

QUARTERLY OSMB UPDATE REPORT

Directorate:	Adult Care, Housing and Public Health
Date of report:	12 December 2018
Title:	The Budget Forecast and Continued Improvement Plan Update

1 The purpose of the report is to update OSMB members on the following;

- Budget Forecast
- The continued ASC Improvement Plan

2 **Adult Social Care Budget**

2.1 Adult Care Services are currently forecasting an overall overspend of £6.221m in 2018/19. See table 1 below.

Table 1	£000
Budget 2018/19	57,778
Remaining savings to be achieved (17/18 plus new 18/19 savings)	
Review of Learning Disabilities	3,324
Review of all Community care packages	1,812
Focussed enablement service	340
Review in house service provision formally funded by Supporting people subsidy/Housing related support	1,530
Review provision of in-house residential and intermediate care for older people	1,640
	8,646
Savings already implemented/on track	
Housing Related Support	(811)
Learning Disabilities	(250)
	(1,061)
Savings still to be delivered	7,585
Overspends - recurring	
Staffing including Agency and Consultancy	370
Transport - external provision	39
	409
Underspends - recurring	
Recurring underspends - staffing and Supported Living	(287)

Demand Pressures			
Residential and Nursing Care		3,843	
Domiciliary Care		1,815	
Direct Payments/Managed Accounts		517	
		6,175	
Assumed use of iBCF - additional funding not yet formally agreed with CCG			
2017/18 iBCF allocation		(4,000)	
2018/19 proposed iBCF additional allocation - funding demand pressures and mitigating savings		(1,979)	
		(5,979)	
Revised forecast		65,681	
Estimated Adverse variance		+7,903	
Further Planned Actions - to deliver existing savings			
	2018/19	2019/20	2020/21
My Front Door- Learning Disability	(1,268)	(3,074)	(3,074)
Reassessment Programme	(414)	(2,847)	(2,847)
Reduction in bed base		(1,640)	(1,640)
Review in-house service provision formally funded by supporting people subsidy/housing related support		(342)	(342)
Total planned actions to deliver existing savings	(1,682)	(7,903)	(7,903)
Revised position (overspend) for 18/19	+6,221	0	0

2.2 Table 2 (below) provides the current budget position and a summary of savings achieved up-to the end of October 2018.

2.3 This shows that in the remaining five months of the financial year a further £343K of savings is required in order to reduce the overspend as planned.

2.4 The directorate is confident that the reduced overspend will be achieved via the actions indicated in the last OSMB update report and the continued review programme outlined in section 3 of this report.

Table 2**Current 2018/19 Budget Position (Period 7 – October 2018)****£000s**

Directorate Budget	74,484
Total savings outstanding (Adults)	8,646
Savings achieved – Total (breakdown below)	(1,422)
> <i>Savings on track to be delivered in 2018/19</i>	(811)
> <i>Savings from case reviews to date</i>	(418)
> <i>Savings on night visiting contract</i>	(193)
Balance of savings still to be delivered	7,224
Other (under)/overspends	(48)
Other one off mitigating actions already identified - <i>underspends/savings on Public Health and Housing General Fund</i>	(612)
Forecast outturn	81,048
Estimated year-end overspend before any further savings/mitigation - <i>as at Oct' 18</i>	6,564
Further savings to be achieved in 2018/19 to achieve reduction in overspend	(343)
Estimated forecast of overspend	6,221

3. Budget Projects

3.1 Care Package Review Programme

- 3.1.1 The key delivery mechanism for delivering the in-year savings continue to be improving practice, reducing reliance on residential/nursing care, and ensuring that care packages are proportionate across all client groups by undertaking care package reviews of existing eligible customers.
- 3.1.2 At the project's inception (May '18) a total of 3815 customers were identified as eligible to receive a care package review, if unchanged the original support costs for these packages would total almost £71M in 2018/19.
- 3.1.3 To date, of the baseline, a total of 202 customer care package reviews have been completed with an additional 45 Mental Health reviews, which were not in original base line due to difficulties in data collection from system one . In total this has achieved an in-year saving of £612K, (against their original projected 2018/19 support costs).

Table 3 (below) provides further breakdown by client group. NB not in target group refers to the status of reviews at the point of 1.5.18.

Table 3: Care Package Reviews by customer group

Customer Group	Baseline – May 2018		Progress to Date		
	Customers Eligible for Review	Total Predicted cost 2018/19 (£)	Customers reviewed to date	Original costs for customers reviewed (£)	Change in predicted costs for reviews completed cost/(saving) (£)
1 - In House Daycare Only	82	60,534	7	0	5,670
2 - In House Daycare Plus Other	199	5,828,743	8	263,188	(5,265)
3 - In House Residential	41	1,133,313	3	92,013	119
4 - Night Visiting	21	491,253	12	297,804	(24,020)
5 - Managed Direct Payment	529	7,268,143	65	1,045,996	(15,395)
6 - Community Support Under 10hrs	571	2,927,074	32	129,738	(11,676)
7 - Direct Payment	526	7,766,658	15	332,365	(23,500)
8 - Under £150	114	477,898	3	22,026	(5,510)
9 - Short Stays	85	2,467,289	7	184,167	(47,939)
10 - JPOC	52	2,084,743	0	0	0
12 – High Cost	157	10,504,138	1	49,719	1,964
13 - Transition This Year	2	31,644	0	0	0
14 - Annual Review Overdue	631	14,820,204	26	626,818	(63,421)
15 - Residential Not in Targeted Group	315	7,895,880	14	335,419	(64,455)
16 - CBS Not in Targeted Group	490	7,195,186	9	162,830	(17,512)
Total:	3815	70,952,700	202	3,542,082	(270,940)
Mental health reviews			45	1,097,178	(147,230)
Saving on Night Visiting contract			0	258,000	(193,000)
Grand Total	3815	70,952,700	247	4,897,260	(611,170)

3.2 My Front Door

3.2.1 My Front Door reviews are underway with 60 assessments already completed, for clients with a learning disability, out of the 750 required. The results of these assessments are shown in the table above, which includes reviews on all client groups. However, this project will not deliver significant savings in the current year. The savings will, in the main, come from the closure of existing facilities, which are expected to occur in 2019/20 and 2020/21. The reviews for clients using Oaks are well underway and are on track, which should enable closure early in 2019/20.

3.3 Increase the number of Direct payment customers

3.3.1 Direct payments offer value for money and improve outcomes if delivered appropriately. Current performance is 21.25% which is an improvement on last quarter

3.3.2 To maximise the use of direct payments for new and existing adult social care customers, all assessment staff are attending direct payments training and are supported by on-line resources, and a comprehensive set of fact sheets have been produced to support the policy and procedures. This will ensure that the DP is of the right size and will also provide an opportunity to reclaim un spent direct payments

3.4 Transforming Care

3.4.1 Transforming Care has been identified as a potential area risk for in year demand as funding responsibility moves from specialist commissioning (NHSe) to CCGs and Local Authorities. To mitigate risks Fortnightly meetings have been established, to include commissioners, finance and senior managers, to ensure that this complex and vulnerable group of individuals are appropriately supported and that any financial pressures for the local authority are identified and planned for as early as possible.

3.4.2 Although this won't deliver any savings the approach will enable the Council to monitor and manage potential additional costs more effectively.

4 Summary

4.1 Original projections estimated the Directorate overspend to be £8.646m. In the year-to-date there has been £1.422m savings achieved in adult's social care with additional savings support from other service areas within the Directorate of £660K. This has reduced the projected overspend to £6,564m with £343K of savings still to be secured.

4.2 The care package review programme, supported by the promotion of Direct Payments, is on target to achieve the additional £343K required and successfully reduce the 2018/19 overspend to £6.221m. Other projects are in place to ensure known areas of risk for unplanned, high cost spend are mitigated.

5 Improvement Plan

- 5.1 As indicated in the last update, of the 19 key areas of accountability contained within the improvement plan:
- 8 progressed on to become routine activity;
 - 9 formed part of the Medium Term Financial Strategy (MTFS) project plans, either directly or as an enabler to delivery;
 - 2 became the focus of DLT challenge sessions - Commissioning and Safeguarding Adults.
- 5.2 A final detailed “deep cleanse” of the original improvement plan took place on 11th October 2018 led by the Strategic Director. This cross-referenced all improvement plan actions to ensure they were completed or are contained within the Continued Improvement Plan or MTFS project plans.
- 5.3 Thematic deep dive workshops covering complex areas such as mental health, reablement, and continuing health care (CHC) are taking place. This will determine the more detailed work streams that are required to progress both the improvement actions and MTFS projects plans.

6 Improvement Plan Key Areas of Accountability

Performance Update

- 6.1 Currently the latest available benchmarking data available is 2016-17 - we expect the 2017-18 data to be available imminently.
- 6.2 The data shows a mixed picture of some areas still having too high a request or provision outcome than our comparators, so probably reflecting where the changes to service / practice and our current offer is. More encouraging is Delayed Transfers of Care (DTC), whilst a challenge for all partners, Adult Social Care is performing well.
- 6.3 Although demand rates remain high, the good news is over 65 reduced permanent residential admissions rates show changes are positively reflected in this area of improvement.
- 6.4 Safeguarding Adults figures show that, whilst there is a high referral rate, there has been a reduction in the number of safeguarding concerns which are progressed further to safeguarding enquiries. This evidences that making safeguarding personal is becoming embedded within practice.
- 6.5 The overall figures show that Rotherham is not an outlier.
- 6.6 More work will be able to be done on analysis when the full 2017-18 all council data is published November / December.

7 Improvement Plan Key Areas of Accountability

Narrative Update

- 7.1 With support from the Local Government Association (LGA) a Commissioning Strategy has been developed covering 2018-20.
- 7.2 The strategy will inform a refreshed Market Position Statement for all cohorts to drive market shaping and improve engagement. Delivery of the Commissioning Strategy is crucial as this is a major enabler to the improvement activity and MTFS actions.
- 7.3 A series of workshops have been held to strengthen the interface with social work and commissioning to involve frontline staff in co-production and also in identifying gaps in the existing offer.
- 7.4 Targeted events, such as voluntary sector engagement session, have been facilitated. The purpose has been to raise awareness of the local offer and encourage take-up of community asset based solutions by social work staff applying strength-based approaches.
- 7.5 A Quality Board has been established to drive multi-agency working to proactively manage service quality and drive up standards of CQC registered services.
- 7.6 Financial Management Processes to ensure that Adult Support Plans meet RMBC's required quality standards, adhere to legal frameworks and meet the eligible outcomes of adults have been implemented across all services.

8 Workforce Development

- 8.1 Building upon the evidence provided by the externally commissioned file audit, the Directorate commissioned a programme of legal literacy and strength based practice training to support practitioners and managers.
- 8.2 The voluntary sector organisation 'Active Independence' was commissioned to deliver direct payments training to all frontline staff in October. This training is to support the implementation of the revised Direct Payments Policy and aligned procedures, applying a customer perspective and embedding personalisation.
- 8.3 The Adult Social Care Quality Assurance Framework has been strengthened with the monthly programme of case audits now in place. Where areas of improvement are identified these inform further staff learning and development.
- 8.4 The outcomes of the case file audit work are also considered at performance meetings.
- 8.5 Supervision is also fundamental to practice change and a quality assurance process and training is now being set up to ensure RMBC are able to practice competently and confidently.

8.6 The Wellbeing Forums are held weekly and provide a necessary framework to monitor the quality of support plan, enable consistent decision-making, assures shared learning and assist staff to consider alternative solutions if they have not already done so.

8.7 The Best Practice group is finalising a review “top tips” booklet.

9 Tracking Progress

9.1 A Performance data refresh has recently been agreed by the Performance SMT. This will assist Managers to understand what sits beneath the data and use it more effectively to drive performance activity.

9.2 The financial and performance tracker continues to be utilised and provides monthly updates into the project assurance group on savings against the MTFS.

9.3 The tracker also forms part of the performance clinic structure. A fortnightly performance report is now being used to manage team performance.

9.4 The Continued Improvement Plan will report into the monthly Project Assurance Meeting (PAM) which are chaired by the Strategic Director (SD) of Adult Social Care, Housing and Public Health.

9.5 Internal Audit, at the request of the Assistant Chief Executive, has recently undertaken a review of the Phase 2 Corporate Improvement Plan to provide assurance that improvement actions are being maintained. One of the actions chosen for review related to “Delivery of the Adult Social Care Development Programme”.

9.6 The general view from Internal Audit (awaiting final report to be issued) is that ASC has provided positive assurance in respect of maintaining implementation of the Development Programme.

10 Next Steps

- To continue the monitoring of the right-sizing of care packages at SMT and take any mitigating actions.
- Governance and implementation of the Continued Improvement Plan via the Project Assurance meetings.
- Continued Quarterly review of programme and project plans against milestone plans.
- Electronic reporting process to facilitate collation of data so that arising practice development themes can be addressed (working towards continuous improvements).
- Recruitment activity within reablement to increase scope of the service so that more Rotherham residents can benefit from this intervention.

- Audit safeguarding cases across all teams and embed this as part of a wider quality assurance framework.
- Design the New Target Operating Model for the ASC structure.
- Implement refreshed performance data.

. **11 Accountable Officer**

Anne Marie Lubanski, Strategic Director for Adult Care, Housing and Public Health.