

CABINET MEMBER FOR ADULT INDEPENDENCE HEALTH AND WELLBEING

**Venue: Town Hall,
Moorgate Street,
Rotherham
S60 2RB**

Date: Monday, 14th March, 2011

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
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 meeting held on 28th February, 2011 (Pages 1 - 4)
5. Adult Services Revenue Monitoring (Pages 5 - 11)

CABINET MEMBER FOR ADULT INDEPENDENCE HEALTH AND WELLBEING
Monday, 28th February, 2011

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

H62. MINUTES OF MEETING HELD ON 14TH FEBRUARY, 2010

Consideration was given to the minutes of the previous meetings held on 14th February, 2011.

Resolved:- That the minutes of the previous meeting held on 14th February, 2011, be approved as a correct record.

H63. KEEPING WARM IN LATER LIFE (KWILLT)

Jo Abbott, Consultant in Public Health, and Catherine Homer, Health Promotion Specialist, gave a powerpoint presentation on the above research project as follows:-

Why bother in Rotherham?

- Seasonal excess winter deaths – is there a problem?

Research Project

- Semi-structured, face to face indepth interviews
- Recruited 30 older people (aged 55-95) through social groups, mapping and snowball sampling e.g. VAR
- Tiny tag data logger used prior to interviews
- 25 Health and Social care staff recruited from RMBC and the NHS
- 5 focus groups with service heads and front line staff and older people from Anchor Staying Put, Tassibee and the Salvation Army

What have we learnt so far?

- Staff and older people identified similar barriers to keeping warm including
 - Use of technology
 - Money
 - Visibility
 - Disjointed systems (organisations, care staff, engineers etc.)
- Poor understanding of technology: heating
 - People do not understand how to use their boilers
 - Set the timers
 - Temperatures
 - Buttons are too small
 - Digital screens are too small
 - “Can’t see” gas/ electric
 - Choose to use other more expensive forms of heating
- Poor understanding of technology: banking
 - Older people do not understand modern banking or billing:
 - Direct debits (usually associated with a cheaper tariff)
 - Internet banking (virtual/”can’t see”)

- Billing information from suppliers unclear – tariff
- Family and community support
 - People may be socially integrated into their community but they do not necessarily know the relationship between keeping warm and good health
 - People are unaware of the correct temperature their house should be (21°C for main living area 18°C bedroom)
- Trust
 - Trust in who is providing the information
 - Local Council
 - NHS
 - Family and friends
 - Trust in technology
 - Lack of trust in private landlords
- Staff interviews
 - The mindset of older people:
 - “They get to the stage where they will switch it off (their heating), they will wrap up but they do not understand the importance of the house being warm because they have lived in conditions like that for many years when they were younger, damp cold houses and they do not realise the effect it can have on their health”
 - “Older people see it as a luxury. I do not think they see it has any bearing on their health”

What next for the project?

- Focus groups continue including 1 for Elected Members on 25th March, 2011
- A stakeholder event to look at solutions to be held in the summer
- Social marketing – getting the message across to older people and staff

What does it mean for us in health and local authorities

- It raises a few challenges for the months ahead for our services including
 - Implications of introducing “Green Deal”
 - Technology and “smart meters”
 - The mindset of staff and older people in Rotherham
 - Visibility and vulnerability
- Against a backdrop of a new Health and Social Care Bill and the introduction of Health and Wellbeing Boards within local authorities

Discussion ensued on the presentation with the following points raised:-

- The statistics had taken into account the past heavy industry in the area and the resultant respiratory diseases
- It was more than installing a new boiler but ensuring that the customer knew how to use it and that the control was situated in a position that could be reached
- Energy providers did not immediately refund any overpayment on Direct Debits
- Winter Fuel Allowance not used for its intended purpose

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- Work was needed with the banks and energy companies
- The stakeholder event would look at what the barriers were for the people of Rotherham

The Strategic Director of Housing and Neighbourhood Services stated that the statistics would be fed into the refresh of the Joint Strategic Needs Assessment so that actions would be commissioned to address the trends.

Resolved:- That the presentation be noted.

H64. "DO IT ROTHERHAM"

Catherine Homer, Health Promotion Specialist, reported that an event was to be held on 9th March, 2011, to celebrate the success of Rotherham's Healthy Weight Initiatives.

Rotherham's 2011 Public Health Annual Report and Joint Health and Wellbeing Strategy was based on the recommendations and 6 policy objectives from the Marmot Review. Whilst there was a lot of progress being made against all of the objectives, areas had been identified where, working smarter in a collaborative way, would create vital opportunities to address the wider determinants affecting healthy weight locally.

H65. CONFERENCE - "TOUGH TIMES, GOOD DECISIONS"

Resolved:- That the Cabinet Member (or substitute) be authorised to attend the "ToughTimes, Good Decisions" conference to be held at the ICC London ExCel on 19th-21st October, 2011.

H66. EXCLUSION OF THE PRESS AND PUBLIC

Resolved:- That, under Section 100A(4) of the Local Government Act 1972 the press and public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in Paragraph 3 of Part 1 of Schedule 12A to the Local Government Act 1972 (business/financial affairs.)

H67. IN-HOUSE RESIDENTIAL ACCOMMODATION CHARGES

The Director of Health and Wellbeing submitted proposals for increasing the charge to service users for the provision of in-house residential care for 2011/12.

In accordance with its statutory duty, the Council was required to set a maximum charge for residential accommodation it provided in local authority homes for:-

- Those residents who refused to provide details of their financial circumstances
- Those service users who had been financially assessed according to their liability to pay and as a result did not qualify for financial assistance towards their charges
- Those service users who were placed and financially supported by another

local authority

It was proposed that the maximum charge for all local authority residential care homes be increased by 1% (£5.00 per week). It was noted that this increase was below the current rate of inflation but in line with the Council's recommendations on levels of fee setting.

Resolved:- (1) That the charges set out in Appendix 1 of the report submitted be approved.

(2) That the charges be effective from April, 2011.

(3) That a further report be submitted on a possible further increase in line with the rate of inflation and the financial implications of such.

ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS
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1	Meeting:	Cabinet Member for Adult Independence Health & Well Being
2	Date:	Monday 14 March 2011
3	Title:	Adult Services Revenue Budget Monitoring Report 2010/11.
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 2011 based on actual income and expenditure to the end of January 2011.

The forecast for the financial year 2010/11 is an overall underspend of £717,000, against the revised approved net revenue budget of £71.3m. A significant part of the forecast underspend is due to an overachievement in the savings associated with the merger of the wardens and care enablers service. The response to voluntary severance has been higher than anticipated. Additional savings have been achieved through holding vacancies to facilitate redeployment of staff in support of the various structural reviews. There have also been an increasing number of residential care clients who are now receiving full funding through continuing health care. This has been underpinned by tight financial management within the service.

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 January 2011 for Adult Services.

7 Proposals and Details

7.1 The Current Position

7.1.1 The original approved net revenue budget for Adult Services for 2010/11 was £72.2m. 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 2010/11 budget setting process.

7.1.2 During 2010/11 a number of significant budget pressures emerged across the wider Council and as part of meeting these in year budget pressures, Adult Services have contributed a total of £868k savings from it's original approved budget (NAS Directorate £1.14m). These savings were approved by The Cabinet on 17 November 2010 and the revenue budget for Adult Services amended accordingly.

7.1.3 These savings included delaying the implementation of community based alternatives to residential care within Physical and Sensory Disabilities (£250k), increased levels of Continuing Health Care funding from Health (£500k) and efficiency savings within commissioning and training including a review of grant funding (£118k).

7.1.4 The table below summarises the forecasts against both the original and revised budgets:-

Service Area	Original Budget £000	Original forecast £000	Original Variation £000	Revised Budget £000	Revised forecast £000	Revised Variation £000
Commissioning & Partnerships	4,716	4,614	-102	4,598	4,513	-85
Assessment & Care Management	31,096	30,433	-663	30,446	30,026	-419
Independent Living	1,871	1,819	-52	1,871	1,645	-132
Health & Well Being	34,482	34,431	-51	34,382	34,396	-81
Total	72,165	71,297	-868	71,297	70,580	-717

7.1.5 The latest year end forecast shows there are a number of underlying budget pressures which are offset by a number of forecast underspends. The underlying pressures include:

- An overall forecast overspend within Older Peoples' Home Care Service (+£658k) mainly due to actual contract hours greater than activity (In House) plus increased demand for maintenance care within independent sector.
- There is also a pressure on independent home care within Physical and Sensory Disability Services (+£82k) due to a continued increase in demand. An additional increase of 71 new clients on service since April (+853 hours).
- Income shortfall in respect of charges within in-house residential care +£383k.
- Continued budget pressure on Learning Disabilities Day Care Transport (+£315k) due to an increase in demand and costs.
- Additional employee costs to cover vacancies and sickness within residential care (+225k).
- A forecast overspend on Direct Payments (+£349k) across all client groups. A net increase of 57 new clients since April.

7.1.6 These pressures have been offset by the following forecast underspends:-

- Forecast net underspend on Older People independent sector residential and nursing care due to placements less than planned (-25), additional continuing health care funded placements (+65) and income from property charges (-£599k).
- Continued underspend on employee costs within Extra Care Housing (-£271k) which is under review as part of the wardens and enabling care merger.
- Underspend within Transport Unit within employees and leasing costs plus additional income (-£148k).
- Forecast underspend within Learning Disabilities residential and nursing care due to admissions less than planned (-£528k).
- Additional Continuing Health Care Income plus a underspend on Supported Living Schemes within Physical and Sensory Disabilities (-£151k).
- Slippage on vacant posts within Assessment & Care Management (Older People and Mental Health, -£357k).
- Forecast underspend on Richmond Fellowship SLA (-£65k) as clients move to Direct Payments.
- Underspend within Mental Health Residential and Nursing Care (-£192k) mainly due to increase in income from health.
- Slippage on developing Adult placement scheme within Physical and Sensory disabilities has resulted in a forecast underspend of -£150k.
- Vacancies during the year within the Safeguarding team (-£60k).

The latest forecast outturn includes forecasts against the savings and investments agreed as part of the budget setting process and excludes any costs associated with Voluntary Early Retirements and Voluntary Severance.

7.1.7 For the period April to January 2011 total expenditure on Agency staff for Adult Services was £314,944 (of which £37,503 was off contract). This compares with an actual cost of £392,305 for the same period last year (of which £43,746 was off contract).

The main costs were in respect of residential care and assessment and care management staff to cover vacancies and sickness. There has been no expenditure on consultancy during the year.

7.1.8 Actual expenditure to the end of January 2011 on non-contractual overtime for Adult Services was £284,987, broken down as follows:-

- Assessment and Care Management £7,467.
- Health and Well Being £277,520.

The actual costs of both Agency and non contractual overtime are included within the financial forecasts.

7.1.9 The forecast also excludes any additional income from NHSR in respect of additional funding announced by the Government for the support of social care. In October 2010 the Department of Health announced an additional £70m would be allocated to Primary Care Trusts nationally to promote better services for patients upon discharge from hospitals. In January 2011 a further national allocation of £162m was allocated to Primary Care Trusts for spending on social care services that would benefit the NHS during the winter period and required that this should be transferred to Council's under section 256 of the NHS Act 2006. Negotiations are taking place with NHSR to determine the most appropriate way of utilising this funding in 2010-11 and beyond.

7.2 Current Action

To mitigate any further financial pressures within the service, budget meetings with Service Directors and managers continue to be held on a monthly basis to monitor financial performance against the revised approved budget and ensure expenditure is within this revised budget.

8. Finance

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 both against original approved budget and the revised budget approved by The Cabinet.

9. Risks and Uncertainties

The underlying pressures within the service continue to be reviewed and closely monitored. The report includes forecasts against the savings approved as part of the budget setting process which include increasing fees and charges, review of management structures, review of the cost of placements within physical and sensory disabilities and day care services within Learning disability services and the achievement of the corporate savings targets in respect of agency staff, printing, mileage etc.

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 24 February 2010 –Proposed Revenue Budget and Council Tax for 2010/11.
- The Council's Medium Term Financial Strategy (MTFS) 2008-2011.
- 2010-11 Budget Report to The Cabinet – 17 November 2010.

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

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SUMMARY												
PROJECTED OUT-TURN AS AT 31 JANUARY 2011												
Last Reported Projected Net Variance as at 31/12/2010 £000	Service Division	Net Expenditure							Financial Impact of Management Action £000	Revised Projected Year end Variance Over(+)/Under(-) spend £000	Revised Financial RAG Status	* Note
		Original Budget £000	Proj'd out turn £000	Variance (Over (+) / Under (-) Spend) to Original Budget £000	Revised Budget £000	Proj'd out turn £000	Variance (Over (+) / Under (-) Spend) to Revised Budget £000	Current Financial RAG Status £000				
(85)	<u>Commissioning, Quality & Performance</u>	4,716	4,614	(102)	4,598	4,513	(85)	Green	0	(85)	Green	1
	<u>Assessment & Care Management</u>											
(105)	Older People Assessment & Care Management	24,080	23,783	(297)	23,680	23,425	(255)	Green	0	(255)	Green	2
(152)	Physical Dis Assessment & Care Management	7,015	6,650	(365)	6,765	6,601	(164)	Green	0	(164)	Green	3
(257)	Total Assessment Care Management	31,095	30,433	(662)	30,446	30,026	(419)		0	(419)		
(48)	<u>Older People Independent Living</u>	1,871	1,819	(52)	1,777	1,645	(132)	Green	0	(132)	Green	4
	<u>Health & Well Being</u>											
523	Older People Health & Well Being	13,904	14,210	306	13,998	14,448	449	Red	0	449	Red	5
(362)	Learning Disabilities	16,010	15,766	(244)	15,910	15,570	(339)	Green	0	(339)	Green	6
(161)	Mental Health	4,568	4,455	(113)	4,568	4,378	(191)	Green	0	(191)	Green	7
0	Total Health & Well Being	34,482	34,431	(51)	34,476	34,396	(81)		0	(81)		
(390)	Total Adult Services	72,164	71,297	(867)	71,297	70,580	(717)	Green	0	(717)		

Reason for Variance(s), Actions Proposed and Intended Impact on Performance

NOTES Reasons for Variance(s) and Proposed Actions

or under performance against income targets) and actions proposed intended to address budget variances on Key Performance

	<p><u>Main Reasons for Variance</u></p>
1	<p><u>Commissioning & Partnerships</u></p> <p>Pressures on unfunded posts are being offset by vacancies, secondments and Voluntary Early Retirements approved as part of the review of Policy and Performance. Government announcement to cut Supporting People Admin grant (£162k) has been contained within procurement process and non recruitment to vacant posts.</p>
	<p><u>Assessment and Care Management</u></p>
2	<p><u>Older Peoples Services (Independent)</u></p> <p>Overspends on Independent Sector Home Care budget (+£447k) and Direct Payments (+£120k). Underspend on independent residential and nursing care due to placements less than forecast (-25) and additional income from health and property charges (-£599k). Slippage on recruitment to vacant posts within Assessment and Care Management (-£298k). Overspend on Fast Response employee costs (+£60k)</p>
3	<p><u>Physical & Sensory Disabilities</u></p> <p>Slippage of establishing Shared Lives Scheme (-£150k) Continuing health care income on supported living scheme at Rig Drive (-£66K) and underspend on Crossroads contract (-£85k). Pressure on Independent Sector domiciliary care (+£82K) due to continue increase in demand (additional 71 clients = 853 hours since April) Further demand for Direct Payments (net increase 23 clients since April) reduced by one off income from Supporting People (+£87k).</p>
4	<p><u>Independent Living</u></p> <p>Forecast additional income within Rothercare Direct (-£122k) plus slippage on vacant posts within Extra Care Housing (-£11k).</p>
	<p><u>Health and Well Being</u></p>
5	<p><u>Older Peoples Services (In House)</u></p> <p>Forecast shortfall against income budget for In house Residential care (+£383k) plus overspend on employee costs due to agency and sickness cover (+£225k). Continue overspend on In House Home Care employees costs and non pay (+£211k) due to contract hours being greater than hours delivered plus a reduction in average income from clients plus overspend on Home Care Operations team (+£70k). Underspend on Extra Care Housing costs (-£271k). Forecast underspend on Transport (-£148k) due to additional income and savings on leasing costs.</p>
6	<p><u>Learning Disabilities</u></p> <p>Slippage on vacant posts due to reviews and voluntary early retirements (-£60k). Recurrent overspend against budget on day care transport (+£315k). Admissions to residential care less than forecast plus additional health funding (-£528k). Underspend on Direct Payments (-£31k)</p>
7	<p><u>Mental Health</u></p> <p>Projected underspend on residential care due to additional discharges (-£192k) . Underspend on Assessment & Care Management due to vacancies (-£59k) Projected overspend on Direct Payments (+£173k) - an additional 61 clients since April being offset by reduction in Richmond Fellowship SLA (-£65k).</p>
	<p><u>Proposed Actions to Address Variance</u></p> <p>Budget performance clinics continue to meet monthly to monitor financial performance against approved budget.</p>