

ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
22nd JANUARY 2024

MEDIUM TERM FINANCIAL STRATEGY 2024/25 – 2027/28

MINUTE EXTRACT

Medium Term Financial Strategy 2024/25 - 2027/28.

The Committee considered a joint report of the Director of Adults and Communities and Director of Corporate Resources which provided information on the proposed 2024/25 to 2027/28 Medium Term Financial Strategy (MTFS) as it related to the Adults and Communities Department. A copy of the report marked 'Agenda Item 8' is filed with these minutes.

The Chairman welcomed Mrs. C. M. Radford, Cabinet Lead Member to the meeting for the item.

Arising from discussion, the following points arose:

Proposed Revenue Budget, Other Changes and Transfers

- (i) Members questioned if the revenue budget had been compiled included pay and inflation increases. The Director reported a contingency for pay and inflation was held centrally and allocated in year when the budget was set.
- (ii) Members acknowledged the challenge faced with external factors outside the control of the authority affecting ever-diminishing resources.

Growth

- (iii) A Member questioned the appeared lack of rehabilitation being provided to patients on discharge from hospital which had to be picked up by family members. The Director reported that the NHS had pressures which it had to address, and that there was a different discharge process post pandemic, whereby a discharge decision used to be multi-disciplinary was now an NHS decision, which had caused some problems on the over-prescription of care on discharge. It was noted the Council had worked closely with NHS colleagues over the past 12 months on the three 'Rs': Rehabilitation, Reablement, Recovery elements. Community hospitals had recently provided additional beds for rehabilitation and recovery.
- (iv) There had been some changes to the way NHS out of hospital services have been commissioned. It was reported that pre-pandemic there had been a substantial amount of community nursing and therapy services that would work with people on discharge, but that service was no longer available. However, resources had been re-directed to the development of virtual wards which had been very successful, for example, working with people with respiratory and coronary conditions. The NHS were also under immense pressure with regards to waiting lists and people waiting for various forms of treatment. The Council was working with the NHS to address

totality of need, but there was a £3.2million shortfall of funding as outlined at paragraph 34 in the report.

- (v) Members queried the 30% year-on-year growth in older people demand and asked how the increase was calculated. It was reported that in order to forecast growth, finance worked on the number of service users and average costs, and used a national formula on the prediction of the number of people coming through as new entrants, which would usually be different each year.
- (vi) Members queried the Discharge Fund increasing by 50%. It was reported that the growth figure was actual demand and costs which was then netted off with extra money from the NHS further down in the accounts. It was noted that the Discharge Fund was limited to certain periods of time.
- (vii) Members noted the increase in costs over the next few years and asked if enquiries had been made of central government for additional money. The Director reported that conversations had been held with the Department for Health and Social Care and the Department for Levelling Up, Housing and Communities, neither of which had suggested there would be any more funding made available. It was further noted that much of the social care funding for 24/25 had been announced in 2022/23, a two-year settlement at that point. The Director commented that he was not aware of any additional funding coming through, though every opportunity would be explored by the Leadership of the Council.
- (viii) The Director reported that considerable savings had been made in the past through the Target Operating Model, thought to be in excess of £10million, though likely to be much more when applying inflation. It was noted that this had alleviated some of the budget pressures being experienced currently.
- (ix) Members noted that the increase in the National Living Wage (NLW) added significant pressure on the Council's budget, in particular for adults social care. This was because the majority of social care services were delivered on the basis of the NLW for care staff, of which there were in excess of 17,000k care staff the Council supported through contracts. The NLW was set to cost the Council over £20million, which was more than the Council could raise through the adult social care precept on Council Tax.

Adult Social Care – Savings

- (x) A Member queried under AC16 (Eff) how the demarcation between care and non-personal care was made, and how, if the situation arose that a person would not do a job because it wasn't allocated to them would be addressed, or if a person on a lower hourly rate was being sent some distance to undertake a five-minute job. The Director confirmed that each individual circumstance would be looked at on its own merits, and that nothing would be implemented without reviewing all roles prior to any changes being made. It was noted that home care fee rates in the county compared well with other authorities, with upwards of £26 to £27 an hour being paid which, if being used for shopping, could be delivered through working with the volunteering community sector for £15 to £20 per hour, therefore some significant savings could be made, but only if not detrimental to the individual.
- (xi) A Member questioned under *AC6 (Eff) – Direct Payment Commissioning Efficiencies, if surplus balances would be taken back from people. The Director reported that the review of Direct Payment packages was undertaken every year

and was considered to be good housekeeping. It was noted that people were given direct payments into a bank account to pay for their own care with a contingency of at least four weeks in advance. Where people built up a surplus balance, they would be asked to return anything they had not used over what would need to cover their next four weeks of care, the sums of which could be in the thousands of pounds of public money. Members noted that largely people returned it when requested to. Over £40million had been made in Direct Payments, with around 3-4% being returned. It was further noted that if people were given the opportunity to purchase care, they would often purchase less than when Adult Social Care services arranged it, often relying on family and friends instead. Members raised a concern that, if people were not spending the money sent to them, were they receiving adequate care. Members requested that during the course of the year, a report on direct payments be brought to the committee to allay the concern that Members had made.

Communities and Wellbeing

- (xii) In response to a Member's query regarding *AC19 (SR) Review Green Plaque Service, and if sponsorship had been considered, the Director reported that sponsorship had been looked at with potentially joining or integrating with some of the district council that ran similar schemes in the past. However, this had not been a viable option. Other options had also been considered before ceasing the service, the decision for which had been made in the previous financial year by full Council, though it had only recently been implemented.

Savings Under Development

Transitions Review

- (xiii) Members noted the work to be undertaken over the next 12 months with Children and Family Services to look at the way people moved from Children's Services into Adult Services. The Director confirmed there would be no changes until the outcome of the review was known.

Health and Social Care Integration

Better Care Fund

- (xiv) Members noted that the BCF at £82.5million for 2024/25 and £22.9million as a minimum contribution of the NHS allocation would be used to sustain adult social care services, with a further £8million of NHS funding going towards adult social care services, therefore it was vital the funding was maintained.

Other Funding Sources

- (xv) Members noted the smaller grants expected for 2024/25 which were received to sustain adult social care services, the most significant of which was the market sustainability improvement fund worth over £10million.

Capital Programme

- (xvi) Members noted the main source of external funding of the capital programme totalling £22million was the BCF grant programme of £19.4million passported directly through to district councils for the disabled facilities grant, leaving a balance

of just under £3million of discretionary funding to be used for the social care investment programme.

Future Developments

(xvii) Members noted the disabled facility grants had brought in a substantial amount of money to the district councils, and the way the scheme had run, particularly Lightbulb, and the way the County Council worked with district councils was exemplary.

RESOLVED:

- a) That the report regarding the Medium Term Financial Strategy 2024/25 to 2027/28 and the information now provided be noted;
- b) That the comments now made be forwarded to the Scrutiny Commission for consideration at its meeting on 29th January 2024;
- c) That the Director be requested to provide a report on Direct Payments to a future meeting of the Committee.