



Meeting: **Adults and Communities Overview and Scrutiny Committee**

Date/Time: **Tuesday, 16 January 2018 at 2.00 pm**

Location: **Sparkenhoe Committee Room, County Hall, Glenfield**

Contact: **Miss. G. Duckworth (0116 305 6226)**

Email: **gemma.duckworth@leics.gov.uk**

Membership

Mr. T. J. Richardson CC (Chairman)

Dr. P. Bremner CC Mr. D. Jennings CC
Ms. L. Broadley CC Mr. W. Liquorish JP CC
Mr. M. H. Charlesworth CC Mr. J. Miah CC
Mrs. H. J. Fryer CC Mr T. Parton CC

**Please note: this meeting will be filmed for live or subsequent broadcast via the Council's web site at <http://www.leicestershire.gov.uk>
– Notices will be on display at the meeting explaining the arrangements.**

AGENDA

| <u>Item</u> | <u>Report by</u> |
|---|------------------|
| 1. Minutes of the meeting held on 14 November 2017. | (Pages 5 - 10) |
| 2. Question Time. | |
| 3. Questions asked by members under Standing Order 7(3) and 7(5). | |
| 4. To advise of any other items which the Chairman has decided to take as urgent elsewhere on the agenda. | |
| 5. Declarations of interest in respect of items on the agenda. | |



6. Declarations of the Party Whip in accordance with Overview and Scrutiny Procedure Rule 16.
7. Presentation of Petitions under Standing Order 36.
8. Performance Report 2017/18 - Position at November 2017. Chief Executive and Director of Adults and Communities (Pages 11 - 26)
9. Medium Term Financial Strategy 2018/19 - 2021/22. Director of Adults and Communities and Director of Corporate Resources (Pages 27 - 52)

10. Date of next meeting.

The next meeting of the Committee is scheduled to take place on 6 March 2018 at 2.00pm.

11. Any other items which the Chairman has decided to take as urgent.

QUESTIONING BY MEMBERS OF OVERVIEW AND SCRUTINY

Members serving on Overview and Scrutiny have a key role in providing constructive yet robust challenge to proposals put forward by the Cabinet and Officers. One of the most important skills is the ability to extract information by means of questions so that it can help inform comments and recommendations from Overview and Scrutiny bodies.

Members clearly cannot be expected to be experts in every topic under scrutiny and nor is there an expectation that they so be. Asking questions of 'experts' can be difficult and intimidating but often posing questions from a lay perspective would allow members to obtain a better perspective and understanding of the issue at hand.

Set out below are some key questions members may consider asking when considering reports on particular issues. The list of questions is not intended as a comprehensive list but as a general guide. Depending on the issue under consideration there may be specific questions members may wish to ask.

Key Questions:

- Why are we doing this?
- Why do we have to offer this service?
- How does this fit in with the Council's priorities?
- Which of our key partners are involved? Do they share the objectives and is the service to be joined up?
- Who is providing this service and why have we chosen this approach? What other options were considered and why were these discarded?
- Who has been consulted and what has the response been? How, if at all, have their views been taken into account in this proposal?

If it is a new service:

- Who are the main beneficiaries of the service? (could be a particular group or an area)
- What difference will providing this service make to them – What will be different and how will we know if we have succeeded?
- How much will it cost and how is it to be funded?
- What are the risks to the successful delivery of the service?

If it is a reduction in an existing service:

- Which groups are affected? Is the impact greater on any particular group and, if so, which group and what plans do you have to help mitigate the impact?
- When are the proposals to be implemented and do you have any transitional arrangements for those who will no longer receive the service?
- What savings do you expect to generate and what was expected in the budget? Are there any redundancies?
- What are the risks of not delivering as intended? If this happens, what contingency measures have you in place?

This page is intentionally left blank



Minutes of a meeting of the Adults and Communities Overview and Scrutiny Committee held at County Hall, Glenfield on Tuesday, 14 November 2017.

PRESENT

Mr. T. J. Richardson CC (in the Chair)

Dr. P. Bremner CC
 Ms. L. Broadley CC
 Mr. M. H. Charlesworth CC
 Mrs. H. J. Fryer CC

Mr. D. Jennings CC
 Mr. W. Liquorish JP CC
 Mr. J. Miah CC
 Mr T. Parton CC

In attendance

Mr. R. Blunt CC, Lead Member for Adults and Communities
 Dr. K. Feltham CC, Cabinet Support Member
 Mrs. D. Taylor CC, Deputy Chairman of the Health Overview and Scrutiny Committee (for Minute Numbers 35 and 37)
 Dr. S. Hill CC, Spokesperson of the Health Overview and Scrutiny Committee (for Minute Numbers 35 and 37)
 Mr. S. Sheahan CC, Spokesperson of the Children and Families Overview and Scrutiny Committee (for Minute Number 37)

28. Minutes

The minutes of the meeting held on 12 September 2017 were taken as read, confirmed and signed.

29. Question Time.

The Chief Executive reported that no questions had been received under Standing Order 35.

30. Questions asked by members under Standing Order 7(3) and 7(5).

The Chief Executive reported that no questions had been received under Standing Order 7(3) and 7(5).

31. Urgent Items

There were no urgent items for consideration.

32. Declarations of interest in respect of items on the agenda.

The Chairman invited members who wished to do so to declare any interest in respect of items on the agenda for the meeting.

No declarations were made.

33. Declarations of the Party Whip in accordance with Overview and Scrutiny Procedure Rule 16.

There were no declarations of the party whip.

34. Presentation of Petitions under Standing Order 36.

The Chief Executive reported that no petitions had been received under Standing Order 36.

35. Delayed Transfers of Care

The Committee considered a report of the Director of Adults and Communities concerning Delayed Transfers of Care (DTC). The report outlined:

- i) the new national requirements imposed by NHS England as part of the Better Care Fund (BCF) policy;
- ii) the work undertaken to date by the County Council and local NHS partners to reduce DTC.

A copy of the report, marked 'Agenda Item 8' is filed with these minutes.

A supplementary paper setting out the position on DTCs at the end of September 2017 was circulated at the meeting and a copy is filed with these minutes.

In introducing the report, the Director of Adults and Communities advised that the County Council and all local NHS partners had agreed plans to achieve the NHS target for DTCs by March 2018 and the report and supplementary paper showed that the Plan was on target to deliver early in the new year, before March 2018. NHS England had arbitrarily changed the target date to November 2017. The County Council had reluctantly signed up to this target recognising that achievement of the target by November would be challenging. As yet, it was unclear what penalties would be imposed should the target not be achieved by November.

The Chairman welcomed the Deputy Chairman and Spokesperson of the Health Overview and Scrutiny Committee to the meeting for this item.

In the ensuing discussion, the following points were made:

- The role of the trusted assessors was to avoid duplication and speed up the assessment process. A single individual was nominated by the respective partners and all agreed to abide by the assessors decision. There was a need for more trusted assessors, particularly a person nominated by the private care home sector. Work was ongoing to develop this model.
- The workshops planned for staff, particularly in community settings, were aimed at looking at current practice and identifying issues that delayed discharges. It was hoped that small changes in working practices and processes would improve outcomes.
- Members of the Committee welcomed the report but expressed concern at the position adopted by NHS England which seemed to pay no regard to the circumstances prevailing locally.

RESOLVED:

That the current position with Delayed Transfers of Care be noted.

36. Impact on Adult Social Care of the National Living Wage and Payments to Staff for Sleep-In and Live-In Care

The Committee considered a report of the Director of Adults and Communities advising of the implications of recent developments in how the National Living Wage (NLW) and the former National Minimum Wage (NMW) applied to staff salaries for sleep-in and live-in duties. A copy of the report, marked 'Agenda Item 9' is filed with these minutes.

Members welcomed the report and the fact that the County Council already paid its staff above the NLW. It was also pleasing to note that the Council now required providers to pay the NLW.

In response to questions, members were advised as follows:

- It was possible for staff to be paid under the NLW for sleep-in duties, provided they were paid above the NLW while awake at work and that the two amounts balanced out so that overall the hourly rate was above the NLW.
- This ruling applied to when staff were required to be at specific premises rather than just being on-call. In terms of the effect on a person's pension, the hours worked and therefore paid would be classed as normal working time and therefore the pension contribution would be standard.
- The possibility of having to pay back pay could have a severe impact on a provider. In turn, this could cause a risk to residents of care homes if the provider was unable to pay a large back pay claim and continue to operate. Arrangements would therefore need to be put in place to find alternative accommodation for residents should this occur. A national piece of work had been undertaken around the implications on providers if they were faced with a back pay claim, and the Government had so far issued two guidance documents. Further guidance was awaited.

RESOLVED:

That the report be noted.

37. Draft Leicester, Leicestershire and Rutland Carers Strategy 2018-2021

The Committee considered a joint report of the Director of Adults and Communities, the Director of Children and Family Services and the Director of Public Health on the Draft Leicester, Leicestershire and Rutland Carers Strategy 2018-2021. The Strategy set out the draft strategic priorities relating to unpaid carers of all ages, and was a joint Strategy including all local authorities and CCGs across Leicester, Leicestershire and Rutland (LLR). A copy of the report, marked 'Agenda Item 10', is filed with these minutes.

The Chairman welcomed the Deputy Chairman and Spokesperson of the Health Overview and Scrutiny Committee, and the Spokesperson of the Children and Families Overview and Scrutiny Committee to the meeting for this item.

In introducing the report, the Director of Adults and Communities stated that a formal, public consultation exercise was due to commence in early January 2018. This had recently been approved by the County Council's Cabinet and was subject to approval by all the statutory sector partners. Arising from the discussion, the following points were made:

- Priority 8 in the Strategy (Supporting Young Carers) was aspirational, but it was necessary for the document to be at a high level. More detailed implementation plans had been developed at a lower level. A County Implementation Plan was currently being developed and this would be shared with the Committee once it had been completed. In terms of having a model of best practice, guidance had been received on producing a model Carers Strategy. The National Carers Strategy had still not been launched by the Government and it was stated that it would be some time before this was rolled out. Consultation had taken place with a large number of local carers and their views had been taken into account when producing the Strategy.
- A number of key actions had already been identified to improve the local support offer based on the earlier engagement, and it was agreed that work could commence on these during the consultation period. Once a clear implementation timetable for the Strategy was available, a further report would be presented to the Committee.

RESOLVED:

- (a) That the proposed consultation documentation on the draft Leicester, Leicestershire and Rutland Carers Strategy 2018-2021 be noted;
- (b) That a further report be presented to the Adults and Communities Overview and Scrutiny Committee when a clear implementation timetable for the Strategy is available.

38. Adults and Communities Local Account 2016/17

The Committee considered a report of the Director of Adults and Communities presenting the Adults and Communities Local Account for 2016/17. This was produced to report a local authority's performance, and was presented to the Committee on an annual basis. A copy of the report, marked 'Agenda Item 11', is filed with these minutes.

Members welcomed the report. Arising from the discussion, the following points were made:

- Following the Department's self-assessment on performance, two domains had been rated as 'adequate' – ensuring people have a positive experience and supporting carers. Key to informing the self-assessment rating was feedback from service users and carers and the feedback on the two adequate domains had been very mixed.
- It was felt that it would be useful to ascertain whether there were specific groups who felt that the service provided was only adequate. Work was being undertaken to look closely at the information received. However, the survey was anonymous and it was therefore only possible to identify demographics. Feedback on the

survey was made available, and where possible, respondents were asked if they wished to discuss their comments further with the Department.

- A suggestion was made that future reports should have a more detailed analysis of a particular area of service and that feedback and improvement plans could be a feature in the report. The Director undertook to explore this.
- The LLR Carers Strategy questionnaire could be amended to take account of the comments raised in the Local Account.

RESOLVED:

That the Adults and Communities Local Account 2016/17 be noted.

39. Date of next meeting.

It was noted that the next meeting of the Committee would be held on 16 January 2018 at 2.00pm.

2.00 – 3.31pm
14 November 2017

CHAIRMAN

This page is intentionally left blank



ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
16 JANUARY 2018

PERFORMANCE REPORT 2017/18 – POSITION AT NOVEMBER 2017

JOINT REPORT OF THE CHIEF EXECUTIVE AND
DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of Report

1. The purpose of this report is twofold: firstly to highlight the comparative performance position in 2016/17 through national benchmarking, and secondly to present the Committee with an update of the Adults and Communities Department's performance at the end of November 2017.

Policy Framework and Previous Decisions

2. The Adults and Communities Department's performance is reported to the Committee in accordance with the Council's corporate performance management arrangements.

Background

3. The metrics in Appendix A are based on the key performance measures of the Adults and Communities Department for 2017/18. These are reviewed through the annual business planning process to reflect the key priorities of the Department and the Council. The structure of Appendix A is aligned with the Vision and Strategy for Adult Social Care 2016-2020, '*Promoting Independence, Supporting Communities*'. This strategic approach is designed to ensure that people get the right level and type of support, at the right time to help prevent, reduce or delay the need for ongoing support, and maximise people's independence. This 'layered' model has been developed to ensure the obligations under the Care Act 2014 are met and Appendix B outlines the four central aspects of the Strategy.
4. The Adult Social Care indicators are a combination of national and local measures. At a national level performance is monitored via the Adult Social Care Outcomes Framework (ASCOF). The Communities and Wellbeing service area does not have such a formal structure for performance monitoring at a national level. The measures included in this report have been determined as local indicators.
5. Progress against targets is highlighted using a Red/Amber/Green (RAG) system and Appendix C sets out the description of each category.
6. A new Strategic Plan for the Council has been developed and was approved by the County Council at its meeting on 6 December. This outlines the Council's long-term vision for the organisation and the people and places of Leicestershire. Alongside

this is an overarching single outcomes framework which sets the strategic context for outcome based commissioning. As such, performance reporting from April 2018 will reflect these outcomes and be structured in line with the framework.

Benchmarking of 2016/17 Performance

7. There were 26 metrics in the 2016/17 ASCOF and performance in Leicestershire was above the national average for 54% of them. Four were in the top quartile, ie amongst the top 25% of authorities, and two were in the bottom quartile. The quartile performance on twelve of the 26 metrics improved from the previous year whilst four reduced.
8. Thirteen indicators were sourced from two surveys of carers and people in receipt of adult social care services. For people in receipt of adult social care services these include their quality of life, overall satisfaction, and ease at which they found information. These had all improved from the previous year when Leicestershire was significantly lower than the national average to last year when performance was statistically similar to the national average. In addition, the proportion of people stating that services help them feel safe is significantly higher than the national average and in the top quartile. The level of satisfaction amongst carers fell by ten percentage points from the previous survey two years ago and was significantly lower than the national average. All other metrics sourced from the carer survey were statistically similar to the national average.
9. Comparative ASCOF performance is commented on in more detail for each of the adult social care metrics reported in the remainder of the report.
10. In addition to the ASCOF and other national performance frameworks, the Department of Health and the Department for Communities and Local Government have developed an additional dashboard. This brings together a range of metrics in relation to the interface between the NHS and Adult Social Care. Analysis has recently been published at a local authority level and of the 150 councils included, Leicestershire is ranked 34th – this is in the top quartile, the second highest county council, and the highest when ranked against similar shire authorities.
11. Quality standards for contracted services such as residential placements and domiciliary care form part of the core agreement and providers are monitored by the Care Quality Commission (CQC) against these standards. In Leicestershire 85% of local providers are rated as good or outstanding which is above the national average whilst 14% require improvement and 1% are assessed as being inadequate.
12. Each year The Chartered Institute of Public Finance and Accountancy release library data over a range of metrics and compares counties that have a similar size and make up. The data reflects 2015-actuals and estimates for 2016-17. The strategic direction that Leicestershire has taken in greater engagement in volunteers is reflected in the county being in the top quartile for the amount of “worked hours” provided by volunteers of 23% compared to a county average of 9.3%
13. Leicestershire is in the bottom quartile for active borrowers per 1,000 population and physical visits for library purposes per 1,000 population. The profiles do not reflect the use of libraries for community purposes, as evidenced by the direction taken by

community managed libraries, where more work is being undertaken to make local libraries community hubs for their local areas.

14. Leicestershire is in the upper quartile for the percentage of libraries that provide public access wifi and the number of electronic workstations per 100,000 population, but in the lower quartile for the number of hours that the IT has been used per 1,000 population. This suggests that work is required to review the balance between available IT and its take-up.

Performance Update: April to November 2017

15. Appendix A includes four key measures to reflect each of the four layers of the Vision and Strategy. Each of these monitors the proportion of new contacts from people requesting support and what the sequels of these requests were. Between April and November 2017 there were 18,250 new adult social care contacts, of which 60% resulted in a preventative response such as universal services or signposting. A further 17% resulted in a response relative to reducing need such as providing equipment or adaptations and 12% resulted in a response relative to delaying need, ie the provision of a reablement service that supports people to relearn the skills required to keep them safe and independent at home. Finally, 11% resulted in a long-term service such as a personal budget.
16. The overall number of visitors to heritage sites between April and November was the same as the equivalent period last year. The Century Theatre, 1620s House and Garden, and Melton Carnegie museum have all seen increased visitors whilst Bosworth Battlefield and Charnwood museum have both seen reductions.
17. There has been a national downward trend in the number of visits to libraries, including those in Leicestershire. As such, the 2017/18 targets have been agreed with this in mind. Between April and November there were 700,000 visits to Leicestershire libraries and the current full-year forecast is on track to meet the target of one million visits. The number of loans (a little over one million between April and November) is currently forecast to meet the 2017/18 target of 1.4million.
18. An additional two libraries metrics are included to reflect the priorities around children's loans and e-loans. Between April and November there have been 421,000 children's loans which are up on the comparable period last year, due in part to Hinckley library being closed for a short period in the summer of 2016. With regards e-loans, these continue to show a marked increase - 86,000 between April and November compared to 48,000 during the comparable period the year before.
19. At the Overview and Scrutiny Committee meeting on 14 June 2016, it was requested that the number of libraries loans are split between those run by the County Council and those that are community managed. This precise breakdown is not appropriate due to the continually changing number of community managed libraries. However, Appendix A does contain the number of loans from all community libraries, including those which are community managed or due to become community managed. The data also highlights the split for children's loans.
20. The Leicestershire Adult Learning Service's (LALS) performance relates to the proportion of learning aims due to be completed in a period successfully achieved. For the academic year 2016/17, the proportion of 96% met the target and was an

improvement on the previous year. The figure is lower at 81% for 2017/18, although this is often the case as learners that are not fully committed tend to withdraw early in the academic year and this skews initial performance figures.

21. Volunteering programmes are a priority for the department in relation to libraries, museums and heritage services. Between April and November there were 18,000 hours of volunteering, an 8% increase on the same period last year.
22. The nature of accommodation for people with learning disabilities has a strong impact on their safety, overall quality of life, and reducing social exclusion. One of the ASCOF indicators monitors the proportion of service users aged 18-64 with a learning disability who are in settled accommodation and not in a care home. Performance in 2016/17 was 79% and better than the national average. Further improvement has been made between April and November with performance now at 80%.
23. ASCOF 1E measures the proportion of adults with learning disabilities who are receiving long-term services and are in paid employment. There is a strong link between employment and enhanced quality of life, including evidenced benefits for health and wellbeing. Performance last year was 11% and in the top quartile nationally. This high level of performance has also been maintained through the period April to November.
24. Reducing delayed transfers of care from hospital is a national priority and monitored through the Better Care Fund (BCF). The national methodology has changed to use the average number of days people have been delayed per month. Between April and October (data is published nationally two months in arrears) the average number of days per month people have been delayed (and the delay was attributable to adult social care) was 242; the equivalent figure during 2016/17 was slightly higher at 248. Compared with other similar and regional councils Leicestershire remains one of the better performing authorities.
25. During 2016/17, 80% of people who received reablement support had no need for ongoing services following the intervention. This level of performance was better than the national average. Between April and November performance remains similar at 79%.
26. A key measure in the BCF is the ASCOF metric which measures the proportion of people discharged from hospital via reablement services who are still living at home 91 days later. During 2016/17 performance (87%) was better than the national average and just short of the top quartile (88%). Performance between April and November (90%) shows further improvement and is on track to meet the 2017/18 target of 87% target.
27. Avoiding permanent placements in residential or nursing care homes is a good indication of delaying dependency. Research suggests that where possible, people prefer to stay in their own home rather than move into permanent care. For people aged 18-64 performance was in the top quartile during 2016/17. However, there were 24 admissions between April and November giving a full-year forecast of 36 admissions, an increase on last year (29).

28. For people aged 65 or over the number of admissions in 2016/17 was higher than the national average and in the third quartile. Based on the number of admissions between April and November the 2017/18 forecast is for 863 admissions. This is on track to meet the BCF target (879) which is set slightly higher to take account of a growing population.
29. The County Council remains committed that everyone in receipt of long-term, community-based care should be provided with a personal budget, preferably as a direct payment. During 2016/17, the ASCOF measures relating to service users and carers were all above the national average with the proportion of service users in receipt of a cash payment (55%) in the top quartile. Between April and November performance has remained similar although the slight reduction in service user personal budgets is due in part to recording rather than actual practice.
30. There were over 1,000 safeguarding enquiries completed between April and November 2017; 23% more than in the similar period last year. The proportion of these which were substantiated has increased by two percentage points to 46% between April and November.
31. Developing a safeguarding culture that focuses on the personalised outcomes desired by people with care and support needs who may have been abused is a key operational and strategic goal of the Care Act. Of the safeguarding enquiries completed in the first quarter where an outcome was expressed, 95% were fully or partially achieved.

Conclusion

32. This report provides a summary of benchmarked performance in 2016/17 and an update for the period April to November 2017.
33. Just over half the ASCOF metrics were above the national average in 2016/17.
34. Overall performance since April has been good. There are areas of excellent performance, such as accommodation and employment of people with learning disabilities and library issues, particularly children's and e-loans. Conversely there are clear areas recognised as requiring improvement, such as permanent residential admissions, access to service user information and social contact for carers. Details of all metrics will continue to be monitored on a monthly basis through the remainder of the year.

Background papers

Adult Social Care Outcomes Framework 2015/16

<https://www.gov.uk/government/publications/adult-social-care-outcomes-framework-ascof-2015-to-2016>

Leicestershire's Better Care Fund Plan 2016/17 – Delivering our vision and for health and integration

<http://www.healthandcareleicestershire.co.uk/wp-content/uploads/2016/12/BCF-Plan-Public-summary.pdf>

Leicestershire County Council Strategic Plan 2014-18

<http://politics.leics.gov.uk/documents/s92330/7%20council%20strategic%20and%20transformation%20appx%201%20strategic.pdf>

Leicestershire County Council Vision and Strategy for Adult Social Care 2016-20

http://corpedrmsapp:8087/Intranet%20File%20Plan/Departmental%20Intranets/Adults%20and%20Communities/2012%20-%2013/Departmental%20Administration/ASC%20Policies%20and%20Procedures/ASC_Strategy_2016-2020_P0358_12.pdf

Department of Health NHS Social Care Interface Dashboard
<https://www.gov.uk/government/publications/local-area-performance-metrics-and-ambitions>

Officers to Contact

Jon Wilson, Director of Adults and Communities
Adults and Communities Department
Tel: 0116 305 7454
Email: jon.wilson@leics.gov.uk

Sandy McMillan, Assistant Director (Strategy and Commissioning)
Adults and Communities Department
Tel: 0116 305 7320
Email: sandy.mcmillan@leics.gov.uk

Matt Williams, Business Partner – Business Intelligence Service
Chief Executive's Department
Tel: 0116 305 7427
Email: matt.williams@leics.gov.uk

List of Appendices

- Appendix A - Adults and Communities Department Performance Dashboard for 2016/17;
- Appendix B – Adult Social Care Strategic Approach;
- Appendix C – Red/ Amber/Green (RAG) Rating - Explanation of Thresholds.

Relevant Impact Assessments

Equality and Human Rights Implications

35. The Adults and Communities Department supports vulnerable people from all diverse communities in Leicestershire. However, there are no specific equal opportunities implications to note as part of this performance report. Data relating to equalities implications of service changes are assessed as part of Equality and Human Rights Impacts Assessments.

Partnership Working and Associated Issues

36. BCF measures and associated actions are overseen and considered by the Integration Executive and Health and Wellbeing Board.

Adults and Communities Performance 2017/18

April – November 2017

PREVENT NEED

| | |
|--|---|
| Corporate Strategy | Better Adult Social Care |
| Joint Health and Wellbeing Strategy | Managing the shift to early intervention and prevention |

Corporate Priority: Unified prevention offer and Information and Support

| Measure and Description | | Aim | RAG | In-Year Progress | Year-end Target | 17/18 | 16/17 and Quartile | |
|-------------------------|--|-------------------|----------|------------------|-----------------|-----------------------------|-----------------------------|--------|
| Local | % of sequels that 'Prevent Need' | Target Band Width | G | ↔ | 59-63% | 60% (10.9k out of 18.3k) | 58% (18.9k out of 32.7k) | N/A |
| ASCOF 3D pt 1 | % of SUs who find it easy to find information | H | N/A | N/A | 70.1% | Due May -18 | 70% | Bottom |
| ASCOF 3D pt 2 | % of carers who find it easy to find information | H | N/A | N/A | N/A | Next survey due 2018/19 | 63.5% | Third |

Corporate Strategy

Leicestershire's Cultural Environment

Corporate Priority: A Better Place and Visitor Offer

| Measure and Description | | Aim | RAG | In-Year Progress | Year-end Target | 17/18 | 16/17 and Quartile | |
|-------------------------|-----------------------|-----|----------|------------------|-----------------|--------|---------------------|-----|
| Local | Heritage visits | H | G | ↔ | Maintain 16/17 | 115.9k | 115.7k (Apr-Nov) | N/A |
| Local | Hours of Volunteering | H | G | ↑ | Maintain 16/17 | 18.0k | 16.6k (Apr-Nov) | N/A |

Corporate Priority: Remodelled Library Service

| Measure and Description | | Aim | RAG | In-Year Progress | Year-end Target | 17/18 | 16/17 and Quartile | |
|-------------------------|--|-----|-----|------------------|-----------------|-------|--------------------|--|
|-------------------------|--|-----|-----|------------------|-----------------|-------|--------------------|--|

Corporate Priority: Remodelled Library Service

| Measure and Description | | Aim | RAG | In-Year Progress | Year-end Target | 17/18 | 16/17 and Quartile | |
|-------------------------|--------------------------------------|-----|-----|------------------|-----------------|--------|--------------------------|-----|
| Local | Total council funded library visits | H | G | ↑ | 1.0m | 699.0k | 696.8k (Apr-Nov 2016) | N/A |
| Local | Total council funded library issues | H | G | ↑ | 1.41m | 1.04m | 1.02m (Apr-Nov 2016) | N/A |
| Local | Council funded children's issues | H | G | ↑ | 551.0k | 421.2k | 412.6k (Apr-Nov 2016) | N/A |
| Local | E-loans | H | G | ↑ | 100.2k | 85.6k | 48.0k (Apr-Nov 2016) | N/A |
| Local | Total community library issues | N/A | N/A | N/A | N/A | 250.5k | 278.0k (Apr-Nov 2016) | N/A |
| Local | Community library children's issues. | N/A | N/A | N/A | N/A | 137.1k | 143.3k (Apr-Nov 2016) | N/A |

Corporate Strategy

Investment in People – Employment and Skills Support

Corporate Priority: Remodelled Library Service

| Measure and Description | | Aim | RAG | In-Year Progress | Year-end Target | 17/18 | 16/17 and Quartile | |
|-------------------------|-------------------|-----|-----|------------------|-----------------|------------------------------|------------------------------|-----|
| Local | LALS Success Rate | H | A | ↑ | 86% | 81% (Academic year 17/18) | 96% (Academic year 16/17) | N/A |

REDUCE NEED**Corporate Strategy**

Better Adult Social Care

Joint Health and Wellbeing StrategySupporting the ageing population;
Improving services for people with learning disabilities*Corporate Priority: Unified prevention offer and Information and Support*

| Measure and Description | | Aim | RAG | In-Year Progress | Year-end Target | 17/18 | 16/17 and Quartile | |
|-------------------------|--|-----|-----|------------------|-----------------|-------|--------------------|--|
|-------------------------|--|-----|-----|------------------|-----------------|-------|--------------------|--|

Corporate Priority: Unified prevention offer and Information and Support

| Measure and Description | | Aim | RAG | In-Year Progress | Year-end Target | 17/18 | 16/17 and Quartile | |
|-------------------------|---|-------------------|----------|------------------|-----------------|----------------------------|----------------------------|--------|
| Local | % of sequels that 'Reduce Need' | Target Band Width | G | ↑ | 13-17% | 17% (3.0k out of 18.3k) | 21% (6.9k out of 32.7k) | N/A |
| ASCOF 1I pt 1 | % of SUs who had as much social contact as they would like | H | N/A | N/A | 48% | Due May 18 | 46% | Second |
| ASCOF 1I pt 2 | % of carers who had as much social contact as they would like | H | N/A | N/A | N/A | Next survey due 2018/19 | 31.4% | Third |

Corporate Priority: Effective Support for People with Learning Disabilities

| Measure and Description | | Aim | RAG | In-Year Progress | Year-end Target | 17/18 | 16/17 and Quartile | |
|-------------------------|--|-----|----------|------------------|-----------------|-----------------------------|-----------------------------|--------|
| ASCOF 1G | % of people with LD in settled accommodation | H | G | ↑ | 80% | 80.0% (1.2k out of 1.5k) | 79.4% (1.2k out of 1.5k) | Second |
| ASCOF 1E | % of people with LD in employment | H | G | ↑ | 11% | 11.4% (0.2k out of 1.5k) | 11.1% (0.2k out of 1.5k) | Top |

DELAY NEED

| | |
|--|---|
| Corporate Strategy | Integrating Health and Social Care – Better Care Fund |
| Joint Health and Wellbeing Strategy | Supporting the ageing population |

Corporate Priority: Improved Hospital Discharge and Reablement

| Measure and Description | | Aim | RAG | In-Year Progress | Year-end Target | 17/18 | 16/17 and Quartile | |
|-------------------------|--------------------------------|-------------------|----------|------------------|-----------------|------------------------------|------------------------------|-----|
| Local | % of sequels that 'Delay Need' | Target Band Width | G | ↔ | 12-16% | 12.1% (2.2k out of 18.3k) | 12.2% (4.0k out of 32.7k) | N/A |

Corporate Priority: Improved Hospital Discharge and Reablement

| Measure and Description | | Aim | RAG | In-Year Progress | Year-end Target | 17/18 | 16/17 and Quartile | |
|--------------------------------------|---|-----|-----|------------------|-----------------|---|-------------------------------------|--------|
| Local | Delayed transfers of care attributable to ASC-only | L | N/A | N/A | TBC | 242 Ave days/Mth (Apr-Oct) | 248 Ave days/Mth (2016/17) | Second |
| ASCOF 2D | % of people who had no need for ongoing services following reablement | H | A | ↔ | 80% | 78.8% (1.6k out of 2.0k) | 80.2% (2.7k out of 3.4k) | Second |
| ASCOF 2B pt 1 <i>*BCF*</i> | Living at home 91 days after hospital discharge and reablement | H | G | ↑ | 87% | 89.9% (507 out of 564) | 86.5% (378 out of 437) | Second |
| ASCOF 2A pt 1 | Permanent admissions to care (aged 18-64) per 100,000 pop. | L | R | ↓ | 6.1 | 8.8 (36 admissions) (full year forecast) | 7.1 (29 adm's) (full year) | Top |
| ASCOF 2A pt 2 <i>*BCF*</i> | Permanent admissions to care (aged 65+) per 100,000 pop. | L | G | ↔ | 630.6 | 619.1 (863 admissions) (full year forecast) | 633.5 (864 adm's) (full year) | Third |

MEET NEED

| | |
|--|----------------------------------|
| Corporate Strategy | Better adult social care |
| Joint Health and Wellbeing Strategy | Supporting the ageing population |

Corporate Priority: Greater Personalisation of Services

| Measure and Description | | Aim | RAG | In-Year Progress | Year-end Target | 17/18 | 16/17 and Quartile | |
|-------------------------|-------------------------------|-------------------|-----|------------------|-----------------|------------------------------|-----------------------------|-----|
| Local | % of sequels that 'Meet need' | Target Band Width | A | ↔ | 5-9% | 11.4% (2.1k out of 18.3k) | 9.0% (2.9k out of 32.7k) | N/A |




Corporate Priority: Greater Personalisation of Services

| Measure and Description | | Aim | RAG | In-Year Progress | Year-end Target | 17/18 | 16/17 and Quartile | |
|-------------------------|---|-----|-----|------------------|-----------------|-----------------------------|-----------------------------|--------|
| ASCOF 1C pt 1a | Adults aged 18+ receiving self directed support | H | A | ↔ | 97% | 93.3% (4.6k out of 4.9k) | 95.5% (4.6k out of 4.8k) | Second |
| ASCOF 1C pt 2a | Adult aged 18+ receiving direct payments | H | G | ↔ | 45% | 52.9% (2.6k out of 4.9k) | 55.4% (2.7k out of 4.8k) | Top |
| ASCOF 1C pt 1b | Carers receiving self directed support | H | G | ↔ | 99% | 99.6% (1.4k out of 1.4k) | 99.7% (1.6k out of 1.6k) | Second |
| ASCOF 1C pt 2b | Carers receiving direct payments | H | G | ↑ | 96% | 96.9% (1.4k out of 1.4k) | 96.7% (1.5k out of 1.6k) | Second |

Corporate Priority: Strong Adult Safeguarding

| Measure and Description | | Aim | RAG | In-Year Progress | Year-end Target | 17/18 | 16/17 and Quartile | |
|-------------------------|--|-----|-----|------------------|-----------------|---------------------------|---------------------------|-----|
| Local | Of safeguarding enquiries where an outcome was expressed, the percentage partially or fully achieved | H | G | ↔ | 85% | 94.9% (561 out of 591) | 94.2% (481 out of 512) | N/A |
| ASCOF 4B | % of service users who say that services have made them feel safe | H | N/A | N/A | 90% | Due May -18 | 91% | Top |

Key to Columns

| | | |
|-------------------------|---|--|
| Measure | ASCOF | A metric within the national performance framework known as Adult Social Care Outcomes Framework (ASCOF) |
| | Local | A measure defined and calculated for Leicestershire County Council only |
| Aim | High | The aim of performance is to be high |
| | Low | The aim of performance is to be low |
| In year progress |  | During the course of the year performance is improving. If month-by-month monitoring is not applicable e.g. due to seasonality, progress on year-to-date compared with last year is improving. |
| |  | During the course of the year performance is neither improving nor declining. If month-by-month monitoring is not applicable e.g. due to seasonality, progress on year-to-date compared with last year is similar. |
| |  | During the course of the year performance is declining. If month-by-month monitoring is not applicable e.g. due to seasonality, progress on year-to-date compared with last year is declining. |

Vision and Strategy for Adult Social Care 2016 – 2020

Prevent need

We will work with our partners to prevent people needing our support. We will do this by providing information and advice so that people can benefit from services, facilities or resources which improve their wellbeing. This service might not be focused on particular health or support needs - but is available for the whole population – for example, green spaces, libraries, adult learning, places of worship, community centres, leisure centres, information and advice services. We will promote better health and wellbeing and work together with families and communities (including local voluntary and community groups).

Reduce need

We will identify those people most at risk of needing support in the future and intervene early if possible to help them to stay well and prevent further need for services. For example we might work with those who have just been diagnosed with dementia, or lost a loved-one, people at risk of isolation, low-level mental health problems, and carers.

Our work will be targeted at people most likely to develop a need, and try to prevent problems from getting worse so that they do not become dependent on support. This might include: information, advice, minor adaptations to housing which can prevent a fall, support and assistance provided at a distance using information and communication technology via telephone or computer.

Delay need

This will focus on support for people who have experienced a crisis or who have an illness or disability, for example, after a fall or a stroke, following an accident or onset of illness. We will try to minimise the effect of disability or deterioration for people with ongoing health conditions, complex needs or caring responsibilities. Our work will include interventions such as reablement, rehabilitation, and recovery from mental health difficulties. We will work together with the individual, their families and communities, health and housing colleagues to ensure people experience the best outcomes through the most cost effective support.

Meeting need

The need for local authority funded social care support will be determined once we have identified and explored what's available to someone within their family and community. People who need our help and have been assessed as eligible for funding, will be supported through a personal budget. The personal budget may be taken as a payment directly to them or can be managed by the council. Wherever possible we will work with people to provide a choice of help which is suitable to meet their outcomes. However, in all cases the council will ensure that the cost of services provides the best value for money. Whilst choice is important in delivering the outcomes that people want, maintaining people's independence and achieving value for money is paramount.

This page is intentionally left blank

Explanation of RAG Rating

| | |
|--------------|---|
| RED | <p>Close monitoring or significant action required. This would normally be triggered by any combination of the following:</p> <ul style="list-style-type: none"> • Performance is currently not meeting the target or set to miss the target by a significant amount. • Actions in place are not believed to be enough to bring performance fully back on track before the end of the target or reporting period. • The issue requires further attention or action |
| AMBER | <p>Light touch monitoring required. This would normally be triggered by any combination of the following:</p> <ul style="list-style-type: none"> • Performance is currently not meeting the target or set to miss the target by a narrow margin. • There are a set of actions in place that is expected to result in performance coming closer to meeting the target by the end of the target or reporting period. • May flag associated issues, risks and actions to be addressed to ensure performance progresses. |
| GREEN | <p>No action required. This would normally be triggered when performance is currently meeting the target or on track to meet the target, no significant issues are being flagged up and actions to progress performance are in place.</p> |

The degree to which performance is missing a target is open to debate. A common way of overcoming this is to use a precise percentage threshold between current performance and the target. However, a blanket approach (such as plus or minus 10%) is not appropriate due to the varying ways that metrics are reported. E.g. small numbers, rates per capita, percentages.

This page is intentionally left blank



ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
16 JANUARY 2018

JOINT REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES
AND THE DIRECTOR OF CORPORATE RESOURCES

MEDIUM TERM FINANCIAL STRATEGY 2018/19–2021/22

Purpose of Report

1. The purpose of this report is to:
 - a) Provide information on the proposed 2018/19-2021/22 Medium Term Financial Strategy (MTFS) as it relates to the Adults and Communities Department;
 - b) Ask members of the Committee to consider any issues as part of the consultation process, and make any recommendations to the Scrutiny Commission and Cabinet accordingly.

Policy Framework and Previous Decisions

2. The County Council agreed the current MTFS in February 2017. This was the subject of a comprehensive review and revision in light of the current economic circumstances. The draft MTFS for 2018/19-2021/22 was considered by the Cabinet on 12 December 2017.

Background

3. The MTFS is set out in the report to Cabinet on 12 December 2017, a copy of which has been circulated to all Members of the County Council. This report highlights the implications for the Adults and Communities Department.
4. Reports such as this one are being presented to the relevant Overview and Scrutiny Committees. The views of this Committee will be reported to the Scrutiny Commission on 24 January 2018. The Cabinet will consider the results of the scrutiny process on 9 February 2018 before recommending a MTFS, including a budget and capital programme for 2018/19 to the County Council on 21 February 2018.

Service Transformation

5. The Adult Social Care (ASC) Strategy provides a context for the transformation and delivery of adult social care services in Leicestershire for the next four years. The aim of the Strategy is to increase people's independence, reduce the reliance on formal social care provision, and develop new ways of working to meet the demands going forward.

6. At the same time the Care Act 2014 places a duty on local authorities to integrate services with Health and other partners, both at an operational level and in respect to strategy and commissioning, in order to deliver joined up high quality services. The Better Care Together Programme and the development of the Sustainability and Transformation Plan (STP) will provide a framework to develop new models of care across Leicestershire.
7. The ASC Strategy is focussed on:
 - Preventing social care need, developing robust and flexible solutions;
 - Reducing and delaying the need for social care by promoting self-care, reablement, enablement and improved independence skills, ensuring that the “reablement and progression” models we develop are flexible, accessible and produce effective outcomes;
 - Meeting essential need in order to keep people safe and maintain wellbeing;
 - Streamlined and efficient assessments, support planning and reviews;
 - Processes that work and workers empowered with the right tools to undertake tasks, having the right skills in the right part of the pathway;
 - Targeting staffing resources to meet needs for assessment and care management, social care provision and review.
8. The Department of Health requires that each area has a plan for integration between social care and the NHS for implementation by 2020. In order to meet these requirements to work in a more planned and integrated way with East and West Leicestershire Clinical Commissioning Groups (CCGs), the Adults and Communities Department has been reorganised at an operational level to a locality organised Care Pathway footprint. This will also build, refine, and develop relationships with other non-health partners, in particular the District Councils and local voluntary sector organisations. This will ensure that the County Council is involved and contributes to developing new models of care.
9. Having restructured the adult social care services, the department intends to review operating systems, processes and practice over the course of the next 12 months. The department aims to articulate a new Target Operating Model (TOM) to assure alignment to the department’s strategic approach and ensure that it is operating effective and efficient operations. The operating model will focus on self-service approaches, proportionate assessment and review, productive back office functions, strategic commissioning and alternative delivery models including potential partnerships/joint ventures to deliver high quality, sustainable social care provision.
10. The Better Care Fund (BCF) contributes £17m towards the protection of social care services. At this point, it has been assumed that this will continue into 2018/19 at the same amount and will be directed to services that aim to help service users to maintain their independence in the community, provide residential services where required and reduce the decline in conditions that lead to more costly social care and NHS services. In addition to the adult social care protection, the BCF contributes an additional £5.4m of funding to social care for the provision of social work services, management of demand and development of integrated services.
11. The Communities and Wellbeing strategy provides a platform for the future development of cultural, heritage and adult learning services through to 2020. The

strategic goals are to enable access to services, support to strategic services to enable independent and resilient communities through culture and learning.

12. The Communities and Wellbeing Service will continue to explore how it can sustain services through partnerships with communities and specialist resources. The service will be reconfigured to support the core offer, and new models of delivering evidence based services will either be devolved or commissioned from the Council. The continued development of partnerships to deliver services and new opportunities to extend access to services will be sought.
13. The draft Growth and Savings for the 2018 MTFS (2018/19-2021/22) reflect the changes in demand for services and the transformation in delivery of services to achieve the department's strategic intentions.

Proposed Revenue Budget

14. The table below summarises the proposed 2018/19 revenue budget and provisional budgets for the next three years. The proposed 2018/19 revenue budget is shown in detail in Appendix A.

| | 2018/19 £000 | 2019/20 £000 | 2020/21 £000 | 2021/22 £000 |
|--|-------------------------|-------------------------|-------------------------|-------------------------|
| Original prior year budget | 135,053 | 132,831 | 133,701 | 134,761 |
| Budget Transfers and Adjustments | 688 | | | |
| Sub total | 135,741 | 132,831 | 133,701 | 134,761 |
| Add proposed growth (Appendix B) | 1,845 | 3,455 | 2,375 | 2,120 |
| Less proposed savings (Appendix C) | (4,755) | (2,585) | (1,315) | (0) |
| Proposed/Provisional net budget | 132,831 | 133,701 | 134,761 | 136,881 |

15. Detailed service budgets have been compiled on the basis of no pay or price inflation, a central contingency will be held which will be allocated to services as necessary.
16. The central contingency also includes provision for an annual 1% increase in the employers' contribution to the Local Government Pension Scheme based upon the 2016 triennial actuarial revaluation of the pension fund.
17. The total gross proposed budget for 2018/19 is £226.4m with contributions from grants, health transfers and service user contributions projected of £93.6m. The proposed net budget for 2018/19 totals £132.8m and is distributed as follows:

| Net Budget 2018/19 | | |
|----------------------------------|----------------|---------|
| Demand Led Commissioned Services | £106.5m | 80.2% |
| Direct Services | £16.0m | 12.0% |
| Care Pathway –East Locality | £8.2m | 6.2% |
| Care Pathway – West Locality | £6.7m | 5.1% |
| Strategic Services | £5.1m | 3.8% |
| Early Intervention & Prevention | £1.2m | 0.9% |
| Department Senior Management | £0.9m | 0.7% |
| Better Care Fund Contribution | (£17.0m) | (12.8%) |
| Communities & Wellbeing | £5.2m | 3.9% |
| Department Total | £132.8m | |

Other Changes and Transfers

18. A number of budget transfers (totalling a net increase of £0.7m) were made through the 2017/18 financial year and are now adjusted for in the updated original budget. These transfers are:
- £0.8m for pay and pension inflation transferred from the central inflation contingency;
 - (£0.1m) smaller transfers to and from other departments.
19. Growth and savings have been categorised in the appendices under the following classification:
- * item unchanged from previous MTFS;
- ** item included in the previous MTFS, but amendments have been made;
- No stars new item.
20. This star rating is included in the descriptions set out for growth and savings below.
21. Savings have also been classified as Transformation or Departmental and highlighted as “Eff” or “SR” dependent on whether the saving is seen as an efficiency or a service reduction or a mixture of both. “Inc” denotes those savings that are funding related or to generate more income.

Growth

22. As in previous years, demographic growth and increasing needs are the main drivers of the need for growth budgets within ASC. However, the profile of service users and their care needs are constantly changing, which may impact on the services commissioned or the income received. The impact on the budget can be significant with gross demand led expenditure totalling c£160m.
23. The total growth required is £1.8m for 2018/19 and £9.8m over the next four years in total. The budget increases are outlined below and summarised in Appendix B.

****G6 Older People demand – £1,275,000 2018/19 rising to £4,680,000 by 2021/22**

24. People aged over 65 account for the majority of the department’s care expenditure. This financial growth is required to meet the increasing numbers of older people with substantial and critical needs as well as the increasing fragility of existing service users. Future changes in demand are initially estimated using historic trends to produce a baseline forecast of the likely number and average cost of service users. During 2017/18, there has been an increase in additional needs requirements and the number of home care service users offset by a reduction in the average cost of care packages provided. It is anticipated that this trend will continue.

****G7 Learning Disability demand – £880,000 2018/19 rising to £4,140,000 by 2021/22**

25. The level of learning disability support required is growing mainly due to costs of care packages for known service users transferring from Children’s to Adult Social Care (around 120 per annum) and increasing levels of additional needs of existing service users requiring high cost placements. There is currently a significant increase in the

numbers of social care placements in Children's services which may impact on Adults in the long term but cannot be quantified yet. Increased demand will also impact on the number of packages commissioned through the Learning Disabilities Pooled Budget where Continuing Healthcare (CHC) will be awarded.

**G8 Mental Health demand – £130,000 2018/19 rising to £340,000 by 2021/22

26. During 2017/18, the number of service users has slightly increased and there has also been an increase in Additional Needs Allowances (ANAs). It is anticipated that this trend will continue.

**G9 Physical Disabilities demand – £170,000 2018/19 rising to £495,000 by 2021/22

27. During 2017/18, the number of service users has remained static. However, this growth is required to meet the needs of the expected increase in service users from the projected demographic growth.

G10 Resources for ongoing reviews of service users needs – £610,000 2018/19 ongoing

28. The Care Act 2014 specifies that care and support plans must be kept under review generally. Reviewing intended outcomes detailed in the plan is the means by which the local authority complies with its ongoing responsibility towards people with care and support needs. Without a system of regular reviews, plans could quickly become out of date meaning that people are not obtaining the care and support requires to meet their needs.
29. There are around 5,000 planned and 600 unplanned reviews to complete per year (excluding those required for specific projects). There are currently 36 full time equivalents (FTEs) delivering these reviews undertaking approximately 110 reviews per year and current performance is likely to achieve 4,000 reviews. Half of these posts are temporary and funded from earmarked funds.
30. It is planned to deliver the 5,600 reviews by improving the level of performance per FTE to 154 reviews per annum. To achieve this level of performance would require a different approach, ie significantly more telephone reviews, in order to deliver more statutory reviews and contribute to MTFS savings. This approach would require a total of 36 FTE to deliver all the reviews of which 18 FTE are already funded so the growth is required for the remaining 18 FTE.

G11 Resources for managing hospital discharges - £170,000 2018/19 ongoing

31. Until 2015/16 the Council received additional government funding over the winter period to prevent admissions to University Hospitals Leicester (UHL) and facilitate timely discharge resulting in reduced lengths of stay and delayed transfer of care. Since 2016/17, this funding has not been available and resources have been funded from Council earmarked funds.
32. In June 2017, the ASC Care Pathway restructure established the overall staffing resource for the UHL social care team. However, the following issues have impacted on the team:
- In July the Integrated Discharge Team was established at UHL which has resulted in additional demands on the service;

- Opening of the Leicester Royal Infirmary's new Accident and Emergency has resulted in additional demands for social care in supporting admission avoidance and navigating to appropriate services;
 - The improved Better Care Fund (iBCF) targets have placed additional demand on managing the flow of patients out of hospital, avoiding Delayed Transfer to Care (DToC's) delay attributable to social care and supporting the reduction of DToC's attributable to health;
 - Requirement to move towards seven days service.
33. An additional five FTE Community Support Workers (£170,000) are now required to manage demand (full implementation of seven days service is not expected in the short medium term).
34. Four workers will be dedicated to UHL. These workers would:
- Support Emergency Department, Acute Frailty Unit and Assessment Wards to avoid admission to acute beds;
 - Provide link workers to support activity in Glenfield Hospital, Leicester General Hospital and other out of county hospitals;
 - Support patients allocated to UHL on the Discharge to Assessment;
 - Ensure effective contribution and development of the IDT;
 - Provide appropriate resource to facilitate discharges at weekends (currently over winter period) and to progress discharge arrangements to reduce length of stay.
35. One worker will provide additional peripatetic support to all hospital discharge environments.
36. There is no capacity in the current programme, but BCF funding will be investigated for future years

G12 Transforming Care transfers from health - £750,000 2018/19 to £1,500,000 by 2019/20

37. The national Transforming Care Programme aims to significantly reduce the numbers of people with learning disabilities and/or autism receiving assessment and treatment in inpatient settings. Typically these patients have very complex and challenging needs with high costs of care. There are currently 26 such longer term patients from Leicestershire and the plan is to halve this number by March 2019. There is also a plan to reduce the number of inpatient assessment and treatment beds provided locally by four during 2018.
38. This will mean that by 2019 approximately 15 people per annum who would previously have received inpatient care will receive community services. A portion of the cost will fall on the County Council, estimated to be around £1.5m per annum. There will be a transfer of funding through a "dowry" for the existing patients from NHS Specialised Commissioning to local CCGs for some long term patients. There is uncertainty around the information provided from the NHS including the timing of the transfers, funding levels for existing patients and funding for future demand.

* G13 removal of time limited income - £2,140,000 from 2018/19 ongoing

39. This is removing the Adult Social Care Support Grant from the Department of Communities and Local Government which was an one off grant for 2017/18.

Changes in Growth

40. An additional growth requirement has been identified, that was not included in the draft MTFs reported to the Cabinet in December. This relates to the loss of a Deprivation of Liberty Safeguards (DoLS) grant from the Department of Health (£260,000). The grant was for a limited period in recognition of additional costs that local government have incurred. However, the pressure to undertake assessments continues and the Government have not provided any on-going funding to replace the grant.
41. Before the MTFs report to Cabinet on 9 February, the provisional MTFs will be reviewed and if appropriate updated by the latest budget monitoring position for 2017/18. The expenditure and income budgets related to the provision of care are particularly volatile.

Savings

42. Details of proposed savings are set out in Appendix C and total £4.8m in 2018/19 and £8.7m over the next four years in total.

Adult Social Care

Transformation Savings

*AC1 (Eff) Review of Equipment and Therapy Services – £250,000 in 2018/19 rising to £350,000 by 2019/20

43. A revised Equipment, Adaptations and Assistive Technology Strategy has been consulted on with partners including Health. The savings are to come from a review of the Adaptations Team and its service offer, and a review of the Assistive Technology Team and its service offer.

*AC 2 (Eff) Review of individual long term residential placement costs – £250,000 in 2018/19 rising to £750,000 by 2020/21

44. There are a range of factors increasing costs in the residential and nursing care sector and any savings are at best likely to be modest for care provided to older people, despite it being the Council's biggest single area of expenditure.
45. There are a significant number of people with learning disabilities in residential care and the top 100 highest cost placements have an average cost of £120,000 per annum (some of which are 100% Continuing Health Care (CHC) funded or receive joint funding or funded solely by ASC). Annual spend is approximately £12m a year.
46. A joint team with the CCG is being used to robustly review the highest cost placements. Savings are expected to be achieved across social care and health budgets (pooled budget). This is to be delivered through reducing hotel costs, setting

clear goals as part of a progression model to reduce staffing costs and ensuring that assistive technology and equipment are integral to the placement. Further benefits will be delivered by identifying potential for more independent living.

**AC 3 (SR/Eff) Effective management of Direct Payments and review of personal budget allocations – £1,500,000 in 2018/19 rising to £2,000,000 by 2019/20.

47. This saving has been updated since the previous MTFS to reflect the revised opportunities identified for savings. The main elements of this saving are:
- a) Continuation and refinement of the use of Direct Payment Cards to enable easier management of direct payments by service users. The information provided by the card system coupled with timely interventions from both strategic finance and adult social care colleagues will provide the County Council with improved information on spend analysis, reducing the opportunity for fraud and ensure that unused budgets are returned effectively;
 - b) Review of how personal budgets are commissioned to ensure that they support the delivery of the Cost Effective Care Policy. Through the introduction of revised assessment and support planning tools coupled with training and guidance for staff and information for the public the review will focus on ensuring that service users do not receive more money than is necessary to meet their eligible unmet needs. It will seek to ensure that direct payments are not higher than the personal budget of service users with comparable needs receiving a managed service.

AC4 (Eff) Review of Staff Absence -£160,000 from 2019/20 rising to £325,000 in 2020/21 ongoing

48. To reflect the support being put in place to reduce staff absence a financial target has been allocated to all departments. This reflects the intention to meet or exceed the County Council's target of 7.5 days per FTE. The target is phased 50% in 2019/20 and 100% in 2020/21 to allow time for improvement to take effect. This is the savings target for the whole department.

AC5 (Eff) Improvements to the finance pathway for service users - £75,000 from 2018/19 rising to £150,000 in 2019/20

49. The current review of the service user finance pathway was excluded from the recent departmental organisational change programme. However, a review is now being undertaken that should see improvements to financial processes and system efficiencies which are expected to deliver a reduction in staffing and levels of debt.
50. Work is in progress across a number of areas that will seek to streamline processes in order to reduce the number of handoffs across teams of staff, reduce manual workarounds, and introduce a single financial assessment form that can be used across residential and non-residential financial assessments, and to further explore digital solutions to processes.

Departmental Savings

****AC6 (Eff) Review of Direct Services – £430,000 in 2018/19 ongoing**

51. A review of the cost of all Direct Services is being undertaken with the intention of reducing operating costs to create a viable on-going service.
52. The programme has been in place for four years now and delivered considerable staffing and efficiency savings. Continued review of services and staffing requirements will produce the savings identified. Refocus of service delivery will continue to streamline services further.

***AC7 (Inc) Increased income from Fairer Charging and removal of subsidy/aligning increases – £100,000 in 2018/19 rising to £300,000 by 2020/21**

53. The Department for Work and Pensions (DWP) increases in benefits payments should provide additional charging income. Monitoring of income levels continue, with levels for 2017/18 being reported above target. It is anticipated that income from older people will rise faster than inflation as a result of the protection of over 65s benefits by the Government. This should help to maintain income levels in line with the target and will mitigate the impact of potential reductions in the income from under 65s.

***AC8 (Eff) Developing Extra Care as an alternative to residential, nursing and homecare – £35,000 in 2018/19 ongoing**

54. In November 2017, a new 62 unit extra care scheme opened - Waterside Court in Loughborough, and it is planned that this will be filled within six months. It is anticipated that the average costs of supporting these new residents will be lower at Waterside Court than in alternative services.
55. The saving will be delivered by cost avoidance within residential care or lower homecare costs.

***AC 9 (Eff/SR) Review of Supported Living Costs – £165,000 in 2018/19 rising to £465,000 by 2020/21**

56. Supported Living is a way of providing flexible support to disabled people (generally under 65 years) in mainstream housing. On 11 October 2016, the Cabinet approved the commencement of procurement of a new Supported Living Framework to commence 1 April 2017 for a period of four years. The intention is to reduce the number of providers to five, delivering savings through economies of scale and working with providers to ensure appropriate progression of service users to increase their independence.
57. The new Supported Living Framework is now in place and a lead provider has been awarded to each of five lots covering the county. The hourly rates for care submitted by the new lead providers are in line with the expected levels targeted. The new providers are now mobilised and ready to take on new business.
58. A transition plan for existing service users has been developed and started in August 2017. Individual reviews will take place to confirm current care and support needs to

ensure continuation of care at an appropriate level. This has been reflected in the savings profile.

**AC10 (Eff/SR) Reablement Review – £300,000 in 2018/19 ongoing

59. The main saving activity will focus upon a review of the existing in-house reablement service to optimise which service user's benefit from reablement and reduce unit costs for those that do. Consideration of future delivery options for the service will include ways to reduce the cost of the current arrangements.
60. Savings of £200,000 can be achieved from the current staffing underspend, but close monitoring of activity levels for hospital discharge is needed to ensure sufficient capacity to avoid DToCs.

**AC11 (Eff/SR) Review of Community Life Choices (CLC) costs – £400,000 in 2018/19 rising to £500,000 in 2019/20 ongoing

61. On 11 October 2016, the Cabinet approved implementation of the recommendations set out in the report on CLC, ie service users who are in long term residential care (receiving support on a 24/7 basis) should no longer receive CLC services in addition to this and the current number of commissioned weeks of service be reduced from 50 weeks per annum to 48 weeks per annum.
62. The new CLC Framework commenced from 1 January 2017. There were a total of 820 individuals who were accessing CLC support as at 1 January 2017. A phased transition to providers on the new framework for all existing CLC users is underway and due to be completed by the end of 2018.

*AC12 (Eff) Improvements to Mental Health (MH) Pathway – £250,000 in 2018/19 ongoing

63. The Mental Health Pathway is being reviewed to better align with the Care Pathway, health pathways, the new ASC Strategy and to support recovery and reablement. This will reduce the need for longer term support through promoting recovery, self-management, and the individual's own social and community support.
64. The new reablement and recovery pathway model has been launched with staff and the Mental Health Pathway steering group has been relaunched so that membership reflects the new management structures. The saving will be achieved by focusing on reducing use of residential placement spend using the recovery model.

AC13 (Eff/SR) Promoting independence for high dependency service users - £800,000 in 2018/19 rising to £1,200,000 in 2019/20

65. A significant proportion of the cost of care relates to delivery by multiple carers to a single service user. There is the potential to reduce two carers provision through improved use of equipment and moving/manual handling practices.
66. Following a review of the approach taken by other authorities, the department has established a temporary team of three Occupational Therapists and two Community Support Workers during the summer 2017. This allowed early implementation of savings in 2017/18 of £220,000. Based on the original profile of service users in receipt of two carer provision (approx. 445) and the current level of productivity (approximately 10 reviews per week) this initial cohort of service users should be

reviewed by end of March 2018. Potential savings proposed for 2018 MTFS are estimated at £800,000 for 2018/19 and a further £400,000 for 2019/20. In addition to the savings, the reduction in commissioning has meant that 26,000 hours have been released to date to support other service users. The saving is net of the cost of any equipment that needs to be provided.

AC14 (Eff/SR) Review of Low level services provision - £400,000 in 2019/20 ongoing

67. Analysis of current activity and performance data appears to show that the Council has more low level service delivery than expected, eg under five hours of home care per week or a direct payment of under £50 per week with a total cost in the region of £1.5m. This may demonstrate a reliance on local authority services when alternative offers (such as Assistive Technology, equipment, family, friends, voluntary sector and community sector) may be available, or may equally represent good value for money in reducing people's reliance to very low levels because of those other interventions being in place.

Communities and Wellbeing

Transformation

*AC15 (Eff/SR) Implementation of revised service for Communities and Wellbeing - £200,000 in 2018/19 rising to £1,200,000 in 2020/21

68. The delivery of this saving will be through a remodelling and reduction of the Communities and Wellbeing structure and assumes significant capital investment to introduce SMART library technology and the creation of a Collections Hub.
69. Achievement of the MTFS target will include the de-commissioning of the Care Online Service, an efficiency review of Mobile Libraries, a remodelling of the Green Plaque Scheme; progressing alternative governance for Century Theatre to community management and ending provision of the National Portable Antiquities Scheme in Leicestershire and specialist support for archaeological deposition (linked to planning). Cabinet approval was given to progress these areas in September 2017.
70. The Cabinet approved the roll out of SMART libraries in September 2017. This will provide public access to libraries, without staff present and allow extended opening hours. Roll out will take place during 2018, with the full £230,000k being realised by the end of 2020/21.
71. The proposed Collections Hub will provide a combined publicly accessible base for museum, archive and educational resources. The new facility will bring together multiple teams, enabling a reduced staffing structure. A high level appraisal has identified the following options for further development work:
- New build on County Council owned land;
 - Refurbishment of an existing County Council building;
 - Refurbishment of a non-County Council owned building.

72. Leicester City Council and Rutland County Council, partners in the Record Office, have provisionally agreed to contribute financially to the development as it affects archival services.

Savings under development

73. The MTFS is balanced in 2018/19 and 2019/20 but shows shortfalls of £8.8m in 2020/21 rising to £17.7m in 2021/22. To help bridge the gap a number of initiatives are under development to generate further savings. Once business cases have been completed savings will be confirmed and included in a future MTFS. The initiatives that will involve Adults and Communities are:

Lower Cost Adult Social Care Provision

74. The most significant cost in ASC is for residential placements. Some exploratory work has been undertaken to better understand the market and scope to make savings from different models of placements for adults with learning difficulties.
75. The residential/nursing care market in Leicestershire is currently operating at approximately 90% occupancy; however, the occupancy rates are variable both geographically and within market segments. More rural areas such as Harborough, Melton and North West Leicestershire demonstrate less available provision and there is also less provision for complex needs such as dementia care and nursing care.
76. Options being investigated include:
- A capital investment by the Council to develop more capacity in the sector, eg develop appropriate residential property for service users.
 - A partnership with a care and/or accommodation provider could both increase capacity to deliver a more sustainable market whilst at the same time reduce average care costs.
 - Supporting the building of extra care and supported living accommodation.

Home First

77. The proposed development of Home First services across the county aims to care for people at home wherever possible to prevent hospital admissions and ensure timely discharge should people require hospital admissions.
78. If people can be cared for at home rather than being admitted to a hospital bed, and if people can be supported at home through reablement, or provided with a reablement bed on discharge, the number of long term care admissions and long term community packages should be reduced.
79. Further development work is to be undertaken to determine the potential opportunities for delivery of home first services in the county in collaboration with NHS partners, based on the specifications and design principles developed this year. The first step toward this is the recruitment of a 24/7 crisis support team. Implementation of Home First services is dependent on developing a more integrated health and social care response to people experiencing a crisis in the community, and to patients on discharge from hospital. The stability of the domiciliary care

market will be a key dependency and the review of current commissioning models being undertaken by the Institute of Public care will inform future requirements.

Improvements to the Operating Model for the Department

80. The department is seeking to develop its TOM to articulate how the flow of activity and demand will be managed going forward. The TOM will seek to reduce variation, improve systems and processes, ensure proportionate responses, explore simplification and thereby deliver a more efficient and effective service both for service users and staff.
81. A tender document has been produced to seek a partner to facilitate the development of a new TOM. The proposal is for the partner to support the identification of efficiencies through systematic review of current operating practices.

Place to Live

82. Despite excellent performance in the last couple of years to reduce admissions to long term care, there are currently too many working age adults with disabilities living in long term care.
83. Best practice would suggest that there are a number of people who could be supported to live independently in the community through an intensive programme of housing with care development, deregistration of existing provision and progressive support planning.

Health and Social Care Integration

84. Health and Social Care Integration continues to be a top priority for both the County Council and its NHS partners. Developing effective ways to co-ordinate care and integrate services around the person is seen nationally and locally as key to improving outcomes and ensuring high quality and sustainable services for the future. The Government's expectation is that every part of the country has a plan for health and social care integration to be implemented by 2020/21.
85. NHS planning guidance directs the progression of the health and care integration agenda via STPs (see below) which need to demonstrate how the new models of care proposed in the NHS England Five Year Forward View will be accelerated and implemented. The local STP footprint covers the geographical area of Leicester, Leicestershire and Rutland (LLR).
86. To support this agenda delivery of the Leicestershire BCF is constructed using the following themes:
 - Unified prevention offer;
 - Home First;
 - Integrated housing support;
 - Integrated domiciliary care;
 - Integrated locality teams;
 - Integrated urgent response;
 - Integrated points of access;
 - Integrated data;

- Integrated commissioning;
- Transforming Care (learning disabilities).

87. It was announced in the spring 2017 budget that the Government would make available an additional one-off allocation of £2bn nationally over the next three years to meet social care need, assist in alleviating pressures on the NHS, with particular emphasis on transfers of care from hospital, and help to stabilise the social care provider market. The County Council's allocation (£19.7m) has been split between directly supporting BCF initiatives (£11.5m) and providing funding for social care costs and impacts (£8.2m).
88. Part of Leicestershire's BCF allocation continues to be allocated towards the protection of adult social care services. This is currently £17m to ensure that the needs of the most vulnerable residents are met. Approximately £5m of other BCF funding is received by the County Council for other social care components of the BCF plan.
89. In 2018/19, the County Council will receive £5.6m from the iBCF, rising to £11.4m from 2019/20. This is assumed to be ongoing. In total the County Council will have £33m of BCF Plan funding incorporated into the base budget from 2019/20. Only a minimal amount of related expenditure could easily be stopped, should this funding be reduced or removed, presenting a risk to both service delivery and the financial balance of the MTFS.
90. The risk of funding being reduced has risen in 2017 due to NHS England's additional performance expectations in relation to DToCs.
91. National conditions in the BCF Policy Framework 2017/18–2018/19 set out a DToC national target of no more than 3.5% of occupied bed days delayed by November 2017. Failure to reach that target could result in a financial penalty to the Council. DToC performance is improving but the target is not expected to be achieved until early next year. Despite this it should be recognised that DToC performance, in Leicestershire, is above average and social care performance is in the top quartile.
92. Leicestershire's contribution to this national target equates to achieving no more than 6.84 delayed bed days per 100,000 of population, with the DToC performance target comprised of delays attributable to both health and social care.

Sustainability and Transformation Plan (STP)

93. Across the LLR local health and social care economy, through the STP analysis, a funding gap of £400m by 2020/21 has been identified if no action were to be taken on how current services are being delivered and demand managed.
94. The STP aims to address the way in which health and care services are delivered to meet the needs of the local people, while at the same time ensuring that the current financial pressures faced are effectively managed. The five-year plan has identified five key strands for change to meet these challenges. The five key strands include the development of:

- New models of care focused on prevention, and moderating demand growth, including place based integrated teams, a new model for primary care, effective and efficient planned care and an integrated urgent care offer.
 - A reconfiguration of hospital based services, subject to consultation.
 - Redesigned pathways to deliver improved outcomes for patients and residents.
 - Operational efficiencies - to support financial sustainability.
 - Getting the enablers right - including workforce; technology; estates; and health and social care commissioning integration.
95. As interventions are focussed towards prevention, avoided hospital admissions, a 'home first' model of care and greater integration across social care, community health care and primary care, it has been recognised that this will affect demand for social care support, public health interventions and community services. The three LLR BCF funds are a key enabler to the delivery of the LLR STP.
96. The full implications of the STP for the County Council (and for service users) however need to be identified and addressed in order to manage the increased pressure on resources and to allow for planning to meet this additional demand.
97. To date there are no additional County Council funds identified beyond those set out in the BCF plan, to resource the STP. However, there is a commitment to ensure a system wide response, by all partners, to meeting changes in demand across the sector that may enable further funding transfers from the NHS to local authorities with social care responsibilities.

Other External Influences

98. There are a number of other external factors that will influence the achievability of the MTFs for Adult Social Care. These include:
- a) As part of the autumn 2015 review, the Government headlined significant improvements to funding for social care that local authorities will receive through the BCF. The additional income for the County Council is expected to be £5.6m in 2018/19 rising to £11.4m in 2019/20. This is being incorporated in the revised MTFs and is assumed to fund ASC growth and inflation for two years.
 - b) The Care Act 2014 was only partially implemented by Government with some of the changes to social care legislation postponed until 2020. The most notable postponement was the introduction of a cap on people's contribution to the cost of care. A further postponement is anticipated after the Government announced its intention to publish a green paper by summer 2018. The paper will set out plans for how government proposes to improve care and support for older people and tackle the challenge of an ageing population.
 - c) The Government has announced that short-term supported housing, eg homelessness and domestic violence accommodation will be funded through a new ring-fenced grant to upper tier local authorities from April 2020. The amount of short term supported housing grant funding will be set on the basis of current projections of future need (as informed by discussions with local authorities) and will continue to take account of the costs of provision in this part of the sector. Full details regarding the implementation are still to be announced.

- d) There will be a review of the existing fee model for residential and nursing care during 2018 which will focus on providing quality based model which may increase the cost of placements paid to providers. In 2017, the Competition and Marketing Authority (CMA) published its review of the care homes market. The CMA are recommending local authorities increase fees to the sector by over 10% and further recommended that Government should recompense Local authorities for this uplift. The Government are yet to respond.

Other Funding Sources

99. For 2018/19, the following other funding is expected to be received:

- Former Independent Living Fund (ILF) grant of £1.2m is expected to be received by the County Council in 2018/19 which provides support packages, usually alongside local authority funding, to help disabled people live independently in the community;
- Service users eligible for CHC - £13.6m through the Learning Disabilities Pooled Budget and for non-learning disability service users ;
- Social Care in Prisons Grant - £118,000 which is anticipated to be ongoing;
- Local Reform and Community Voices Grant - £50,000 for DoLS in Hospitals;
- War Pension Scheme Disregard Grant - £110,000;
- There is potentially additional income from the STP Transformation Fund to support integrated working the pool is around £21m across LLR.
- Funding from Skills Funding Agency £4.2m and Education Funding Agency £110,000 in 2017 continues to support Adult Learning.

Capital Programme

100. The draft Adults and Communities capital programme totals £16.8m including £5.9m in 2018/19. The main external funding for the programme is the BCF grant programme (£14.5m), which is pass ported to District Councils to fund major housing adaptations in the County. The balance of the programme (£2.3m) is discretionary funding. The various schemes are outlined below and summarised in Appendix D.
101. SMART Libraries: £890,000 in 2018/19 and £20,000 in 2020/21 – This invest to save scheme will provide a remote controlled system of access to libraries that allows the building to open and function without the need for staff to be present.
102. Adult Learning relocation from Brockington to Danemill: £560,000 in 2018/19 – The Council is proposing relocating provision of adult learning services to a disused site at Danemill, Enderby. This will have the benefit of reduced revenue costs to the authority.
103. External funding has been approved in principal by NHS England for a capital bid relating to the LLR Transforming Care Plan. The LLR Transforming Care Plan outlines the need to develop a choice of long term housing, including small scale supported living to support people coming out of inpatient settings.
- Hinckley, The Trees (refurbishment): £390,000 for 2018/19 - It is intended to undertake reconfiguration and refurbishment of Cedarwood and Beechwood units at The Trees. These two units are dated in terms of their facilities and equipment,

with internal rooms sizes becoming challenging to provide support for people with complex and multiple needs.

- Mountsorrel - Transforming Care Step Down Accommodation (NHS Bid) - £440,000 for 2018/19 - This proposal outlines a request for funds of £405,000 to remodel an existing County Council owned asset in Mountsorrel. It is the intention to reconfigure the current internal space within the building into two self-contained single, accommodation units.

104. BCF - Disabled Facilities; £3,630,000 in 2018/19 to 2021/22 - This is an estimate pending the BCF allocation announcement. These grants are used to fund major housing adaptations for vulnerable people allowing them to remain safely in their own home, rather than being admitted to a residential care setting this funding is initially pass ported to District Councils.

Future Developments

105. Where capital projects are not yet fully developed or plans agreed these have been included under the heading of 'Future Developments' under the department's programme in Appendix D. It is intended that as these schemes are developed during the year and where there is a financial justification, or an investment required to maintain delivery of the service, they are included in the capital programme. There is £28m being held corporately to fund future capital schemes.

- a) Collections Hub - This scheme will co-locate the County Council's collections and archives into a single facility, this will support delivery of the department's savings target (AC15). This forms part of the Communities and Wellbeing (C&W) Strategy to reduce the number of collection locations and ensures provision of adequate storage capacity to meet future need.

The Collections Hub proposal would be a significant investment for the authority. A development of this scale may encounter unforeseen delays or costs, which would impact on the ability of the C&W service to deliver the staffing savings associated with the project. In order to mitigate these risks, detailed feasibility and options appraisals will be undertaken to ensure clear costing of the bid and a comprehensive risk log and project plan will be developed to ensure delivery within agreed timeframes.

- b) Artworks Collection Relocation - To re-locate the Council's Creative Learning Services Artwork collections from the Sherrier Centre in Lutterworth into a single facility, initially within the Eastern Annex at County Hall, pending relocation to the Collections Hub. These are enabling works to allow for the wider Collections Hub capital project to occur.
- c) Health and Social Care Service User Accommodation - The Council is investigating looking into investment options to develop more capacity in the sector, eg develop an appropriate property for supported living or supporting the building of extra care homes.

Equality and Human Rights Implications

107. Public authorities are required by law to have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation;
- Advance equality of opportunity between people who share protected characteristics and those who do not;
- Foster good relations between people who share protected characteristics and those who do not.

108 Many aspects of the County Council's MTFS may affect service users who have a protected characteristic under equalities legislation. An assessment of the impact of the proposals on the protected groups must be undertaken at a formative stage prior to any final decisions being made. Such assessments will be undertaken in light of the potential impact of proposals and the timing of any proposed changes. Those assessments will be revised as the proposals are developed to ensure decision makers have information to understand the effect of any service change, policy or practice on people who have a protected characteristic.

109. Proposals in relation to savings arising out of a reduction in posts will be subject to the County Council's Organisational Change policy which requires an Equality Impact Assessment to be undertaken as part of the action plan.

Background Papers

- Report to Cabinet 12 January 2017 - Medium Term Financial Strategy 2018/19-2021/22 <http://politics.leics.gov.uk/documents/s134223/MTFS%2018-22%2012%20Dec%202017%20report%20final.pdf>

Circulation under local issues alert procedure

None.

Officers to Contact

Jon Wilson, Director of Adults and Communities
Tel: 0116 305 7454
E-mail: jon.wilson@leics.gov.uk

Chris Tambini, Director of Finance, Corporate Resources Department
Tel: 0116 305 6199
E-mail: chris.tambini@leics.gov.uk

Judith Spence, Finance Business Partner, Corporate Resources Department
Tel: 0116 305 5998
E-mail: judith.spence@leics.gov.uk

Appendices

Appendix A – Revenue Budget 2018/19
Appendix B – Growth
Appendix C – Savings
Appendix D – Capital Programme 2018/19 – 2021/22

ADULTS AND COMMUNITIES**REVENUE BUDGET 2018/19**

| Net Budget 2017/18 £ | Employees £ | Running Expenses £ | Internal Income £ | Gross Budget £ | External Income £ | Net Budget 2018/19 £ |
|--|-------------------|--------------------------|-------------------------|----------------------|-------------------------|----------------------------|
| Care Pathway - East Locality | | | | | | |
| 400,515 | 376,781 | 51,800 | 0 | 428,581 | 0 | 428,581 |
| 2,182,482 | 2,262,599 | 89,294 | 0 | 2,351,893 | -239,619 | 2,112,274 |
| 1,552,268 | 2,103,919 | 54,420 | 0 | 2,158,339 | -493,407 | 1,664,932 |
| 781,778 | 1,733,218 | 101,364 | 0 | 1,834,582 | -538,749 | 1,295,833 |
| 2,249,766 | 1,371,521 | 1,734,547 | 0 | 3,106,068 | -435,263 | 2,670,805 |
| 7,166,809 | 7,848,038 | 2,031,425 | 0 | 9,879,463 | -1,707,038 | 8,172,425 |
| Care Pathway - West Locality | | | | | | |
| -1,140,910 | 294,154 | 134,511 | 0 | 428,665 | -704,598 | -275,933 |
| 2,982,056 | 2,932,085 | 164,544 | 0 | 3,096,629 | -142,482 | 2,954,147 |
| 2,432,630 | 2,891,059 | 79,691 | 0 | 2,970,750 | -204,410 | 2,766,340 |
| 1,363,154 | 1,310,978 | 221,818 | 0 | 1,532,796 | -248,100 | 1,284,696 |
| 5,636,930 | 7,428,276 | 600,564 | 0 | 8,028,840 | -1,299,590 | 6,729,250 |
| Direct Services | | | | | | |
| 415,836 | 432,538 | 3,800 | 0 | 436,338 | 0 | 436,338 |
| 4,097,066 | 4,076,975 | 184,810 | 0 | 4,261,785 | 0 | 4,261,785 |
| 3,395,473 | 2,987,667 | 230,875 | -67,850 | 3,150,691 | -55,446 | 3,095,245 |
| 328,823 | 286,903 | 41,920 | 0 | 328,823 | 0 | 328,823 |
| 4,512,333 | 5,189,113 | 710,880 | 0 | 5,899,993 | -1,655,000 | 4,244,993 |
| 1,161,455 | 1,411,757 | 67,200 | -2,100 | 1,476,857 | -152,280 | 1,324,577 |
| 2,758,271 | 734,752 | 3,388,237 | 0 | 4,122,989 | -1,605,600 | 2,517,389 |
| 195,104 | 22,000 | -226,247 | 0 | -204,247 | -17,790 | -222,037 |
| 16,864,361 | 15,141,706 | 4,401,475 | -69,950 | 19,473,230 | -3,486,116 | 15,987,114 |
| Early Intervention & Prevention | | | | | | |
| 544,032 | 0 | 714,217 | 0 | 714,217 | 0 | 714,217 |
| 83,287 | 0 | 83,287 | 0 | 83,287 | 0 | 83,287 |
| 115,000 | 0 | 0 | 0 | 0 | 0 | 0 |
| 136,717 | 0 | 1,502,898 | -544,891 | 958,007 | -726,290 | 231,717 |
| 159,015 | 0 | 941,015 | -782,000 | 159,015 | 0 | 159,015 |
| 1,038,051 | 0 | 3,241,417 | -1,326,891 | 1,914,526 | -726,290 | 1,188,236 |
| Strategic Services | | | | | | |
| 152,727 | 164,581 | 2,300 | 0 | 166,881 | 0 | 166,881 |
| 1,859,268 | 1,903,184 | 271,700 | -569,726 | 1,605,159 | 0 | 1,605,159 |
| 1,203,796 | 1,284,500 | 737,977 | -318,461 | 1,704,016 | -161,237 | 1,542,779 |
| 394,920 | 341,810 | 70,259 | 0 | 412,069 | -28,700 | 383,369 |
| 1,353,722 | 1,986,875 | 90,087 | -75,925 | 2,001,037 | -612,456 | 1,388,581 |
| 4,964,433 | 5,680,950 | 1,172,323 | -964,112 | 5,889,162 | -802,393 | 5,086,769 |
| Demand Led Commissioned Services | | | | | | |
| 55,681,440 | 0 | 88,973,452 | 0 | 88,973,452 | -34,096,655 | 54,876,797 |
| 1,430,000 | 0 | 1,450,000 | 0 | 1,450,000 | 0 | 1,450,000 |
| 13,941,160 | 0 | 14,736,160 | 0 | 14,736,160 | 0 | 14,736,160 |
| 15,575,882 | 0 | 15,396,022 | 0 | 15,396,022 | 0 | 15,396,022 |
| 36,252,215 | 0 | 36,865,609 | 0 | 36,865,609 | -1,198,399 | 35,667,210 |
| 4,992,650 | 0 | 4,792,650 | 0 | 4,792,650 | 0 | 4,792,650 |
| 474,000 | 0 | 474,000 | 0 | 474,000 | 0 | 474,000 |
| -19,450,700 | 0 | 0 | 0 | 0 | -20,892,878 | -20,892,878 |
| 108,896,647 | 0 | 162,687,893 | 0 | 162,687,893 | -56,187,932 | 106,499,961 |
| -16,971,879 | 241,840 | 5,286,589 | -130,000 | 5,398,429 | -22,370,807 | -16,972,378 |
| 654,028 | 956,230 | 751,323 | -741,208 | 966,345 | 0 | 966,345 |
| 2,140,000 | 0 | 0 | 0 | 0 | 0 | 0 |
| 130,389,380 | 37,297,040 | 180,173,009 | -3,232,161 | 214,237,888 | -86,580,166 | 127,657,723 |
| Communities and Wellbeing | | | | | | |
| 2,164,665 | 2,296,173 | 325,601 | 0 | 2,621,774 | -528,301 | 2,093,473 |
| 612,884 | 711,423 | 274,705 | 0 | 986,128 | -414,250 | 571,878 |
| 201,712 | 433,097 | 61,423 | 0 | 494,520 | -295,970 | 198,550 |
| 757,281 | 573,089 | 239,468 | 0 | 812,557 | -9,800 | 802,757 |
| 975,968 | 242,741 | 717,999 | 0 | 960,740 | -7,698 | 953,042 |
| 498,743 | 463,866 | 14,150 | -14,781 | 463,235 | 0 | 463,235 |
| 267,593 | 528,406 | 173,000 | 0 | 701,406 | -415,000 | 286,406 |
| 5 | 347,754 | 303,776 | -27,366 | 624,164 | -627,574 | -3,410 |
| 5 | 3,940,656 | 982,815 | -214,950 | 4,708,520 | -4,708,520 | 0 |
| -105,255 | 41,319 | -179,250 | -54,400 | -192,331 | 0 | -192,331 |
| 5,373,601 | 9,578,524 | 2,913,687 | -311,497 | 12,180,714 | -7,007,113 | 5,173,601 |
| 135,762,981 | 46,875,564 | 183,086,696 | -3,543,658 | 226,418,602 | -93,587,279 | 132,831,324 |

This page is intentionally left blank

APPENDIX B

References

| 2018/19 | 2019/20 | 2020/21 | 2021/22 |
|---------|---------|---------|---------|
| £000 | £000 | £000 | £000 |

GROWTH**ADULTS & COMMUNITIES****Demand & cost increases**

| | | | | | | |
|----|-----|---|--------------|--------------|--------------|--------------|
| ** | G6 | Older people - new entrants and increasing needs in community based services and residential admissions | 1,275 | 2,570 | 3,680 | 4,680 |
| ** | G7 | Learning Disabilities - new entrants including children transitions and people with complex needs | 880 | 2,065 | 3,160 | 4,140 |
| ** | G8 | Mental Health - new entrants in community based services and residential admissions | 130 | 215 | 285 | 340 |
| ** | G9 | Physical Disabilities - new entrants in community based services | 170 | 310 | 410 | 495 |
| | | <u>Other increases</u> | | | | |
| | G10 | Resources for ongoing reviews of service users needs | 610 | 610 | 610 | 610 |
| | G11 | Resources for Hospital Discharge Team | 170 | 170 | 170 | 170 |
| | G12 | Transforming Care - transfers from Health | 750 | 1,500 | 1,500 | 1,500 |
| * | G13 | Removal of time-limited growth - Additional Adult Social Care Support | -2,140 | -2,140 | -2,140 | -2,140 |
| | | Total | 1,845 | 5,300 | 7,675 | 9,795 |

* items unchanged from previous Medium Term Financial Strategy

** items included in the previous Medium Term Financial Strategy which have been amended

This page is intentionally left blank

References

| 2018/19 | 2019/20 | 2020/21 | 2021/22 |
|---------|---------|---------|---------|
| £000 | £000 | £000 | £000 |

SAVINGS**References used in the following tables**

* items unchanged from previous Medium Term Financial Strategy

** items included in the previous Medium Term Financial Strategy which have been amended

Eff - Efficiency saving

SR - Service reduction

Inc - Income

ADULTS & COMMUNITIES**Adult Social Care****Transformation**

| | | | | | | | |
|----|-----|--------|---|---------------|---------------|---------------|---------------|
| * | AC1 | Eff | Review of Equipment and Therapy Services | -250 | -350 | -350 | -350 |
| * | AC2 | Eff | Review of individual long term residential placement costs | -250 | -500 | -750 | -750 |
| ** | AC3 | Eff/SR | Effective management of Direct Payments and Personal Budget allocations | -1,500 | -2,000 | -2,000 | -2,000 |
| | AC4 | Eff | Review of staff absence | | -160 | -325 | -325 |
| | AC5 | Eff | Improvements to finance pathway for service users | -75 | -150 | -150 | -150 |
| | | | Total | -2,075 | -3,160 | -3,575 | -3,575 |

Departmental

| | | | | | | | |
|----|------|--------|---|---------------|---------------|---------------|---------------|
| ** | AC6 | Eff | Review of Direct Services | -430 | -430 | -430 | -430 |
| * | AC7 | Inc | Increased income from fairer charging and removal of subsidy / aligning increases | -100 | -200 | -300 | -300 |
| * | AC8 | Eff | Developing Extracare as alternative to residential, nursing and homecare | -35 | -35 | -35 | -35 |
| * | AC9 | Eff/SR | Review of Supported Living costs | -165 | -465 | -465 | -465 |
| ** | AC10 | Eff/SR | Reablement review | -300 | -300 | -300 | -300 |
| ** | AC11 | Eff/SR | Review of Community Life Choices costs | -400 | -500 | -500 | -500 |
| * | AC12 | Eff | Improvements to the Mental Health pathway | -250 | -250 | -250 | -250 |
| | AC13 | Eff/SR | Promoting Independence in the home for high dependency service | -800 | -1,200 | -1,200 | -1,200 |
| | AC14 | Eff/SR | Review of low level service costs | | -400 | -400 | -400 |
| | | | Total | -2,480 | -3,780 | -3,880 | -3,880 |

Total ASC

| | | | |
|---------------|---------------|---------------|---------------|
| -4,555 | -6,940 | -7,455 | -7,455 |
|---------------|---------------|---------------|---------------|

Communities and Wellbeing**Transformation**

| | | | | | | | |
|---|------|--------|---|-------------|-------------|---------------|---------------|
| * | AC15 | Eff/SR | Implementation of revised service for communities and wellbeing | -200 | -400 | -1,200 | -1,200 |
| | | | Total C&W | -200 | -400 | -1,200 | -1,200 |

TOTAL A&C

| | | | |
|---------------|---------------|---------------|---------------|
| -4,755 | -7,340 | -8,655 | -8,655 |
|---------------|---------------|---------------|---------------|

This page is intentionally left blank

ADULTS & COMMUNITIES - CAPITAL PROGRAMME 2018/19 to 2021/22 - Draft

| | 2018/19 £000 | 2019/20 £000 | 2020/21 £000 | 2021/22 £000 | Total £000 |
|--|-----------------|-----------------|-----------------|-----------------|---------------|
| <u>New Starts</u> | | | | | |
| Enderby Danemill Annex - co-locate the Adult Learning Service into a single facility | 560 | | | | 560 |
| Mountsorrel - Transforming Care Step Down Accommodation (NHS Bid) | 440 | | | | 440 |
| Hinckley, The Trees (refurbishment) | 390 | | | | 390 |
| Smart Libraries - Invest to Save | 890 | 0 | 20 | | 910 |
| Better Care Fund / Disabled Facilities Grant* | 3,630 | 3,630 | 3,630 | 3,630 | 14,520 |
| Total A&C | 5,910 | 3,630 | 3,650 | 3,630 | 16,820 |

* - awaiting Government announcement due early/mid December 2017.

| | |
|--|--|
| <u>Future Developments - subject to further detail and approved business case</u> Collections Hub/ Records Office / Replace/New Parking Artworks Collections Relocation - to release existing site - subject to collections hub decision Health and Social Care Service User Accommodation - Supported Living Health and Social Care Service User Accommodation - Extracare Libraries - reconfiguration of space | Report on Business Case planned to Cabinet April 2018 Can be delivered in advance of main project |
|--|--|

This page is intentionally left blank