

CABINET MEMBER FOR HEALTH & SOCIAL CARE

**Venue: Eric Manns Building,
Moorgate Street,
Rotherham**

Date: Monday, 8th February, 2010

Time: 10.00 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 (as amended March 2006)
2. To determine any item which the Chairman is of the opinion should be considered later in the agenda as a matter of urgency.
3. Apologies for absence
4. Minutes of the previous meeting held on 25th January 2010 (Pages 1 - 2)
5. Adult Services Budget Monitoring Report 2009/10 (Pages 3 - 8)
6. Adult Services Capital Monitoring Report 2009/10 (Pages 9 - 13)

(The Chairman authorised consideration of the following item to enable the matter to be processed.)

7. Shield (HIV and Aids) proposal for Group Sessions (Pages 14 - 20)

1H

CABINET MEMBER FOR HEALTH & SOCIAL CARE - 25/01/10

**CABINET MEMBER FOR HEALTH & SOCIAL CARE
Monday, 25th January, 2010**

Present:- Councillor Doyle (in the Chair); Councillors Barron, Gosling, Jack, P Russell and Walker.

H78. MINUTES OF THE MEETINGS HELD ON 21ST DECEMBER 2009 & 11TH JANUARY 2010

Resolved:- That the minutes of the meetings held on 21st December 2009 and 11th January 2010 be approved as a correct record.

H79. EXCLUSION OF PRESS AND PUBLIC

Resolved:- That, under Section 100A(4) of the Local Government Act 1972 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 they involve the likely disclosure of exempt information as defined in Paragraphs 3 and 4 of Part 1 of Schedule 12A to the Local Government Act 1972.

H80. UPDATE ON THE LEARNING DISABILITY FUNDING TRANSFER

Shona McFarlane, Director of Health and Wellbeing presented the submitted report which updated the Cabinet Member on the progress and issues regarding the Learning Disability Transfer, since the presentation of the paper in February 2009, which advised on the requirements for the planned transfer of commissioning responsibility and associated funding for Learning Disability social care services previously funded through NHS R.

An agreement had been reached between NHS R and RMBC on how the funding transfer would be implemented, and funding amounts were agreed. However as this was a significant piece of work, a risk analysis and risk register had been established.

The report gave an update and information on the next steps.

Resolved:- (1) That MPs be asked to petition government regarding the inability to access ILF funding

(2) That officers continue to work towards an acceptable agreement

(3) That further reports be brought to this meeting.

H81. LEARNING DISABILITIES AGM

Learning Disabilities AGM

Councillor Pat Russell reported that she had attended the Learning Disabilities AGM the previous week. The event was attended by over 150 people and was successful. The views of people with a learning disability were heard, and during the meeting a Learning Disability Customer commented that they were not happy at being referred to as a "user". It was suggested and agreed that in future they should be referred to as "Customers" or Clients".

H82. OLDER PEOPLE'S CHAMPION - UPDATE

Councillor Walker reported that she had been working with winter payments for the elderly. She had found that some old people were given it as a matter of course and others had to apply for it.

She also reported that wardens were fitting safety devices in old people's properties free of charge.

Councillor Walker made reference to the varying degrees of effectiveness between the Area Assemblies, and confirmed that she would be taking the South Yorkshire Fund Officer to all the Area Assembly groups in order to inform them what was on offer to them.

ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS
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1	Meeting:	Cabinet Member for Health and Social Care
2	Date:	Monday 8 February 2010
3	Title:	Adult Services Revenue Budget Monitoring Report 2009/10.
4	Directorate :	Neighbourhoods and Adult Services

5 Summary

This Budget Monitoring Report provides a financial forecast for the Adult Services Department within the Neighbourhoods and Adult Services Directorate to the end of March 2010 based on actual income and expenditure to the end of December 2009.

The forecast for the financial year 2009/10 is an overspend of £69k after assuming achievement of a number of management actions to offset pressures identified within the budget.

6 Recommendations

Members are asked to note:

The latest financial projection against budget for the year based on actual income and expenditure to the end of December 2009 for Adult Services.

7 Proposals and Details

7.1 The Current Position

7.1.1 The approved net revenue budget for Adult Services for 2009/10 is £72.9m. Included in the approved budget was additional funding for demographic and existing budget pressures together with a number of new investments and efficiency savings identified through the 2009/10 budget setting process.

7.1.2 The latest budget monitoring report for Adult Services shows some underlying pressures of £2.1m. However after taking account of a number of identified savings and management actions achieved to-date these pressures are reduced and assuming the balance of management actions (£85k) are achieved there is a forecast overall net overspend of £69k by the end of the financial year.

The Directorate is continuously reviewing planned spend to identify any further potential opportunities to mitigate the remaining forecast overspend.

7.1.3 The latest year end forecast shows the main budget pressures in the following areas:-

- Home Care as a result of delays in shifting the balance of provision to the independent sector (+£612k). The 70/30 split was achieved at the end of July 2009 and the balance has now moved beyond 70/30.
- Increase in residential and nursing care short stays over and above approved budget for clients with a physical and sensory disability (+£85k).
- Independent sector home care provision for Physical and Sensory Disability clients has increased by an additional 970 hours since April 2009, a further 38 clients are now receiving a service. This is resulting in an overspend of £378k against the approved budget.
- A significant increase above approved budget in clients receiving a Direct Payment within Physical and Sensory Disabilities and Older Peoples Services (+£405k), reduced by Social Care Reform Grant Allocation of (-£100k).
- Additional one-off expenditure is being incurred in respect of the costs of boarding up, removal of utilities and security costs at the former residential care homes prior to them transferring to the Council's property bank (+£200k).
- Delays in the implementation of budget savings agreed as part of the budget setting process for 2009/10 in respect of meals on wheels (+£290k), laundry (+£141k) and the bathing service (+£40k).
- Continued pressure on the cost of external transport provision for Learning Disability Day care clients (+£82k).

7.1.4 The above pressures have been reduced by :-

- Additional income from continuing health care funding from NHS Rotherham (-£222k).
- Delays in the implementation of new supported living schemes within Learning Disability services (-£395k).

- Savings within independent residential care due to an increase in income from property charges (-£668k) and slippage in intermediate care spot beds (-£40k).
- Savings on the reconfiguration of Extra Care housing (-£340k).
- Planned delay in developing rehabilitation and supported living facilities for clients with a physical and sensory disability (-£157k) plus agreed delay in developing respite care provision (-£157k).
- Slippage in recruitment to a number of new posts (-£74k) where additional funding was agreed within the 2009/10 budget process.

7.1.5 The Directorate continues to identify additional management actions to mitigate the outstanding budget pressures above. The majority (93%) of management actions have already been achieved (£1.054m) and are included in the financial forecasts. These include additional savings on supported living, residential short stay placements, independent residential care costs within Older People services and savings from the decommissioning of in-house residential care.

7.1.6 Members have requested details of expenditure on Agency and Consultancy to be included within budget monitoring reports. The following table shows the monthly spend on Agency for Adult Services, there is no expenditure on consultancy to date. It should be noted that these costs are included in the reported forecast outturn position.

Month	On Contract £	Off Contract £	Total £
April	22,495	1,298	23,793
May	10,667	3,853	14,520
June	19,381	545	19,926
July	40,654	11,248	51,902
August	25,474	3,286	28,760
September	55,276	265	55,541
October	46,438	2,113	48,551
November	57,149	8,140	65,289
December	20,833	0	20,833
Total	298,367	30,748	329,115

7.2 Current Action

To further mitigate the financial pressures within the service all vacancies continue to require the approval of the Directorate Management Team. There is also a moratorium in place on uncommitted, non-essential non-pay expenditure.

Budget meetings with Service Directors and managers take place on a monthly basis to robustly monitor financial performance against approved budget including progress on delivering the proposed management actions and to consider all potential options for managing expenditure within the approved revenue budget.

8. Finance

The finance details are included in section 7 above and the attached appendix shows a summary of the overall financial projection for each main client group.

9. Risks and Uncertainties

There are a number of underlying pressures within the service which continue to be reviewed and closely monitored. The report assumes the achievement of the savings in respect of the outstanding management actions (currently £85k). However, the report does not include any potential costs in respect of any possible redundancies associated with the decommissioning of in-house services.

Management Action Plans have been developed to address the initial budget pressures and include the impact of any decisions on the Key Performance Indicators. Careful scrutiny of expenditure and income and close budget monitoring remains essential to ensure equity of service provision for adults across the Borough within existing budgets.

10. Policy and Performance Agenda Implications

The delivery of Adult Services within its approved cash limit is vital to achieving the objectives of the Council and the CSCI Outcomes Framework for Performance Assessment of Adult Social Care. Financial performance is also a key element within the assessment of the Council's overall performance.

11. Background Papers and Consultation

- Report to Cabinet on 25 February 2009 –Proposed Revenue Budget and Council Tax for 2009/10.
- The Council's Medium Term Financial Strategy (MTFS) 2008-2011.
- Action Plan to address Adult Services Budget Pressures – Cabinet Member for Health & Social Care – 14 September 2009

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

Contact Name: Mark Scarrott – Finance Manager (Adult Services), *Financial Services x 2007*, email Mark.Scarrott@rotherham.gov.uk.

**ADULT SOCIAL SERVICES
REVENUE BUDGET MONITORING SUMMARY**

Last Net Projected Variance £	Directorate/Service Area	EXPENDITURE/INCOME TO DATE (As at 31 December 2009)									PROJECTED OUT-TURN					Revised Financial RAG Status	Note	
		Expenditure			Income			Net			Net							
		Profiled Budget £	Actual Spend to date £	Variance (Over (+) / Under (-) Spend) £	Profiled Budget £	Actual Income to date £	Variance (Over (+) / Under (-) Recovered) £	Profiled Budget £	Actual Net Expenditure to date £	Variance (Over (+) / Under (-) Spend) £	Annual Budget £	Proj'd out turn £	Variance (Over (+) / Under (-) Spend) £	Current Financial RAG Status	Financial Impact of Management Action £			Revised Projected Year end Variance Over(+)/Under(-) spend £
	<u>Commissioning, Quality & Performance</u>																	
(7)	Commissioning & Partnerships	9,030	9,049	19	(7,445)	(7,516)	(71)	1,585	1,533	(52)	5,116	5,048	(68)	Green	0	(68)	Green	1
	<u>Assessment & Care Management</u>																	
(409)	Older People Assessment & Care Management	26,386	26,688	302	(8,483)	(9,140)	(657)	17,903	17,548	(355)	24,254	23,781	(473)	Green		(473)	Green	2
196	Physical Dis Assessment & Care Management	4,385	4,935	550	(334)	(793)	(459)	4,051	4,142	91	6,088	6,241	153	Red	(35)	118	Red	3
(213)	Assessment Care Management	30,771	31,623	852	(8,817)	(9,933)	(1,116)	21,954	21,690	(264)	30,342	30,022	(320)		(35)	(355)		
	<u>Independent Living</u>																	
(84)	Older People Independent Living	2,427	2,399	(28)	(238)	(228)	(10)	2,189	2,171	(38)	1,632	1,581	(51)	Green	0	(51)	Green	4
	<u>Health & Well Being</u>																	
1,027	Older People Health & Well Being	12,908	13,399	491	(2,197)	(1,871)	326	10,711	11,528	817	15,766	16,783	1,017	Red	0	1,017	Red	5
(436)	Learning Disabilities	18,710	18,518	(192)	(8,993)	(9,105)	(112)	9,717	9,413	(304)	15,693	15,286	(407)	Green	0	(407)	Green	6
(98)	Mental Health	4,063	4,190	127	(302)	(442)	(140)	3,761	3,748	(13)	4,304	4,287	(17)	Green	(50)	(67)	Green	7
189	Total Adult Social Services	77,909	79,178	1,269	(27,992)	(29,095)	(1,123)	49,917	50,083	146	72,853	73,007	154		(85)	69		

Reason for Variance's)

NOTES	Reasons for Variance's) and Proposed Actions	Performance
	<i>Indicate reasons for variance (e.g. increased costs or client numbers or under performance against income targets) and actions proposed to address the variance which produce</i>	<i>(List key targets and RAG status- highlight impact of actions intended to address budget</i>
	<u>Main Reasons for Variance</u>	
1	<p><u>Commissioning & Partnerships</u></p> <p>Forecast pressures on a number of unfunded posts offset by management actions including planned slippage on recruitment to new and vacant posts a review of grant funding plus slippage on the implementation of carers breaks.</p>	<p><u>Physical Disabilities</u></p> <p>Performance indicator C29 - physical disability users helped to live at home (2009-10 Target = 3.2). Current performance = 2.93 against a monthly target of 3.13, below target.</p>
2	<p><u>Assessment and Care Management</u></p> <p><u>Older Peoples Services (Independent)</u></p> <p>19 more placements than budgeted being offset by the additional income generated by additional admissions and increased income from property charges and Continuing Health Care (-£668k). Reduced spend on intermediate care spot beds (-£40k). Current forecast overspend on Direct Payments (+£300k) due to clients transferring from former Age Concern Day care where budget cut as part of budget setting process in 2007-08 and 2008-09 reduced by (-£100k) SCRG. Overspend on running costs of PC's and mobile phones (+£36k). Running costs for Manvers accommodation (+£50k) , increase in running cost for CRT transport (+£10K). Increased costs on independent sector homecare (+£200k) as balance of provision now exceeds 70%. Net underspend on assessment Social Work staff due to vacant posts (-£125K). Management Actions of (-£100k) refers to slippage on developing community support services for people with dementia now fully achieved.</p>	<p><u>Residential/Nursing Care</u></p> <p>Performance indicator NAS 3 - Older People in residential care. (2009-10 Target = 237) Current performance = 192.82 against a monthly target of 239.5, exceeding target.</p> <p><u>Home care</u></p> <p>Performance Indicator C32 - Older People helped live at home (2009-10 Target = 96.32) Current performance = 65.17 against a monthly target of 89.61, below target.</p> <p><u>Direct Payments</u></p> <p>Performance Indicator N130 - Self Directed Support (all clients), (2009-10 Target = 300) Current performance = 286.77 against a monthly target of 266, exceeding target.</p>
3	<p><u>Physical & Sensory Disabilities</u></p> <p>Pressure on Home Care Independent sector (+£378k) due to increased hours (+ 970 hours), more expensive care packages, including backdated costs. Pressure on Direct Payments budgets as number of clients increase (21 new care packages since April (+£105k), further analysis being undertaken Pressures on Residential and Nursing Care due to overspend on short stays (+£86k) offset by additional Continuing care income on supported living schemes (-£61k). Implemented management action includes deferring full implementation to develop care and rehabilitation in a residential setting (-£157k) plus defer development of respite care services (-£157k). Outstanding Management Actions of -£35k include savings from the review of Direct Payments and out of authority residential care placements.</p>	
4	<p><u>Independent Living</u></p> <p>Forecast underspend on employee costs within Extra Care Housing (-£36k) Underspend on Assessment Direct staffing (-£28k) offsetting the overspend on Rothercare (+£14k).</p>	
5	<p><u>Health and Well Being</u></p> <p><u>Older Peoples Services (In House)</u></p> <p>Additional one-off costs for decommissioning former residential care homes including security costs, boarding up, removal of utilities, overspend on employee costs of community support services, cost of utilities in new homes, shortfall on income against budget (+£516k). Slippage on meeting agreed savings for Laundry Service (£119k), Meals on Wheels service (£241k) & Bathing service (£40K) agreed in budget setting process. Supernummery staff from decommissioned MOW & laundry service (+£69K) Forecast overspend on in-house home Care due to slippage in achieving 35/65 split by end March 2009 (+£412k) plus more contract hours than demand. Overspend on employee costs within Home Care operations team (+£68k), Reconfiguration of Extra Care Housing, Bakersfield Court including additional slippage identified from new investment (-£305K), utilisation of grant monies b/fwd (-£64k). Planned delay on recruitment to vacant posts (-£74K) to reduce overall pressures. Underspend on Transport (-£50K).</p>	
6	<p><u>Learning Disabilities</u></p> <p>Additional Continuing care income (-£172K) from health, slippage on employee costs (-£114k), slippage on supported living schemes (-£290k), underspend on homecare budget (£-20k), forecast underspend on Direct Payments (-£5K), Underspend reduced by continuing pressure on day care services (+£134k) mainly on external transport hire costs and agency staff costs (+£34k).</p>	
7	<p><u>Mental Health</u></p> <p>Projected overspend on residential and nursing care (+£85k) - 10 new admissions this year. Savings on review of Voluntary sector contracts (-£76k) and underspends on staffing budgets at Dinnington Outreach and Clifton Court (-£20k). Direct Payments delay in uptake drugs & alcohol placements (+£11K) plus additional income from Supporting People (-£29k). Outstanding Management Actions (-£50k) in respect of capitalisation of revenue expenditure on equipment.</p> <p><u>Finance Performance Clinics</u></p> <p>Monthly finance clinics are held with each Service Director and their budget holders to monitor actual and planned spend against approved budget. Management actions are currently being identified to offset the additional budget pressures. Moratorium on non essential non-pay expenditure in place.</p>	

ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS

1.	Meeting:	Cabinet Member for Health and Social Care
2.	Date:	Monday 8 February 2010
3.	Title:	Adult Services Capital Budget Monitoring Report 2009/10 - All Wards affected
4.	Directorate:	Neighbourhoods and Adult Services

5. Summary

To inform members of the anticipated outturn against the approved Adult Services capital programme for the 2009/10 financial year.

6. Recommendations

Members receive and note the Adult Services forecast capital outturn for 2009/10.

7. Proposals and Details

This capital monitoring report provides detail of the approved capital programme for the Adult Services department of the Neighbourhoods and Adult Services Directorate, actual expenditure for the period April to the 15 January 2010 and the projected final outturn position for each scheme.

Actual expenditure to the mid January 2010 was £477k against a revised programme of £1.2m for 2009/10. Total funding of £480k as been carried forward into 2010/11 since the last report. The approved schemes are funded from a variety of different funding sources including, unsupported borrowing, allocations from the capital receipts, Supported Capital Expenditure and specific capital grant funding. Appendix 1 shows actual expenditure to date against the approved budget together with the forecast outturn position.

8. Finance

The following information provides a brief summary of the latest position on the main projects within each client group.

Older People

The two new residential care homes opened in February 2009. The balance of funding (£230k) relates to outstanding fees and the cost of any final minor works.

The Assistive Technology Grant (which includes funding from NHS Rotherham) is being managed jointly and is being used to purchase Telehealth and Telecare equipment to enable people to live in their own homes. A procurement plan to spend the remaining NHSR funding is currently being finalised and will now be procured in 2010/11. The RMBC funding is approved and includes the purchase of lifeline connect alarms, low temperature sensors and fall detectors within peoples homes.

A small element of the Department of Health specific grant (£13.5k) issued in 2007/08 to improve the environment within residential care provision was carried forward into 2009/10. The remaining balance of funding is being spent within in-house residential care services.

Learning Disabilities

The small balances of funding (£10k) carried forward from 2008/09 are to be used for the purchase of equipment for Parkhill Lodge and within existing supported living schemes.

The refurbishment at Addison Day Centre (Phase 2) is now complete and awaiting final invoices.

Since the last report a new scheme to refurbish the respite centre at Treefields has been approved from the Councils Strategic Maintenance Investments fund and will be completed in early May 2010.

Mental Health

A small balance remains on the Cedar House capital budget and will be used for the purchase of additional equipment.

A large proportion of the Supported Capital Expenditure (SCE) allocation has been carried forward from previous years due to difficulties in finding suitable accommodation for the development of supported living schemes.

Suitable properties continue to be identified and spending plans are being developed jointly with RDASH. The possibility of funding equipment purchased for direct payments is also being considered to reduce the current pressures on the mental health revenue budgets and is included as a management action (£50k). Further options are also being considered to provide more intensive supported living schemes with a range of providers and to fund a range of new assistive technologies for mental health clients, which will support their independence with access to 24 hour support.

Management Information

The balance of the capital grant allocation (£85k) for Adult Social Care IT infrastructure was carried forward from 2008-09 and used with this years grant allocation to fund the Adults Integrated Solution as part of introducing electronic care management.

9. Risks and Uncertainties

The main risk relates to the potential overspends due to the increase in construction related costs over and above approved budgets. Also projects funded through Supported Capital Expenditure or capital grants where spending must be in accordance with certain spending conditions, in accordance with national priorities. Any shortfall in capital funding will delay implementation and may result in the Directorate not meeting national agendas and performance targets.

10. Policy and Performance Agenda Implications

The approved capital budget for 2009/10 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 key priorities.

11. Background Papers and Consultation

Department of Health Local Authority Social Services Letter LASSL(DH)(2008)3-Adult's Personal Social Services: Distribution of Single Capital Pot and Specific Capital Allocations in 2009-10 and 2010-11.

Department of Health Local Authority Circular (2008) 6 – Supported Capital Expenditure (Capital Grant) for Adult Social Care IT Infrastructure – 2008-09, 2009-10 and 2010-11.

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

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CAPITAL EXPENDITURE MONITORING 2009-10

Directorate Adult Services

Monitoring Period : 1 April 2009 to 15th January 2010

Expenditure Code	Scheme description	Approved Capital PROGRAMME 2009/10 £	Actual Expenditure 15/01/10 £	Year End Projection £	Supported Capital Expenditure (SCE) £	Scheme 2009/10 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	230,528	69,469	230,528					230,528	G	1	
UXB150	Assistive Technology (NHSR)	11,000	11,000	11,000				11,000		R	2	
UXB150	Assistive Technology (RMBC)	178,545	21,295	178,545		178,545	DoH Grant			G	2	
UXB151	Residential Care - Improving the Environment	13,585	8,211	13,585		13,585	DoH Grant			A	3	
	Learning Disabilities											
UXL128	Addison Day Centre/Parkhill Lodge	1,761	0	1,761				1,761		G	4	
UXL135	LDDF for Supported Living	5,548	0	5,548				5,548		A	5	
	Strategic Maintenance Investment Programme											
UXZ004	Addison Day Centre - Alterations	23,728	0	23,728					23,728	A	6	
UXZ011	Addison Day Centre - Phase 2	250,000	236,879	250,000					250,000	G	7	
UXZ012	Treefields - refurbishment	110,000	0	110,000					110,000	A	8	
	Mental Health											
UXH098	Cedar House	12,358	0	12,358					12,358	G	9	
UXH101	Supported Capital Expenditure	150,000	53,725	150,000					150,000	A	10	
UXH102	Mental Health Single Capital Pot	0	0	0					0	G	11	
	Management Information											
UXT003	Social Care IT Infrastructure Capital Grant	177,017	46,571	177,017		177,017	DoH Grant			G	12	
	General											
	Adult Social Services Single Capital Pot	30,000	0	30,000	30,000					A	13	
TOTALS		1,194,070	447,149	1,194,070	30,000	369,147		18,309	0	776,614		

Comments
1 Balance of funding to cover cost of outstanding fees and any final minor works. Residential Care Homes opened in February 2009.
2 Funding for the purchase of Telehealth and Telecare equipment. Health funding will now be carried forward into 2010/11 in agreement with Health, balance of RMBC funding re-profiled to meet planned spending on equipment.
3 Department of Health Capital Grant balance carried forward from 2009/10. Final Spending plans now agreed.
4 Balance of funding to be used for furniture and equipment at Parkhill Lodge.
5 Funding is earmarked for equipment within existing supported living schemes.
6 Scheme is now completed and balance of funding to meet any final fees.
7 Scheme commenced in July 2009 and is now complete, awaiting final account and outstanding fees.
8 New scheme to start 9 February 2010, estimated completion date May 2010.
9 Balance of funding committed to providing support for early interventions and crisis move on.
10 Committed funding to develop assistive technologies, carers resource centre, capital purchases for mental health teams relocation, equipment within the two new residential care homes, direct payments and new supported living schemes. Spending plans have been re-profiled over the next two years.
11 Spending plan re-profiled and funding carried forward into 2010/11 (£555k).
12 2009-10 grant allocation plus balance of funding brought forward from 2009-10 to fund Adults Integrated Solution as part of introducing electronic care management.
13 New allocation in 2009-10 - spending plans being developed, £100k now carried forward to 2010/11.

ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS

1.	Meeting:	Cabinet Member for Health and Social Care
2.	Date:	8 th February 2010
3.	Title:	Shield (HIV and Aids) proposal for Group Sessions
4.	Programme Area:	Supporting People, Neighbourhoods and Adult Services

5. Summary

- 5.1 The 2009-10 budget for the HIV and Aids grant is £45K. The Government has indicated that this will remain in 2010 – 11.
- 5.2 The expenditure on this grant per annum is £21,700 from the Shield contract via Supporting People. This contract is for housing related support services on a floating basis to 45 clients within the Rotherham area. Therefore £23,300 still remains uncommitted from the HIV and Aids grant.
- 5.3 It was recommended that a gaps analysis be undertaken to consider how this balance of funding could be appropriately utilised (See Appendix 1: Gaps Analysis).
- 5.4 The analysis has identified the need for women's (and their children) group sessions on a weekly basis delivered by a specialist HIV and Aids service that has the skills and capacity to facilitate these sessions. The contractor has quoted £15,784 as the cost of delivering the service.

6. Recommendations**IT IS RECOMMENDED THAT:**

The Cabinet member exempt the contract for the delivery of group sessions on HIV and Aids to women and their children from the requirement of standing order 47.6.2 (requirement to invite at least two oral or written quotations for contracts with an estimated value between £5,000 and £20,000) and award the contract to Shield.

7. Proposals and Details

Shield is the only specialist HIV and Aids service operating in the Rotherham area which is currently contracted to provide housing related support through the Supporting People Programme on a floating basis to this client group. The service is contracted to provide support to 45 clients; however, at present Shield has 42 clients with HIV and Aids and 7 with Hepatitis C, a total of 49. Alongside this, the service also provides education to people in schools.

From the gaps analysis, undertaken in collaboration with key partners, it became apparent that there is a need in the Rotherham area for group sessions, particularly for women and their children.

Supporting People developed a service specification and sent this to Shield requesting a quote for the service (maximum of 20K). Shield submitted costings that demonstrate they can provide this service (Women's Group Sessions) in the premises already established in the local area (Moorgate Road, Rotherham) for **£15,784** per annum.

The Supporting People (SP) team contacted the Public Health Specialist (Melanie Simmonds) to identify any other providers of these services in the area. The Gate Surgery was identified as the only possible provider with the capacity and skill to deliver this service. The SP team requested a quote from Gate Surgery against the specification however the response was that Gate Surgery cannot provide a VFM service as it employs psychologists who would not normally deliver this type of service and who are paid at much higher rates of pay than suitably qualified persons would be paid.

It is not appropriate to request quotes from providers working outside the Rotherham area as this would require them to obtain premises which would exceed the value of the contract.

8 Finance

Details are included in the proposals section above

9 Risks and Uncertainties

10 Policy and Performance Agenda Implications

The Supporting People 5 year Strategy (2005-10) identified gaps in the service provision for people with HIV and Aids.

SP currently delivers on NI 142 which is in the NAS Service Plan 2008/11.

Alive:

- NI 142, percentage of vulnerable people maintaining their independence

11 Background Papers and Consultation

The Strategic Director of Finance has been consulted re the report and supports the recommendation for the reasons outlined in the report

The Assistant Chief Executive (Legal and Democratic Services) supports the recommendation for the reasons outlined in the report.

Appendix 1 – HIV and Aids Gaps Analysis

Appendix 2 – Shield Costings for Women’s Group Sessions

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Appendix 1

HIV and Aids Gaps Analysis

Principal Findings and recommendations

There is a higher demand for existing provision for the housing and support needs of people with HIV and Aids than there is supply. Currently there is only one service (Shield) contracted to provide housing related support through the Supporting People programme on a floating basis to this client group. The service is contracted to provide support to 45 clients; however, at present Shield has 42 clients with HIV and Aids and 7 with Hepatitis C in service, a total of 49. Recent figures show that new cases are arising every week, which is putting a strain on the service's resources. Alongside this, the service also provides education to people in schools.

Summary of needs of people with HIV and Aids

In the last five years Rotherham has seen two significant trends regarding HIV:

1. A substantial increase in new cases of HIV diagnoses; at the end of December 2008 there were 106 people diagnosed, this has risen to 129 in 2009.
2. In the late 1990s HAART (combination therapy) was introduced nationally which resulted in increased numbers accessing medical care for longer periods of time. Life expectancy for a person diagnosed with HIV at an early stage is far greater than before medication and the need for care due to illness has decreased.

The changing face of HIV: today there are increased diagnoses and less deaths resulting in a population of Rotherham residents that require a more comprehensive health provision than in the 1980s and 1990s when the focus was on palliative care. There were approximately 100 people accessing treatment at Rotherham GUM Clinic in the winter of 2008.

The **Sexual Health Needs Assessment** carried out in April 2009 by Rotherham PCT shows the following;

- From the 2006 figures Rotherham has a population of 800 Black Africans, 9% of which have been diagnosed with HIV (70).
- Other BME groups together have a population of 8000, of which 10 have been diagnosed with HIV.
- The rest of the population (white) was 241,800 of which 49 have been diagnosed with HIV.

This shows that the Black African ethnic group has the highest level of HIV cases despite only having a population of 800.

Shield's analysis of clients confirms the findings with 28 clients from BME ethnic groups, 1 client from White European and 13 White British clients in service at present (not including Hepatitis C clients). The age range of clients varies between 18 (born with HIV) and 69 and there are an increasing number of women 20-40 with young children accessing the service. Of the 42 clients in service, 25 have dependent children.

Serious concerns have been raised in recent meetings such as the Rotherham NHS Foundation Trust Department of GU Medicine HIV Community Initiatives Group Meeting regarding the social issues of some of the HIV patients at the present time. Current provision is overwhelmed with this workload as there is no particular body delegated to dealing with these issues in Rotherham. The group identified this as a major gap in service and identified the need for more workers.

Core needs

The 2008-2013 Supporting People strategy recognised the increase in the numbers of people with HIV and Aids and their social issues and exclusion which is why this service was developed. However, it is increasingly apparent that the provision is not sufficient to deal with the demand and the increase in clients with isolation and support issues.

Nationally there is an increase in the number of people with depression due to the constant medication regime, isolation, rejection from family, social stigma and the unknown factor of how the virus affects the ageing process.

Statistics show that there is an increase in the number of women diagnosed with HIV, a large proportion of which have not disclosed that they have HIV and are caring for families. Typically, these women have not met anyone who is positive and are extremely isolated. Domestic violence and pressures around the family unit are rising and GUM Clinic is referring more clients to Shield with emotional, social and counselling needs.

There is also a lack of knowledge around the virus and the medical terms associated, people also tend to struggle with stigma, disclosure and knowing their rights. The Health Service (GUM) does not have the capacity to run sessions around education of the virus and its effects socially and emotionally.

Gaps in Provision

There are currently no support groups held in the Rotherham area; Shield encourages its clients to attend Sheffield's group sessions but this can be inappropriate and impractical as it costs clients money and they are already nervous and isolated so are not always comfortable in travelling to another service to receive support. These group sessions provide a valued service to

clients, ensuring that people meet each other to socialise, overcome barriers and isolation, hear other people's experiences, ask medical questions and receive counselling. Shield estimates that at least 50 individuals (including children) will attend a group session on an annual basis. Many will return week-on-week to sessions.

Shield have submitted costings for 3 group sessions that could be run in the Rotherham area from the remaining HIV and Aids grant of **21K per annum** (See Appendix 2 for details). It has been identified that the Women's group (Option 1) would be the preferred option as this fits the most prominent need of the client group.

Appendix 2

OPTION 1

ROTHERHAM GROUPS Rotherham's Weekly Women's Group

	Persons per session	No of weeks	Item Cost	Total cost pa	Notes
Balanced meal	10	50	4	2000	
Laundry Facility for group detergent		50	3	150	
Utilities/rates/general overheads				1500	
Emergency food hampers	2	50	10	1000	
Workshops/Activities expenses		25	10	250	

Therapists/Counsellor costs

	Hours	No. of weeks	Cost per hour	Total cost pa	Notes
Complementary Therapies-hire	3	50	15	2250	
Counselling - supervision	3	50	4.2	630	2*

Staffing Costs

	Staff hours	No. of weeks	Cost per hour	Total cost pa	Notes
Duration of club x 2 staff minimum	8	50	10.53	4212	1*
Management	5	50	15.17	3792.5	1*

TOTAL 15784.5

1* non full cost recovery

2* working on one hour supervision for 12 hours as £45