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To: Members of the

CARE SERVICES POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

Councillor Judi Ellis (Chairman)
Councillor Catherine Rideout (Vice-Chairman)
Councillors Reg Adams, Ruth Bennett, Roger Charsley, John Getgood,
David Jefferys, Mrs Anne Manning and Charles Rideout

Non-Voting Co-opted Members

Brebner Anderson, Disability Voice Bromley
Angela Clayton-Turner, Bromley Mental Health Forum
Angela Harris, Bromley LINk
Brian James, Learning Disability and Looked After Children Representative
Leslie Marks, Bromley Council on Ageing
Lynne Powrie, Carers Bromley

A meeting of the Care Services Policy Development and Scrutiny Committee will be held at on **WEDNESDAY 16 JANUARY 2013 AT 7.00 PM**

MARK BOWEN
Director of Resources

Paper copies of this agenda will not be provided at the meeting. Copies can be printed off at www.bromley.gov.uk/meetings. Any member of the public requiring a paper copy of the agenda may request one in advance of the meeting by contacting the Clerk to the Committee, giving 24 hours notice before the meeting.

Items marked for information only will not be debated unless a member of the Committee requests a discussion be held, in which case please inform the Clerk 24 hours in advance indicating the aspects of the information item you wish to discuss

AGENDA

PART 1 AGENDA

Note for Members: Members are reminded that Officer contact details are shown on each report and Members are welcome to raise questions in advance of the meeting.

STANDARD ITEMS

- 1 APOLOGIES FOR ABSENCE AND NOTIFICATION OF SUBSTITUTE MEMBERS
- 2 DECLARATIONS OF INTEREST
- 3 QUESTIONS FROM COUNCILLORS AND MEMBERS OF THE PUBLIC ATTENDING THE MEETING

In accordance with the Council's Constitution, questions to this Committee must be received in writing 4 working days before the date of the meeting. Therefore please ensure questions are received by the Democratic Services Team by 5pm on Thursday 10th January 2013.

4 QUESTIONS TO THE CARE SERVICES PORTFOLIO HOLDER FROM MEMBERS OF THE PUBLIC AND COUNCILLORS ATTENDING THE MEETING

In accordance with the Council's Constitution, questions to the Portfolio Holder must be received in writing 4 working days before the date of the meeting. Therefore please ensure questions are received by the Democratic Services Team by 5pm on Thursday 10th January 2013.

- 5 CARE SERVICES PDS WORK PROGRAMME 2012/2013 AND MATTERS ARISING (Pages 5 10)
- 6 MINUTES OF THE MEETING OF CARE SERVICES PDS COMMITTEE MEETING HELD ON 4TH DECEMBER 2012 (Pages 11 30)

HOLDING THE PORTFOLIO HOLDER TO ACCOUNT

7 PRE-DECISION SCRUTINY OF CARE SERVICES PORTFOLIO REPORTS

The Care Services Portfolio Holder to present scheduled reports for pre-decision scrutiny on matters where he is minded to make decisions.

- a DRAFT 2013/14 BUDGET (Pages 31 42)
- **b BUDGET MONITORING 2012/13** (Pages 43 50)
- C UPDATE ON COMMISSIONING STRATEGY FOR OLDER PEOPLE DAY OPPORTUNITIES AND RESPITE (Pages 51 62)
- d REVISED CHARGING POLICY FOR NON-RESIDENTIAL SERVICES (Pages 63 70)
- e GATEWAY REVIEW ADULT CARE SERVICES (Pages 71 78)

POLICY DEVELOPMENT AND OTHER ITEMS

8 QUESTIONS ON THE CARE SERVICES PDS INFORMATION BRIEFING

The briefing comprises:

- Care Home Quality Annual Report
- 2011/12 Local Account Adult Social Care Annual Report

Members and Co-opted Members have been provided with advance copies of the briefing via email. The briefing is also available on the Council's website at the following link:

http://cds.bromley.gov.uk/ieListMeetings.aspx?Cld=559&Year=2013

Printed copies of the briefing are available on request by contacting the Democratic Services Officer.

9 LOCAL GOVERNMENT ACT 1972 AS AMENDED BY THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) (VARIATION) ORDER 2006 AND THE FREEDOM OF INFORMATION ACT 2000

The Chairman to move that the Press and public be excluded during consideration of the items of business listed below as it is likely in view of the nature of the business to be transacted or the nature of the proceedings that if members of the Press and public were present there would be disclosure to them of exempt information.

Items of Business

Schedule 12A Description

10 EXEMPT MINUTES OF THE CARE SERVICES PDS COMMITTEE MEETING HELD ON 4TH DECEMBER 2012 (Pages 79 - 80)

Information relating to the financial or business affairs of any particular person (including the authority holding that information)

11 PRE-DECISION SCRUTINY OF EXEMPT CARE SERVICES PORTFOLIO HOLDER REPORTS

Information relating to the financial or business affairs of any particular person (including the authority holding that information)

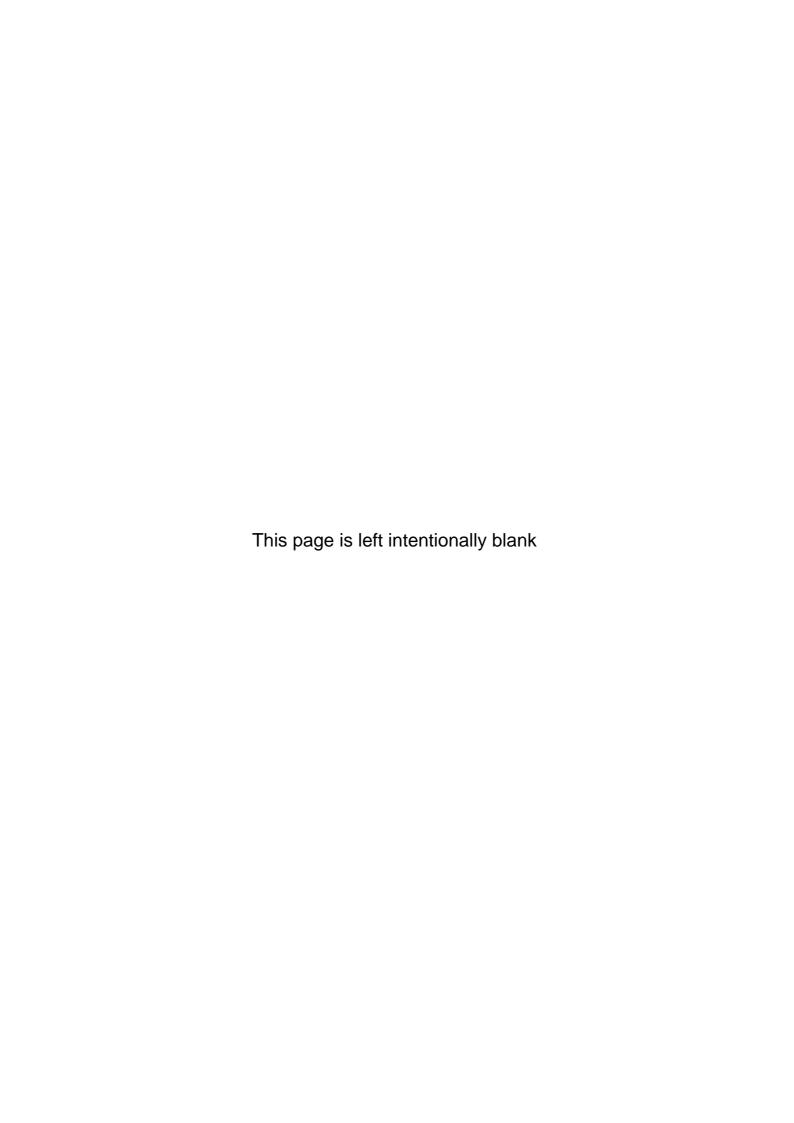
12 CONTRACT AWARD BROMLEY HEALTHWATCH (Pages 81 - 84)

Information relating to the financial or business affairs of any particular person (including the authority holding that information)

13 CONTRACT EXTENSION FOR THE SOCIAL CARE DATABASE (CAREFIRST) (Pages 85 - 88)

Information relating to the financial or business affairs of any particular person (including the authority holding that information)

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Report No. RES13016

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: CARE SERVICES POLICY DEVELOPMENT AND SCRUTINY

COMMITTEE

Date: Wednesday 16 January 2013

Decision Type: Urgent Non-Urgent Executive Non-Executive Key Non-Key

Title: CARE SERVICES PDS WORK PROGRAMME 2012/2013 AND

MATTERS ARISING

Contact Officer: Helen Long, Democratic Services Officer

Tel: 0208 313 4595 E-mail: helen.long@bromley.gov.uk

Chief Officer: Director of Resources

Ward:

1. Reason for report

1.1 Members are asked to review the PDS Committee's work programme for 2012/13 and to consider progress on matters arising from previous meetings of the Committee, the report also provides an update on the PDS members' visits to day centres and residential homes.

2. RECOMMENDATION(S)

2.2 The Committee is asked to consider its work programme and mattes arising and indicate any changes that it wishes to make.

Corporate Policy

- 1. Policy Status: Existing Policy: As part of the Excellent Council stream within Building a Better Bromley, PDS Committees should plan and prioritise their workload to achieve the most effective outcomes.
- 2. BBB Priority: Excellent Council

Financial

- 1. Cost of proposal: No Cost:
- 2. Ongoing costs:: N/A
- 3. Budget head/performance centre: Democratic Services
- 4. Total current budget for this head: £344,054
- 5. Source of funding:

Staff

- 1. Number of staff (current and additional):
- 2. If from existing staff resources, number of staff hours: Maintaining the Committee's work programme takes less than an hour per meeting

Legal

- 1. Legal Requirement: No statutory requirement or Government guidance
- 2. Call-in:: This report does not require an executive decision

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): This report is intended primarily for Members of this Committee to use in controlling their on-going work.

Ward Councillor Views

- 1. Have Ward Councillors been asked for comments? No
- 2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

- 3.1 The format of this report was changed in May 2012 to encompass both the PDS Work programme and the Matters Arising from previous meetings. This single report aims to simplify and streamline the PDS agenda by reducing the number of reports.
- 3.2 The Committee's matters arising table is attached at **Appendix 1** this report updates Members on recommendations from previous meetings which continue to be "live". Currently there are 5 items 1 will have been completed following this meeting and 4 have been scheduled as future items on the PDS work programme.
- 3.3 The draft 2012/13 Work Programme is attached as **Appendix 2.** It reflects the areas identified at the beginning of the year. Other reports may come into the programme or there may be references from other Committees, the Portfolio Holder or the Executive.
- 3.4 The Committee is asked at each meeting to consider its Work Programme and review its workload in accordance with the process outlined at Section 7 of the Scrutiny Toolkit. All PDS Committees are also recommended to monitor the Council's Forward Plan of Key Decisions for their portfolios and to use it for identifying issues for consideration in advance of executive decisions being made. The Forward Plan issued on 9th January 2013 includes key decisions related to the Care Services Portfolio and the next Forward Plan will be published on 6th March 2013.
- 3.5 In approving the work programme Members will need to be satisfied that priority issues are being addressed; that there is an appropriate balance between the Committee's key roles of (i) holding the Executive to account, (ii) policy development and review, and (iii) external scrutiny of local health services; and that the programme is realistic in terms of Member time and officer support capacity.
- 3.6 The Attendance Schedule for Council Member Visits is attached as **Appendix 3** to this report for information. All Elected Council members and Co-opted members have been invited to attend the four visits scheduled for January March 2013.

Non-Applicable Sections:	Policy/Financial/Legal/Personnel
Background Documents: (Access via Contact Officer)	Previous work programme reports

Matters Arising 2012/13 progress summary

PDS Minute number/ title	Committee Request	Update	Completion Date
Report CS12030 Commissioning Strategy for Older People (day opportunities and respite)	Include the modelling of the legacy (if it fits, or as a separate report at another meeting)	Added to agenda item scheduled for Jan 2013	Jan 2013
Report CS12024 Annual Report of the Bromley Adoption Agency and the Bromley Adoption Agency Statement of Purpose 2012 - 2013	Consider and approve the arrangements outlined for the presentation of the six monthly reports to the Executive Working Party for Safeguarding and Corporate Parenting and the annual report to be presented for consideration to the Care Services PDS and Portfolio Holder.	Scheduled at a future Safeguarding and Corporate Parenting Executive Working Party. Added to PDS work programme.	September 2013
Report CS12028 Integrated Transition Strategy	Further reports would be submitted to both this Committee and the Education PDS Committee on the latest developments. It was agreed that this be reflected in the Committee's Work Programme.	Added to PDS work programme.	April 2013
Report CS12045 Housing Services Mid-Year Performance Report 2012/13	An update report to be presented to the Committee on the impact of the Localism Bill.	Added to PDS work programme.	March 2013
Report CS12048 Citizens Advice Bureaux- Changes	A further report on CAB services and the provision of information and advice at a future meeting.	Added to PDS work programme.	June/July 2013

CARE SERVICES PDS COMMITTEE WORK PROGRAMME 2012/13

Title	Report Author	Notes
Health and Wellbeing Board – 17 th January 2013 (12.30pm		
Health Social Care and Housing Partnership Board – 21 st	January 2013	3
Health Scrutiny Sub Committee – 14 th February 2013		
Outcome of Orpington Hospital Consultation Results	NHS Bromley	
South London Healthcare NHS Trust	TBC	
Out of hours GP cover	NHS Bromley	PDS request
Care Services PDS – 12 th March 2013		
Draft Portfolio Plan 2013/14 priorities/aims (inc end of year performance report)	AD SS	
Budget Monitoring 2012/13	HoF	
Capital Programme	HoF	
Report from the Housing PDS working group	DSO	
Update on the Housing Allocation Scheme and the impact of the Localism Bill	HoHS	
Annual Corporate Parenting Report 2012	ADCSC	
Fostering Service Annual Report	ADCSC	
Children's social care improvement plan update	ADCSC	
Management restructure of the In-House Learning Disability Service	AD CP	
De-registration of care homes	AD CS	
Health and Wellbeing Board – 21 st March 2013 (12.30pm)		

Report Author Key

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DE CS	Director Education & Care Services	
AD CS	Assistant Director Care Services	
AD SS	Assistant Director Strategic Support	
AD CP	Assistant Director Commissioning & Partnership	
ADCSC	Assistant Director Children's Social Care	
HoHS	Head of Housing Services	
DPH	Director of Public Health	
HoF	Head of Finance	
DSO	Democratic Services Officer	
TBC	To be confirmed	

CARE SERVICES PDS COMMITTEE FUTURE ITEMS TO BE CONSIDERED:

0/11/2 021/11/020 1 20 001/11/11/2 1 0 1 0 1 0 1 0 2 2 0 0 1 0 1 0 2 1 0 1 0		
ITEM	NOTE	
Public Health Update from Resources Portfolio Holder	Needs to be rescheduled	
Citizens Advice Bureaux- Changes - Update	June/July 2013	

Attendance Schedule for Council Member Visits

Forthcoming Visits:

Glebe Court Nursing Home - Fri 25/1/13

Fairmount Residential Care Home - Fri 7/2/13

Whitehouse Residential Home - Mon 11/2/13

Park Avenue Care Centre (Elderly - Nursing) - Tues 5/3/1'3

CARE SERVICES POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

Minutes of the meeting held at 7.00 pm on 4 December 2012

Present:

Councillor Judi Ellis (Chairman) Councillor Catherine Rideout (Vice-Chairman) Councillors Reg Adams, Ruth Bennett, Roger Charsley, John Getgood, David Jefferys, Mrs Anne Manning and Charles Rideout

Brebner Anderson, Angela Clayton-Turner, Maureen Falloon, Angela Harris, Brian James and Leslie Marks

Also Present:

Councillor Graham Arthur, Councillor Stephen Carr, Councillor Robert Evans, Councillor Sarah Phillips, Councillor Colin Smith and Councillor Diane Smith

37 APOLOGIES FOR ABSENCE AND NOTIFICATION OF SUBSTITUTE MEMBERS

Apologies were received from Lynne Powrie - Maureen Falloon attended as her alternate.

38 DECLARATIONS OF INTEREST

The following declarations of personal interest were made:

- Brebner Anderson as a member of Bromley Healthcare Board
- Councillor Judi Ellis declared that her father had dementia and was resident in a care home in Bromley.
- Angela Clayton-Turner declared that her husband was in a Bromley Care Home.
- Leslie Marks declared that she had a son in a care home.

39 QUESTIONS FROM COUNCILLORS AND MEMBERS OF THE PUBLIC ATTENDING THE MEETING

3 written questions were received from members of the public and these are attached at Appendix 1.

40 QUESTIONS TO THE CARE SERVICES PORTFOLIO HOLDER FROM MEMBERS OF THE PUBLIC AND COUNCILLORS ATTENDING THE MEETING

No questions had been received.

41 MINUTES OF THE MEETING OF CARE SERVICES PDS COMMITTEE MEETING HELD ON 4TH SEPTEMBER 2012

Three amendments were noted:

- Minute 19 Brian James had tendered his apologies.
- Minute 20 Angela Clayton-Turner had declared an interest as her husband was in a Bromley care home.
- Minute 32 Council Motion Membership of Housing Working Party should read Councillor Catherine Rideout not Charles.

RESOLVED that the minutes from the meeting held on 4th September 2012 be agreed, subject to the amendments outlined above.

42 CARE SERVICES PDS WORK PROGRAMME AND MATTERS ARISING REPORT

Report CS12055

The Committee considered its Work Programme for 2012/13 and progress on the matters arising from previous meetings.

43 PRE-DECISION SCRUTINY OF CARE SERVICES PORTFOLIO REPORTS

The Committee considered the following reports for pre-decision scrutiny on matters where the Care Services Portfolio Holder was minded to take decisions.

A) REVIEW OF SERVICES FOR CHILDREN AND YOUNG PEOPLE WITH MENTAL NEEDS

In April 2012 the Children and Young Peoples Portfolio Holder agreed that the contract for services for children and young people with mental health needs (CAMHS) commissioned by the Council from Oxleas NHS Foundation Trust would be extended until 31st March 2013 to sustain provision whilst a review of CAMHS was undertaken. In order to identify what was required in the future a gateway review of CAMHS services commissioned by the Council had been undertaken to consider the services in detail.

The report made recommendations for the future focus of CAMHS, the allocation of resources and for the extension of current contracts to the end of March 2014 to enable the reconfigured service model to be specified and tendered.

Although the review was carried out in consultation with the Clinical Commissioning Group (CCG), it primarily focused on services funded by the Council, driven partly by the timescales for the Council's current contracts, two of which would end in March 2013. However it was clear that it would be detrimental to the wider CAMHS agenda for the Council to unilaterally change the focus of its commissioning in isolation from the funding and services commissioned by the CCG.

The CCG had indicated that it supported the findings of the review and acknowledged that any new service model needed to take into account the impact on and linkages between all of the tiers of service. It was therefore proposed that during 2013 the Council and the CCG would jointly develop the new service model in detail and agree respective funding streams and that the new services be procured in readiness for implementation in April 2014.

Of the three current Council contracts, two were due to end in March 2013 with the other due to end in March 2014. Subject to agreement of the proposals it was recommended that the timescales for all three contracts be aligned. Therefore, authorisation was sought from the Portfolio Holder to:

- extend the contract with Oxleas Trust for the provision of CAMHS for one year until March 31st 2014
- extend the contract with Bromley Y for the provision of Counselling services for one year until March 31st 2014

The proposal to extend the two contracts due to end on the 31/3/2013 would have no financial implications as they would be contained within existing resources. This would allow officers sufficient time to procure a more comprehensive service model.

Officers would work with existing providers in the next few months to identify the potential for savings in 2013/14 and explained that if time was taken to develop the service it should build a robust model which will meet future needs.

A co-opted member commented that he was aware of case where there had not been engagement with parents – the Chairman invited him to provide the details to officers so that these could be followed up.

RESOLVED that the recommendations be supported and the Portfolio Holder be requested to:

(1) Endorse that the focus of the Council's expenditure should be on strengthening early intervention and prevention services as set

out in paragraphs 3.9 and 3.10 of the report and that the Council will work with the Clinical Commissioning group during 2013 to develop and procure the new service model for CAMHS;

- (2) Approve an extension of one year, in line with Contract Procedure Rule 23.7.3, to the contract held with Oxleas NHS Foundation Trust for the provision of Child and Adolescent Mental Health Services, with a revised contract end date of 31st March 2014.
- (3) Approve an extension of one year, in line with Contract Procedure Rule 23.7.3, to the contract held with Bromley Y for the provision of Counselling Services to Children & Young People, with a revised contract end date of 31st March 2014.
- (4) Approve the commencement of tendering for a comprehensive CAMHS service based on the proposed model detailed in this report, with service delivery for the newly tendered service to commence from 1st April 2014.
- B) DRAFT TENANCY STRATEGY 2013-15

Report SC12046

Officers sought approval for the draft Tenancy Strategy for 2013 - 15, attached at Appendix 1 to the report. In line with the requirements of the Localism Act 2011, the draft strategy set out the Council's approach to tenure reform in the social housing sector and outlined the objectives to be taken into account by social housing landlords as they formulated their own tenancy policies.

A number of changes to legislation, regulatory frameworks and funding mechanisms had occurred recently that impacted both on how existing affordable housing was managed and how it was delivered.

This proposal fulfilled the requirements of the Localism Act 2011 for local authorities to have a tenancy strategy agreed by 15 January 2013, setting out matters to which individual Registered Providers (housing associations) in the area must have regard when setting their own policies in relation to:

- The kind of tenancies they would grant.
- Where they granted tenancies for a fixed term, the length of those terms.
- The circumstances under which they would grant tenancies of a particular type.
- The circumstances under which a tenancy may or may not be re-issued at the end of the fixed term in the same property or in a different property.

The strategy also reconfirmed the council's position in relation to:

- The application of the affordable rent tenure.
- Discharging the Council's homelessness duty into the private rented sector.

The allocations scheme which defined the process for allocating affordable housing in Bromley through the common housing register and nominations agreement with all stock holding RPs in the area was reviewed and updated in December 2011 in advance of the forthcoming Localism Act. It would now be reviewed independently of the tenancy strategy to ensure that it reflected any changes introduced as a result of the Localism Act and relevant government guidance.

Within the above framework the tenancy strategy had been developed with the following objectives:-

- Making best use of the available housing stock for those that
 most needed it, for as long as they needed it, including reducing
 overcrowding, tackling under-occupation, and making best use
 of adapted housing for those with a disability.
- Offering tenancies which were in the best interest of the individual household.
- Protecting and providing stability for vulnerable people and promote independence.
- Promoting economic activity and not disincentivise work.
- Encouraging the development of new affordable housing.
- Increasing local and customer accountability for the use of affordable and social housing.
- Promoting sustainable communities.

Officers explained that the strategy should have a positive effect on the waiting list and that they had consulted with Housing Associations (HA) who were keen on the changes.

Members noted a number of incidents where exceptions might need to be made such as foster carers who needed to keep rooms available for possible placements and those that had adaptations to their property. Officers confirmed this was an area of concern and that options were being considered as how to minimise the impact for specific groups which are currently being identified. The Director added that this issue had been raised at ministerial level.

RESLOVED that

- (1) The report be noted.
- (2) The Portfolio Holder be requested to approve the final draft of the tenancy strategy.

C) CAPITAL PROGRAMME - 2ND QUARTER MONITORING 2012/13

Report RES12180

On 24th October 2012, the Executive had received the 2nd quarterly capital monitoring report for 2012/13 and agreed a revised Capital Programme for the four year period 2012/13 to 2015/16. The report highlighted, in paragraphs 3.1 to 3.3, the changes agreed by the Executive in respect of the Capital Programme for the Care Services Portfolio and also highlighted, in Appendix B, progress on schemes in the 2012/13 programme. The revised programme for this portfolio was set out in Appendix A.

RESOLVED that the Portfolio Holder be asked to confirm the changes agreed by the Executive in October.

44 SOUTH LONDON HEALTHCARE TRUST - TRUST ADMINISTRATOR - PRESENTATION

The Trust Special Administrator (TSA), Matthew Kershaw, had been due to attend the Committee. Due to "double booking" he was unable to attend and Dr Angela Bhan attended in his place. The Chairman and the Committee expressed their disapproval at the absence of Mr Kershaw.

The Leader of the Council, Councillor Stephen Carr, addressed the Committee. He felt it was "inappropriate" that Mr Kershaw was not at the meeting and that he should be in attendance. He had written to Mr Kershaw to advise him that his attendance was required and had received confirmation that he would be present. Councillor Carr had also asked for an extension to the consultation period as the effect of the consultation would be far reaching and there had not been sufficient time for the Local Authority to consider it. This view was shared by the Committee. Dr Bhan agreed to convey to Mr Kershaw the Committee's disappointment.

Members then made a number of comments and asked questions to which Dr Bhan responded. These were as follows:

 Ward Councillors for Beckenham and Penge were concerned that a public meeting had not been organised in the Beckenham/Penge area; they felt that their residents had been disadvantaged by this, and that more time should have been allowed for the consultation, especially as the scope of the review was more wide ranging than expected. In response Dr Bhan said that the legal requirement was to hold one meeting but there had actually been 14 meetings. However she accepted that there had not been a meeting in Beckenham and she was happy to take back any comments. The consultation had to follow a legal timetable which the TSA could not alter. There would be further opportunities for dialogue after the end of formal consultation.

 In relation to the Beckenham Beacon (the Beacon), many residents used this facility rather that the Princess Royal University Hospital (PRUH). Had consideration been given to how people travelled and where they came from?

The Clinical Commissioning Group's (CCG) intention was to continue to use the Beacon. The South London Healthcare Trust (SLHT) had underutilised this site and there was capacity to include other services. Further work was needed to consider which services could be provided at the Beacon.

• The changes to GP services meant that, at some practices, it was increasingly more difficult to obtain an appointment, with many practices using telephone consultations.

The CCG were aware of this problem and agreed that access needed to be improved; this was mentioned in one the appendices attached to Mr Kershaw's report. GP's were doing more consultations by telephone, and in some cases this was justified.

Whilst it was recognised that Lewisham Hospital would still retain an
urgent care centre the public may not understand this and would be more
likely to attend the A&E department at the PRUH. The parking at the
hospital was currently insufficient and would not be able to support further
demand.

There had been some modelling undertaken in relation to patient travel. Most patients who needed A&E in the Lewisham area would probably go towards the London Hospitals such as King's and St Thomas's. The urgent care centre would remain at Lewisham and it was anticipated that 80% of current patients would still go there. However, there were space issues at the PRUH and the CCG was aware of these.

• Due to the closure of the Hydrotherapy pool at Queen Mary's it had been suggested that these patients be treated using physiotherapy but there were concerns that this would not be as beneficial as hydrotherapy.

Arrangements would be made for those patients that benefitted from this treatment to be able to continue.

• The closure of the emergency eye treatment centre at Queen Mary's would mean that the nearest eye emergency centre would be at Moorefield's. It was felt this was unsatisfactory.

The CCG recognised that this service was needed and would be addressing this.

• It was noted in the report that the lease of the Beacon was currently costing the Trust £1.7m p.a. Members asked about the original business case and whether whoever took over the space vacated by the Trust would still be required to take on these costs.

When the business case was originally made for the Beacon it was based on using the whole site, but perhaps did not take account of changes in healthcare provision. However it was envisaged that new providers would make more effective use of the building, attracting more payments with the intention that the site pay for itself.

There was concern that the report was superficial and did not take account
of acutely ill patients having a range of complex health and care needs.
Locating services in large specialist units improved quality, but this had to
be balanced against excessive travel times. Some services had to be
moved away from hospital settings.

Mr Kershaw had asked for all CCG's to inform him of their plans. It was acknowledged there would be a need to manage individuals. There was an ageing population in Bromley and it was anticipated there would need to be more effective community based care, where a range of specialists would work around each patient. Discussions were currently underway with providers. This approach was aimed at reducing the need for hospital admissions. However it was not a substitute for hospital admission if that was in the best interests of the patient.

• Would services in the community be in place before changes were made to hospital services?

The changes would not all be implemented on 1st April – it was accepted that there would have to be double-running of services.

• There was concern that not enough had been done to inform the public about the different ways to access services other than through A&E, and whether to dial 111 or 999.

It was accepted that this was an issue. The quality of primary care was variable, but efforts were being made to bring all GP practices up to a high standard.

Would the Paediatric unit still be maintained at Queen Mary's hospital?

All the services at Queen Mary's would be reviewed but the unit was still currently in place. GP's should be able to treat many sick children but there needed to be a range of systems in place for sick children.

 The proposed changes would have an impact on London Ambulance Service (LAS) response times. There may be a need for ambulances to travel longer distances. In the case of non-blue light transfers the patient could be travelling for some considerable time and would be subject to traffic delays.

The LAS had been involved in the production of the report and they were aware of the greater travel times that might be involved. Non-blue light cases may be able to go to another unit rather than A&E. These issues would be included in the health impact assessment.

 Older people would welcome anything that improved the patient experience. However, if the aim was to provide more community based care these people would require additional social care and this was not contained in the report.

Mr Kershaw was conscious that the community based approach would impact on additional need for social care and the Local Authority had been involved in the workshops. There had been more input from Bromley than the other Boroughs affected by the proposals. It was better to try to keep people in their own homes and maintain their independence; the Portfolio Holder had taken this approach in his Portfolio Plan.

 Older people would worry that, with a static income but other costs rising, they would not be able to fund care. What additional funding would be available?

There was a fixed amount of funding available to improve the quality of care and promote independence.

• Bromley had a good provision for community care but the concern was that people would not understand urgent care centres or would bypass their GP's and go elsewhere for care. If Lewisham Hospital became an urgent care centre it was unlikely people would still go there - they would still want to go to A&E. The Local Authority would not be able to pick up the deficit so it was wary. There was real concern as the report did not state that GP's would be expected to do more and care would become more community based - the finances would need to be in place.

Some things would be introduced gradually over the 3 year period so there was time to consider the funding. However discussions were taking place with GP's and they would not just be expected to take on more and more.

Lewisham Hospital was well-served by public transport and served a
growing population in Beckenham/Penge. Would there be the bed capacity
at the PRUH when Lewisham A&E closed? The PRUH was already over
capacity and would not have the capacity to take on the patients that
Lewisham reported they admitted from A&E.

Care Services Policy Development and Scrutiny Committee 4 December 2012

Some work on capacity had been undertaken but it was not contained in the report. It had been shared with a number of people. It may be included in the next part of the report but Dr Bhan would check this.

 Would there still be paediatric assessment services at the Lewisham urgent care centre?

The focus of discussion was on A&E and maternity services, so Dr Bhan was not sure of the answer to this, but she confirmed that the intention was for Lewisham to expand its provision of elective procedures. She confirmed that there was evidence and modelling behind the report, and would ask whether this could be made available.

 The report did not appear to address issues of public access – what weight was given to this?

This would be covered in the health impact assessment, which would particularly address the needs of vulnerable groups. This assessment would be published.

• The TSA was effectively asking the Government to provide massive funding to deal with the Trust's debts – it would surely be expecting efficiencies in return, but the report did not cover how the way the Trust worked would be changed to strip out management costs and become more efficient. The Chairman added that the Council was more interested in service delivery, and needed to ensure that the services provided were not second rate.

Dr Bhan confirmed that there was no intention that services would be second rate, and no suggestion that this was what out of hospital care meant.

 Although there had been improvements in Bromley, community care services were not perfect. Everything needed to all be in place before the hospital proposals were implemented and it was not clear that these services were in place in other boroughs. The timetable to achieve these changes was tight, and depended on cooperation from GP practices, which were effectively independent businesses.

Dr Bhan summed up saying that it had been useful to have such a full discussion. She explained that they would have to put new changes in place before removing the old services so there would be a degree of overlap to ensure continuity. The whole health and care system needed to work across the area before full implementation. She recognised the need for GP practices to change and the strength of the challenge ahead, but the opportunity to implement major changes needed to be taken.

The Chairman recognised that there was a three year programme to reduce the deficit, and commented that the public needed to be reassured that there would be capacity in the system and that the quality of services would be improved. Comments would be submitted to the TSA based on the Committee's minutes. The Chairman thanked Dr Bhan for attending the meeting.

45 MOTION REFERRED FROM COUNCIL - HOSPITAL SERVICES

Report RES123205

At the meeting of Council held on 12th November 2012 the following motion was moved Councillor by John Getgood and seconded by Councillor Kathy Bance:

"This council welcomes the positive and helpful recommendations of the Special Administrator to deal with the financial problems associated with the South London Health Trust in his initial report published on 29th October 2012.

However, this Council is deeply concerned that the proposals to close Orpington Hospital, the Lewisham A&E and Maternity units and to withdraw services from the Beckenham Beacon will be harmful to the standards of health care for people living in Bromley.

This council calls on the Leader of the Council and the Chief Executive to respond to the consultation by drawing attention to these concerns and to approach the four Members of Parliament representing the Borough to present a united response to the Special Administrator on the recommendations he will finally make to the Secretary of State for Health."

The Leader of the Council confirmed that he had written to local MPs and the Trust Special Administrator after the Council meeting.

RESOLVED that the motion be noted.

46 BUDGET MONITORING 2012/13

Report CS12039

Members considered the budget monitoring position for 2012/13 based on activity up to the end of September 2012.

Forecasts based on the latest activity available showed an overspend of £531,000 on Bed & Breakfast accommodation for 2012/13 after the use of grant funding that was carried forward from 2011/12 of £453,000. The projected full year cost pressures were £1,047,000 and this sum had been included in the four year financial forecast for 2013/14. The number of B&B placements was currently fairly stable averaging at around 326 for the last few months although without the "invest to save" initiatives the numbers would have been 446.

Care Services Policy Development and Scrutiny Committee 4 December 2012

The Chairman expressed disappointment that, due to overspending in other areas, the Health Authority had not been able to support the Admissions Avoidance Service as had been agreed. Consequently, despite it reducing the numbers of admissions, the service had been closed.

RESOLVED that:

- (1) The projected under spend of 1,935k, based on information as at September 2012, be noted.
- (2) The Portfolio Holder be requested to approve the report.

47 EDUCATION AND CARE SERVICES DEBTORS REPORT 2012

Members considered the current level of Education and Care Services (ECS) debt and the action being taken in order to reduce the level of long-term debt.

One co-opted member asked if the invoices sent to adults with learning difficulties (LD) were a standard invoice as they were not easy to understand. Officers confirmed that there was a standard invoice, but would consider ways to make it easier for people with LD to understand.

Officers explained that the team were very proactive and a relatively small amount of debt had to be written off.

This report would be submitted on an annual basis.

RESOLVED that:

- (1) The current level of debt over a year old owing to ECS and action being undertaken to reduce this sum be noted.
- (2) Further reports be submitted on an annual basis.

48 CARE SERVICES PORTFOLIO PLAN MID YEAR PERFORMANCE REPORT 2012/13

This report provided Members with the final Care Services Portfolio Plan for 2012/13 (Appendix 2) together with the most recent update on progress against the Quarter two Care Services aims contained within the Plan.

The portfolio framework and plan were developed over a period of time in consultation with senior officers and the Portfolio Holder and the framework was agreed at the June Care Services PDS meeting.

Good progress was reported at the end of Quarter two with the update highlighting, the work undertaken to achieve the portfolio aims. The summary showed that of the 34 aims due to be reported at this point in the year 20 were on target (rated green) 13 were likely to be achieved by the end of the year (rated amber) and 1 was unlikely to be achieved (rated red).

The Plan detailed the seven priority outcomes and supporting aims for the Care Services Portfolio. Of these, Outcome three was a jointly held aim with the Education Portfolio and Outcomes four to nine related solely to Care Services. Outcomes one and two related to the Education Portfolio and therefore did not form part of this report.

Members asked for clarification on a number of points:

- Outcome 3 Disability focussed youth club: The numbers for the usage of the Hawes Down Centre disability focussed youth club appeared to be low at 15-20 per session. Officers would clarify the actual figures.
- Outcome 4 New foster carers: A Co-opted Member asked whether
 the figure of 16 new foster carers recruited since April 2012 was those
 recruited to provide placements for children with complex needs, who
 were particularly needed, or all foster carers generally. It was probably
 the latter, but this would be checked.
- Outcome 5 Looked after Children (LAC) placements: Any child away from placement for 24 hours was, by legal definition, counted as a move. The Chairman felt that a note for clarification should be added to the plan.
- Outcome 5 LAC dental and medical checks and immunisation plans: Members commented that the percentages seemed quite low; it was noted that there were sometimes problems with establishing whether children coming into care had been immunised.
- Outcome 5 Healthy Schools Initiative: Officers clarified that this
 referred to all schools including academies and independent schools.
 Members requested clarification on the numbers of school nurses officers would provide this information outside of the meeting. The
 Chairman suggested that this aim should be flagged as red rather than
 amber.
- Outcome 8 Carers Assessments: It was explained that the aim was to encourage carers to have an assessment in their own right, rather than just as part of the assessment of the person they cared for.
- Outcomes 6, 7, 8 & 9 Self funders: Members asked if it was possible to identify "self funders" for domiciliary care. The Director explained that the Council did not have the resources to gather this information and many self-funders would object to being included on council lists.

RESOLVED that the report be noted

49 HOUSING SERVICES MID-YEAR PERFORMANCE REPORT 2012/13

Report CS12045

Officers presented a report which provided an overview of the half year performance of Housing Needs and Housing Development & Strategy against the key objectives and targets for 2012/13. The Chairman noted that 14 under-occupiers had moved – this did not appear to be many, but this had taken a lot of "hand holding". She wanted to ensure this continued and that funding was available to support it.

An update report would be brought back to the Committee in the New Year.

RESOLVED that:

- (1) The performance against the key objectives and targets in the 2012/13 Portfolio Plan and work plan for these service areas be noted.
- (2) The comments on the priorities for the remainder of the year, as set out in paragraph 3.4 of the report, in response to the drivers set out from paragraph 3.3, be noted.

50 MENTAL HEALTH STRATEGY UPDATE (WITH ACTION PLAN)

Officers presented the finalised Strategy for Mental Wellbeing in Bromley following consultation on the draft. The Joint Strategy for Mental Wellbeing in Bromley 2012-2015 had developed the priorities for the next three years for mental health services following consideration of a wide range of evidence and views. These included an assessment of need, a review of national advice and consultation with stakeholders, including users and carers.

Members expressed concern at the wording at the beginning of paragraph 2.1 - this was standard wording but the Chairman felt that as this was a Bromley document it ought to be reviewed.

Brian James asked about references to people with Learning Difficulties as he could only find one in the strategy. Officers explained that they were considered under the review and remodelling of CAMHS. The Chairman felt that awareness of services for people with learning difficulties needed to be mentioned in the strategy and asked that a further sentence be added. She was aware that this group was covered in the Mental Health Needs Assessment but felt it would be helpful for the Committee to have a link to the assessment added to the strategy. Similar concerns were raised about the lack of references to substance abuse, and officers confirmed that this was an overarching strategy with various other strategies sitting below it containing the detail.

One member raised a couple of other concerns, that the strategy should include opportunities for voluntary work as well as employment and that there

should be support for people who were wrongly assessed as being fit for work. Officers explained that the point about volunteering opportunities was covered and that there were a range of support services available through GPs and Oxleas.

RESOLVED that the report be noted

51 CITIZENS ADVICE BUREAUX - CHANGES

Report CS12048

Members considered a report which outlined the current arrangements for the provision of general advice and information services provided by Bromley Citizens Advice Bureau (CAB). The report provided Members with an update on the service following a reduction in funding and changes from traditional 'open door' services to a model of service based on outreach provision, telephone and web access. Members requested this information at a previous meeting.

Until June 2012 Bromley CAB had provided services from three bureaux, Orpington, Bromley Town (based in Community House) and Penge. The Orpington bureau closed in June 2012. In its place Bromley CAB established three outreach centres in the Orpington area: Cotmandene Centre, Hope Church and The Priory School. These were in addition to an existing outreach venue in Biggin Hill. Overall, the changes identified had not resulted in a reduction of service.

The Penge bureau was due to close in March 2013. Bromley CAB was actively negotiating for outreach venues within the Penge area as they had in Orpington which would enable easy access for members of the public. The success of outreach services in Penge would be closely monitored by Education and Care Services. A Member suggested that the wider geography of the Penge area needed to be considered in seeking outreach locations – another local Member confirmed that ward councillors had been involved in this process.

Members requested a further report on CAB services and the provision of information and advice more generally at a future meeting; the Chairman suggested that this should be in June or July 2013.

RESOLVED that the current level of service provided by Bromley Citizens Advice Bureau following the implementation of changes to the service model agreed at the Executive meeting held on 14 December 2011 be noted.

52 QUESTIONS ON THE CARE SERVICES PDS INFORMATION BRIEFING

Four reports had been circulated for Members' information - there were no questions on the briefing.

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LOCAL GOVERNMENT ACT 1972 AS AMENDED BY THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) (VARIATION) ORDER 2006, AND THE FREEDOM OF INFORMATION ACT 2000

RESOLVED that the Press and public be excluded during consideration of the items of business referred to below as it is likely in view of the nature of the business to be transacted or the nature of the proceedings that if members of the Press and public were present there would be disclosure to them of exempt information.

The following summaries refer to matters involving exempt information

54 CONTRACTUAL ARRANGEMENTS FOR SERVICES FOR PEOPLE WITH LEARNING DISABILITIES AT LANCASTER HOUSE AND GOLDSMITHS CLOSE, BIGGIN HILL

Report CS12057

The Portfolio Holder considered this report and approved the recommendations.

The Meeting ended at 9.54 pm

Chairman

Minute Annex

Appendix 1

3. QUESTIONS FROM COUNCILLORS AND MEMBERS OF THE PUBLIC ATTENDING THE MEETING

Questions from Susan Sulis, Secretary, Community Care Protection Group.

1. FLAWED PUBLIC CONSULTATION ON THE SOUTH LONDON HEALTHCARE TRUST SPECIAL ADMINISTRATOR'S PROPOSALS FOR RE-ORGANISING S.E. LONDON'S HOSPITAL SERVICES. (Agenda item 9).

The CCPG has made repeated requests for hard and enlarged copies of the Full Consultation Document (which contains the Questionnaire) to the TSA between 30th October and 12th November, without response.

(a) Will the Committee ask the TSA to extend the Consultation process, and ensure that full copies of the document are available?

Reply -

This issue has been formally raised with the TSA by the Council. Unfortunately, the timeline is laid-down by Parliament and as this is the first case that has been through this process it is unlikely that the legislative timetable can or will be changed.

2. EFFECTS ON BROMLEY RESIDENTS OF PROPOSED CLOSURE OF LEWISHAM HOSPITAL'S A&E DEPARTMENT.

S.E. London PCTs recently wrote to local GPs, requesting that they refrain from sending their patients to A&E departments because they were all full.

(a) If Lewisham's A&E and ICU is closed, this will impact adversely on Bromley residents. How many additional patients will be sent to Princess Royal University Hospital?

Reply -

We are aware that a significant proportion of patients who attend EDs could in fact be seen by the general practitioner, but they choose to not attend their GP or they have difficulty getting an appointment. There is research literature available to show this happens in many areas. The Public Health Department in Bromley have, over the last year, done audits in QEH and PRUH ED which shows that about a third of patients could have been seen in general practice. Accordingly, earlier this year, the Cluster Director of Primary Care very reasonably wrote to practices at an unexpectedly busy time, reminding them that they should be seeing their patients in the practice whenever this is possible. We should be using EDs for the patients that need to be seen there, and other patients should be managed in the community.

Initial modelling by the Trust Special Administrator, Lewisham Healthcare Trust and Lewisham CCG suggests that the majority of patients will not be using facilities at the PRUH. Current patient flows and previously undertaken patient questionnaires indicate that most residents of Lewisham would use Kings, and St Thomas's if there was not an admitting Emergency Department (ED) at Lewisham.

Lewisham Hospital has been undertaken an assessment of how patients use the ED and it is believed that 70-80% of patients that currently use the ED at Lewisham could still attend as normal and be managed within the borough. The majority of the remaining patients will probably attend Kings ED, though some may well attend QEH and PRUH, especially if they live in the Downham area.

A relatively small number of patients (when compared with all who attend EDs) are obviously brought into EDs by ambulance and for these patients; the ambulance will of course take the patient to the nearest ED. Again, this is not expected to be a large number for each site.

There is building work currently under way at both sites (PRUH and QEH) to expand capacity in both departments.

In addition to this, all boroughs are planning to put in place significant services out of hospital, including the strengthening of general practice. In Bromley, we have seen a growth in the proportion of patients seen in the Urgent Care Centre (UCC). This time last year, about 30% of patients going to the ED

would have been seen in the UCC. It is now over 40%. All six CCGs are committed to working with the NHS Commissioning Board and general practices to improve access to primary care, as part of the TSA Community Based Care work stream

3. EFFECTS ON BROMLEY RESIDENTS OF PROPOSED HOSPITAL CLOSURES AND CUTS IN SERVICES. (Ref. OTSA Appendix 1, Community Based Care Strategy for SE London).

The proposed withdrawal of hospital services is to be replaced by the PCT's Joint 'Community Based Care Strategy', but this is repeatedly described as an 'aspiration'. It does not exist.

(a) How will the Council, already struggling with massive cuts in its budget, cope with these additional requirements for care services?

Reply -

The Council welcomes the increased emphasis on community based care and will work with the CCG to help reconfigure and recommission community services across the borough for both children and adults. The TSA draft recommendations document is clear that transitional support will be needed and it is important that the resources required will be provided to both the CCG and to the Council to make this happen.

There is already considerable evidence to show that between the local authority and the CCG (and providers of health services), we are able to deliver community based care. Examples include:

- the virtual ward pilot in Crown Meadow where social care and community services are delivered together
- Musculoskeletal services in the community better patient satisfaction for physiotherapy with waiting times reduced from over 6 months to 6 weeks and weekend and evening and early morning clinics
- COPD services more cost effective services out in the community – reduced death rates and now reduced readmissions to hospital
- Leg ulcer clinic for severe leg ulcers, average healing times have reduced from over 20 weeks to 5 weeks
- reducing unnecessary emergency admissions to hospital Bromley has the third lowest rate in London and Greenwich has the lowest rate in the country
- Urgent Care Centre from seeing 30% of all ED patients to now seeing over 40% and we are in the middle of procuring a service

where an even higher proportion can be seen. This will reduce A&E waiting times and ensure a better, speedier service for all patients

We need to deliver more such services at scale and pace and are aware of the challenges but more than able to meet them if we work in partnership to so do.

Agenda Item 7a

Report No. CS12064

London Borough of Bromley

PART 1 - PUBLIC

<Please select>

Decision Maker: Care Services Policy Development and Scrutiny Committee

Date: 16th January 2013

Decision Type: Non-Urgent Executive Non-Key

Title: DRAFT 2013/14 BUDGET

Contact Officer: David Bradshaw, Head of ECS Finance

Tel: 020 8313-4807 E-mail: david.bradshaw@bromley.gov.uk

Chief Officer: Executive Director of Education & Care Services

Ward: Boroughwide

Reason for report

- 1.1 The prime purpose of this report is to consider the Portfolio Holder's Draft 2013/14 Budget which incorporates future cost pressures and initial draft budget saving options which were reported to Executive on 9 January 2013. Members are requested to consider the initial draft budget savings proposed and also identify any further action that might be taken to reduce cost pressures facing the Council over the next four years.
- 1.2 Executive are requesting that each PDS Committee consider the proposed initial draft budget savings and cost pressures for their Portfolio and the views of each PDS Committee be reported back to the next meeting of the Executive, prior to the Executive making recommendations to Council on 2013/14 Council Tax levels.
- 1.3 There are still outstanding issues and areas of uncertainty remaining. Any further updates will be included in the 2013/14 Council Tax report to the next meeting of the Executive.

2. RECOMMENDATION(S)

The PDS Committee are requested to:

- (a) Consider the update on the financial forecast for 2013/14 to 2015/16;
- (b) Consider the initial draft saving options proposed by the Executive for 2013/14.
- (c) Consider the initial draft 2013/14 Budget as a basis for setting the 2013/14 Budget;
- (d) Provide comments on the initial draft 2013/14 Budget for the February meeting of the Executive.

Corporate Policy

- 1. Policy Status: Existing policy.
- 2. BBB Priority: Excellent Council.

Financial

- 1. Cost of proposal: N/A
- 2. Ongoing costs: N/A.
- 3. Budget head/performance centre:
- 4. Total current budget for this head: £
- 5. Source of funding:

Staff

1. Number of staff (current and additional): full details will be available with the

Council's 2013/14 Financial Control Budget published in March 2013

2. If from existing staff resources, number of staff hours: N/A

Legal

1. Legal Requirement: Statutory requirement.

The statutory duties relating to financial reporting are covered within the Local Government Act 1972; the Local Government Finance Act 1998; the Accounts and Audit Regulations 1996; the Local Government Act 2000; and the Local Government Act 2002.

2. Call-in: Call-in is applicable

Customer Impact

- 1. Estimated number of users/beneficiaries (current and projected):
- 2. The 2013/14 budget reflects the financial impact of the Council's strategies, service plans etc which impact on all of the Council's customers (including council tax payers) and users of the services.

Ward Councillor Views

- 1. Have Ward Councillors been asked for comments? No.
- 2. Summary of Ward Councillors comments:

3. COMMENTARY

Approach to Budgeting

- 3.1 Forward financial planning and financial management is a key strength at Bromley and this has been recognised previously by our external auditors. This report continues to forecast the financial prospects for the next 4 years but some caution is required in considering any projections beyond the 4 year Comprehensive Spending Review period i.e. 2015/16 and 2016/17. The report identifies the significant changes which impact on the Council's finances from 2013/14 arising from the final outcome of the Local Government Resources review which includes the localisation of business rates and the new council tax support scheme.
- 3.2 The Budget Strategy has to be set within the context of a reducing resource base, with ongoing Government funding reductions continuing till beyond 2020 – the ongoing need to reduce the size and shape of the organisation to secure priority outcomes within the resources available. There is also a need to build in flexibility in identifying options to bridge the budget gap as the gap could increase further. The overall updated strategy has to be set in the context of the national state of public finances, unprecedented in recent times, and the high expectation from the Government that services should be reformed and redesigned. There is also an ongoing need to consider "front loading" savings to ensure difficult decisions are taken early in the budgetary cycle, provide some investment in specific priorities and to support invest to save opportunities which provide a more sustainable financial position in the longer term, ensuring stewardship of the Council's resources. Any budget decisions will need to consider the finalisation of the 2013/14 Budget but also consider the longer time frame where it is now clear that a longer period of austerity up to 2020 and beyond is inevitable. Members will need to consider decisions now that can have a significant impact on the future year's financial position which ultimately will help to protect key services

Changes that could impact on longer term financial projections

- 3.3 In considering the next four years there remain many variables which will impact on any final outcome. Some examples are highlighted below:
 - (a) Impact of "recession" factors likely to continue in the foreseeable future, as the economy continues to face an unprecedented period of low/negative growth and further uncertainty. This includes, for example, losses of income and increased demands for services;
 - (b) Interest rates will remain low in the medium term, which results in lower investment income for the Council the deleveraging of banks, quantitative easing and "funding for lending" have resulted in a reduction in interest earnings over the last few months;
 - (c) The Government has also confirmed additional spending reductions of 2% (in addition to previous planned reductions) in 2014/15;
 - (d) The Government have previously indicated that the planned reductions in funding in 2015/16 and 2016/17 are significantly greater than the equivalent annual reductions for the period 2011/12 to 2014/15:
 - (e) The Government has also confirmed additional spending reductions in 2017/18 in the recent Autumn Statement;
 - (f) The Government has confirmed in the Chancellors Autumn Statement that "detailed plans for spending in 2015/16, including the breakdown by department, will be set out in first half of next year" it is therefore not possible to accurately predict the funding reductions for 2015/16 and future years;
 - (g) Inflation remains higher than previously predicted by many economists which is mainly due to "external factors" (e.g. commodity and oil prices etc.);
 - (h) Impact of demographic factors including an increasing older population;

(i) Ongoing consequences of protecting many elements of government spending (mainly education and health) results in spending reductions being intensified in remaining "unprotected areas" – local government is currently the largest non ring fenced area of spend.

Latest Financial Forecast

The report to the Executive in January 2013 identified a budget gap of £106K in 2013/14, £12,602k in 2014/15, and £25,561k in 2015/16 increasing to £39,277k by 2016/17. This assumes that all savings on Appendix 4 of the Executive report are agreed.

Growth Pressures & Real Changes

3.5 A breakdown of the growth pressures over the next four years for Care Services Portfolio is shown below:-

Adults with learning disabilities - new placements	2013/14 £'000 903	2014/15 £'000 1,793	2015/16 £'000 1,793	2016/17 £'000 1,793
Homelessness - Bed & Breakfast pressures	1,000	1,000	1,000	1,000
	1,903	2,793	2,793	2,793

3.6 A sum of £1m has also been set aside in the central contingency for the potential impact of the welfare reform.

Saving Options

3.6 A summary of the new savings options relating to the Care Service Portfolio is shown in Appendix 1 of this report.

Policy Sheets

3.7 Appendix 2 contains the details of the Draft Revenue Budget, variations and their details and a subjective summary of the Care Services Portfolio.

4. COMMENTS FROM THE EDUCATION AND CARE SERVICES DIRECTOR

4.1 The achievability of savings arising from efficiency targets with suppliers is critically dependent upon successful commissioning activity and negotiations with external providers for below inflation increases, no increases or reductions in annual costs. This strategy has been effective in the past. However, as we become increasingly demanding on price, the market may respond by contracting. This results in fewer suppliers willing to do business with us and therefore prices may rise. Managing the market to ensure we continue to have a range of suppliers will be vital in the coming years. The department delivered significant savings in 2012/13 through contract negotiations and the 2013/14 budget assumes that this will continue.

Challenging targets have been set and officers will continue to review services to ensure that they deliver in the most cost effective way that generates the budget savings.

4.2 The Executive Director of Education and Care services has highlighted a range of key issues that need to be taken into account in shaping the 2013/14 budget arrangements for care services:-

4.3 Ageing Population

The number of people aged over 85 years in Bromley's population continues to increase, and during the past year the department has faced increasing demands for assessments and numbers of safeguarding alerts needing investigation. This will put a significant strain on resources during 2013/14 as we seek to keep on top of and improve performance in these areas. Officers will continue to manage this cost pressure by effective implementation of eligibility criteria, and maximising opportunities for maintaining people's independence — minimising the need to use residential and nursing care placements and helping more people remain in their own homes through direct payments and domiciliary care packages.

Based on the evidence of the current year and the continuing increasing numbers of older people within the population, and continuing pressures from young disabled people reaching adulthood with significant care needs, 2013/2014 will be another very challenging year financially.

4.4 Bed and Breakfast Accommodation

Forecasts based on the latest activity available show an increase in the demand on Bed & Breakfast accommodation for 2012/13 which is forecast to continue into 2013/14. The projected full year cost pressure of £1,000k is included in the four year financial forecast for 2013/14.

An invest to save initiative is currently in place which has helped to minimise the growth as far as possible. Without this in place the growth would be greater. Officers continue to explore alternative options around managing these cost pressure down but this remains a key pressure area for 2013/14.

4.4 <u>Learning Disabilities</u>

Learning Disabilities continues to show growth over future years. A sum of £903k is included in the budget for 2013/14 which reflects the number of people with complex learning disabilities going into residential care. Work is ongoing to review all high cost placements and ensure that a number of people with learning disabilities can move into supporting living schemes in the Borough. Moving people from existing placements into supported living is a complicated task which requires careful planning and consideration

4.5 Welfare Reform

The Government is planning fundamental reform of the welfare benefits system in order to simplify the existing system and improve work incentives.

5. POLICY IMPLICATIONS

- 5.1 The Council's key priorities are included within the Council's "Building a Better Bromley" statement and include:
 - Safer Communities
 - A quality environment
 - Vibrant, thriving town centres
 - Supporting independence, especially of older people
 - Ensuring all children and young people have opportunities to achieve their potential
 - An Excellent Council
- 5.2 "Building a Better Bromley" refers to aims/outcomes that include "remaining amongst the lowest Council tax levels in Outer London" and achieving a "sustainable council tax and sound financial strategy".

6. FINANCIAL IMPLICATIONS

6.1 The financial implications are contained within the overall report.

7. LEGAL IMPLICATIONS

7.1 The Local Authorities (Standing Orders)(England) Regulations 2001 deal, amongst other things, with the process of approving the budget. Under these provisions and the constitution, the adoption of the budget and the setting of the council tax are matters reserved for the Council upon recommendation from the Executive. Sections 73-79 of the Localism Act 2011 has amended the calculations billing and precepting authorities need to make in determining the basic amount of Council tax. The changes include new sections 31 A and 31 B to the Local Government Finance Act 1992 which has modified the way in which a billing authority calculates its budget requirement and basic amount of Council Tax.

8. PERSONNEL IMPLICATIONS

8.1 The Corporate Trade Union and departmental Representatives' Forum receives regular updates on the Council's finances and the associated policy implications and challenges. Staff and their trade union representatives will be consulted individually and collectively on any adverse staffing implications arising from the budget options. Managers have also been asked to encourage and facilitate staff involvement in budget and service planning

Non-Applicable Sections:	
Background Documents: (Access via Contact Officer)	Finance Monitoring, Estimate Documents etc all held in Finance Section

Appendix 1

Budget \$Saving £'000 £'000 SAVINGS ALREADY DELIVERED/AGREED SAVINGS ALREADY APPROVED/DELIVERED ECS 1 Domiciliary Care retendering 6,967 1,000 Savings already reported to Executive ECS 2 Extra Care Housing (saving from residential placements) 1,898 500 Savings already reported to Executive - 11/4/12 ECS 3 Campus Reprovision - attrition 1,100 1,100 Reflected in Budget Monitoring Reports Risk when several care and several car	Possible impact on service/notes
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ECS 3 Campus Reprovision - attrition 1,100 1,100 Reflected in Budget Monitoring Reports Risk when a	
	grant moves from specific to RSG around
	nt factoring attrition impact
ECS 4 Additional savings from Supporting People Services 200 Reflected in Budget Monitoring Reports	
200 Tellected in Budget World Supporting 1 copie Scratocs	
FOR E Contract Efficiencies	
ECS 5 Contract Efficiencies 200 Reflected in Budget Monitoring Reports	
ECS 6 Education Restructure to offset part of impact of LACSEG 43 (plus a further £320k re DSG)	
Sub Tatal	
Sub-Total 3,043	
MANAGEMENT SAVINGS	
Senior Management	
STAFF SAVINGS	
	staff having to take on additional duties and this
reducing increases the second of the second	he service risks due to a reduced management
structure.	
Sub-Total 150	
Other Staff Savings	
	sk around capacity and quality of service.
strategy and support functions.	
	livered by Oxleas who will resist reductions & warn nt service implications
	it service implications
ECS 10 Safeguarding and QA - Business Support Post/Part time Finance 451 55 Staffing review - deletion of 1.5fte	
Post Post	
Sub-Total 255	
REDUCTION IN SERVICE/CEASING OF SERVICE	
Pa	
	Development expenditure covers the entire
	e workforce, including external providers (e.g
EQS) 12 Decommission/cease Care Link 189 50 Cease provision and sign post in market services. This will dir	rectly impact on service users so will need to be
managed c	
ECS 13 Tightening of FACs criteria 1,669 100 Tightening of the application of the FACS criteria for adults with	
Learning Disabilities ECS 14 Contracts - Disabled Children 166 35 Reduction in expenditure on Service Level Agreements within	
ECS 14 Contracts - Disabled Children 166 35 Reduction in expenditure on Service Level Agreements within the Specialist Support and Disability Service.	
and opposituate diapport and biodamity derivide.	

		1	1			1
						5
Dept	No	Service area	2012/13	2013/14	Detail of proposal	Possible impact on service/notes
			Budget	Saving		
			£'000	£'000		
ECS	15	Older people's Day Care	965	500	Reduce costs by 50% by concentrating on dementia day care to prevent need for long term care costs	Currently 1500 places provided per week in 10 day centres including 4 specialist centres, with 752 people attending each week. The proposal is to shift the emphasis on specialist places for those that meet the eligibility criteria with a reduction of the overall number of places available. May have an effect on other more intensive services over time i.e. personal care, respite care, residential care as is often part of a wider package of support being provided by family carers. Any reduction of income has already be factored in the charging income figures.
ECS	16	Transformation of Children & Adult Care Services		502	This relates to savings of in staffing costs and commissioning	
1					efficiencies.	
		Sub-Total		1,287		
		SAVINGS THROUGH OUTSOURCING/SHARED		+		
ECS	17	SERVICES/SERVICE REDESIGN Outsource Reablement	1,701	250	In-house reablement service to be outsourced/reduced and	Tupe may impact on overall savings.
			·		alternative provision grown in independent sector	
ECS	18	Market testing - LD core and cluster	1,317	75	property and care outsourcing	All would have TUPE implications which would reduce potential savings under current legislation.
ECS	19	Market testing - ECH services	971	100	closure of one ECH scheme and outsourcing of care in remaining	Tupe may impact on overall savings.
ECS		Market testing - LD day services	2,030		seek external provider for LD day service provision	Tupe may impact on overall savings.
ECS	21	Market testing of Tenancy Support (SP) - already delivered	339	500	reduce by 30% commissioning costs of support to single vulnerable homeless people	
ECS	22	Decommission one LD small home	1,317	50	net cost after reproviding for care of residents (Orchard Grove)	Tupe may impact on overall savings.
ECS	23	ICES - already delivered	556	25	year 1 saving from recommissioning equipment service	
		Sub-Total		1,075		
		INVEST TO SAVE				
ECS	24	Reduce forecast growth in PDSI*	600	150	achieve through investing £500,000 NHS social care fund into new service options, leading to reduction in residential care placements from 2013/14	Budget for 2012/13 assumes savings of £100k increasing to £250k by 2013/14. By 2013/14 only likely to deliver £100k savings in total - shortfall of £150k
ECS	25	Offset LD Growth (CYP) esp. transition costs with NHS Social Care funds	900	75	Achieve through investing £500,000 NHS social care funds a) funding growth projections b) reducing numbers in long term	Budget for 2012/13 assumes savings of £100k increasing to £250k by 2013/14. By 2013/14 only likely to deliver £150k
Pa					residential care, reducing projections from 2013/14 onwards.	savings in total - shortfall of £100k
EØ ()	26	Admission Avoidance scheme	221	75	Service now ceased	
38						
ECS	27	Reduce long term care costs in dementia*	2,500	150	achieve through investing £500,000 NHS social care fund into new service options, leading to reduction in residential care placements from 2013/14	Budget for 2012/13 assumes savings of £100k increasing to £250k by 2013/14. By 2013/14 only likely to deliver £100k savings in total - shortfall of £150k
		Sub-Total		450		

					T	T
Dept	No	Service area	2012/13	2013/14	Detail of proposal	Possible impact on service/notes
			Budget £'000	Saving £'000		
ECS	20	INCOME Additional income will be generated in the Care Services divison	13,530	100	Limited capacity within the team means that not all service	
ECS	20	from the creation of an additional post in the Appointeeship Team	13,530	100	users, who are unable to manage their financial affairs, will be provided with this service. Creating this additional post will provide the capacity within the team and avoid having a waiting list for the service.	
		Sub-Total		100		
		FUNDING TO VOLUNTARY SECTOR				
ECS	29	Reduce funding to Citizens Bureau	245	41	Reduction in non – priority voluntary sector spend:	
					Citizens Advice Bureau (CAB)	CAB provides and free impartial advice and information and is available to all residents. The funding reduction through contractual arrangements is part of the wider review undertaken on information, advice and guidance services.
ECS	30	Support planning and brokerage service for ineligible service	100	50	Reduce cost of non-priority service areas	
	3	users	150			approximately 420 older people who fall outside the eligibility criteria receive services designed to provide targeted support for a period of time (moderate needs). Information, advice and guidance services are provided fro people with learning disabilities who do not meet eligibility criteria but who need low level support. The service supports approximately 135 people pa. The potential for different models of service and charging for services could minimise the impact of any long term effect on care services.
ECS	31	Mental health day & support services	387	75	Reduce contracts with voluntary sector for MH day support and activities, and work related schemes	Day centres for adults wiht mental health needs, provide employment support, training courses, peer support, benefits advice to approximately 450 service users per annum – includes a high proportion of people not eligible for services under the FACS criteria. This may impact longer term on other services.
ECS	32	Disability work schemes	525	100	Reduce the amount spent on supported work schemes provided by Shaw Trust through the contracting process.	Current employment support services work with people who may otherwise be unable to access employment opportunities. Potential to achieve efficiencies in contracts with providers.
Page (33	Carers organisations	400	100	Efficiencies from Carers Support & Services	Potential to achieve efficiencies from joint contracts and funding with PCT. Approx 4000 carers supported by range of services. May have an effect on other more intensive services over time i.e. personal care, respite care, residential care as is often part of a wider package of support being provided by family carers.
39		Sub-Total		366		

Dept	No	Service area	2012/13	2013/14	Detail of proposal	Possible impact on service/notes
			Budget £'000	Saving £'000		·

CARE SERVICES

DRAFT REVENUE BUDGET 2013/14 - SUMMARY

2011/12	Г		Ingrassed	Other	2013/14 Draft
Actual	Service Area	2012/13 Budget	Increased costs	Changes	Budget
£		£	£	£	£
~	Adult Social Care	~	~	~	~
123,645	AIDS-HIV Service	120,210	1,090	0	121,300
32,766,470	Assessment and Care Management	31,602,840		Cr 1,986,880	
	Direct Services	4,626,420		Cr 1,128,470	3,492,750
	Learning Disabilites Day and Short breaks Service	2,050,430			1,888,680
2,240,958	Learning Disabilities Care Management	2,451,190	41,920	Cr 100,000	2,393,110
	Learning Disabilities Housing & Suppport	1,211,030		Cr 47,660	1,160,340
44,002,515		42,062,120	702,010	Cr 3,438,010	39,326,120
	Children's Social Care			_	
	Bromley Youth Support Programme	911,020		0	912,620
	Care and Resources	13,124,780		861,640	14,222,290
	Referral and Assessment	2,990,810		0	3,003,570
	Safeguarding and Care Planning	2,870,910		0	2,882,960
	Safeguarding and Quality Assurance	1,872,070			1,767,700
23,109,673		21,769,590	275,120	744,430	22,789,140
	Commissioning				
2 776 910	Commissioning	3,620,620	32,610	Cr 491,010	3,162,220
	Drugs and Alcohol	254,090	· · · · · · · · · · · · · · · · · · ·	0	257,100
	Learning Disabilities Services	17,144,320		8,422,660	· ·
	Mental Health Services	5,193,120			5,021,250
	PCT Funding (Social Care & Health)	0,100,100		0	0
	Supporting People	4,051,560	48,330	Cr 1,000,000	3,099,890
26,891,875		30,263,710		6,639,080	37,529,010
			ì		
	Education Division				
	School Improvement Looked After Children	559,790			
4,488,615	SEN and Inclusion Children's Disability Services	4,257,640			4,266,510
4,931,144		4,817,430	84,790	Cr 116,340	4,785,880
070 740	Environmental Services - Housing	054 070	0		050 000
	Housing Enforcement	254,270		0 000	253,880
1,008,451	Housing Improvement	475,720 729,990			391,200 645,080
1,000,431		729,990	3,090	Ci 90,000	045,000
	Operational Housing				
Cr 4,277	Enabling Activities	Cr 4,200	0	0	Cr 4,200
	Housing Benefits	Cr 1,016,540			Cr 1,041,950
	Housing Needs	2,160,310		1,000,000	3,170,480
1,561,161	3	1,139,570		1,000,000	2,124,330
			,		, ,
	Strategic and Business Support Service				
	Performance & Information	2,509,980	156,760	Cr 276,510	2,390,230
	Quality Assurance	188,350		13,420	
1,683,507		2,698,330	156,900	Cr 263,090	2,592,140
103,188,327		103,480,740	1,834,890	4,476,070	109,791,700
6,580,048	TOTAL NON CONTROLLABLE	#VALUE!	#VALUE!	#VALUE!	#VALUE!
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Agenda Item 7b

Report No. CS12065

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: CARE SERVICES POLICY DEVELOPMENT AND SCRUTINY

COMMITTEE

Date: 16th January 2013

Decision Type: Urgent Non-Urgent Executive Non-Executive Key Non-Key

Title: BUDGET MONITORING 2012/13

Contact Officer: David Bradshaw, Head of Education and Care Services Finance

Tel: 020 8313 4807 E-mail: David.Bradshaw@bromley.gov.uk

Chief Officer: Executive Director of Education & Care Services

Ward: (All Wards);

1. Reason for report

1.1 This report provides the budget monitoring position for 2012/13 based on activity up to the end of November 2012.

2. RECOMMENDATION(S)

- 2.1 The Care Services PDS committee are invited to:
 - (i) Note that a projected underspend of 2,474k is forecast, based on information as at November 2012;
 - (ii) Refer the report to the Portfolio Holder for approval

Corporate Policy

- 1. Policy Status: Not Applicable
- 2. BBB Priority: Children and Young People

Financial

- 1. Cost of proposal: Not Applicable:
- 2. Ongoing costs: Not Applicable:
- 3. Budget head/performance centre: Care Services Portfolio
- 4. Total current budget for this head: £117.088m
- 5. Source of funding: Care Services Approved Budget

<u>Staff</u>

- 1. Number of staff (current and additional): 916.15 Full time equivilent
- 2. If from existing staff resources, number of staff hours: N/A

Legal

- 1. Legal Requirement: Statutory Requirement
- 2. Call-in: Applicable

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): The 2012/13 budget reflects the financial impact of the Council's strategies, service plans etc. which impact on all of the Council's customers (including council tax payers) and users of the services

Ward Councillor Views

- 1. Have Ward Councillors been asked for comments? Not Applicable
- 2. Summary of Ward Councillors comments:

3. COMMENTARY

- 3.1 Forecasts based on the latest activity available show an overspend of £591,000 on Bed & Breakfast accommodation for 2012/13 after the use of grant funding that was carried forward from 2011/12 of £453,000 and other minor underspends. The projected full year cost pressures are £1,157,000. A sum of £1m has been included in the four year financial forecast for 2013/14. The number of B&B placements is currently fairly stable averaging at around 325 for the last few months although without the "invest to save" initiatives the numbers would have been 475.
- 3.2 The projected underspend of £2,474k for 2012/13 is mainly due to savings proposed for 2013/14 which have been delivered early or as a result of the recent tendering exercise for domiciliary care. The department has also benefit from attrition in the LD service where responsibility and funds transferred from the PCT to the council in April 2011 (campus reprovision programme). The Department of Health has continued to fund these services, paid to the council in the form of specific grant, at the agreed transfer sum and as yet have not factored in any impact of attrition.

4. POLICY IMPLICATIONS

- 4.1 The Resources Portfolio Plan includes the aim of effective monitoring and control of expenditure within budget and includes the target that each service department ill spend within its own budget.
- 4.2 Bromley's Best Value Performance Plan "Making a Difference" refers to the Council's intention to remain amongst the lowest Council Tax levels in outer London and the importance of greater focus on priorities.
- 4.3 The four year financial forecast report highlights the financial pressures facing the Council. It remains imperative that strict budgetary control continues to be exercised in 2012/13 to minimise the risk of compounding financial pressures in future years.
- 4.4 Chief Officers and Departmental Heads of Finance are continuing to place emphasis on the need for strict compliance with the Council's budgetary control and monitoring arrangements.

5. FINANCIAL IMPLICATIONS

- 5.1 A detailed breakdown of the projected outturn by service area in shown in appendix 1(a) with explanatory notes in appendix 1(b). Appendix 2 gives the analysis of the latest approved budget. Other financial implications are contained in the body of this report and Appendix 1b provides more detailed notes on the major services.
- 5.2 Overall the Care Services Portfolio is projected to underspend by £2,474k in 2012/13 mainly as a result of savings relating to 2013/14 being delivered early or due to efficiencies from tendering. The main budget variations are shown in the table below: along with the impact these variations will have in 2013/14:-

	2012/13 £'000	2013/14 £'000
Savings assumed for 2013/14 but delivered early		
Staffing savings - strategy division	-100	-100
Supporting People efficiencies	-800	-800
Mental Health Services	-75	-75
Domiciliary care - tendering (already reported to Executive)	-400	-1,000
Campus Reprovision (attrition)	-1,100	-1,100
	-2,475	-3,075
B&B Pressures	591	1,157
Other savings/Pressures (Details in appendix 1b)		
Adult Social Care	522	0
Strategic & Business Support	-175	0
Children's Social Care	200	0
Education Division	-37	0
Commissioning	-850	0
Non recurrent underspend relating to previous years	-250	0
	-590	0
TOTAL	-2,474	-1,918

Non-Applicable Sections:	Legal Implications
	Personnel Implications
	Customer Implications
Background Documents:	2012/13 Budget Monitoring files in ECS Finance Section
(Access via Contact	
Officer)	

REASONS FOR VARIATIONS

1. Assessment & Care Management - Dr £114k

The variation can be analysed as follows:-

	•	£'000
a)	Residential/Nursing care and respite for older people	(591)
b)	Domiciliary care & direct payments for older people	521
c)	less part year saving on retendering of domiciliary care contracts	(258)
d)	Residential and domiciliary care for people with physical disabilities	92
e)	Community Equipment Service	350
		114

- a) The number of nursing and residential placements continue to be below budget resulting in a projected
- b) There continues to be pressure on the community based budgets for older people, with a projected overspend of £521k reported. The priority is to keep older people in their own homes rather than placed in residential care, especially following discharge from hospital, and this can be seen in the reduced costs of residential and nursing placements above, however this has placed pressure on the domiciliary care and direct payments budgets which continue to overspend. Savings being delivered by the reablement team, which continues to support and reable clients and avoid ongoing care costs, have avoided annual costs of approximately £500k, which has been factored into the 12/13 budgets as part of the savings to be delivered.
- c) The above overspend is partly offset by savings being delivered from the retendering of domiciliary care contracts which are expected to save approximately £400k this year and £1m in a full year. Currently it is estimated that the retendering has realised £142k of savings, with another £258k still to be realised. This is based on data from early September, and changes to packages would continue to be made after this period. The saving in 2013/14 is £1m, so next year the service will not have the benefit of this underspend.
- d) Services for clients with physical disabilities were showing an overspend of £88k at the last budget monitoring, this has increased by £4k to £92k this month .An invest to save proposal to help avoid future growth was agreed at Executive on 19 October 2011 and officers are currently implementing the initiatives agreed, with expected savings already included in the projected outturn.
- e) The Community Equipment Service has moved to a new model of working, with the service having been outsourced. The service is now run on the basis of a sum being charged each time an item is required, together with associated delivery costs, whilst a credit for the item is raised when it is collected, together with associated collection and cleaning costs. Invoices received to date indicate an increasing monthly cost, and officers are currently investigating levels of spending by teams and implementing measures to reduce expenditure in this area. It is anticipated that the overspend will be at least £350k, but an increased contribution will also be required from Health to ensure this overspend is not exceeded.

2. Direct Services - Dr £68k

- a) Reablement The budget for the reablement team is expected to underspend by £19k this year.
- b) Carelink The staffing budget is projected to be underspent by £50k this year, as a result of a minor reorganisation of the service.
- c) Admissions Avoidance service The overspend of £96k relates to the full staffing costs of the team. The service was jointly commissioned with Bromley PCT and the business case was built on the basis of savings in hospital tariffs, with the risk and benefits being shared by the by the two organisations. Although the activity levels for the service in 2011/12 resulted in avoided admissions (and therefore notional reductions in cost), the PCT had experienced an overall increased spend on emergency acute activity during the year and was not in a position to reimburse any funding to the Council. As a result of this the Council overspent the budget in 2011/12 and with no likely reimbursements in the future, proposals to withdraw from the service were submitted to ACS PDS on 10th April.
 - The service has now closed and the overspend reported is the final cost for the year.
- d) C.A.R.T's The projected spend on staffing for the Community Assessment and Rehabilitation team is expected to be £9k below budget this year.
- e) Extra Care Housing There is currently pressure on the inhouse ECH service, with an underachievement of income being projected. This is due to a short term increase in void properties, and hence lower client numbers as a result of the new ECH schemes at Regency Court and Sutherland Court recently opening.

3. Learning Disabilities Care Management - Dr £38k

The overspend relates to turnover on the staffing budget not being achieved.

4. Learning Disabilities Day and Respite Services - Cr £75k

There are 2 services for clients with Learning Disabilities provided under this budget head, day services and respite services. Day services are provided at various council owned premises, as well as in the community, whilst respite services were previously provided at 2 locations in the borough, but the service has now relocated to one premises in Bromley. There is a net underspend of £76k projected for these services.

5. Learning Disabilities Housing and Support - Cr £23k

A savings target of £100k was included in the 2012/13 budget for the decommissioning of an LD small home. To date several small homes have been closed, resulting in the achievement of the saving. Longer term changes to achieve further savings in 2013/14 include the deregistration of Orchard Grove and St Blaise.

Monitoring of the service overall shows a projected underspend in the region of £23k, after taking account of the £100k saving.

6. Housing Needs - Dr £591k

The forecast net overspend of £591k comprises:

	£'000
Nightly paid accommodation (B&B) projected overspend	1,067
Use of Housing Grants to mitigate overspend	(453)
Other	(23)
	591

The number of B&B placements is currently fairly stable, largely as a result of the impact of invest to save initiatives, including the 26 units now available at Cranbrook Court. However, numbers are expected to increase at an average rate of 6 per month (net) for the remainder of the year and this is reflected in the projected overspend. This is a continuation of the trend seen in 2011/12.

The savings from the invest to save initiatives are set out below. It should be noted that there is still an element of projection in some of the figures and the actual position may vary.

	2012/13	FYE
	£'000	£'000
Top up on existing leasing programme (golden hellos)	(151)	(225)
Enhanced initiatives on homeless prevention and enhanced incentives for	(414)	(670)
access to private rented sector		
Building conversion (Cranbrook Court)	(73)	(111)
	(638)	(1,006)

Increases in client numbers and rising unit costs have been noticeable across all London boroughs and are the result of the pressures of rent and mortgage arrears coupled with a reduction in the number of properties available for temporary accommodation. There are high levels of competition and there is evidence of 'out-bidding' between London boroughs to secure properties. This has contributed towards the high cost of nightly paid accommodation.

Given the size of the projected overspend, £453k of Housing grant funding has been used to help offset these cost pressures in the current year. This is a short term measure and doesn't address the increasing cost pressures going forward.

The full year effect of the projected overspend is forecast to be £1,157k in 2013/14. This is based on projected activity to the end of March 2013 and includes assumptions on savings arising from invest to save initiatives. It does not include any projected further growth in numbers beyond the end of March 2013 nor the impact of welfare reform. £1m growth has been included in the 2013/14 draft budget which leaves a residual pressure of £157k going in to 2013/14.

7. Strategic & Business Support Services - Cr £275k

The projected underspend of £275k relates to:

	£'000
Social Care Workforce training	(164)
Staffing	(76)
Overachievement of income	(20)
Other, mainly general running expenses	(15)
	(275)

The savings on Social Care Workforce training partly relate to early achievement of savings required in 2013/14 (recurrent saving) and partly to delayed commissioning of training services in 2012/13 following a strategic workforce learning needs analysis (non-recurrent saving).

The underspend on staffing relates mainly to vacant posts, the majority of which have now been filled.

The Performance and Research trading account is projected to generate £20k income in excess of budget in 2012/13 from services sold to schools.

8. Children's Social Care - Cr £200k

Staffing

It is anticipated that staffing costs will come in broadly on budget this year. Some areas are managing to maintain vacancies, however there is an ongoing need to rely on agency staff due to the usual reasons of delays in recruitment, sick and maternity leave.

The Recruitment and Retention package brought in in 2010/11 has been successful in its aim of reducing the overspend within the Social Care teams.

Step Up to Social Work Grant

This is the second year of the two year grant funding and the budget for this year is £465k, plus a carry forward of £51k from 2011/12, which was approved by Executive on 20th June. The DfE has confirmed that any underspend on the grant this year can be carried forward to 2013/14.

Placements

The Placement Budget has had growth of £500k added in 2012/3 to address the high level of overspend in the last 2 financial years. There has been 62% increase nationally in the numbers of children taken into care during this period, and during the last 2 months Bromley itself has seen an increase in the number of placements having to be made. At this stage it is expected that expenditure will be approximately £100k over budget, assuming the invest to contain strategy and tight gatekeeping continue to be managed . This overspend is offset by underspends in other areas of children's social care.

Unaccompanied Asylum Seeking Children

Grant funding is reducing for these clients as the numbers have fallen over the last few years. Leaving Care clients are now below the de minimus level of 25 so no funding will be received. This resulted in an overspend in 2011/12 and is being monitored closely in 2012/13.

No Recourse to Public Funds - £200k

The number of people in Bromley with no recourse to public funding continues to increase. As these people have children we have a duty to ensure their safety. The current expenditure is projected to be £300k against a budget of £100k.

9. SEN & Inclusion Children's Disability Services

Although relating to Care Services Portfolio, the Children's Disability Service comes under the responsibility of the Assistant Director of Education.

There is a projected underspend of £140k in the Short Breaks Service mainly due to travel and escort costs, and grants and subscriptions. Looked After Children placements are forecast to overspend by £403k, mainly due to two new children (above projections) starting this year. Also, the contract for Hollybank will underspend by £20k. This is offset by underspends in our areas within Education, so no variation is currently reported.

Projected Variations

£

Total Children's Disability Services	243,000
Children's Disability Team	403,000
Hollybank	-20,000
Short Breaks	-140,000

10. School Improvement Looked After Children - Cr £37k

An underspend of £38k is expected in the Children in Care Education team due to a vacant post, which will be deleted in 2013/14 to help meet the impact of LACSEG changes.

Projected Variations
£
Children In Care Education -37,000

Total School Improvement LAC -37,000

11. Learning Disabilities Services - Cr £1,670k

Budgets for learning disabilities placements (including supported living and shared lives) are forecast to underspend by £1,670k.

The savings arise mainly from commissioning cost efficient placements for some of the ex-PCT reprovision clients, limiting inflationary increases and attrition. The projected spend includes assumptions in relation to future volume-related changes (i.e. increased numbers of clients from: transition, carer breakdowns, increased client needs and Ordinary Residence transfers) which may not occur. This would result in an increased level of underspend.

A range of growth and savings have been included in the 2013/14 draft budget for Learning Disabilities. Once these have been taken into account, the full year effect of the current year's projection, added to anticipated new activity in 2013/14, is a budget pressure of approximately £400k.

In addition to the underspend of £1,670k, there is a further, non-recurrent underspend of £250k relating to previous years items. The accounts are closed each year on the basis of the best information available at that point in time and, subsequent to that, additional information has indicated that actual costs are not as high as anticipated when the accounts were closed.

12. Mental Health Services - Cr £288k

The projected underspend arises partly from the full year effect of client moves during 2011/12 which resulted in more cost effective placements, from increased use of flexible support rather than residential placements and from containing annual contract price increases to providers. Some of the underspend relating to restricting price increases has been attributed to the 2012/13 budget saving for commissioning contract efficiencies.

£75k of the underspend relates to early achievement of savings required in 2013/14 on the s75 Agreement with Oxleas NHS Trust for delivery of community mental health services.

13. Supporting People - Cr £800k

There is a projected underspend of £800k on Supporting People budgets. This is in addition to the savings required to achieve the savings targets built in to the 2012/13 budget (further £400k reduced funding for sheltered housing and £300k reduced commissioning of Supporting People services).

The £800k underspend relates mainly to savings arising from the gateway review of Supporting People funded tenancy support services, from limiting inflationary increases and from the tendering of mental health flexible support services. This represents early achievement of savings required in 2013/14.

14. Housing Improvement - Nil Variation

There is a projected overspend of £17k within employee costs due to non-achievement of the turnover budget. This is fully offset by extra income received as a result of repayment of home improvement loans.

Management Team Comments

There is a forecast underspend of £2,474k in 2012/13 mainly due to retendering of the domiciliary care contracts, the learning disabilities grant funding relating to the campus reprovision programme and Supporting People budgets.

The main pressure on the budget in 2012/13 is around Bed & Breakfast numbers which continue to increase each month and potentially could result in unfunded cost pressures in excess of £1m by 2013/14. Officers continue to discuss various initiatives with Private Landlords to help mitigate these costs. Detailed work is being undertaken to model the financial implications if numbers increase, track when some of the initiatives are likely to impact on the budget and explore other options that might be available.

Waiver of Financial Regulations:

Since the last report to the Executive, waivers were approved as follows:

Adult Social Care

- (a) 7 residential placements between £50k and £100k and 4 exceeding £100k
- (b)There were also contract waivers agreed for £76k, £137k, £168k and £540k for extension of current contracts.

Children's Social Care

- (a) 10 residential placements between £50k and £100k and 16 exceeding £100k
- (b) A further 2 waivers were approved for residential placements for children with SEN & disabilities, one for £196k p.a and one for £144k p.a. Both of these placements are joint funded with Education with the Care Services contributions being £116k and £72k respectively.
- (c)There was also a contract waiver agreed for £51k.

Virements Approved to date under Director's Delegated Powers

Details of virements actioned by Chief Officers under delegated authority under the Financial Regulations "Scheme of Virement" will be included in financial monitoring reports to the Portfolio Holder. Since the last report to Executive, no virements have been actioned.

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Agenda Item 7c

Report No. CS12067

Date:

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Portfolio Holder for Care Services

Executive

For Pre-Decision Scrutiny by the Care Services Policy Development and

Scrutiny Committee on Wednesday 16 January 2013

For recommendation by the Care Services Portfolio Holder to the Council

Executive on Wednesday 6th February 2013

Decision Type: Non-Urgent Executive Key

Title: COMMISSIONING STRATEGY FOR OLDER PEOPLE DAY

OPPORTUNITIES AND RESPITE CARE - INVEST TO SAVE.

Contact Officer: Andy Crawford, Commissioning Manager

E-mail: Andy.Crawford@bromley.gov.uk

Chief Officer: Executive Director of Education & Care Services

Ward: (All Wards);

1. Reason for report

- a. In September 2012 the Care Services Portfolio Holder approved in principle the proposed commissioning strategy for older people's day opportunity services and respite at home services in which individual choice and control is central and Personal Budgets/ Direct Payments the preferred mechanism to fund the support provided by the Council to eligible individuals.
- b. Transitional arrangements to reach that position were described whereby, from 1st April 2013, all block contract arrangements with older peoples' day opportunities providers and respite at home service providers would cease. At that point all existing users of the services would have continuation of the service guaranteed by their places being spot-purchased by the Council on an individual basis (referred to as "legacy placements"). As clients leave the service the value of the spot placement would be withdrawn from the provider.
- c. Future eligible clients coming new to the system from April 2013 would have the value of their service included in their Personal Budget. If the Council manages the Personal Budget on behalf of the service user, the Council can either purchase an individual place at a day centre or another form of respite/ activity according to the individual's choice. Alternatively the service user can take a Direct Payment, which would enable them to purchase either a day opportunities place of their choice or other forms of respite/day activities (e.g. sitting service) should they wish to do so.
- d. Members asked that the detailed arrangements in respect of Legacy Placements, Personal Budget values and future arrangements with providers be worked up and reported in January/February 2013 in order to implement the changes.

2. RECOMMENDATION(S)

The Policy Development and Scrutiny Committee is asked to comment on the proposals in the report.

The Portfolio Holder is asked to recommend approval of the commissioning approach to the Council Executive

The Council Executive is asked to approve:

- a) The legacy funding approach as set out in 3.19 to 3.21
- b) Transitional contracts for older people's day opportunity services as set out in 3.29
- c) The Personal Budget values for older people's day opportunity services as set out in 3.22 to 3.28
- d) The funding of transport as set out in 3.13
- e) Waivers to extend the contracts for the Respite at Home services as set out in 3.31 to 3.33
- f) Client contributions for older people day opportunity services as set out in 3.34 and 3.35
- g) The draw down of £900,000 of the NHS funds to invest to save as outlined in 5.3

Corporate Policy

- 1. Policy Status: Existing Policy:
- 2. BBB Priority: Supporting Independence:

Financial

- 1. Cost of proposal: Estimated Cost: £900k Invest to Save
- 2. Ongoing costs: Recurring Cost: £1.87m in 2013/14 reducing to £1.18m in 2015/16
- 3. Budget head/performance centre: Care Services Older Peoples' Services Respite and Day Care
- 4. Total current budget for this head: £1.75m
- 5. Source of funding: Care Services Portfolio

<u>Staff</u>

- 1. Number of staff (current and additional): N/A
- 2. If from existing staff resources, number of staff hours:

Legal

1. Legal Requirement: Statutory Requirement The Council has a duty under s29 National Assistance Act 1948 to provide advice and support services for rehabilitation, occupational, social, cultural and recreational activities and under s2 Chronically Sick and Disabled Persons Act 1970 a duty to a range of services to meet the needs of disabled people including recreational facilities outside the home.

Subject of Government White Paper "Caring for our future: reforming care and support" July 2012

2. Call-in: Applicable

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): There are an estimated 51,900 people aged over 65 in the borough, over 4,000 of whom have dementia. Around 670 individuals are currently funded by the Council in day opportunity services for older people and approximately 500 individuals over 65 access various forms of Council funded respite.

Ward Councillor Views

- 1. Have Ward Councillors been asked for comments? Not Applicable
- 2. Summary of Ward Councillors comments:

3. COMMENTARY

Update

- 3.1. A project group was established, led by Commissioners and including representation of Finance, Care Management, Procurement and Communications, to deliver the benefits of the planned commissioning and contracting approach for older people's day opportunity services and respite at home services..
- 3.2. In order to deliver the benefits and to realise the intended savings the main focus to date has been on
 - The establishment of the transitional arrangements with the providers from 1st April 2013, including the detail of the legacy placements, contracting arrangements and how services will adapt and change.
 - Financial modelling of the anticipated reducing legacy costs and the future costs of new Personal Budgets so that there is clarity about what savings will be delivered and the anticipated trajectory.
- 3.3. A series of meetings has taken place with all the existing providers at which the approach has been discussed in detail, including the basis for the calculations of the legacy placement costs and the potential different transitional arrangements, with their relative benefits, risks and issues explored.
- 3.4. This has been an opportunity for a full and open sharing of views, ensuring that there is as extensive and clear an understanding as possible on both sides of the way in which things will work in the future, the issues, risks and concerns.
- 3.5. The potential impacts of personal choice and control have been the subject of discussion between the Council and the providers for at least 3 years in both 1:1 meetings between the Council and each provider and the Council co-ordinated Day Opportunities Forum. Whilst each of the providers are at different stages in their own business planning and service planning they all fully understand the principles of the intended approach and what this will mean for the way in which they will need to operate. Although there is considerable trepidation from them about their future, how they will adapt and change and how they will attract future clients, particularly self funders, they are generally accepting of the proposed way forward and have worked with commissioners in a spirit of cooperation.
- 3.6. It is recognised that ending the block contract arrangements, and thereby the guaranteed funding regardless of service level and demand, represents a transfer of risk from the Council to the service providers.
- 3.7. Throughout the last year there have been significant efforts to support providers to fully understand the implications of the new approach and how they will need to adapt and change in order to attract either the service users with Personal Budgets/ Direct Payments or other business from people who self fund. Opportunities have been made available for providers to explore possibilities for partnership arrangements and to consider how their own service can be presented and marketed to best effect.
- 3.8. Community Links Bromley have been commissioned to provide support for providers to identify priority areas for learning and development and deliver support through training, workshops or facilitated sessions as appropriate.
- 3.9. The Bromley MyLife team have also made proactive approach to all the providers with a view to ensuring that the information presented on the MyLife website is as accurate and comprehensive as possible. It has also been the intention through this process to assist the providers to review how they each present themselves and what other developments, such as websites, advertising, literature etc. they could best benefit from.

Transitional arrangements

- 3.10. The approach to calculating the unit costing of the legacy placements is that the cost of the service is divided by the number of days being used by Bromley funded people on 31st March 2013.
- 3.11. The service cost. This is the full cost of the operation of each day centre to the Council, less any costs that are not directly part of providing the day service. The service cost includes the current block contract value plus any additional costs currently borne by the Council, including premises (lease costs), utilities, caretaking arrangements, building and equipment maintenance, less any costs that are not directly part of delivering the day service. The position of each provider in respect of such costs is variable.

DAY PROVIDER SI DECEMBER 2012	ERVICE COSTS	Α	В	С	D	
Day Centre	Run By	Contract Cost 12/13	Additional lease costs (PA)	Additional utility costs etc	Non LBB transport costs	TOTAL SERVICE COSTS (A+B+C-D)
Bertha James Day Centre	Age Concern Ravensbourne	£219,318	£68,000	£18,818	n/a	306,136
Melvin Hall Day Centre	Age Concern Penge & Anerley	£152,102	£22,000	n/a	-£41,379	132,723
Saxon Day Centre	Age Concern Orpington	£160,123	£36,000	£11,186	n/a	207,309
St Edwards' Day Centre	Age Concern Bromley	£110,239	£5,000	n/a	n/a	115,239
St Mark's Day Centre	BHCCA	£38,200	£20,991	Incl in lease cost	-£9,129	50,062
White Gables	Alzheimer's Society	£223,001	£27,000	n/a	-£42,397	207,604
Mindcare	Bromley Mind	£410,751	£22,011	n/a	-£107,381	325,381
		£1,313,734	£201,002	£30,004	-£200,286	1,344,454

^{*} the figure including transport is £1,544,740.

3.12. <u>Legacy placements.</u> There are various patterns of use of the day centres with people currently attending for anything between 1 and 6 days per week. The unit cost will be based upon actual units of attendance not the number of individuals. The implementation of the charging policy for day opportunity services in 2011 has ensured the availability of good quality information about the number of users and days of attendance but there are daily changes and therefore a final number of legacy units on 31st March will not be known until 1st April.

3.13. Transport

- 3.13.1. Transport is subject to a separate review and is specifically not part of this project but it is important that legacy clients continue to be transported as at present and that new Personal Budget clients are able to access transport.
- 3.13.2. The majority of clients at the day centres are transported to the centres by the Council's in-house transport service. However, approximately 25% of the clients are transported by the day service providers under the terms of the current contracts. The provider's costs of delivering transport have been identified as £200k and these have been separated out from the service costs. This sum will need to be ringfenced so that it is included in the transport costs and activity for the transport review.

- 3.13.3. The providers will need to continue to operate the transport as under the current contract terms for the duration of the transitional contract period for which they will receive the ringfenced sum and the transitional contract will reflect this.
- 3.14. The mechanism by which the legacy costs are reduced affects the timescale in which any savings to the Council are realised and is also crucial to the providers in giving them a degree of protection, allowing them time to change their business model. There is a balance between the two, the providers wanting as much cushioning as possible but the savings needing to be achieved.
- 3.15. Three basic options have been considered upon which the approach can be developed.

OPTION 1 Real time – As a legacy client leaves the service the payment is stopped immediately.

Pros

 Savings from the reduction in legacy placements are realised quickly.

Cons

- It will be administratively burdensome for both the Council and providers.
- All the risk is with the providers with the level of income reducing very quickly and at an unknown rate.

OPTION 2 *Periodic* – At the end of an established period, e.g. a quarter, the number of units of legacy placement to have ceased in that period is checked and the payment for the following quarter is reduced accordingly.

Pros

- Simple to operate with minimal administrative burden.
- Starts to realise savings at the end of each period.
- Providers have a guaranteed level of funding for the length of the period

Cons

 The removal of funding from the providers at the end of the period will be sudden and make it difficult for them to plan their service.

OPTION 3 Periodic with notice - At the end of the established period, e.g. 3 months, the number of units of legacy placement to have ceased in that period is checked. One period's notice is given to the provider of the level of consequent reduction that will apply from the subsequent period.

Pros

- Simple to operate.
- Beneficial to providers as it gives guaranteed funding for 2 whole periods.
- Providers have a notice period in which they can make service adjustments if required (e.g. notice to staff)

Cons

- Savings are realised more slowly.
- As new people with Personal Budgets will be coming into the service there will be an element of double running costs
- 3.16. With each of the periodic approaches any length of period could be adopted, 1 month, 2 months, quarterly or even longer. The shorter the period the more quickly any savings will be realised but the advantages of that approach in supporting the providers will diminish.
- 3.17. The question of whether there should be a level of core funding has arisen from some of the providers. The argument put forward is that, in order to deliver the service, each organisation will need a basic level of infrastructure that might include premises, management, administration and other central costs. Core funding would be a mechanism by which a degree of security and cushioning over the transition period could be afforded to the providers.

3.18. Core funding however is a potentially cumbersome approach that is difficult to implement in a fair an equitable way given the very different sizes and funding levels of each provider.

Recommended approach

- 3.19. The Periodic With Notice approach (Option 3), based on a quarterly period but without any core funding is the approach recommended following discussions with all the providers on the various options and consideration of how the change can be achieved with best effect, minimising the risk of services failing.
- 3.20. It will provide a good level of early protection for providers by guaranteeing their income for the first 6 months, giving them the opportunity to adapt and to attract new clients, building up some level of reserve income through new clients in the initial 6 months. This will provide additional cushioning as the legacy placement funding reduces from October 2013.
- 3.21. The periodic with notice approach also makes core funding unnecessary as it provides transitional support in a way that enables providers to plan in advance, based on a known level of income, yet still bringing about major service change and realising the required savings by 2015.

Personal Budget value

- 3.22. Whilst some of the service providers currently offer private placements and have a price for those places, the market cost for day care is not yet established. It is important however that, in setting their prices, providers are not starting with a blank sheet of paper and pitching them at any level they may wish. By the Council being clear what it sees as reasonable rates for a Personal Budget it will steer the providers to keep their costs within appropriate levels.
- 3.23. The value of a Personal Budget is a quite different calculation to the unit cost of a legacy placement. Whereas the legacy placements are based on actual usage, because there is significant under-occupancy they will be high. Personal Budget values will be somewhat less and will reflect what the Council believes to be fair and appropriate rates to enable people to purchase a service that will meet the assessed need.
- 3.24. The planned level of service under the block contracts has been taken as the start point in the calculation of Personal Budget rates. Because of changes in service levels since the contracts were implemented, resulting in lower numbers of service users but with higher levels of need, adjustments were made to reflect a more realistic situation.
- 3.25. The approach developed is of bandings and units. By having different banding levels the differential costs of mainstream day opportunities and dementia specialist services can be accommodated. By people being offered units, the Personal Budget will accommodate where people need to access a service on more than one day per week.
- 3.26. The chart below outlines three banding levels for Personal Budgets at £17, £24 and £32 per week. A person who might under current arrangements be referred to a mainstream day centre for 2 days per week would in future, in this example, receive a Personal Budget allocation of £34 (2 units at band 1).

UNITS	BAND 1	BAND 2	BAND 3
1	£17.00	£24.00	£32.00
2	£34.00	£48.00	£64.00
3	£51.00	£72.00	£96.00
4	£68.00	£96.00	£128.00
5	£85.00	£120.00	£160.00

3.27. Each band represents an adequate sum to enable an individual to purchase a service that meets their needs and to exercise choice in so doing. The actual service charges by

providers will vary within these bands. Where the actual service charge is lower the Council will only pay the service cost. If a person wishes to access a more expensive service or purchase more provision (e.g additional days) they will be able to do so by paying a top-up directly to the provider.

- 3.28. The weighted average cost for each band and therefore what the Council will expect to pay overall is:
 - Band 1 £15.17
 - Band 2 £23.03
 - Band 3 £30.90

Contracting

- 3.29. Although the block contract arrangements will cease on 31st March 2013 it will be necessary to have contracts with each of the providers for the transitional arrangements from April 1st 2013 to March 31st 2015. This will ensure clarity about the operation of the legacy payments and tapering arrangements along with maintaining an overview of the service quality and outcomes through the period of change.
- 3.30. Consideration has been given as to whether a new contract arrangement or procurement approach, such as a framework agreement of preferred provider list, will be required for the new approach with Personal Budgets. It is not anticipated it will be necessary to put in place any new arrangement for people using Personal Budgets in terms of the Councils relationship with providers. Each person going to a centre or provider will be on an individual spot purchase basis with people making their choice of appropriate service through the Bromley MyLife website.

Respite at home

- 3.31. The respite at home services provided by Carers Bromley and Bromley Mind are also part of this same approach. However, what has become clear as a result of the meetings with the providers is that, whilst day services and respite have many parallels there are some fundamental differences which mean some different approaches need to be adopted. It has also become clear that the basis on which each of the two respite at home services operate is completely different. The Carers Bromley service is a universal service, taking direct referrals from various local organisations and including self-referrals and for which Carers Bromley levy a charge towards their costs. The Bromley Mind service is only for people referred by the Council who meet eligibility criteria. The Council pays the full cost and no charge is levied.
- 3.32. Because of the very different footing on which these services are provided the work needed to align them is complex and involved. As the implementation of the changes in day opportunity services is central to realising the projected savings it is proposed to take the work forward on day services and respite on two different tracks, implementing the changes in day services by 1st April 2013 but delaying the changes in respite at home services until later in the year.
- 3.33. This will necessitate approval of waivers to extend the contracts for the respite at home services to enable the necessary work to be undertaken and it is proposed that contracts for 12 months be put in place from April 2013, with a break clause to end at an earlier date if the intended changes can be implemented sooner.

Client contributions

3.34. As the principal being applied to legacy clients is that they do not experience any obvious difference or disadvantage as a result of the changes, the current level of contribution will need to remain the same as at present at £15.68 per session (subject to any annual uplift).

3.35. To ensure equity and fairness under the new arrangements future clients in receipt of a Personal Budget for their day opportunity services, either as a Direct Payment or as a managed service, should also have their contribution based upon the same day care contribution rate.

Next steps

- 3.36. The project will enter the implementation phase to put in place the agreed approach to both legacy placements and Personal Budgets. A new project group will be convened, led by Commissioning, to oversee the work with providers including procurement activity and development support, to specifically address the business change issues for care management and finance and to manage the communication and information requirements.
- 3.37. Throughout the transition period there will be pro-active management, including regular ongoing engagement with the providers, to ensure that the there is good overview of the whole process and that emerging risks and issues are identified at an early stage.

4. POLICY IMPLICATIONS

The provision of support to service users and carers through Personal Budgets meets the Council's priority to support independence, enabling vulnerable people to remain in the community and in their own homes and by providing breaks for carers that support them to continue in their caring role, in a way that enables personal choice and control over the support they receive.

5. FINANCIAL IMPLICATIONS

- 5.1 The level of savings achieved and the speed with which they can be realised will dependent upon a number of variables and factors, some of which are directly controllable and some not.
 - 5.1.1. **Value of legacy place** will be defined by the number of legacy users at 31/3/13 and the total service cost.
 - 5.1.2. Rate of decline of legacy placements as this is the multiplier against the value of the legacy placements the speed at which legacy clients leave the service will be key factor in defining the speed and level of savings. It is not controllable, however there is good statistical information on historical rate of movement from the day centres to be able to make a reasonable prediction of the departure rate.
 - 5.1.3. **Amount of protection for providers** this will be key to the rate at which savings are realised but the overall level of savings achieved in the first full year post-transition (2015/16) is only marginally affected.
 - 5.1.4. **Value of Personal Budgets** this will be controllable although the value of the PB will need to be realistic and adequate to meet the assessed needs.
 - 5.1.5. Rate of new clients receiving a Personal Budget as with the rate of decline of legacy placements this is a key factor in defining future costs as it is the multiplier against the value of the Personal Budgets. It is not controllable but there is good statistical information on the number of new clients over the last year to enable projections to be made with reasonable confidence.
- 5.2 The financial model that has been developed based upon statistical information about movement out of and into the service, projects the following:

	Periodic changes with notice			
	2013/14	2014/15	2015/16	2016/17
Legacy costs P.B. client costs Transport (ringfenced)	1,169,406 286,228 200,300	•	0 786,137 200,300	,
Total costs	1,655,934	1,309,127	986,437	886,079
Saving	-141,234	205,573	528,263	628,621

Assumptions in the above:

NET POSITION

- Movement out of the service (legacy placements) and movements into the service (Personal Budgets) is consistent with historical changes in the 24 months October 2010 to September 2012.
- Three bandings for Personal Budgets, with average weighted costs applied for estimated numbers at each level.
- 3 months applied for the period of notice.
- From April 2015 all legacy clients are absorbed into the Personal Budgets and transitional arrangements cease.
- 5.3 Savings of £500k has been assumed in the draft 2013/14 budget against the overall day care budget of £1,544,740, which will leave £1,044, 740 available for the service next year. To deliver the new service model outlined in this paper will require an investment to save over the next two years, to offset the transitional funding being provided by the council whilst the providers move to a more business operating model. The table below breaks down the financial implications proposed in this report:-

Current Expendite	•		t, utilities et	c)		
	Budget 2012/13 £	Saving 2013/14	2013/14 £	2014/15 £	2015/16 £	2016/17 £
Bertha James Melvin Hall Saxon Centre St Edwards St Marks White Gables Mindcare	306,136 174,102 207,309 115,239 59,191 250,001 432,762 1,544,740		1,044,740	1,044,740	1,044,740	1,044,740
Financial Model (para 5.2)	-	1,655,934 -611,194	1,309,127 -264,387	986,437 58,303	886,079 158,661
Money for one off i	nvest to Sav	re initiative	611,194	264,387	0	0

0

0 58,303

158,661

- 5.4 As can be seen from the table above for a one off investment out of the NHS Social Care Fund of £875,581 by 2015/16 the council will have delivered savings of £558,303 increasing to £658,661 by 2016/17 compared to the 2012/13 budget
- 5.5 The 2012/13 budget for the respite at home service is £231k and the impact of renewing this contract for 1 year is £218k so there are no financial implications.

6. LEGAL IMPLICATIONS

- 6.1 The Council has a duty under s29 National Assistance Act 1948 to provide advice and support services for rehabilitation, occupational, social, cultural and recreational activities and under s2 Chronically Sick and Disabled Persons Act 1970 a duty to a range of services to meet the needs of disabled people including recreational facilities outside the home.
- 6.2 The Council is entitled to determine the threshold at which it considers it will fund the provision of facilities. Effectively a person has to have substantial or critical need for support and inadequate means before state funding will be provided. This funding in terms of a Personal Budget can be held by the Council and used to purchase the necessary support or as is being increasingly promoted by means of a Direct Payment. This allows the individual more choice in their selection of the services they require, subject to the Council retaining an overarching duty to monitor the effectiveness and value for money of the service purchased to meet their assessed need.

Non-Applicable Sections:	PERSONNEL IMPLICATIONS
Background Documents: (Access via Contact Officer)	Report to Adult and Community PDS, 13 th December 2011 and Executive 14 th December 2011; GATEWAY REVIEW – DAY OPPORTUNITIES FOR OLDER PEOPLE,
	Report to Care Services Portfolio Holder and PDS, 19 th June 2012; RESPITE AT HOME CONTRACTS
	Report to Care Services Portfolio Holder and PDS, 4 th September 2012; COMMISSIONING STRATEGY FOR OLDER PEOPLE - DAY OPPORTUNITIES AND RESPITE CARE

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Agenda Item 7d

Report No. CS12066

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker: Care Services Policy Development and Scrutiny Committee

Date: 16 January 2013

Decision Type: Non-Urgent Non-Executive Non-Key

Title: CONTRIBUTIONS POLICY

Contact Officer: Lesley Moore, Deputy Finance Director,

Tel: 020 8313 4633 E-mail: lesley.moore @bromley.gov.uk

Chief Officer: Terry Parkin, Executive Director Education & Care Services

Ward: Boroughwide

1. Reason for report

1. To outline the proposed contribution rates for personal care from April 2013, as a result of the recent tendering exercise which was undertaken for domiciliary care services and to approve that officers consult with service users currently based at 3 Tugmutton, their families and carers around charging for services when they move to new respite service.

2. RECOMMENDATION(S)

- 2.1 The Care Services Policy Development & Scrutiny Committee are asked to comment on this report.
- 2.2 The Portfolio Holder is asked to approve:-
 - (a) The new rates for personal care as set out in paragraph 3.11 and 3.17 for 2013/14.
 - (b) Consultation with service users, their families and carers as outlined in paragraphs 3.21 − 3.24.
 - (c) The charge of £1,017 per week (which equates to £145 per night) to other local authorities if that take up any vacant respite beds at the new respite service as per paragraph 3.25.

Corporate Policy

- 1. Policy Status: N/A.
- 2. BBB Priority: Supporting Independence.

Financial

- 1. Cost of proposal: N/A
- 2. Ongoing costs: N/A.
- 3. Budget head/performance centre: Care Services
- 4. Total current budget for this head: £5m charging income
- 5. Source of funding: N/A

<u>Staff</u>

- 1. Number of staff (current and additional): N/A
- 2. If from existing staff resources, number of staff hours: N/A

Legal

- 1. Legal Requirement: Statutory requirement.
- 2. Call-in: Call-in is applicable

Customer Impact

1. Estimated number of users/beneficiaries (current and projected):

Ward Councillor Views

- 1. Have Ward Councillors been asked for comments? N/A.
- 2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1 As part of the budget process officers always review income budgets to ensure that income is maximised or reflects changes that have occurred to services that ultimately impact on our charging policy.

Charging for Personal Care

- 3.2 The Council's strategy for care is to support independence by moving away from a reliance on residential care towards community-based services which supports people to remain in their own homes. Domiciliary care services which is used predominantly by people with physical disabilities and older people is key in helping us to achieving this.
- 3.3 The Executive approved a new Contributions Policy from April 2011 for non residential social care services, in light of the supporting independence government agenda. This now allocates services on the basis of a personal budget and allows service users to take a direct payment to buy care directly themselves or still ask the council to manage this on their behalf. This new contribution policy assumes full cost recovery (subject to a financial assessment) of all services.
- 3.4 The services included within a personal budget are shown below:-

Personal Care
Personal Assistant
Extra Care Housing – Personal Care
Supported Living
Day Care including transport
Live in Carers
Assistive Technology Community Alarm Service
Assistive Technology Equipment (provided as part of Community Alarm)
Non Residential Respite
Other non residential services determined as necessary to meet assessed need e.g.
Laundry, Shopping, Bathing

- 3.5 In 2003, the Government issued guidance for setting charges for non-residential social care services. That guidance sought to ensure that people who use services are treated fairly and are not asked to make a contribution towards their care that will leave them in financial difficulty or hardship. It also ensured that local authorities could not make a profit from these services, so the maximum charge that can be set is full cost recovery (subject to a financial assessment).
- 3.6 The recent retendering of our domiciliary care contracts under a Framework Agreement, which was approved by the Executive on the 20 June 2012 and commenced on the 1 September 2012, achieved significant savings in our budget estimated to be around £400,000 in 2012/13 and £1m from 2013/14 onwards. This was achieved by set a ceiling rate which the council was prepared to pay to providers for personal care, based on 30 minutes, 45 minutes and 60 minutes this assumed broadly a reduction of 10% on our existing average day rates, excluding weekends and bank holidays. The ceiling rates were set at £7.50 for 30 minutes, £10.00 for 45 minutes and £12.50 for 60 minutes.
- 3.8 Our current charging rates for service users in receipt of personal care is £8.46 for 30 minutes of care, £10.98 for 45 minutes of care and £14.64 for 60 minutes of care. Our charges were not amended from September 2012 as several of our existing providers that are not part of the new framework agreement retained care packages for existing service users for a period of time to allow for a smoother transition, meaning that until March 2013 we will still be paying some

- providers at the higher rates. The complex charging system and limitations of the Care First Information system also mean it is not be possible to operate two different contribution policies.
- 3.9 Given that most of our care packages are now allocated to the providers that are on our framework agreement and therefore not paid above the ceiling rate levels, it is now appropriate to revisit our charges for personal care for 2013/14. The report to Executive in June 2012 assumed that our charging rates would reduced in line with the rates paid to providers as we are not allowed to make a "profit" when setting our charge rates and the report identified that the new framework agreement would generate savings of approximately £1.4m gross of client contributions and £1m net of client contributions, in a full year.
- 3.10 The contributions policy is aimed at ensuring that regardless of how a service user decides to purchase their care, either through a managed service or via a direct payment, there is not a disincentive to service users accessing personal budgets by having a more favourable regime for one or other.
- 3.11 It is therefore proposed to amend our current charge for personal care both the managed service and those paid through a direct payment, to align it with the ceiling rates we set for providers when the new domiciliary care framework agreement was awarded. The table below sets out the current rates and proposed new rates from April 2013:-

	2012/13 Charge Do	2012/13 Charge puble Handed	2013/14 Proposed Charge	2013/14 Proposed Double Handed
	£	£	£	£
30 minutes	8.46	16.92	7.50	15.00
45 minutes	10.98	21.96	10.00	20.00
60 minutes	14.64	29.28	12.50	25.00

Based on our current service users the changes shown above will result in a loss of income of around £450k p.a.

- 3.12 There are currently 2,795 service users that receive non residential care type services, of which 636 are nil payers, 1,458 make a contribution towards their care package and 701 are full payers. The reduction in our personal care charge will impact on 430 service users.
- 3.13 It is not proposed to make any changes to our current charge to service users taking a direct payment for the cost of a Personal Assistant as the recent tendering exercise did not impact on this. The current charge in 2012/13 of £11.50 per hour will simply be uplifted by inflation for 2013/14.

Extra Care Housing

- 3.14 Our current charge for personal care is the same for service users in our Extra Care Housing service as those that receive a personal care package e.g. £14.64 an hour. This is because in the past we have used the same providers.
- 3.15 Over the last few years given that Extra Care Housing is far more cost effective than placing people into residential care, officers have been actively working with housing associations to identify more properties in the borough to enhance this service. Recently, 3 new Extra Care

- Housing units have been made available to the council which are Crown Meadow, Regency Court and Sutherland Court.
- 3.16 These new schemes are very different from our in-house services as they are more aligned to supported living services and the care element requires a more flexible approach around time of visits, more intensive support and specialist dementia support. The care support for these new schemes was recently tendered and given that they are very similar to our supported living schemes which is based on full cost recovery (subject to means testing) it is proposed that our charging policy for Crown Meadow, Regency Court and Sutherland Court is also actual costs.
- 3.17 For our existing in-house Extra Care services, given that the council will be using providers on the framework agreement it is proposed to reduce the charging for these services in line with personal care e.g. our ceiling rates.

Respite Services

- 3.18 Under CRAG legislation the council has the option to set a charge for respite services based on the service user having a financial assessment undertaken or alternatively to set a flat charge to cover some of our costs.
- 3.19 The councils current policy is that if a service user goes into a residential care type accommodation then they will be financial assessed on their ability to pay, but varied slightly from a residential care assessment to reflect the fact that this is a temporary placement and as such the service user will need to retain funds to cover their existing private accommodation costs.
- 3.20 If the service user however, goes into any other type of respite service such as Bromley Road or Shared Lives, then a flat rate is set. The rate is set in line with income support levels and as such will vary depending on age. The rates are shown below:-

	Under 25 years £	Over 25 years £
Income Support	56.25	71.00
Premium - Dis Enhanced	30.35	30.35
	86.60	101.35
Personal Allowance	23.50	23.50
Weekly Charge	63.10	77.85
Nightly Charge	9.01	11.12

- 3.21 The respite at home service is not currently charged for but as mentioned in the Day and Respite Care report elsewhere on the agenda, this well be covered in a later report.
- 3.22 Over the last few months the council has taken over the running of respite services at 3 Tugmutton, which was previously the responsibility of the PCT. Funding for these clients moved to the council in April 2011 as part of the campus reprovision programme (£8.3m grant funding). As this service was provided by the PCT it was provided free of charge, but since moving across to the council it now falls within our charging regime.

- 3.23 As the council is currently moving this service from 3 Tugmutton to the new respite service it would now seem an appropriate time to consult around charging for this service, particularly as the respite service at Bromley Road will also be moving to the new respite service users are charged for respite services at our flat rate of £9.01 or £11.12 a night.
- 3.24 There are currently 43 service users in 3 Tugmutton that will need to be consulted regarding charging for this service from April 2013.
- 3.25 To ensure that the new respite service is fully utilised it is further proposed that we look to sell any vacant respite beds to other local authorities, based on full cost recovery. The 2012/13 current gross budget cost of running the new respite service is £636,570 based on 12 beds. This equates to a charge of £1,017 per week.
- 3.26 If service users remain at the new respite service for day care, then our existing charge of £15.68 will apply, uplifted by inflation for 2013/14.

4. POLICY IMPLICATIONS

4.1 These proposals impact on the Council's Building a Better Bromley aim of promoting independence by ensuring that resources are available to meet increasing demand from an increasing elderly population and adults with disabilities and care needs.

5. FINANCIAL IMPLICATIONS

- 5.1 All service users have a means tested assessment of their finances and their circumstances in line with Bromley Fairer Charging policy, which is consistent with the national Fairer Charging guidance. The calculation of the assessment will show how much the service user can reasonably afford to contribute toward the cost of their care (the client contribution). This assessment takes account, not only of an individual's income and outgoings, but also those additional costs associated with living with a disability.
- 5.2 The changes outlined in this report will result in a reduction of income from our charging policy of approximately £450,000 p.a. due to changes in our personal care rate. The report to Executive in June 2012 allowed for this reduction in income levels as the council cannot set charges which would result in us making a profit. This report identified that as a result of the new framework agreement for domiciliary care the council would generate savings of approximately £1.4m gross of client contributions and £1m net of client contributions, in a full year.
- 5.3 It is difficult to estimate how much additional income will be generated from charging service users moving from 3 Tugmutton, because until the financial assessments are completed it is not known how many of the 43 services users will make a contribution towards their care.

Non-Applicable Sections:	
Background Documents: (Access via Contact Officer)	

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Agenda Item 7e

Report No. CS12060

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: For pre- decision scrutiny by Care Services Policy Development and

Scrutiny Committee

Executive

16th January 2013

Date:

6th February 2013

Decision Type: Non-Urgent Executive Key

Title: GATEWAY REVIEW : ADULT DIRECT CARE SERVICES

Contact Officer: Lorna Blackwood, Assistant Director Commissioning, ECS

E-mail: lorna.blackwood@bromley.gov.uk

Chief Officer: Executive Director, Education & Care Services

Ward: (All Wards)

1. Reason for report

- 1.1 In line with the Council's Corporate Operating principle that the Council's services will be provided by whoever offers customers and council tax payers excellent value for money, and in accordance with our gateway review process under Contract Procedure Rules, Education and Care Services have considered options for delivering reablement, extra care housing for older people and learning disability services which are currently provided by in house teams.
- 1.2 It is proposed that extra care housing and reablement services are tendered in April 2013 in order to establish who is best placed to deliver these services and that further work is carried out to establish the most appropriate model for future commissioning of learning disability services.

2. RECOMMENDATION(S)

- 2.1 The Policy Development and Scrutiny Committee is asked to comment on the proposals in the report.
- 2.2 The Executive is asked to:
 - a) agree to proceed to tendering the extra care housing service using the framework which was set up in 2011;

- b) agree to proceed to tendering the reablement service; and
- c) note that savings will be sought in the in house learning disability service in 2013/14 and that a further report on the most appropriate future commissioning model will be made during 2013.

Corporate Policy

- 1. Policy Status: Existing Policy:
- 2. BBB Priority: Supporting Independence and Excellent Council

Financial

- 1. Cost of proposal: Estimated Cost: £500, 000 savings identified for 2013/14
- 2. Ongoing costs: Recurring Cost: £5,519, 000 2013/14
- 3. Budget head/performance centre: Care Services Learning Disability Respite and Day Care; Learning Disability Homes; Extra Care Housing; Reablement
- 4. Total current budget for this head: £6, 019, 000
- 5. Source of funding: Care Services Portfolio

Staff

- 1. Number of staff (current and additional): In post: 29.5 FTE (38 staff) in reablement service; 48.4 FTE (68 staff) in extra care housing service
- 2. If from existing staff resources, number of staff hours:

Legal

- 1. Legal Requirement: Statutory Requirement
- 2. Call-in: Applicable

Customer Impact

1. Approximately :130 residents in extra care housing schemes; 50 service users in reablement service at any one time; 39 residents in learning disability supported living and care homes; approx 90 service users of learning disability day and respite services

Ward Councillor Views

- 1. Have Ward Councillors been asked for comments? Not Applicable
- 2. Summary of Ward Councillors comments:

3. COMMENTARY

- 3.1 The Council's Corporate Operating principles include a commitment that services will be provided by whoever offers customers and council tax payers excellent value for money. This is underpinned by a commitment to be a commissioning organisation determining who is best placed to deliver high quality services based on local priorities and value for money principles.
- 3.2 To support this, the Council has undertaken to regularly review why and how we provide services and to identify who is best placed to deliver services.
- 3.3 Within Education and Care Services (ECS), a number of adult social care services are still directly provided by in house teams. These include reablement, extra care housing for older people and learning disability services (day care, short breaks (aka respite), supported living and residential care). To date none of these services have been market tested, although separate tender processes did indicate that external providers of care and support in extra care housing and reablement were more economic.
- 3.4 The Council's 2013/14 draft budget includes savings options for these services, totalling £0.5m.
- 3.5 Each of the service areas are described below, together with recommendations for the future of the services.

Extra care housing

3.6 The Council still provides an in house care and support service within four extra care housing schemes for older people. These are:

Norton Court	(Beckenham)	45 units
Durham House	(Shortlands)	30 units
Lubbock House	(Orpington)	30 units
Apsley Court	(St Mary Cray)	26 units

- 3.7 There are currently 48.4 FTE (68 staff) in post providing the service. The buildings in which the schemes are located are owned by Affinity Sutton and by A2Dominion.
- 3.8 The average weekly cost of the care and support within these schemes is approximately £298 per week.
- 3.9 During 2011 and 2012 the Council opened three new extra care housing schemes in Bromley and Penge in buildings owned by Hanover Housing. The care and support within these schemes was tendered, the later two schemes being tendered through a framework set up in 2011. The contracts were awarded to two external providers, Mears Care and Sanctuary Care. The hourly rates for these schemes are between £12.68 and £14.25 per hour depending on the volume of hours provided, which results in an average weekly cost of £184. However, the actual cost of schemes is dependent on the number of service users and their level of dependency.
- 3.10 The savings options for 2013/14 assume a reduction in costs of £100k from the in house extra care scheme budget.
- 3.11 Following the previous tendering exercises, a generic specification for the delivery of care and support in extra care housing is already available which can be tailored to meet the specific requirements of the four in house schemes. Given the potential to realise savings from tendering, it is proposed that the service within the four in house schemes is tendered using

the framework. As the framework is already available, this could take place in April 2013. Once the result of the tendering is known, a further report will be made to the Executive recommending the way forward.

Reablement

- 3.12 The in-house reablement service started in March 2010. The service was developed alongside the in house domiciliary care service and as this service closed some of the staff joined the reablement service.
- 3.13 Reablement services aim to maximise a service user's independence for as long as possible. The service is the usual response to most new referrals to ECS where an element of care is required and engages with service users for up to six weeks, working to meet a set of goals established during an initial assessment by a Care Manager. The key outcome achieved from the service is that 68% of users do not require an ongoing package of care, whilst 24% continue with a care package indefinitely. The service has also proved successful in reducing the level of existing packages through improving the confidence and functioning of the individual.
- 3.14 In 2010, as the in-house reablement service was proving to be successful, it was decided to test whether the independent sector domiciliary care providers could deliver a reablement service for self funders to the same specification. Providers were invited to tender for a contract to deliver reablement and contracts were awarded to two providers. As the external service was slow to develop, only one provider, Advanced Care and Support Services (ACSC), was subsequently awarded any work. ACSC have delivered a service since February 2011 to people who are receiving Council support, providing additional resource if the in house service does not have sufficient capacity to deal with the demand for service. The outcomes from this service have been consistent with those achieved by the in house service, but have been delivered at a more cost effective rate.
- 3.15 The comparative costs of the services are:

ACSC £ 12.89 per hour

In House £ 24.99 per hour (estimated)

- 3.16 The number of hours being delivered by the in house service is approximately 480, to an average of 50 service users. There are currently 29.5 FTE (38 staff) in post delivering the in house service, including administration staff.
- 3.17 The 2013/14 savings options assume a reduction in the cost of the reablement service of £250k.
- 3.18 Although the Council's domiciliary care providers are expected to re-enable service users wherever possible it is understood that the majority of users will be with the service on a long term basis and the providers are commissioned on a time and task basis. The key difference between traditional domiciliary care and reablement is the emphasis on achieving sustainable independence outcomes for service users.
- 3.19 As with extra care housing, a generic specification for reablement is already available and the previous tender has demonstrated that there are providers in the market with reablement experience. It is therefore proposed that the reablement service is tendered and subject to the response a minimum of two external providers sought to deliver the service in the borough in order to maximise the potential for incentivising the providers. The service could be tendered

- in April 2013. As with extra care, once the result of the tender is known, a further report will be made to the Executive recommending the way forward.
- 3.20 With regard to outcomes, other authorities have built in incentives to providers to achieve the required outcomes. Whilst this is desirable it must be balanced with a practical approach to management as it would not be prudent to build in incentives which result in a complex monitoring arrangement involving the Council and provider in further costs. It is recommended that options for incentives are explored prior to going out to tender for this service which balances all these considerations.

Learning disability services

Residential and supported living

- 3.21 Bromley's in house service currently provides support to 39 clients, seven of whom live in two registered care homes and the remainder in supported living homes located around the borough.
- 3.22 The in house services are well established in Bromley. Care and support is provided to clients with a wide range of needs. Due to the length of time in which some clients have been in the service, some may only just meet current eligibility criteria whilst some would fall into the 'critical' banding.
- 3.23 The services have developed over many years without a clear strategy and this is reflected in the diverse mix of community based properties and registered care homes. The benefits of supported living were recognised by management some years ago and most of the properties are now registered for domiciliary care and support and with only two of the homes registered as care homes (although the Executive agreed to pursue deregistration of these two homes in July 2012 and this is being progressed). Whilst of benefit to the clients, who have assured tenancies, the supported living properties are of varying quality, type and ownership and some will be more suitable in the longer term, than others. The Council owns the two registered care homes and two other properties for which it receives rental income, which currently contributes to the overall cost of service provision.
- 3.24 Many clients' needs have changed over the years and meetings with the Group Manager have established that some individuals may benefit from living in more accessible properties or moving to properties where the client compatibility is more appropriate. Three properties have already been closed as a result of such moves.
- 3.25 Within the current service there is a heavy reliance upon Supporting People funding and Independent Living Funded support. These funding streams potentially add to the complexity of re-providing services and care must be taken to ensure that in seeking value for money the funding streams are not destabilised resulting in increased cost for the Council.
- 3.26 The diverse funding streams of some of the services and the complexity of establishing the full package costs for individual properties and/ or individuals mean that it would be premature at this stage to progress to market testing as there are a number of actions that should be undertaken before consideration is given to market testing the service. This would include consideration of appropriate groupings of schemes, the identification of the properties where ownership could/ should be retained and establishing / progressing any individual moves following consultation with service users and families.

Respite and day care

- 3.27 Learning disability respite services were reconfigured as part of the learning disability campus reprovision programme, which resulted in the closure of the services at 44 Bromley Road and 3 Tugmutton Close and the opening of an integrated service at 118 Widmore Road which opened in November 2012. There are currently 16.02 FTE (17 staff) in post in the respite service, 6 of whom are seconded to the Council from Bromley Primary Care Trust (PCT) and who will transfer to the Council's employment from 1st April 2013. Bringing together the two previous services provides an opportunity to review the staffing structure within the new service with a view to establishing whether there is potential for efficiencies.
- 3.28 Day services are provided from three locations Astley Day Centre, Cotmandene and Kentwood which together cater for approximately 90 service users at any one time. There are currently 39.71 FTE (51 staff) currently in post in the day service, 11 of whom are seconded to the Council from Bromley Primary Care Trust (PCT) and who will transfer to the Council's employment from 1st April 2013.
- 3.29 Discussions with learning disability providers have indicated that, due to their experience with for example PCT campus reprovision programmes, there is a reluctance to tender for public sector services where these involve TUPE staff transfers (the risks associated with pension scheme deficits appear to be the main concern). It is therefore proposed that the learning disability service continues to work to identify the potential to achieve efficiencies prior to consideration of commissioning options for the future. Initial estimates are that the in house service is likely to achieve a significant part of the £150k assumed during 2013/14 by internal reconfiguration of services, including deregistration of residential services and staff restructuring. Further reports will be presented to Members during 2013 on these proposals including proposals for the future commissioning of the services.

4. POLICY IMPLICATIONS

4.1 All of the services referred to in the report support the Council's aim to help people live as independently as possible in the community and are in accordance with the Council's Corporate Operating Principles as set out in para 3.1.

5. FINANCIAL IMPLICATIONS

5.1 The draft budget for 2013/14 assumes savings in respect of the in house services covered by this report. They are:

Service	Budget 2012/13 £000s	Savings assumed 2013/14 Draft budget £000s
Extra care housing	971	100
Reablement	1,701	250
LD homes	1,317	75
LD day and respite	2,030	75
Total	6,019	500

5.2 Full year savings of £100k p.a. and £250k p.a have been assumed in the budget for Extra Care Housing and the Reablement service. Any shortfall in delivering this will need to be contained within the overall budget for 2013/14.

5.3 The savings for Learning Disabilities totalling £150k will in part be met from changes to staffing structures and deregistration of residential services.

6. PERSONNEL IMPLICATIONS

- 6.1 Informal consultation with staff and their representatives around market testing these services has been ongoing since 2011 following the publication of the Departmental Business Plan which outlined the services identified for market testing. Further meetings with staff and their representatives will be taking place before the date of the Committee and any feedback from these discussions will be provided at the meeting. In the event that a recommendation to proceed with tendering is made by the Executive and as more detailed proposals are developed these will be the subject of formal consultation with staff and their representatives.
- 6.2 Any staffing implications arising from the recommendations in this report will need to be carefully planned for and managed in accordance with Council policies and procedures and with due regard for the existing framework of employment law. The tendering process will consider whether or not the Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE) would apply and the consequential legal and financial implications arising from this.

7. LEGAL IMPLICATIONS

- 7.1 The Extra Care Housing and Reablement Services are Part B Services for the purposes of Schedule 1 to the Public Contract Regulations 2006 (as amended). For Part B services there is a lighter regulatory regime under the 2006 regulations mainly covering non-discriminatory simplification and publishing award notices. Regards must also be had to government guidance around to ensure the appropriate level of advertising needed to demonstrate a transparent process, We also have to have regard to our general fiduciary duty to local tax payers to secure value for money and comply with our internal Procurement and financial regulations in the process followed..
- 7.2 The proposals to use a recently established framework agreement for Extra Care Housing services and to follow a competitive tendering process for Reablement Services will secure compliance with the principles set out in paragraph 7.1 above.

Non-Applicable Sections:	
Background Documents: (Access via Contact Officer)	

Agenda Item 10

By virtue of paragraph(s) 3 of Part 1 of Schedule 12A of the Local Government Act 1972.

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Agenda Item 12

By virtue of paragraph(s) 3 of Part 1 of Schedule 12A of the Local Government Act 1972.

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Agenda Item 13

By virtue of paragraph(s) 3 of Part 1 of Schedule 12A of the Local Government Act 1972.

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