

## **CABINET MEMBER FOR HEALTH & SOCIAL CARE**

**Venue:** Eric Manns Building, 45 Moorgate Street,  
Rotherham.

**Date:** Monday, 12th April, 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 22nd March 2010 (Pages 1 - 2)
5. The Learning Revolution: Making it Happen. Lead Accountable Body Status (Pages 3 - 6)
6. Adult Social Care 3rd Quarter (October to December) performance report for 2009/10 (Pages 7 - 15)
7. Adult Services Revenue Budget Monitoring Report 2009/10 (herewith) (Pages 16 - 21)
8. Adult Services Capital Monitoring Report 2009/10 (herewith) (Pages 22 - 26)

**CABINET MEMBER FOR HEALTH & SOCIAL CARE  
22nd March, 2010**

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

An apology for absence was received from Councillor Barron.

**H102. MINUTES OF THE PREVIOUS MEETING HELD ON 9TH MARCH 2010**

Consideration was given to the minutes of the meeting of the Cabinet Member for Health and Social Care held on 9<sup>th</sup> March 2010

Those present discussed the funding available for community services, what we provided and what shortfalls there were. The Cabinet Member asked for a report to be presented to the next meeting giving details in relation to this.

Resolved:- (1) That the minutes of meeting held on 9<sup>th</sup> March 2010, be approved as a correct record.

(2) That a report be presented to the next meeting in relation to funding for community services as detailed above.

**H103. ROLL OUT OF THE TRANSPORT ELIGIBILITY CRITERIA**

Shona McFarlane, Director of Health and Wellbeing presented the submitted report concerning the roll out of the Transport Eligibility Criteria.

In April 2007 Cabinet agreed that a Transport Eligibility Criteria should be applied to all new customers and this had been consistently applied since that time. The number of customers not requiring or accessing transport had proved to be low and would not achieve the original aims of the proposed criteria, which were to achieve savings in the provisions of transport. These savings were achieved through other mechanisms.

The authority continued to provide transport to day services and activities for a significant number of service users to whom this criteria had not been applied, as at the time of the decision they were existing service users.

The report outlined the proposals which had been considered which included:

**Option One**

- Roll out the implementation of the revised transport criteria across all service user groups at the point of review
- That consultation with affected customers be carried out
- The criteria be amended, to ensure those in receipt of the higher

rate DLA did not receive local authority funded transport

#### Option Two

- A decision be taken to stop utilising the criteria due to the small number of service users who were affected by the criteria and undertake a whole review of the transport services.

A discussion ensued and the following issues were raised:-

- Concerns relating to the level of risk to service users
- How elderly people would get to day centres without the transport provided
- Would carers who work, get 24 hour care allowance to enable them to transport service users to day centres
- What was the “real cost” of transporting service users to day care centres?
- How would this cost compared to providing 24 hour care allowance?

Resolved:- That a further report be presented at the next meeting with further details relating to the current criteria and the “real” costs of transporting service users to the day care centres.

<b>ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBER</b>
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<b>1</b>	<b>Meeting:</b>	Cabinet Member for Health & Social Care
<b>2</b>	<b>Date:</b>	12 April 2010
<b>3</b>	<b>Title:</b>	The Learning Revolution: Making it Happen. Lead Accountable Body Status
<b>4</b>	<b>Programme Area:</b>	Neighbourhoods and Adult Services

## 5 Summary

To inform the Cabinet Member for Health and Social Care of the Learning and Skills Council and the Department for Business, Innovation and Skills intention that from 2011/12, all the Learning and Skills Council funding, for informal adult learning, will be channelled through the Local Authority.

## 6 Recommendations

- **That the Cabinet Member for Health and Social Care consider the requirements of The Learning Revolution and agree which service will become the Lead Accountable Body.**
- **That a further report be presented to the Cabinet Member for Health and Social Care following the receipt of additional information on key leadership responsibilities of the Lead Accountable Body.**

## 7 Proposals and Details:

In March 2009 a White Paper, *the Learning Revolution* was published. The White Paper provides a new vision for the delivery of informal adult learning and focuses on the adult learning courses provided by most Local Authorities. It also includes adult learning that happens in other places such as libraries, museums, through self-organised activities, on-line, via broadcasting and in communities. The Learning Revolution identifies the £210 million Learning and Skills Council funds called Adult Safeguarded Learning (currently used for personal and community development learning, neighbourhood learning for deprived communities and family learning) and states its intention to join with other existing national and local lifelong learning budgets, for example, health, culture.

In April 2010 the Learning Skills Council will be abolished and adult learning will be managed by a new successor body called the Skills Funding Agency. Local Authorities will be invited to take responsibility for the local agenda and to provide local leadership and the infrastructure to create a joined up, innovative local learning offer. Consultation has clearly identified Local Authorities as the best place to co-ordinate informal learning activity. Local Authorities are uniquely placed to unlock the learning potential of many local services. Local Authority leadership will ensure informal learning plays a strong role in local strategies for community cohesion, active citizenship, health and wellbeing.

The government want Local Authorities to build on the best of what exists now and have the autonomy and tools to drive the creation of a new culture of informal learning. Local Authorities will work with others to provide five core elements to underpin a strong local offer of informal learning:

**- Innovation:** public funds used flexibly, complementing private and third sector investment effectively, enabling learning opportunities to thrive by building new partnerships and connections

**- Universal access:** all adults able to shape and access the learning activities they want for personal development and fulfilment wherever they live, whatever their qualifications and income

**- Targeted support:** those in most financial need given greatest support. In relation to taught courses, most adults should contribute in part or in full to the cost of their learning wherever it is provided, and local areas should actively use fee collection to reinvest in extending the reach of what's on offer

**- Collaboration:** a wide range of partners and services working in partnership, aligning funds where appropriate, to maximise the scope for offering high quality, inspiring learning opportunities, increasing choice and helping adults move from one learning opportunity to another

**- Promotion:** the maintenance of good, up-to-date information on informal learning opportunities to be freely and openly available to local communities.

The Government wants Local Authorities to create strong partnerships in order to implement their local vision of informal adult learning.

In Rotherham there are already strong existing partnerships which can be built on; the Adult Learning and Skills Strategy Group and the Rotherham Adult Learning Partnership already bring together representatives from statutory, public, private and voluntary and community sector organisations. RMBC's Community Learning team already delivers a substantial amount of Adult Safeguarded Learning through sub contracted provision. These existing local arrangements already provide a joined up local strategic approach but with the Local Authority taking on the role of Lead Accountable Body that will provide even more of an opportunity to promote key agendas, such as: community wellbeing; using learning to keep older and young citizens healthy; learning for citizenship and engaging more people in local democracy; supporting people to gain skills to move into work; and providing economic and social wellbeing in communities and families.

The Learning and Skills Council (LSC) and the Department for Business, Innovation and Skills (DBIS) will work with Local Authorities, Colleges of Further Education and a range of other stakeholders and partners over the next year to implement these proposals. Over the next few months they will initiate discussions with Local Authority nominees about funding allocations, partnership and good working practice, quality and inspection issues, data collection and developing a new National Indicator, and opportunities for teachers and facilitators. Following these discussions a further report will be prepared for the Cabinet Member for Children and Young People's Services.

### **8 Finance**

The total LSC funded Adult Safeguarded Learning for 2010 /2011 has been confirmed as £641,024:20. The funding from mainstream C&YP's revenue for 2009/2010 is £59,267:00.

### **9 Risks and Uncertainties**

In the publication of 'The Learning Revolution' the Government makes clear its commitment to supporting this area of work as they recognise how it can transform lives and boost the nation's wellbeing. However there are still areas of concern:

- The possible reallocation of funding for First Steps learning to the Further Education colleges
- A reduction in the number of progression opportunities for learners
- Less stringent quality standards for Adult Safeguarded Learning
- An overall reduction in the amount of funding available for adult learning

## 10 Policy and Performance Agenda Implications

Adult and family learning delivery contributes to the learning and achieving theme of the Community Strategy. In particular to the priorities of 'Increasing the employability of working age adults by reducing the number of adults lacking essential skills around using computers, reading, writing and maths' and 'maximise participation in adult learning particularly in disadvantaged communities'.

The last Ofsted inspection report makes reference to the positive contribution of the adult and family learning provision to the cross cutting issues of sustainable development, equalities and diversity and regeneration.

'The current action plan takes a broad approach to the adult learning agenda by creating and building sustainable learning by a range of providers in the community'.

'The service's arrangements for promoting and managing equality of opportunity and diversity are outstanding ...and RMBC is outstanding in meeting the needs and interests of learners'.

'The plan addresses regional and sub-regional priorities to create enthusiasm for learning and improving basic skills and skills for everyday work ...removing barriers to learning for many communities in areas of high social deprivation'.

## 11 Background Papers and Consultation

DBIS letter 8<sup>th</sup> October 2009

DBIS letter 9<sup>th</sup> February 2010

LGA The Councillors' concise guide to Informal Adult Learning and Lead Accountable Body status – 3 Feb 2010

White Paper 'The Learning Revolution' March 2009

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**ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS**

1.	<b>Meeting:</b>	<b>Cabinet Member for Health and Social Care</b>
2.	<b>Date:</b>	<b>12<sup>th</sup> April 2010</b>
3.	<b>Title:</b>	<b>Adult Social Care 3rd Quarter (October to December) performance report for 2009/10</b>  <b>All Wards Affected</b>
4.	<b>Programme Area:</b>	<b>Neighbourhoods and Adult Services</b>

**5. Summary**

This report outlines the 2009/10 Quarter 3 Key Performance Indicator (KPI) results for the Adult Social Care elements of the Directorate.

**6. Recommendations**

**That Cabinet Member is asked to note the results and the remedial actions in place to improve performance**



## 7. Proposals and Details

At the end of Quarter 3, 75% of our Key Performance Indicators (KPIs) remain on target. There is no change compared with the last quarter.

Quarter 3 results can be seen in Appendix 'A' where a triangle indicates 'off target', a star indicates 'on target', and a question mark indicates that data is not available yet or targets have not currently been set.

The following performance measures did not achieve their quarter 3 targets;

- **NAS 1 (PAF D40) Percentage of clients receiving a review**

Performance levels have improved since September and the indicator is currently rated as 'on target'. Following a performance clinic on 27<sup>th</sup> November, a recovery plan was put in place integrating actions agreed at November DMT/SMT and outstanding actions from previous clinics. As at Quarter 2 we had reviewed 2420 clients. As a result of the recovery plan this increased to 3748 client by Quarter 3 and, as at 24<sup>th</sup> March, we have reviewed 6314 clients. This represents 79.02% of our service user population which is 2.02% above year end target and is our best ever performance score for reviews. This places us above the national average. At current rates of improvement we anticipate that we will be in the upper quartile by year end.

We have met with RDaSH (Rotherham, Doncaster and South Humberside Mental Health Trust) Directors and agreed a plan to deliver improvements in Quarter 4. A member of our Performance team has been working closely with their managers and information department to implement the actions and, as at 24<sup>th</sup> March, RDASH are performing at 89.86%.

The following performance management actions are in place to improve performance;

- Team managers to authorise all reviews so that they can be counted. Provision has been made for weekend working in order to achieve this.
- Arrangements made for telephone reviews to take place on all eligible clients and initial telephone reviews to take place on new service users.
- Provider reviews to be undertaken during quarter 4 and counted for clients in residential and nursing care placements.
- RDASH are updating their records to ensure all reviews undertaken this year are counted and are working towards reviewing all their clients by 31<sup>st</sup> March.

- **NI136 (Vital Signs 3) People supported to live independently through social services (LAA)**

This indicator includes a combination of people that are receiving care managed services following a community care assessment and those people that are receiving services from the voluntary sector.

At the end of Quarter 3 we were helping 5,737 service users to live at home, which is an improvement of 165 since the 2<sup>nd</sup> quarter. This score includes this year's voluntary sector figures plus people currently in receipt of an assessed care package. The voluntary sector has helped an additional 114 clients to live in the community this year. We have however lost 209 clients this year due to the closure of Meals on Wheels, Laundry and Bathing services and have also seen a reduction in Mental Health services due to data quality work undertaken by RDASH. The combined effect on performance has seen a decrease during Quarter 4 and, as at 24<sup>th</sup> March, we are helping 5,626 service users.

To achieve this year's target we would need to help approximately 1,800 extra service users by the end of the year. The way this indicator is measured excludes a lot of our prevention activity. So for example, the 2,500 telecare installations that we have undertaken this year and the provision of 14,000 items of equipment are not included within the definition. These are national issues which are being debated pending development of the new National Indicator Set which will be implemented during 2011/12.

The following performance management actions are in place to improve performance;

- Intermediate Care and Community Rehabilitation services will be captured within the indicator (these are currently not included).
- Include Occupational Therapy equipment within the indicator as other Councils do (these are currently not included).
- Mental Health action plan in place which will ensure caseloads are up to date and all clients are included within the score.

- **NI 132 Timeliness of social care assessments**

Performance has improved since the 2<sup>nd</sup> quarter of the year. Based upon the actions we have put in place following a corporate performance clinic held on 27<sup>th</sup> November, we predict that we will achieve our year end target. As at 24<sup>th</sup> March 77.03% of new clients have had their assessment completed within 28 days of contacting us and actions in place to achieve 80% by year end. This places us in the next quartile banding when compare to last year's outturn.

There has been a significant amount of management action undertaken on this performance indicator. We have restructured our Intake Teams to provide a more streamlined process for customers. We have been targeting resources to reduce the backlog of new assessments which was created last year following a knock on effect of prioritising a series of high profile safeguarding investigations. Weekly performance clinics have been put in place to recover our performance levels. Additionally RDaSH, who were one of the poor performing elements of the services, have put an action plan in place and performance has improved since last quarter.

The following performance management actions are in place to improve performance;

- Weekly report sent to all managers showing assessments due in the week ahead.
- Daily email identifying current performance and new cases outside the waiting time.
- Learning Disability service to look at case studies and how improvements can be made.
- Each social worker has been given a target of 4 countable pieces of activity per week and weekly performance monitoring is in place.
- Diary Management – All Team Managers to use electronic diaries and include tasks.
- Team meetings include Performance as a standing agenda item.
- Tight monitoring of contact details recorded by Assessment Direct to speed up the time taken from initial contact to the start of the assessment.
- Mental Health action plan is in place and they aim to carry out 100% of assessments within 28 days between October and March.

- **NI 133 (Vital Signs 13) Acceptable waiting times for care packages**

Performance has deteriorated since the 2nd quarter of the year with the amount of care packages being arranged within 28 days decreasing from 86.59% to 85.48%. This has improved during Quarter 4 and, as at 24<sup>th</sup> March, is at 89.77% with a target of 92%. This represents 1,201 care packages out of a total of 1,337 that have been put in place during the year.

Achieving target will place us above the national average, move us up one quartile when compare to last year's outturn and will place us into the top quartile of our comparator group.

We have held performance clinics to understand the reasons for delays which have identified areas for improvement. We are confident that the year end target will be achieved by implementing the following performance management actions;

- Clarification has been sought from Department of Health around measuring waiting times for transitional cases from CYPS into Adult Services. Clarification has been sought on what is required for appropriate measurement of Direct Payments. As a result improvements have been made in the score for Learning Disabilities.
- Clarification to guidance has been sought for cases where the delay is out of our control, i.e. client is in hospital or care is required at a future date outside 28 days.
- We will monitor and reduce waiting times from assessment to request being sent to brokerage.
- Two new providers have been commissioned to reduce the domiciliary care waiting list.
- Data quality exercise taking place to reduce the amount of recording errors on the social care records.
- Mental Health action plan is in place. Between October and March, they aim to have 100% of service users newly assessed and accepted for specialist care to have a completed care plan within 10 working days of undertaking the assessment.

## 8. Finance

The Medium Term Financial Plan for 2009/10 contains £1.719m of budget disinvestments which will impact on a number of performance indicators in the short term. Capacity has focused on assessing and reviewing customers during the decommissioning of the meals on wheels, laundry and bathing services. This has had a negative effect on NI 136 (people supported by the Council to live independently). At the same time there was an investment of £4.438m into adult social care which includes additional resources for people with a physical disability, people with mental health needs, carers' breaks and for new social work assessment resources. This has resulted in improvements to a range of indicators including NI 132 (timeliness of new assessments), NI 133 (timeliness of new care packages) and NI 136 (people supported by the Council to live independently).

## 9. Risks and Uncertainties

The main risk is that performance levels do not improve at a rate that is higher than our comparator average. This will be mitigated through the application of our performance management framework which CQC have described as 'works'. Each performance indicator is owned by a Manager and there is a robust action plan in place to support improvement. Performance is closely monitored at weekly performance clinics and reported monthly to the Performance Meeting of the Directorate Management Team (DMT).

There has been some uncertainty relating to the quality and accuracy of the performance of mental health services. Mental health services are managed in partnership with RDaSH (Rotherham, Doncaster and South Humberside Mental Health Trust) and RDaSH have been unable to satisfy information requirements for the Council and NHS Rotherham for several years. 'Improving the availability of mental health data' has been a recommendation made by the Care Quality Commission (formerly CSCI) for the last two consecutive years.

We have been working with them on an action plan and RDaSH have delivered reports on all performance indicators since the second quarter of 2009/10. The steps that we have taken so far have been included within a 'good practice' case study which supported the Council achieving a 'performing strongly' rating during the 2009 data quality assessment. However, getting the data is only one part of the story and we have new management arrangements in place to improve the accuracy of the data and to ensure performance results improve.

We have met with the RDASH directors during quarter 4 to put remedial actions in place for 2009/10 outturns. Since the meeting we have been working closely with RDASH to rectify data quality issues and put processes in place to deliver against our targets. We are integrating RDASH actions into our performance indicator action plans for 2010/11 and have a meeting in April to discuss and sign off our plans. Performance is now monitored on a weekly basis and weekly performance meetings are taking place. This will continue into the new year until we are satisfied that the actions are working.

There are three indicators where targets have not been set yet. Two of these (NI149 and NI150) are owned by RDASH and there is no comparable data available to allow for a target to be set. The third (NAS 25) relates to safeguarding and we have changed our safeguarding recording practices to comply with new Department of

Health definitions. We expect these uncertainties to be resolved in the next financial year when we have a baseline and benchmarking data becomes available.

### **10. Policy and Performance Agenda Implications**

The Key Performance Indicator (KPI) suite this year includes a mixture of National Indicators and Local Indicators that are part of the LAA or have been identified as priorities for us in our Service Plan.

The new national performance indicators contribute to the Councils Comprehensive Area Assessment (CAA) and Local Area Agreement (LAA) processes and the Care Quality Commission's (CQC) Annual Review of Performance for Adult Social Care. Last year's review of social care included the following indicators as areas for improvement;

- Reviews (reference PAF D40),
- Timeliness of social care assessments (reference NI 132), and
- Timeliness of new care packages (reference NI 133).

### **11. Background Papers and Consultation**

The report has been discussed with Neighbourhoods and Adult Services Directorate Management Team. Appendix 'A' contains the performance results for the second quarter of 2009/10. The indicators rated 'on target' are shown as a star and those that are rated 'off target' are shown as a triangle alert.

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Key to symbols

▲	indicator rated 'off target'
★	indicator rated 'on target'
↑✓	indicator has improved
↓✘	indicator has deteriorated

Commissioning and Partnerships (Chrissy Wright)													
Line no	Current Performance	Measure	Good Performance	2008/09 Baseline	Jun '09 Result 1st Quarter	Sep '09 Result 2nd Quarter	Dec '09 Result 3rd Quarter	Latest Position (24th March)	This time last year	D.o.T. from same time last year	2009/10 Target	Responsible Manager	Outcomes Framework
1.	★	NI 130 (Vital Signs 17) Social care clients receiving Self Directed Support	Higher is better	370.79	233.22	255.25	286.77	8.63%	Started measuring in Oct '08		300	Richard Warring	4
2.	★	NI 141 Percentage of vulnerable people achieving independent living (LAA)	Higher is better	87.35%	89.32	89.32%	85.76%	Q4 Data available in May	82.81%	↑✓	80%	Janine Parkin	2
3.	★	NI 142 Percentage of vulnerable people who are supported to maintain independent living	Higher is better	97.47%	99.27	99.27%	98.2%	Q4 Data available in May	97.95%	↑✓	98%	Janine Parkin	2
Health and Well Being / Assessment and Care Management (Shona McFarlane)													
Line no	RAG Status	Measure	Good Performance	2008/09 Baseline	Jun '09 Result 1st Quarter	Sep '09 Result 2nd Quarter	Dec '09 Result 3rd Quarter	Latest Position (22nd March)	This time last year	D.o.T. from same time last year	2009/10 Target	Responsible Manager	Outcomes Framework
4.	★	NAS 1 (PAF D40) Percentage of clients receiving a review	Higher is better, 75<=100 is best	71.82%	17.92%	35.59%	49.43%	79.02%	41.72%	↓✘	77%	Lucy Pullen	1
5.	▲	NI 132 (Vital Signs 12) Timeliness of social care assessment (all adults)	Higher is better	70.37%	69.69%	69.23%	70.3%	77.03%	78.82%	↓✘	80%	Mark Joynes	4
6.	▲	NI 133 (Vital Signs 13) Acceptable waiting times for care packages (now includes 18-64 age group)	Higher is better	New definition	91.42%	86.59%	85.48%	89.77%	Started measuring in May '09		92%	Mark Joynes	4
7.	▲	NI 136 (Vital Signs 03) People supported to live independently through social services (LAA)	Higher is better	2342.27	2321	2343	2399.6	2363	Started measuring in Feb '09		3149	Lucy Pullen	2
8.	★	NI 146 (Vital Signs 07) Adults with learning disabilities in employment	Higher is better	5.63%	0.30%	0.87%	2.7%	5.02%	Started measuring in Oct '08		4%	Jackie Bickerstaffe	6
9.	★	NAS 24 Number of safeguarding alerts	Higher is better	526	120	300	462	567	257	↑✓	600	Sam Newton	7
10.	★	NAS 5 Average waiting time for an OT assessment (calendar days)	Lower is better	104	21	18	17	16	Started measuring in Dec '08		28	Jill Wilkinson	2
11.	★	NI 125 (Vital Signs 04) Achieving independence for older people through rehabilitation / intermediate care	Higher is better	78.79%	84.06%	83.11%	84.26%	83.90%	Started measuring in Oct '08		81%	David Stevenson	2
12.	★	NI 131 (Vital Signs 10) Delayed transfers of care from hospitals	Lower is better	3.74	5.78	6.49	10.01	10.47	2.99	↓✘	10	Mark Joynes	1
13.	★	NI 135 (Vital Signs 18) Carers receiving needs assessment or review and a specific carers service, or advice and information (LAA)	Higher is better	24.17%	10.78%	15.86%	21.39%	27.99%	15.19%	↑✓	25%	Mark Joynes	2
14.	★	NI 145 (Vital Signs 05) Adults with learning disabilities in settled accommodation	Higher is better	100%	10.01%	24.34%	42.61%	65.13%	Started measuring in Oct '08		60%	Jackie Bickerstaffe	2
15.	★	NAS 25 Safeguarding cases completed referrals	Higher is better	413	50	72	100	114	New definition		tbc	Sam Newton	7
16.	★	NAS 26 Number of staff trained in safeguarding across all partner agencies	Higher is better	1195	Not reported in quarter 1	511	949	1030	Started measuring in Mar'09		1000	Sam Newton	7
17.	?	NI 149 (Vital Signs 06) Adults receiving secondary mental health services in settled accommodation	Higher is better	TBC	Not reported in quarter 1	32.24%	Currently monthly updates are unavailable	Waiting for updated figures from RDASH	Started Measuring Aug '09		tbc	Graeme Fagan	2
18.	?	NI 150 (Vital Signs 08) Adults receiving secondary mental health services in employment	Higher is better	TBC	Not reported in quarter 1	3.42%	Currently monthly updates are unavailable	Waiting for updated figures from RDASH	Started Measuring Aug '09		tbc	Graeme Fagan	6





<b>ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS</b>
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<b>1</b>	<b>Meeting:</b>	<b>Cabinet Member for Health and Social Care</b>
<b>2</b>	<b>Date:</b>	<b>Monday 12 April 2010</b>
<b>3</b>	<b>Title:</b>	<b>Adult Services Revenue Budget Monitoring Report 2009/10.</b>
<b>4</b>	<b>Directorate :</b>	<b>Neighbourhoods and Adult Services</b>

## **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 February 2010.**

The forecast for the financial year 2009/10 is a balanced budget after achievement of a number of management actions to offset service pressures which have occurred during the year.

## **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 February 2010 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 £72.7m. 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 previous budget monitoring reports for Adult Services have identified underlying pressures of £2.1m. However after taking account of a number of identified savings and delivery of a number of management actions these pressures have reduced and there is a forecast balanced outturn by the end of the financial year.

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 (+£599k).
- Increase in residential and nursing care short stays over and above approved budget for clients with a physical and sensory disability (+£66k).
- Independent sector home care provision for Physical and Sensory Disability clients has increased by an additional 1,112 hours since April 2009, a further 74 clients are now receiving a service. This is resulting in an overspend of £381k 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 (+£484k), partially offset 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 (+£277k), laundry (+£145k) and the bathing service (+£40k).
- Increase in costs of Occupational Therapist contracts (+£120k)
- Continued pressure on the cost of day care transport provision for Learning Disability Day care clients reduced by planned delays in recruitment to vacant posts (+£46k).

7.1.4 However, the above pressures have been reduced by :-

- Additional income from continuing health care funding from NHS Rotherham (-£431k).
- Overall underspend within Learning Disabilities Supported Living schemes mainly due to planned delays in the implementation of new schemes (-£188k).

- Savings within independent residential care due to an increase in income from property charges (-£672k) 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).
- Underspend within In house Transport Unit due to a reduction in vehicle leasing costs and additional income (-£150k).
- Slippage in recruitment to a number of new posts (-£76k) where additional funding was agreed within the 2009/10 budget process.

7.1.5 The majority (93%) of identified management actions have 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	4,525	15,192
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
January	53,142	0	53,142
February	47,002	0	47,002
<b>Total</b>	<b>398,511</b>	<b>31,420</b>	<b>429,931</b>

## 7.2 Current Action

To further mitigate the financial pressures within the service all vacancies continue to require the approval of the Directorate Leadership Team.

There has also been 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 includes an estimate for the potential costs in respect of any possible voluntary early retirements and redundancies associated with the decommissioning of in-house services but excludes any provisions for any potential claims against the Directorate.

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.

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**ADULT SOCIAL SERVICES  
REVENUE BUDGET MONITORING SUMMARY**

Last Net Projected Variance £000	Directorate/Service Area	EXPENDITURE/INCOME TO DATE (As at 28 February 2010)									PROJECTED OUT-TURN						Revised Financial RAG Status	Note
		Expenditure			Income			Net			Net							
		Profilled Budget £000	Actual Spend to date £000	Variance (Over (+) / Under (-) Spend) £000	Profilled Budget £000	Actual Income to date £000	Variance (Over (+) / Under (-) Recovered) £000	Profilled Budget £000	Actual Net Expenditure to date £000	Variance (Over (+) / Under (-) Spend) £000	Annual Budget £000	Proj'd out turn £000	Variance (Over (+) / Under (-) Spend) £000	Current Financial RAG Status	Financial Impact of Management Action £000	Revised Projected Year end Variance Over(+)/Under(-) spend £000		
	<b><u>Commissioning, Quality &amp; Performance</u></b>																	
(78)	Commissioning & Partnerships	13,272	13,350	78	(10,055)	(10,208)	(153)	3,217	3,142	(75)	5,094	5,010	(84)	Green	0	(84)	Green	1
	<b><u>Assessment &amp; Care Management</u></b>																	
(403)	Older People Assessment & Care Management	32,463	33,046	583	(11,395)	(12,315)	(920)	21,068	20,731	(337)	24,203	23,836	(367)	Green	0	(367)	Green	2
279	Physical Dis Assessment & Care Management	6,256	6,573	317	(1,214)	(1,264)	(50)	5,042	5,309	267	6,112	6,436	324	Red	0	324	Red	3
(124)	<b>Assessment Care Management</b>	38,719	39,619	900	(12,609)	(13,579)	(970)	26,110	26,040	(70)	30,315	30,272	(43)		0	(43)		
	<b><u>Independent Living</u></b>																	
(25)	Older People Independent Living	2,930	2,896	(34)	(277)	(265)	12	2,653	2,631	(22)	1,669	1,643	(26)	Green	0	(26)	Green	4
	<b><u>Health &amp; Well Being</u></b>																	
820	Older People Health & Well Being	15,673	16,346	673	(2,630)	(2,642)	(12)	13,043	13,704	661	15,662	16,406	744	Red	0	744	Red	5
(544)	Learning Disabilities	25,200	24,973	(227)	(10,912)	(11,211)	(299)	14,288	13,762	(526)	15,658	15,085	(573)	Green	0	(573)	Green	6
(7)	Mental Health	5,050	5,203	153	(1,417)	(1,586)	(169)	3,633	3,617	(16)	4,292	4,274	(18)	Green	0	(18)	Green	7
42	<b>Total Adult Social Services</b>	100,844	102,387	1,543	(37,900)	(39,491)	(1,591)	62,944	62,896	(48)	72,690	72,690	0		0	0		

**Reason for Variance's)**

<b>NOTES</b>	<b>Reasons for Variance's) and Proposed Actions</b>	<b>Performance</b>
	<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>
	<b>Main Reasons for Variance</b>	
1	<p><b>Commissioning &amp; Partnerships</b></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><b>Physical Disabilities</b></p> <p>Performance indicator C29 - physical disability users helped to live at home (2009-10 Target = 3.2). Current performance = 2.91 against a monthly target of 3.18, below target.</p>
2	<p><b>Assessment and Care Management</b></p> <p><b>Older Peoples Services (Independent)</b></p> <p>Slight overspend on placement costs offset by income generated by additional admissions and increased income from property charges and Continuing Health Care Income (-£671k). Reduced spend on intermediate care spot beds (-£40k). Current forecast overspend on Direct Payments (+£335k) 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 (+£45k), increase in running cost for CRT transport (+£10k). Increased demand and costs on independent sector homecare (+£240k) as a result of shifting the balance. Net underspend on assessment Social Work staff due to vacant posts (-£250k). Additional pressure on Occupational Therapy costs (+£60k). Former management actions (-£100k) in respect of slippage on developing community support services for people with dementia now fully achieved.</p>	<p><b>Residential/Nursing Care</b></p> <p>Performance indicator NAS 3 - Older People in residential care. ( 2009-10 Target = 237) Current performance = 180.1 against a monthly target of 237.8, exceeding target (low is better).</p> <p><b>Home care</b></p> <p>Performance Indicator C32 - Older People helped live at home (2009-10 Target = 96.32) Current performance = 64.72 against a monthly target of 94.08, below target.</p> <p><b>Direct Payments</b></p> <p>Performance Indicator N130 - Self Directed Support (all clients), (2009-10 Target = 300) Current performance = 309.08 against a monthly target of 289, exceeding target.</p>
3	<p><b>Physical &amp; Sensory Disabilities</b></p> <p>Pressure on Home Care Independent sector (+£381k) due to increased hours (+ 1112 hours), more expensive care packages, including backdated costs. Pressure on Direct Payments budgets as number of clients increase (37 new care packages since April (+£149k), further analysis being undertaken Pressures on Residential and Nursing Care due to overspend on short stays (+£66k) offset by additional Continuing care income on supported living schemes (-£65k). Additional cost pressure on Occupational Therapists (+£60k). 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).</p>	
4	<p><b>Independent Living</b></p> <p>Forecast underspend on employee costs within Extra Care Housing (-£36k) Underspend on Assessment Direct staffing (-£14k) offsetting the overspend on Rothercare (+£51k).</p>	
5	<p><b>Health and Well Being</b></p> <p><b>Older Peoples Services (In House)</b></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 (+£370k). Slippage on meeting agreed savings for Laundry Service (+£145k), Meals on Wheels service (+£232k) &amp; Bathing service (+£40k) agreed in budget setting process. Potential costs of Voluntary Early Retirements (+£60k). Forecast overspend on in-house home Care due to slippage in achieving shifting the balance by end March 2009 (+£359k) plus more contract hours than demand. Overspend on employee costs within Home Care operations team (+£90k), 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 (-£76k) to reduce overall pressures. Underspend on Transport budgets in respect of reduced lease costs running costs and additional income (-£150k).</p>	
6	<p><b>Learning Disabilities</b></p> <p>Underspend on independent residential care including additional Continuing care income (-£418k) from health, slippage on employee costs (-£102k) slippage on supported living schemes (-£170k), Underspend reduced by continuing pressure on day care services (+£67k) mainly on external transport hire costs and agency staff costs (+£49k).</p>	
7	<p><b>Mental Health</b></p> <p>Projected overspend on residential and nursing care (+£66k) - net 6 new admissions this year, increase in cost of supported living (+£14k). 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 &amp; alcohol placements (+£35k) plus additional income from Supporting People (-£29k).</p> <p><b>Finance Performance Clinics</b></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**

<b>1.</b>	<b>Meeting:</b>	<b>Cabinet Member for Health and Social Care</b>
<b>2.</b>	<b>Date:</b>	<b>Monday 12 April 2010</b>
<b>3.</b>	<b>Title:</b>	<b>Adult Services Capital Budget Monitoring Report 2009/10</b> - All Wards affected
<b>4.</b>	<b>Directorate:</b>	<b>Neighbourhoods and Adult Services</b>

**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 18 March 2010 and the projected final outturn position for each scheme.

Actual expenditure to the mid March 2010 was £464k against a revised programme of £1.2m for 2009/10. There is a forecast underspend of around £200k due to slippage in a number of projects, however, any balance of funding can be carried over into 2010-11 until the capital project is completed. Capital 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 landscaping costs, 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.

A new scheme to refurbish the respite centre at Treefields funded from the Councils Strategic Maintenance Investments fund as now commenced 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. 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 (£92k) to fund the Adults Integrated Solution as part of introducing electronic care management. The integrated solution will be fully completed by the end of March. The next stage of developing the IT infrastructure to improve systems and data quality is currently being discussed and the balance of funding will be carried forward into 2010-11.

## **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 18th March 2010

Expenditure Code	Scheme description	Approved Capital PROGRAMME 2009/10 £	Actual Expenditure 18/03/10 £	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			
	<b>Older People</b>											
UXB149	Adult's Older Peoples Modernisation Strategy	230,528	70,480	200,000					230,528	A	1	
UXB150	Assistive Technology (NHSR)	11,000	11,000	11,000				11,000		A	2	
UXB150	Assistive Technology (RMBC)	178,545	21,295	178,545		178,545	DoH Grant			A	2	
UXB151	Residential Care - Improving the Environment	13,585	8,211	13,585		13,585	DoH Grant			G	3	
	<b>Learning Disabilities</b>											
UXL128	Addison Day Centre/Parkhill Lodge	1,761	0	1,761				1,761	0	G	4	
UXL135	LDDF for Supported Living	5,548	0	5,548				5,548	0	A	5	
	<b>Strategic Maintenance Investment Programme</b>											
UXZ004	Addison Day Centre - Alterations	23,728	0	23,728					23,728	A	6	
UXZ011	Addison Day Centre - Phase 2	250,000	242,111	250,000					250,000	G	7	
UXZ012	Treefields - refurbishment	110,000	406	110,000					110,000	A	8	
	<b>Mental Health</b>											
UXH098	Cedar House	12,358	0	12,358					12,358	G	9	
UXH101	Supported Capital Expenditure	150,000	64,024	100,000					150,000	A	10	
UXH102	Mental Health Single Capital Pot	0	0	0					0	G	11	
	<b>Management Information</b>											
UXT003	Social Care IT Infrastructure Capital Grant	177,017	46,571	112,854		177,017	DoH Grant			A	12	
	<b>General</b>											
UXU001	Adult Social Services Single Capital Pot	30,000	0	0	30,000					A	13	
<b>TOTALS</b>		<b>1,194,070</b>	<b>464,098</b>	<b>1,019,379</b>	<b>30,000</b>	<b>369,147</b>		<b>18,309</b>	<b>0</b>		<b>776,614</b>	

**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. Majority of Health funding now 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. Spending plans being reviewed.
- 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 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 already carried forward to 2010/11 - earmarked for Millenium Day Centre.