latest Revenue Monitoring Report (21.04.08)</u>	<u>Actual Outturn</u>	<u>Under(-)/Over(+)</u> spend	<u>Under/over spending as % of Budget</u>
	£	£	£	£	%
Head of Function					
Head of Function	167,425	187,862	180,550	13,125	7.84
Total Head of Function	167,425	187,862	180,550	13,125	7.84
Learning Disability Services					
Assess & Care Management	707,047	702,799	681,861	-25,186	-3.56
Assess & Care Management-Health	0	0	0	0	0.00
Total Assessment & Care Management	707,047	702,799	681,861	-25,186	-3.56
Residential Care In House	1,474,931	1,519,934	1,495,859	20,928	1.42
Nursing/Res Care Independent	4,347,571	4,010,890	4,029,326	-318,245	-7.32
Total Residential & Nursing Care	5,822,502	5,530,824	5,525,185	-297,317	-5.11
Supported & Other Accommodation	430,123	423,787	421,041	-9,082	-2.11
Supported & Other Acc. Independent	1,447,924	1,152,204	1,243,868	-204,056	-14.09
Other Services Independent	253,143	151,986	66,233	-186,910	-73.84
Homecare Independent	32,188	32,188	8,258	-23,930	-74.34
In House Care Other	188,498	168,498	168,874	-19,624	-10.41
Total Care in Peoples Homes	2,351,876	1,928,663	1,908,274	-443,602	-18.86
Day Care In House	2,917,560	3,023,108	3,002,802	85,242	2.92
Day Care Independent	308,271	290,793	294,759	-13,512	-4.38
Day Care Health	0	0	0	0	0.00
Total Day Care	3,225,831	3,313,901	3,297,561	71,730	2.22
Other Independent Services	326,710	300,603	387,427	60,717	18.58
Total Advice, Information etc.	326,710	300,603	387,427	60,717	18.58
Management & Admin Services	0	0	0	0	0.00
Total Management & Admin	0	0	0	0	0.00
Total Learning Disability Services	12,433,966	11,776,790	11,800,308	-633,658	-5.10

SERVICE UNIT: ADULT SERVICES - NET FIGURES

Revenue Outturn 2007/2008 - Variance Analysis : Net Expenditure

1.	2.	3.	4.	5.	6.
<u>Division of Service</u>	<u>Approved Budget</u>	<u>Latest Revenue Monitoring Report (21.04.08)</u>	<u>Actual Outturn</u>	<u>Under(-)/ Over(+)</u> spend	<u>Under/over spending as % of Budget</u>
	£	£	£	£	%
Mental Health Services					
Assess & Care Management	1,488,681	1,435,495	1,433,502	-55,179	-3.71
Total Assessment & Care Management	1,488,681	1,435,495	1,433,502	-55,179	-3.71
Residential Care In House	13,039	13,039	13,810	771	5.91
Nursing/Res.Care Independent	620,151	767,587	759,850	139,699	22.53
Supported & Other Accommodat.Independent	172,273	168,273	190,983	18,710	10.86
Total Residential & Nursing Care	805,463	948,899	964,643	159,180	19.76
Homecare In House	2,556	2,556	11,382	8,826	345.32
Other Services Independent	401,970	390,970	401,455	-515	-0.13
Homecare Independent	37,070	37,070	14,144	-22,926	-61.85
Total Care in Peoples Homes	441,596	430,596	426,982	-14,614	-3.31
Day Care In House	289,911	281,768	284,022	-5,889	-2.03
Day Care Independent	222,694	256,194	257,124	34,430	15.46
Total Day Care	512,605	537,962	541,146	28,541	5.57
Other Independent Services	164,945	252,531	283,990	119,045	72.17
Total Advice, Information etc.	164,945	252,531	283,990	119,045	72.17
Management & Admin Services	1,642	1,642	3,721	2,079	126.58
Total Management & Admin	1,642	1,642	3,721	2,079	126.58
Total Mental Health Services	3,414,932	3,607,125	3,653,983	239,051	7.00

SERVICE UNIT: ADULT SERVICES - NET FIGURES

Revenue Outturn 2007/2008 - Variance Analysis : Net Expenditure

1.	2.	3.	4.	5.	6.
<u>Division of Service</u>	<u>Approved Budget</u>	<u>Latest Revenue Monitoring Report (21.04.08)</u>	<u>Actual Outturn</u>	<u>Under(-)/Over(+)</u> spend	<u>Under/over spending as % of Budget</u>
	£	£	£	£	%
Physical Disability Services					
Assess & Care Management	1,243,376	1,166,635	1,181,389	-61,987	-4.99
Total Assessment & Care Management	1,243,376	1,166,635	1,181,389	-61,987	-4.99
Residential Care In House	368,782	448,013	414,962	46,180	12.52
Nursing/Res.Care Independent	855,504	931,571	943,419	87,915	10.28
Supported & Other Accommodat.Independent	107,416	50,026	57,794	-49,622	-46.20
Total Residential & Nursing Care	1,331,702	1,429,610	1,416,175	84,473	6.34
Equipment In House	414,078	417,365	444,812	30,734	7.42
Other Services Independent	1,088,769	1,162,333	1,126,079	37,310	3.43
Homecare Independent	606,362	628,068	634,779	28,417	4.69
Total Care in Peoples Homes	2,109,209	2,207,766	2,205,670	96,461	4.57
Day Care Independent	278,609	289,109	289,601	10,992	3.95
Total Day Care	278,609	289,109	289,601	10,992	3.95
Other Independent Services	192,948	175,537	173,399	-19,549	-10.13
Total Advice, Information etc.	192,948	175,537	173,399	-19,549	-10.13
Management & Admin Services	0	0	0	0	0.00
Total Management & Admin	0	0	0	0	0.00
Total Physical Disability Services	5,155,844	5,268,657	5,266,234	110,390	2.14

SERVICE UNIT: ADULT SERVICES - NET FIGURES

Revenue Outturn 2007/2008 - Variance Analysis : Net Expenditure

1.	2.	3.	4.	5.	6.
<u>Division of Service</u>	<u>Approved Budget</u>	<u>Latest Revenue Monitoring Report (21.04.08)</u>	<u>Actual Outturn</u>	<u>Under(-)/Over(+)</u> spend	<u>Under/over spending as % of Budget</u>
	£	£	£	£	%
Policy & Performance					
Assess & Care Management	54,359	54,359	54,469	110	0.20
Total Assessment & Care Management	54,359	54,359	54,469	110	0.20
Management & Admin Support	56,450	56,450	55,720	-730	-1.29
Total Management & Admin	56,450	56,450	55,720	-730	-1.29
Total Policy & Performance	110,809	110,809	110,188	-621	-0.56
Supporting People					
Supporting People					
Management & Admin/Supp Hsg Ind	93,676	93,676	93,676	0	0.00
Total Supporting People	93,676	93,676	93,676	0	0.00
Service Totals	63,255,905	63,148,622	63,046,206	-209,699	-0.33

NOTES

- Total of Column 2 equals Line 5 on sheet 1.
- Total of Column 4 equals Line 6 on sheet 1.
- Total of Column 5 (i.e. Column 2 minus Column 4) equals Line 7 on sheet 1.
- Column 6 equals Column 5 expressed as a percentage of Column 2.
- Figures in Column 3 should be those shown in the latest (pre-Actual Outturn) revenue budget monitoring report.

DIRECTORATE: NEIGHBOURHOODS AND ADULT SERVICES

SERVICE UNIT: ADULT SERVICESRevenue Outturn 2007/2008 - Reasons for Variance from Approved Budget

1.	2.	3.
<u>Division of Service</u>	<u>Under(-)/ Over(+) Spending £</u>	<u>Reasons for key variances (+/- £25k or +/- 5%) %</u>
CQP		
Director of Social Care	-76,167	-58.74 Slippage on employee costs of former Director and secretary.
Director of Commissioning	9,789	7.38 Overspend on employee costs due to additional increments.
Management-Plan, W'force, Complaints	-1,151	-1.71
Policy, Planning & Research	-13,407	-5.62 Slippage on employee costs and underspend on reprographic expenditure.
Complaints	-3,043	-3.64
		Reduction in costs of Social Work backfill on training. Practice Teaching income but expenditure shown in all client
W'force, Planning, Dev & Training	-68,670	-12.03 groups.
Management - Perf, Info, Qual	2,600	6.03 Overspend on salaries budget.
Performance & Quality	-2,707	-1.12
Information Development	-15,189	-4.69
Business Unit Teams	9,335	0.48
Administrative Support	-30,262	-7.22 Slippage on employee costs due to vacant posts.
Adults Corporate Costs	74,935	14.71 Overspend on staff advertising and cost of insurance, telephones and external Audit fees.
Total CQP	-113,938	

DIRECTORATE: NEIGHBOURHOODS AND ADULT SERVICES

SERVICE UNIT: ADULT SERVICES

Revenue Outturn 2007/2008 - Reasons for Variance from Approved Budget

1.	2.	3.
<u>Division of Service</u>	<u>Under(-)/ Over(+) Spending</u>	<u>Reasons for key variances (+/- £25k or +/- 5%)</u>
Older People Services		
Assess & Care Management	-97,961	-2.90
Total Assessment & Care Management	-97,961	
Residential Care In House	411,467	8.72
Nursing/Res.Care Independent	-766,129	-5.50
Total Residential & Nursing Care	-354,662	
Homecare In House	554,033	7.26
Meals In House	-30,397	-9.64
Other Community Services Independent	201,385	833.69
Homecare Independent	73,850	3.30
Total Care in Peoples Homes	798,872	
Day Care In House	-1,374	-0.65
Day Care Independent	6,105	1.37
Total Day Care	4,731	
Other Independent Services	-32,070	-6.39
Total Advice, Information etc.	-32,070	
Management & Admin Services	110,545	3.67
Total Management & Admin	110,545	
Extra Care Housing	-253,506	-32.85
Total Extra Care Housing	-253,506	
Total Older People Services	175,951	

DIRECTORATE: NEIGHBOURHOODS AND ADULT SERVICES

SERVICE UNIT: ADULT SERVICES

Revenue Outturn 2007/2008 - Reasons for Variance from Approved Budget

1.	2.	3.
Division of Service	Under(-)/ Over(+) Spending	Reasons for key variances (+/- £25k or +/- 5%)
Head of Function		
Head of Function	13,125	Cost Director of Health and Well Being and unbudgeted costs of Absence Management Officer post reduced by 7.84 savings on former Director of Assessment & Care Management.
Total Head of Function	13,125	
Learning Disability Services		
Assess & Care Management	-25,186	-3.56 Vacancies in Senior Management Team.
Total Assessment & Care Management	-25,186	
Residential Care In House	20,928	1.42 Under recovery of income from residents contributions at respite units and reduction in Supporting People funding.
Nursing/Res.Care Independent	-318,245	-7.32 Delays in planned transition placements from children's services and increased income from Continuing Health Care funding.
Total Residential & Nursing Care	-297,317	
Supported & Other Accommodation	-9,082	-2.11
Supported & Other Acc. Independent	-204,056	-14.09 Delays in start up of new supported living schemes due to difficulties obtaining suitable properties.
Other Services Independent	-186,910	-73.84 Delays in clients coming onto service and one-off income from Mencap.
Homecare Independent	-23,930	-74.34 Planned reduction in activity, clients diverted to more appropriate Community Support services.
In House Care Other	-19,624	-10.41 Continuing Health Care funding from Primary Care Trust on Family & Friends scheme.
Total Care in Peoples Homes	-443,602	
Day Care In House	85,242	2.92 Increased expenditure on the cost of external transport over and above the budget.
Day Care Independent	-13,512	-4.38
Total Day Care	71,730	
Other Independent Services	60,717	18.58 Overspend on independent sector advocacy reduced by underspend on Direct Payments.
Total Advice, Information etc.	60,717	
Management & Admin Services	0	0.00
Total Management & Admin	0	
Total Learning Disability Services	-633,658	

DIRECTORATE: NEIGHBOURHOODS AND ADULT SERVICES

SERVICE UNIT: ADULT SERVICES

Revenue Outturn 2007/2008 - Reasons for Variance from Approved Budget

1.	2.	3.
<u>Division of Service</u>	<u>Under(-)/ Over(+) Spending</u>	<u>Reasons for key variances (+/- £25k or +/- 5%)</u>
Mental Health Services		
Assess & Care Management	-55,179	-3.71 Slippage in recruitment to vacant posts plus achievement of management actions on a number of service level agreements.
Total Assessment & Care Management	-55,179	
Residential Care In House	771	5.91 Slight overspend on salary recharge from Health.
Nursing/Res.Care Independent	139,699	22.53 Increase in demand and costs of residential placements above budget.
Supported & Other Accommodation Independent	18,710	10.86 Additional costs of Supported living scheme.
Total Residential & Nursing Care	159,180	
Homecare In House	8,826	345.32 Additional costs of carers/sitting service and running costs to outreach scheme.
Other Services Independent	-515	-0.13
Homecare Independent	-22,926	-61.85 Additional income from Health for Supported Housing Scheme.
Total Care in Peoples Homes	-14,614	
Day Care In House	-5,889	-2.03
Day Care Independent	34,430	15.46 Overspend on independent sector contracts offset by management actions within Assessment and Care Management.
Total Day Care	28,541	
Other Independent Services	119,045	72.17 Demographic pressure on Direct Payments including one-off equipment purchases and overspend on Rethink contract.
Total Advice, Information etc.	119,045	
Management & Admin Services	2,079	126.58 Increased cost of salary recharge from Health.
Total Management & Admin	2,079	
Total Mental Health Services	239,051	

DIRECTORATE: NEIGHBOURHOODS AND ADULT SERVICES

SERVICE UNIT: ADULT SERVICES

Revenue Outturn 2007/2008 - Reasons for Variance from Approved Budget

1.	2.	3.
<u>Division of Service</u>	<u>Under(-)/ Over(+) Spending</u>	<u>Reasons for key variances (+/- £25k or +/- 5%)</u>
Physical Disability Services		
Assess & Care Management	-61,987	-4.99 Underspend on employee costs with sensory team and Social Services Officers due to vacancies.
Total Assessment & Care Management	-61,987	
Residential Care In House	46,180	12.52 Overspend on salaries and wages including unmet vacancy factor at St. Ann's.
Nursing/Res.Care Independent	87,915	10.28 Increase in both number and costs of care packages reduced by supplementary estimate.
Supported & Other Accommodat.Independent	-49,622	-46.20 Underspend on Supported Living scheme at Rig Drive due to additional income.
Total Residential & Nursing Care	84,473	
Equipment In House	30,734	7.42 Overspend on running costs at Kirk House.
Other Services Independent	37,310	3.43 Overspend on Direct payments reduced by underspend SLA's with independent sector. Underlying budget pressure reduced by additional one-off budget allocation as part of the revised estimates
Homecare Independent	28,417	4.69 process.
Total Care in Peoples Homes	96,461	
Day Care Independent	10,992	3.95
Total Day Care	10,992	
Other Independent Services	-19,549	-10.13 Overspend on Asylum Support offset by underspends on a number of Vol Sector contracts.
Total Advice, Information etc.	-19,549	
Management & Admin Services	0	0.00
Total Management & Admin	0	
Total Physical Disability Services	110,390	

DIRECTORATE: NEIGHBOURHOODS AND ADULT SERVICES

SERVICE UNIT: ADULT SERVICES

Revenue Outturn 2007/2008 - Reasons for Variance from Approved Budget

1.	2.	3.
<u>Division of Service</u>	<u>Under(-)/ Over(+) Spending</u>	<u>Reasons for key variances (+/- £25k or +/- 5%)</u>
Policy & Performance		
Assess & Care Management	110	0.20
Total Assessment & Care Management	110	
Management & Admin Support	-730	-1.29
Total Management & Admin	-730	
Total Policy & Performance	-621	
Supporting People		
Learning Dis. Supp. And Other Accom		
Management & Admin/Supp Hsg Independ.	0	0.00
Total Learning Dis. Supp & Other Accom	0	
Total	-209,699	

Notes

- (a) Column 1 should correspond to Column 1 on Sheet 2.
- (b) Column 2 should correspond to Column 5 on sheet 2.
- (c) Column 3 should identify additional pressures/fortuitous income etc.

ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS

1.	Meeting:	Cabinet Member for Adult Social Care and Health
2.	Date:	Monday 19 May 2008
3.	Title:	Adult Services Capital Expenditure Outturn Report 2007/08 - All Wards affected
4.	Directorate:	Neighbourhoods and Adult Services

5. Summary

To inform Members of the Capital Outturn against approved budget for Adult Services for the 2007/08 financial year.

6. Recommendations

That Members receive the 2007/08 Capital Outturn report for Adult Services.

7. Proposals and Details

The Capital Outturn for Adult Services for the financial year 2007/08 is £11,217,415 against an approved budget of £11,675,047, resulting in an overall underspend of £457,632. The underspend relates to known commitments in 2008/09 for the further development of the two new residential care homes at Rawmarsh and Dinnington.

The following information provides a brief summary of the Outturn position for each project:

Adult Services – Older People

The construction of the two new residential care homes commenced early in 2007/08 with an estimated completion date of July/August 2008. EDS are project managing the scheme and estimated total expenditure for 2007/08 of £10.75m. The actual expenditure for the year was £10.37m, an underspend due to delays in construction on both projects. Additional funding was approved by Cabinet on 13 February 2008 in respect of the settlement for the land transaction at the Dinnington site. EDS have also indicated potential pressures on the construction project in 2008/09 which are currently being reviewed.

The Assistive Technology Grant (which includes funding from the PCT) is being managed jointly and is being used to purchase Telehealth and Telecare equipment to enable people to live independently in their own homes. The spending profile was revised during the year and the balance of funding will be carried forward into 2008/09 to meet future commitments.

A new specific grant Improving the Care Home Environment for Older People was allocated by the Department of Health to improve the environment within residential care provision. The grant has been allocated mainly across the independent sector. The majority of the grant has been spent in 2007/08 however, a small balance remains and has been carried forward into 2008/09 in accordance with the grant conditions to meet future commitments.

Adult Services - Learning Disabilities

The refurbishment at Oaks Day centre was completed during the year funded from the Council's Strategic Maintenance Investment fund. Work at Addison Day centre commenced in early March 2008.

Adult Services – Mental Health

A large proportion of the Supported Capital Expenditure (SCE) allocation has been carried forward due to difficulties in finding suitable accommodation for the development of supported living schemes. Suitable properties have now been identified and spending plans are being developed. SCE funding is not time limited and at this stage £357k has been identified to be carried forward into 2008/09 to meet future commitments. Further options are being considered to provide more intensive supported living schemes with a range of providers to fully utilise the balance of funding.

Management Information

This is the last year of the specific Capital Grant, which is earmarked to further develop Electronic Social Care Records within Health and Social Care working with the Council's strategic partner RBT and Children & Young People's Services. A recent circular from the Department of Health has advised that any underspend can be carried forward into 2008/09. Therefore based on future spending profiles the majority of the grant is being carried forward into 2008/09. The funding is being used in conjunction with the £760,000 secured from the Council's IT Development Budget to meet the balance of the cost of the whole project. This element of funding is accounted for as part of the Chief Executive's Capital programme.

8. Finance

Appendix 1 shows the detailed financial information for each capital project, including budget, actual expenditure and method of funding.

9. Risks and Uncertainties

The outturn figures within this report are subject to quality assurance work on the statement of accounts, which will be undertaken during late May 2008.

10. Policy and Performance Agenda Implications

The approved capital budget for 2007/08 allows Adult Services to invest and develop its assets to improve and maintain existing levels of service to support the most vulnerable people and continues to contribute to meeting the Council's Corporate Plan and Community Strategy priorities.

11. Background Papers and Consultation

Department of Health Local Authority Circular (2007)7– Mental Health Supported Capital Expenditure (revenue) 2007/08.

Department of Health Local Authority Circular (2006) 1 – Supported Capital Expenditure (Capital Grant) for Improving Management Information 2007/08.
Personal Social Services (PSS) Funding 2007-08

This report has been discussed with the Strategic Director of Neighbourhoods and Adult Services and the Strategic Director of Finance.

Contact Name : Mark Scarrott, Service Accountant (Adult Services), Extension 2007, mark.scarrott@rotherham.gov.uk

ADULT SERVICES CAPITAL OUTTURN 2007-08

Directorate Neighbourhoods and Adult Services
Monitoring Period : 1 April to 31 March 2008

Expenditure Code	Scheme description	Approved Capital PROGRAMME 2007/08 £	Actual Expenditure 01/04/07 - 31/03/08 £	Projected Expenditure to 31/03/2008 £	Supported Capital Expenditure (SCE) £	Scheme 2007/08 Funding Profile				RAG Status	Comment Note number	
						Specific Grant		Other Contributions				Unsupported Borrowing/Capital Receipts £
						£	Detail	£	Detail			
	Older People											
UXB149	Adult's Older Peoples Modernisation Strategy	10,750,000	10,365,737	10,750,000					10,750,000	A	1	
UXB150	Assistive Technology	250,000	267,648	250,000				250,000	PCT	G	2	
UXB151	Residential Care - Improving the Environment	400,000	399,440	400,000		400,000	DoH Grant			G	3	
	Learning Disabilities											
UXL128	Addison Day Centre/Parkhill Lodge	4,561	0	0					4,561	G	4	
UXL135	LDDF for Supported Living	0	0	0				0	PCT	G	5	
	Strategic Maintenance Investment Programme											
UXZ001	Oaks Day Centre Alterations	486	3,152	5,047					486	G	6	
UXZ004	Addison Day Centre - Alterations	50,000	1,246	50,000					50,000	A	7	
UXZ005	Oaks Day Centre Alterations - Phase 2	100,000	97,280	100,000					100,000	G	8	
	Mental Health											
UXH098	Cedar House	10,000	7,825	10,000					10,000	A	9	
UXH101	Supported Capital Expenditure	75,000	48,711	75,000	60,887				14,113	A	10	
	Management Information											
UXT002	Improving Information Management Grant	35,000	26,376	35,000		35,000	DoH Grant			G	11	
TOTALS		11,675,047	11,217,415	11,675,047	60,887	435,000		250,000	0		10,929,160	

Comments
<p>1 Spending profile from external consultants who project manage the scheme now confirm £10.750m spend in 2007/08</p> <p>2 Review of spending profile in respect of Telehealth and Telecare equipment confirm balance to be carried forward into 2008/09.</p> <p>3 Department of Health Capital Grant £420,000 - balance to be carried forward into 2008/09</p> <p>4 Funding from PCT will be vired to fund the budget deficit on UXZ001 - Oaks Day centre</p> <p>5 Funding is earmarked for equipment within supported living schemes</p> <p>6 Final costs on scheme - see note 4 above.</p> <p>7 New approved scheme commenced in March 2008.</p> <p>8 Scheme now completed.</p> <p>9 Committed expenditure on providing support for early interventions and crisis move on.</p> <p>10 Committed funding on developing new supported living schemes.</p> <p>11 Department of Health Capital Grant - balance to be carried forward to 2008/09.</p>

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