

## **HEALTH SCRUTINY AND PERFORMANCE PANEL**

**DATE: 14 NOVEMBER 2013**

### **Draft Revenue Budget and Capital Programme 2014/15 for Social Care and Health Portfolio and Public Health & Protection Portfolio (Public Health element only)**

**Portfolio:** Councillor B McCracken – Social Care and Health  
Councillor Z Ali – Public Health & Protection

#### **Summary of report**

This report outlines the portfolio plans for future service delivery, along with the approach being taken to delivering service improvements and cost efficiency for the Social Care and Health portfolio, and the Public Health element of the Public Health and Protection portfolio. This includes Cabinet's draft revenue budget options and draft capital programme for 2014/15 for consultation, for the panel to consider and make recommendations to Cabinet if they so choose.

Excluding the mental health proposal, the options in the Social Care and Health portfolio plan may impact to some degree on the pooled budget which falls under the remit of this panel.

#### **Recommendation**

The panel are recommended to :-

- A) Consider the portfolio plan for future service delivery, and draft revenue options in this report, and make recommendations to Cabinet as appropriate.
- B) Review and make recommendations to Cabinet as appropriate, on the draft capital programme for services within the remit of this panel.

#### **Background papers**

Various financial working papers.

#### **Reason for scrutiny**

To enable consultation and scrutiny of the draft portfolio plan, draft revenue budget options, and draft capital programme for 2014/15.

#### **Resource and legal considerations**

Cabinet on 23 October 2013 presented their draft portfolio plans on future service delivery, including the draft revenue budget 2014/15 and draft capital programme for consultation.

## Corporate position

### 1. 2014/15 Draft Revenue Budget Headlines – corporate position

The revenue budget has been constructed in accordance with the council's medium term financial strategy (MTFS) and all relevant corporate financial protocols and presents a balanced budget. This includes the future financial predictions on all council funding and pressures, including the forecast reduction in our direct government funding. This results in:

- A focus on a policy-led, risk assessed budget setting approach using corporate priorities established by Cabinet and the Sustainable Community Strategy.
- A total net council tax requirement of **£85.40m**
- Provision for inflationary pressures of **£2.29m**
- Provision for other known budget pressures, including demographic and cost pressures, and reduced levels of income or grant, of **£6.15m**.
- New savings options of **£18.97m**
- Full year impact of savings approved in the 2013/14 budget of **£2.20m**
- Opening general reserves in line with the council's MTFS

The estimated gross revenue expenditure budget for 2014/15 will be **£619.78m**, and gross income will be **£534.38m**, resulting in a net council tax requirement of **£85.40m**. These figures may change as grant allocations are finalised and decision on council tax, etc are taken.

It has been possible to commit to £6.15m to address key priorities and funding of essential cost pressures. This includes changes to discretionary housing payments and housing benefits and the correction of income targets. It also covers a provision to fund inflationary pressures (i.e. contractual), and corporate cost pressures to fund for example, the revenue implications of the capital programme, pay and grading and pension realignments. Income targets have also been corrected in some areas and to address the impact from reduced levels of grant.

This commitment has been made possible by planned improvements in efficiencies and other savings. The council is transforming the way it undertakes its business, with a view to reducing overhead and transactional costs.

### 2. 2014/15 Draft Capital Programme Headlines – corporate position

The draft capital programme for 2014/15 totals £37.61m. It sets out new capital investment funded from the council's own resources of £14.05m (funded by capital receipts and unsupported borrowing) and externally funded schemes of £23.56m (funded by capital grants) and represents a balanced programme for 2014/15. In addition, the report sets out a further two years of proposals for 2015/16 to 2016/17.

Despite reductions in capital funding in recent years and going forward, the draft capital programme contains some significant investment into highways, education, and into adult social care and housing to support vulnerable households through Health through Warmth and provision of aids and adaptations. A reserve list of new projects is also reported, where funding could be redirected in year if available.

## **Position for services within the remit of this panel**

This report summarises the portfolio plans for service delivery, including draft revenue options and draft capital programme 2014/15, for services within the remit of this panel.

The plan and options are presented to this panel for consultation and scrutiny and allow the panel to make recommendations to Cabinet.

### *1. 2014/15 Draft Revenue Budget*

The draft portfolio plans relating to the services within the remit of this panel are attached at **Appendix 1** (Social Care and Health portfolio), and **Appendix 2** (Public Health element of Public Health and Protection portfolio).

**Table 1** sets out the draft revenue budget 2014/15 for the Social Care and Health portfolio, including changes in resources compared to the approved budget for 2013/14.

<b>Table 1 : Draft Net Budget – Social Care and Health Portfolio</b>	<b>2014/15 £m</b>
Budget brought forward from 2013/14	70.775
Contractual inflation	1.174
New savings options	(6.961)
Full year effect of previous years approved savings – Continuation of the resettlement programme	(0.129)
<b>Draft net budget requirement</b>	<b>64.859</b>

*Further provision for pay award and pension changes are made, which are currently held corporately, and will be allocated as the budget is finalised, based on actual requirements.*

Public Health is fully funded from government grant, thus has a net nil cost on the council's funding (Grant of £14.98m in 2013/14).

### *2. 2014/15 Draft Capital Programme*

**Table 2** sets out the draft capital programme 2014/15 to 2016/17 for the Social Care and Health portfolio with further detail of the schemes below.

<b>Table 2 : Draft Capital Programme – Social Care and Health Portfolio</b>			
<b>Project</b>	<b>2014/15 £</b>	<b>2015/16 £</b>	<b>2016/17 £</b>
<b>Externally funded schemes</b>			
Community Capital Capacity Grant	785,511	0	0
<b>Total draft capital programme</b>	<b>785,511</b>	<b>0</b>	<b>0</b>

#### Community Capital Capacity Grant

The Department of Health allocates the Community Capacity Capital Grant to local authorities, providing capital funding to support development in three key areas of Social care: personalisation, reform and efficiency. The funding will support the Directorates 5 yr commissioning strategy delivering transformation of Adult Social care provision. Expenditure would cover the following areas; innovative alternatives for residential care, service redesign of the intake component of the 'Target Operating model', structural

improvements to Social Care's property portfolio, capital investment focused on early intervention and prevention and investment in services for people with Autism & Dementia.

### **Citizen impact**

The budget is aligned with council and service delivery priorities. The report sets out the plans for future service delivery for the services within the remit of this panel.

### **Environmental impact**

The impact on the environment is considered alongside all budget / capital programme options.

### **Performance management**

Financial performance is considered alongside service targets. Managers are required to deliver their service targets within budget, and there are comprehensive performance arrangements in place to monitor and manage this.

### **Equality Implications**

Service managers have regard to equalities in setting budgets / capital programmes and delivering services. Equality impact assessments will be undertaken as required prior to final recommendations being made to Council on the budget.

### **Consultation**

This is a specific meeting for scrutiny to consider the draft revenue budget and draft capital programme for 2014/15.

Consultation is an integral part of the budget process and arrangements are in hand to consult with a wide range of stakeholders (i.e. councillors, residents, service users, business sector, voluntary and community organisations, etc.).

Each year the council consults residents and stakeholders as part of its budget process. This year, over 200 members of staff from across all directorates who have interaction with key groups / stakeholders, have been briefed on the budget message and will be involved throughout the budget consultation process which takes the form of two phases.

Phase one (early September to October 23<sup>rd</sup>) has seen 'Budget- have your say' postcards distributed, as well as an online form and email which are being used to capture feedback from the public on council cost cutting measures. Staff communication is key, therefore as well as the staff briefings, budget information has been shared via the Intranet and core brief, on pay slips and posters in offices. Online forms and an email address are being used to capture feedback from staff.

Phase two (24<sup>th</sup> October to 14<sup>th</sup> November) focuses on the draft budget proposals, allowing for a more informed and meaningful conversation with the public and staff. Staff involved in phase one will be provided with all the information they need to help communicate the draft budget proposals and capture and encourage feedback in the same way they did in phase one. Staff are being briefed before going out and about in the borough, talking to members of the public face to face at venues including libraries, leisure centres, supermarkets, community associations and other local venues (a detailed timetable of dates, times and locations will be published widely). Business representatives will be made aware of the draft budget proposals via existing communication channels and will be consulted at two meetings in early November.

A detailed report on consultation feedback from both phases of consultation, to include scrutiny feedback, will be presented to Cabinet on 11<sup>th</sup> December.

Any changes to these options, following public consultation, will be reported to a future meeting of the panel, providing an opportunity to make further recommendations to Cabinet. Cabinet may wish to consider the feedback contained within this report in formulating their draft budget proposals

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**PORTFOLIO: SOCIAL CARE AND HEALTH****A. Summary of Services within the Portfolio**

The portfolio covers social care services for adults and older people with physical disability, sensory impairment, learning difficulties, mental health issues, substance misuse, autism, HIV/AIDS. Specifically we offer:

- Response, information, advice and signposting
- Preventative services, community alarms, tele-care, tele-healthcare
- Enablement and re-ablement
- Assessment and review
- Resource allocation and support planning
- Safeguarding of vulnerable adults
- Whole sector workforce planning and development
- Commissioning of services including residential, nursing, day care, home care, extra care (incl. Housing 21), supporting people and the learning disability and integrated community equipment pooled budgets
- Shaping and development of adult social care market
- Quality assurance of services
- Direct service provision: reablement, response, day and respite care, adult placements
- Housing related support for vulnerable groups

**B. Portfolio Aims, Objectives, Priorities**

Our operating model describes our approach:

*“to support people to maximise their independence, health and well being and thus to ensure they have an amount of service that leads to personal outcomes in line with this goal”.*

In addition, we focus on arranging services in ways that actively re-able people to regain a higher level of independence and well being, thereby reducing the amount of support needed over time.

The broad aims are:

1. To help citizens to access universal services
2. To assist citizens to access mainstream services
3. To provide access to a range of community based health and social care services
4. To prevent citizens becoming socially excluded and needing more intensive and costly health and social care services by providing a range of practical services close to home
5. To reduce dependence on services, and support independence and self directed support
6. To commission good quality services that provide real choices for citizens to achieve their outcomes

### **C. Service Design (informed by customer demand)**

Adult Social Care and Inclusion is the single largest spending department of the Council. Nationally evidence indicates that on average over the last 3 years there has been a 7% reduction in the spend on adult social care by councils. In Walsall spend has been reduced by 24% but this has been off-set by new monies that have been top-sliced from NHS budgets by the Department of Health and allocated to local authorities.

Spend in Adult Social Care in Walsall can be divided into five areas:

- Spend on universal preventive services such as community alarms; voluntary organisations and supporting people monies (c£10 million)
- Spend on in-house services which include Intermediate Care, Day Care and some residential care (c£10 million) – some of these could be described as preventive services.
- Spend on assessment and care management and their support and business services (c£8 million)
- Spend on commissioned services from the private and voluntary sector to meet people's longer-term needs (c£50 million).
- Income from customers through their contributions to the cost of services (c£10 million)

In Adult Social care and Inclusion we have taken the following approach to our savings:

1. We have looked at how our new operating model (a focus on prevention) will help us to reduce demand for adult social care. We have predicted that we can reduce admissions to residential care for older people and the numbers of older people who will need on-going domiciliary care.
2. We have reviewed staffing across the directorate and reduced costs where we can. As part of this we have also decided that we cannot afford to continue with our "Quality Team". We will continue to undertake contract monitoring through commissioners (and through procurement and safeguarding investigations).
3. We have reviewed a number of services (including commissioned services) and proposed changes that will reduce costs through alternative ways of meeting people's needs.
4. We have reviewed charging and continue to move towards a full recovery cost model (within our legal constraints) for people receiving adult social care services. This means that those that are eligible for care and support will "pay" for services through their personal budgets (where they are means tested to make a contribution to the costs) and for those who are not eligible they will meet the full cost of the services. After next year there will be a cap on the cost of care for any individual of £72,000 and within this it is expected that younger adults will receive free services – they will not be expected to make a contribution (we are awaiting government guidance on this).
5. We have considered services or schemes that we operate that are not statutory (the recruitability scheme and the apprenticeship scheme) and reluctantly have recommended that we no longer offer these services.
6. We will use the new Department of Health monies to fund existing services that will enable us to sustain our joint working with health.

Going forward – we will need to continue to find savings in both learning disability (through the re-provision programme) and mental health (through lower use of residential care) budgets.

#### **D. Financial analysis - reshaping the revenue budget (5 year financial plan)**

The provisional revenue budget for 2014/15 is attached. This summarises the current cash limit for 2013/14 and the proposed cash limit for 2014/15. It details the proposed changes in activity required for 2014/15.

In summary the proposed net budget for 2014/15 is £64.859m compared to £70.775m in 2013/14, a change of £5.916m.

#### **E. Future capital requirements**

The proposed capital programme for the Social Care & Health portfolio is £786k – all external funded.

#### **F. Revenue savings options requiring a change in policy to implement**

There are a number of revenue savings options that require an executive decision to implement. For Social Care and Health, these relate to –

- F1 Removal of Social Care recruitability payments
- F2 Review of preventative low priority services
- F3 Review care costs in extra care housing
- F4 Reduce the number of community satellite bases for Day services



## F1: Removal of Social Care recruitability payments

Estimate Net Saving			
2014 / 2015	2015 / 2016	2016 / 2017	Implementation cost
£110,000	£0	£0	£0

### 1. Description of the Savings Proposal

- 1.1 People who attend our day care workshops at Electrium Point under the Links to Work Programme are currently paid an allowance (less than the minimum wage) for the work they undertake. There is a national debate as to whether this is a legal payment – as it is below the minimum wage. The work they undertake for some is a training opportunity and a small number move onto permanent employment. For others, many of whom have a moderate learning disability, physical impairments and special needs; it is useful and purposeful day time activity. It is proposed to consult with the Users and the Carers on ending the payment in order to save money. For those who want to earn a wage they will be further supported to find work.

### 2. Implications Associated With Savings Proposal

#### 2.1 **Customers**

The people who participate in Links to Work are adults who either have been diagnosed with learning difficulties or a condition within the autism spectrum. For many their care needs might be assessed as moderate and therefore they are unlikely to meet the Council's criteria to be eligible for care services. However because of their disability and the challenges they face the majority are unlikely to find a permanent job in Walsall. At Electrium Point a large workshop offers a variety of work type opportunities in a supervised environment for these adults to undertake some productive work. This includes packing for local firms; cleaning and recycling equipment from the Joint Equipment Store; running the storage of the food bank and the document warehouse for some council records and other contracts that from time to time are gained by the supervisors. An allowance is paid to many of the individuals for undertaking these routine tasks. The amount paid is less than the minimum wage for the hours they work. The adults who receive the allowance really value the fact that they can get minimal reward even though they are unable to secure and hold onto a permanent job. A small number do each year move from this project to permanent employment in Walsall.

#### 2.2 **Employees**

There are supervisors who are employed to oversee the work undertaken and to support the customers. The proposals do not affect these employees directly.

#### 2.3 **Partners**

Contracts are gained with local firms to undertake simple jobs such as packing components. Some of the work carried out supports the work of the council e.g. Data/document storage, recycling equipment, Telecare decommissioning / recycling etc.

## 2.4 **Corporate Plan**

This work is not a priority within the Corporate Plan. The council has always had a target of helping these adults into permanent employment.

## 2.5 **Other Council Services**

As above.

## 3. **Associated Risks**

3.1 There would be a risk that in losing the payment that some of the current attendees may decide not to come to work. This may impact on the overall viability of the scheme and its income streams which is valued by those that use it and their Carers.

3.2 Resulting non attendance at Electrium point may result in a need to reassess individual needs associated with their support package.

## 4. **Consultation and customer feedback**

4.1 A process of consultation with those who attend the services and their carers will now commence and this will be reported back to cabinet.

## 5. **Legal Implications**

5.1 None.

## 6. **Equal Opportunities and Environmental Implications**

6.1 This programme has been seen as an important part of helping people with moderate care needs help to find work. Only a minority of those who attend the service actually do successfully find permanent work. The aim is to continue the service but to withdraw the allowance which the attendees receive. For those who want to earn money from work this will act as a further incentive to help them find a permanent job though this is much harder under the current recession.

## 7. **Equality Impact Assessment**

7.1 An equality impact assessment is currently being undertaken for this savings proposal, which will be assessed by the equalities team.

## F2: Review of preventative low priority services

Estimate Net Saving			
2014 / 2015	2015 / 2016	2016 / 2017	Implementation cost
£300,000	£0	£0	£0

### 1. Description of the Savings Proposal

- 1.1 The council has funded a range of housing related support services under the previous “Supporting People Grant” arrangements. The Government removed the ring fence on this grant three years ago and the commissioning of these services has become much more integrated with the commissioning of health and social care services within the Joint Commissioning Unit. These services are at the preventative end of care pathways for older people, people with learning disabilities, and people with mental health problems and they are commissioned to provide low level support as a means of keeping individuals as independent as possible for as long as possible. All of the services are monitored against contract specifications and where it is has been shown that they do not contribute to the care pathway they have been decommissioned. The total funding has therefore been reduced by circa £2 million in the last three years, with a further £500k reduction during this financial year 2013/14. The remaining services have all demonstrated a degree of effectiveness in supporting people to retain their independence. Over time, the care pathways are being developed further, and as part of this process it is possible to continue to reduce the expenditure on these contracts. The main criteria against which they are measured are the extent to which they support individuals to remain independent and thus not become eligible for social care services; the possible impact on other parts of the council if the contract is terminated (i.e. there is substantial expenditure on support for homeless people and for people who have experienced domestic violence); and the possible impact on partner agencies (particularly health).
- 1.2 This proposal is to continue to review all the current spend on the schemes that were previously funded by the grant to achieve a further saving of £300,000.

### 2. Implications Associated With Savings Proposal

#### 2.1 **Customers**

Until the review is completed it will not be known on which customers there will be an impact.

#### 2.2 **Employees**

An assessment of the impact on the provider is a fundamental part of the review. Some of the contracts are with internal council provided services and so there may be an impact on council staff. Until the review is completed it will not be known what the impact may be.

#### 2.3 **Partners**

An assessment of the impact on partner agencies is a fundamental part of the review.

2.4 **Corporate Plan**

An assessment of the impact on other parts of the council is a fundamental part of the review.

2.5 **Other Council Services**

An assessment of the impact on other parts of the council is a fundamental part of the review.

3. **Associated Risks**

3.1 An assessment of the impact on other parts of the council is a fundamental part of the review.

4. **Consultation and customer feedback**

4.1 Customers will be consulted when proposed changes are being considered.

5. **Legal Implications**

5.1 Customers will be consulted when proposed changes are being considered.

6. **Equal Opportunities and Environmental Implications**

6.1 Customers will be consulted when proposed changes are being considered.

7. **Equality Impact Assessment**

7.1 An equality impact assessment is currently being undertaken for this savings proposal, which will be assessed by the equalities team.

### F3: Review care costs in extra care housing

Estimate Net Saving			
2014 / 2015	2015 / 2016	2016 / 2017	Implementation cost
£750,000	£0	£0	£0

#### 1. **Description of the Savings Proposal**

1.1 There are a number of housing schemes that were previously commissioned as extra care schemes where the providers have continued to receive funding for housing related support services whilst the number of individuals who have become eligible for a personal budget has increased. This has led to a situation where there is a duality of funding from both the old 'Supporting People' contracts and core social care commissioning budgets. Once reviews have been completed to determine which residents are eligible to receive a personal budget and those arrangements have been put in place, it will no longer be necessary to fund housing related support services separately, and so savings from those contracts will be possible.

#### 2. **Implications Associated With Savings Proposal**

##### 2.1 **Customers**

Those people who are eligible for social care services will be able to continue to receive a combination of care and support. There will be some people who are not eligible to receive social care services who will no longer receive housing related support services. A consultation exercise was completed to explain this.

##### 2.2 **Employees**

This may impact on the numbers of permanent employees that are taken on by the companies that provide the care in the schemes.

##### 2.3 **Partners**

Any changes will have to be made in conjunction with those Housing Associations who provide care in the schemes in the Borough.

##### 2.4 **Corporate Plan**

This meets the objective in the corporate plan to promote the independence of older people in Walsall.

##### 2.5 **Other Council Services**

There is no known impact on other council Services. The work that is undertaken will be shared with colleagues in the Housing Department.

#### 3. **Associated Risks**

3.1 Not known.

#### 4. **Consultation and customer feedback**

- 4.1 Consultation about any major changes will take place with those customers currently in the housing schemes.

#### 5. **Legal Implications**

- 5.1 There is a risk of challenge from some people who will no longer be able to receive housing related support services. This has been mitigated by the consultation process and will also be addressed as part of the individual reviews for each resident of the scheme.

#### 6. **Equal Opportunities and Environmental Implications**

- 6.1 The proposals will ensure that equality of access to services is more equitably applied for older people in the Borough. The current evidence would suggest that older people in extra care housing schemes are more favourably treated than other older citizens in the Borough.

#### 7. **Equality Impact Assessment**

- 7.1 An equality impact assessment is currently being undertaken for this savings proposal, which will be assessed by the equalities team.
- 7.2 There is a high offer of care within the model of extra care that is offered in Walsall. It is likely that some customers will lose care that they currently receive if they do not meet the council's stated eligibility criteria. Others will find that their care needs are still met but for some with a lower package of care.

**F4: Policy template – Reduce the number of community satellite bases for Day services**

<b>Estimate Net Saving</b>			
<b>2014 / 2015</b>	<b>2015 / 2016</b>	<b>2016 / 2017</b>	<b>Implementation cost</b>
£160,000	£0	£0	£0

**1. Description of the Savings Proposal**

1.1 Currently day service provisions for adults with learning disabilities are run from 8 different sites across the Borough. Seven of these are in community-based locations. Those with the highest care needs attend the centre at Goscote. This proposal is to rationalise the service, looking to continue to meet the needs of those with eligible care needs on two fewer sites. That means moving from 7 to 5 community locations. The rationalisation proposal does not directly affect Goscote.

**2. Implications Associated With Savings Proposal**

**2.1 Customers**

There may be an impact on some service users who may for personal reasons enjoy attending a centre within their locality and they may be used to a specific environment.

**2.2 Employees**

As part of rationalising the centres there are proposals to reduce the number of staff working across all of the centres from 39 to 30. This is a reduction of 9 staff. Full consultation will take place with the staff and the Trade Unions around the process for managing these changes. Voluntary Redundancy has been offered to all staff in Walsall and it is hoped that this approach will reduce the need for any compulsory redundancies as a result of these proposed changes.

**2.3 Partners**

Many of the services for adults with learning difficulties are funded jointly in a pooled budget with the local NHS. This is not the case for these services but we will share any proposals with them.

**2.4 Corporate Plan**

None.

**2.5 Other Council Services**

None.

**3. Associated Risks**

3.1 We will need to review care packages that service users receive in order to ensure that outcomes are being appropriately met. This will need a project plan and regular feedback of the progress to Management.

3.2 If the service continues to operate from 7 sites there would need to be a significant capital spend on 2 of the sites to make them fit for purpose.

4. **Consultation and customer feedback**

4.1 A full consultation exercise will be undertaken to go alongside any proposals to rationalise the sites.

5. **Legal Implications**

5.1 None.

6. **Equal Opportunities and Environmental Implications**

6.1 We will continue to meet the needs of those with eligible care needs on two fewer sites. A full consultation process will be implemented to ensure a smooth transition to the remaining sites.

7. **Equality Impact Assessment**

7.1 An equality impact assessment is currently being undertaken for this savings proposal, which will be assessed by the equalities team.



**PORTFOLIO: PUBLIC HEALTH & PROTECTION (Public Health element only)**

**A. Summary of Services within the Portfolio**

Services to Public Protection include:

- Public Health

**B. Portfolio Objectives / Outcomes / Purpose**

- Improve health and well being and reduce inequalities
- Prevention and reduction of Anti Social Behaviour
- Deliver the Community Safety Plan
- Environmental Enforcement

**C. Service Design (informed by customer demand)**

Our responsibilities include a very wide range of statutory duties in virtually all service areas, which increasingly will need to be prioritised. There may be scope to vary the level at which such services are provided and this will require further consideration.

In preparing these savings options, we have been guided by the importance of prioritising activities important to local residents, particularly those where there is a statutory obligation. We are also seeing a move towards more generic working and with it a better response to customers, a greater reliance on income from users wherever possible, and further efficiencies in the use of staff, contracts, premises, equipment and finance.

The requirement to identify savings options that protect front line services has inevitably been a challenging one although there are many that do offer such protection. The following savings are proposed:

- Review of public health contracts

Whilst it has again been possible to identify efficiency savings which have no or minimal impact on service levels, it needs to be recognised that there would be a reduction in the flexibility of services to respond to unforeseen demands and workload peaks. This would in turn increase the time taken to deal with some service requests and lead to a further need to ration services. There would be a reduced capacity to respond to demand such as ASB incidents, demonstrations and extremist threats. And it would be harder to respond to new and emerging legislation such as ASB tools and powers, Assets of Community Value, etc.

**D. Financial analysis - reshaping the revenue budget (5 year financial plan)**

Public Health is fully funded from government grant. The current grant is £14.98m in 2013/14.

**E. Future capital requirements**

There are no capital schemes for the Public Health element of the Public Health& Protection portfolio.

## Social Care and Health Portfolio Cash Limit

Service	Activity covered by this Area (per portfolio plan)	Gross Expenditure 2013/14	Gross Income 2013/14	Net Budget 2013-14	Budget 2014/15	Change £	Change Proposals	HOW DOES THE OVERALL BUDGET MEET STRATEGIC PRIORITIES ?			
								IMPROVING HEALTH INCLUDING WELLBEING AND INDEPENDENCE FOR OLDER PEOPLE	IMPROVING SAFEGUARDING, LEARNING AND LIFE CHANCES FOR CHILDREN AND YOUNG PEOPLE	SUPPORTING BUSINESSES TO THRIVE AND SUPPORTING LOCAL PEOPLE INTO WORK	CREATING SAFE, SUSTAINABLE AND INCLUSIVE COMMUNITIES
Access, Assessment & Care Management	<ul style="list-style-type: none"> <li>Assessment and review</li> </ul>	6,412,740	-358,541	6,054,199	5,254,199	-800,000	<b>Non policy saving:</b> Reduction in staffing <b>-£800k</b>	The reduction in number of social workers could result in waiting times for assessment, which could have a negative impact on the health and well being of older people. Loss of independence could occur prematurely without timely access to support.			
Strategic Development	<ul style="list-style-type: none"> <li>Response, information, advice and signposting</li> <li>Resource allocation and support planning</li> <li>Whole sector workforce planning and development</li> <li>Preventative services, community alarms, tele-care, tele-healthcare</li> </ul>	12,709,631	-9,050,386	3,659,245	3,170,575	-488,670	<b>Investment:</b> +£11k contractual inflation increases on CCTV contracts <b>Non policy savings:</b> Review of apprenticeships scheme <b>-£250k</b> Reduction in staffing <b>-£250k</b>	Adult social care will continue to meet programme priorities			
Provision	<ul style="list-style-type: none"> <li>Enablement and re-ablement</li> <li>Direct service provision, re-ablement, response, day and respite care, adult placements</li> </ul>	9,759,606	-1,729,552	8,030,054	7,317,054	-713,000	<b>Policy saving:</b> Removal of recruitability payments <b>-£110k</b> Reduction in number of community satellite bases <b>-£160k.</b> <b>Non policy savings:</b> Reduction in staffing from provider & quality teams <b>-£443k</b> Reduction in number of community satellite bases <b>-£160k.</b>	Service users will continue to attend day care, so Council's priorities will be met. Council will support Telecare development to enable and support people to use assisted technology using a different approach which mainstreams activity. Council will use other means to ensure quality of service across residential and domiciliary care services. Work on the Autism strategy will continue within service areas and be co-ordinated by a lead commissioner.			
Management Support & Other	<ul style="list-style-type: none"> <li>Strategic management of the directorate and the quality assurance team.</li> </ul>	1,609,926	-400,772	1,209,154	-233,846	-1,443,000	<b>Non policy savings:</b> Review of base budget <b>-£250k</b> <b>Policy Saving:</b> The use of new Department of Health monies to fund existing services that will enable us to sustain our joint working with health <b>-£1.193m</b>	Adult social care will continue to meet programme priorities			
Safeguarding	<ul style="list-style-type: none"> <li>Safeguarding of vulnerable adults</li> </ul>	541,627	-23,989	517,638	517,638	0					

Service	Activity covered by this Area (per portfolio plan)	Gross Expenditure 2013/14	Gross Income 2013/14	Net Budget 2013-14	Budget 2014/15	Change £	Change Proposals	IMPROVING HEALTH INCLUDING WELLBEING AND INDEPENDENCE FOR OLDER PEOPLE	IMPROVING SAFEGUARDING, LEARNING AND LIFE CHANCES FOR CHILDREN AND YOUNG PEOPLE	SUPPORTING BUSINESSES TO THRIVE AND SUPPORTING LOCAL PEOPLE INTO WORK	CREATING SAFE, SUSTAINABLE AND INCLUSIVE COMMUNITIES
Commissioning	<ul style="list-style-type: none"> <li>Commissioning of services including residential, nursing, day care, home care, extra care (incl. Housing 21), supporting people and the learning disability and integrated community equipment pooled budgets</li> <li>Housing related support for vulnerable groups</li> <li>Shaping and development of adult social care market</li> </ul>	70,562,921	-24,696,882	45,866,039	43,744,795	-2,121,244	<p><b>Investment:</b>  <b>+</b>£1.16m contractual inflation on numerous contracts  <b>Non policy previous years saving:</b>  <b>-£129k</b> for the continuation of the resettlement programme and reduction in packages of care  <b>Policy savings:</b>  Re-negotiation of Housing 21 contract <b>-£480k</b>  Reduced use of domiciliary care (through re-ablement) <b>-£1m</b>  Review preventative low priority services <b>-£300k</b>  Review of care costs in extra care housing <b>-£750k</b>  Reduction in use of residential care for short term placements <b>-£500k</b>  <b>Non policy saving:</b>  Reduction in staffing at the JCU <b>-£125k</b></p>	<p><i>Housing 21</i> - service delivered should not be effected as people will have alternative care provided elsewhere so priorities should continue to be met.  <i>JCU</i> - There will be less capacity in the JCU, at this stage it is difficult to assess impact on priorities.  <i>Preventative services</i> - People may require more support from community groups to enable them maintain their health, well being and independence as they may not meet the criteria for formal care services.  <i>Extra Care Housing</i> - Extra care support will be targeted on those with the highest level of need.  <i>Short term placements</i> - Fewer people will be supported in residential care. More use of re-ablement.</p>			
Mental Health	<ul style="list-style-type: none"> <li>Dudley and Walsall mental health trust</li> <li>Broadway North</li> <li>Mental health assessments and placements</li> <li>Drugs and alcohol teams</li> </ul>	6,952,467	-1,513,462	5,439,005	5,089,005	-350,000	<p><b>Non policy savings:</b>  Reduction in staffing <b>-£250k</b>  <b>Policy Saving:</b>  Closure of residential unit at Broadway North <b>-£100k</b></p>	<p>A number of social care management posts, user empowerment and welfare rights posts will cease. This will directly impact on Walsall staffing within the partnership as there will be less visible social care managers. Expertise around welfare benefits for mental health users will be lost. The partnership between DWMHP will be strained as less staff are available to deliver social care interventions at a time of increasing demands for service and assessments. There might be a dilution in the quality and number of social care interventions and practice might suffer. Management support will be provided by other means and there is now a senior management structure in place. Changes in service at Broadway North may increase anxiety levels for some people until they get used to the new arrangements.</p>			
<b>Total Social Care and Health</b>		<b>108,548,918</b>	<b>-37,773,584</b>	<b>70,775,334</b>	<b>64,859,420</b>	<b>-5,915,914</b>					