

**CABINET MEMBER FOR ADULT SOCIAL CARE
9th December, 2013**

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

H51. DECLARATIONS OF INTEREST

Councillor P. Russell declared a personal interest in Minute No. 54 (Charging Exemptions for Non-Residential Care).

H52. MINUTES OF PREVIOUS MEETING

Consideration was given to the minutes of the meeting held on 18th November, 2013.

Resolved:- That the minutes of the meeting held on 18th November, 2013, be approved as a correct record.

H53. HEALTH AND WELLBEING BOARD

The minutes of the meeting of the Health and Wellbeing Board held on 16th October, 2013, were noted.

H54. CHARGING EXEMPTIONS FOR NON-RESIDENTIAL CARE

The Director of Health and Wellbeing submitted a report on the Fairer Charging Policies for Home Care and other non-residential Social Services issues under Section 7 of the Local Authority Social Services Act 1970 which set out guidance and a statutory framework for calculating how much someone should pay towards their non-residential services. However, in some incidences, applying charges to Services assessed to meet eligible needs could prevent some of the most vulnerable customers from accessing Services. The proposed Policy would regularise the inconsistencies.

Social Care assessors would need to ensure all assessments, risk assessments and support plans were completed, clearly identifying any risks and stating why an exemption to charges was required and support/services needed to meet the individual's eligible needs.

The Team Manager would then approve, authorise and, where urgent authorisation was required outside of the Resource Allocation Panel, approved by a Service Manager. The proposed exemption categories were:-

- Housing - risk of being served notice by Environmental Health if not supported to improving living conditions
- Risk of continuing cycle of self-neglect causing critical level of risk to health

- Anti-social behaviour incidents – support to report to Police when incidents happened enabling the Police to respond more quickly
- Substance misuse, risk of malnutrition, loss of dignity and support to access services i.e. Clearways for treatment
- Risk of deterioration in mental health, low mood, suicidal ideation should support not be provided

Resolved:- (1) That the Policy be referred to Cabinet for adoption by full Council.

(2) That a report be submitted in 12 months.

H55. ROTHERHAM LEARNING DISABILITY PARTNERSHIP BOARD

The notes of a meeting of the Rotherham Learning Disability Partnership Board held on 25th October, 2013, were submitted for information.

H56. ADULT SERVICES REVENUE BUDGET

Consideration was given to a report presented by Mark Scarrott, Finance Manager (Neighbourhoods and Adult Services), which provided a financial forecast for the Adult Services Department within the Neighbourhoods and Adult Services Directorate to the end of March, 2014, based on actual income and expenditure to the end of October, 2013.

It was reported that the forecast for the financial year 2013/14 was an overspend of £1.366M against an approved net revenue budget of £72.809M. The main budget pressures related to slippage on a number of budget savings targets including Continuing Health Care funding and implementing the review of In-house Residential Care.

The latest year end forecast showed a number of underlying budget pressures which were being offset by a number of forecast underspends:-

Adults General

- A slight underspend based on estimated charges including training

Older People

- A forecast overspend on In-House Residential Care due to slippage on implementation of budget savings target and recurrent budget pressure on Residential Care income
- Recurrent budget pressures in Direct Payments, however, client numbers had reduced since April together with a reduction in the average cost of packages
- Underspend on In House Transport.
- Forecast underspend on Enabling Care and Sitting Service, Community Mental Health, Carers' Services and planned delays on the recruitment to vacant posts within Assessment and Care

Management and Community Support plus additional income from Health

- Overspend on independent sector Home Care due to an increase in demand since April
- Overspend on independent residential and nursing care due to an additional 47 clients receiving a service than forecast. Additional income from property charges was reducing the overall overspend
- Forecast savings on in-house day care due to vacant posts and moratorium on non-pay budgets
- Overall underspend on Rothercare due to slippage in Service Review including options for replacement of alarms
- Minor underspend in other non-pay budgets due to moratorium on non-essential spend

Learning Disabilities

- Overspend on independent sector Residential Care budgets due to 3 new admissions in July and shortfall on Continuing Health Care income
- Forecast overspend on Day Care due to a delay on the implementation of Day Care Review including increase in fees and charges plus recurrent budget pressure on transport
- Forecast overspend in independent sector Home Care due to increase in demand and slippage in meeting budget savings
- High cost placements in independent Day Care reduced due to additional Continuing Health Care funding and 1 client moving out of the area
- High cost Community Support placements resulting in forecast overspend
- Delay in developing Supported Living Schemes plus additional funding from Health resulting in a forecast underspend
- Efficiency savings on Service Level Agreements for Advice and Information and Client Support Services was reducing the overall overspend
- Lower than expected increase in demand for Direct Payments
- Additional staffing costs and essential repairs within In-House Residential Care offset by planned delays in recruiting to vacant posts within Assessment and Care Management

Mental Health

- Projected overspend on Residential Care budget due to a slippage on budget savings target plan to move clients into Community Support Services offset by an underspend in Community Support budget
- Budget press on Direct Payments but additional income recovery was reducing the overall pressure on budget
- Overspends on employees' budgets due to lower than staff turnover, additional overtime and agency cover

Physical and Sensory Disabilities

- Continued pressure on Independent Sector Domiciliary Care due to an increase in demand
- Further increase in demand for Direct Payments
- Underspend on Community Support as clients moved to Direct Payments
- Forecast underspend on Residential and Nursing Care due to planned slippage in developing alternatives to respite provision
- Reduction in contract with independent sector Day Care provider
- Underspend on equipment and minor adaptations budgets
- Forecast efficiency savings on contracts with Voluntary Sector providers

Safeguarding

- Overspend due to lower than expected staff turnover and use of agency support

Supporting People

- Efficiency savings on subsidy contracts had already been identified against budget

Total expenditure on Agency staff for Adult Services to the end of October, 2013, was £244,050 (no off contract) compared with actual expenditure of £161,371 (no off contract) for the same period last year. The main areas of spend were within Assessment and Care Management Teams, Residential Care and Safeguarding to cover front line vacancies and sickness. There had been no expenditure on consultancy to date.

There had been £235,327 spent up to the end of October, 2013, on non-contractual overtime for Adult Services compared with expenditure of £216,957 for the same period last year.

Careful scrutiny of expenditure and income and close budget monitoring remained essential to ensure equity of Service provision for adults across the Borough within existing budgets particularly where the demand and spend was difficult to predict in a volatile social care market. A potential risk was the future number and cost of transitional placements from Children's Services into Learning Disability Services together with any future reductions in Continuing Health Care funding.

Regional benchmarking within the Yorkshire and Humberside region for the final quarter of 2012/13, showed that Rotherham remained below average on spend per head in respect of Continuing Health Care.

Discussion ensued on the report with the following issues raised and clarified:-

- Continuing monthly increase on independent residential and nursing care – more people were moving from short stay to long stay compared to 2012/13
- Direct Payments – generally the numbers were not increasing since the beginning of the year.
- A review of Direct Payments was underway including packages over £200 per week, Home Care packages over 25 hours a week and Learning Disability Residential Care high cost placements
- Winter Pressure funding had been announced but as yet no detail was known as to whether any would be forwarded to local authorities

Resolved:- That the latest financial projection against budget for 2013/14 be noted.