

## MEDIUM TERM SERVICE & RESOURCE PLAN – SAVING DETAILS (2014/15 & 2015/16 ONLY)

### ADULT SOCIAL CARE

2014-15 Saving £000	2015-16 Saving £000	How saving to be achieved	Previously Reported Impact to Service Delivery	Strategic Director's Update on Saving Proposal for November 2013 PDS Panel
293	296	Decrease in Sirona contractual values as agreed.	Already accommodated in service planning and contractual arrangements.	This saving is already incorporated in the contract with Sirona.
575	575	<p>In partnership with Sirona Care &amp; Health further efficiency savings from the contract with 'Sirona' Care &amp; Health. This would be in addition to the £9.0m savings already built into the five year contract between Sirona, the Council and the Primary Care Trust. A recently published Audit Commission report "<i>Reducing the cost of assessments and reviews</i>" based on 2010/11 benchmarking information, which pre-dates the establishment of Sirona, suggests that efficiencies from social care processes could be achieved in the medium term. Target is based on bringing B&amp;NES costs closer to the national benchmark.</p> <p>Delivery of the saving would need to be supported by: i) improved access to signposting, provision of advice and information (including to self-funders); ii) policy and process redesign, including increases in self-assessment; and iii) pathway redesign, culture change and skill-mix review.</p>	<p>Any service impacts would need to be assessed in light of the detailed savings plans, to be developed and agreed during 2013/14. The Audit Commission report suggests that savings can be made without adversely impacting on quality.</p> <p>If implemented in the right way, this change could impact positively on service users as a) some service users would self-assess or be signposted to services with no requirement for an assessment; and b) people who 'self-fund' their care services would be able to access advice (particularly financial advice) and, also a 'brokerage' service that would enable them to choose the provider of their service in light of up to date, accurate information on value for money, quality etc.</p>	<p>Negotiations in respect of plans for the delivery of this saving are on-going with Sirona and are closely linked to the redesign of the adult social care pathway, which, in turn is linked to the development of community cluster teams and alignment to GP practice clusters.</p> <p>The design and implementation of the first two phases of the adult social care pathway redesign [i) access, advice, information and signposting; and ii) integrated reablement services] is progressing well with positive engagement from Sirona and other partners, including the Domiciliary Care Strategic Partners who, along with Sirona, will play a key role in broadening and increasing access to integrated reablement services.</p> <p>The third phase of the redesign, Community Care Assessment and Support Planning for those with enduring and complex needs, is less well progressed but will flow from implementation of the first two phases.</p>

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60		The Fairer Contributions policy, which is based on national guidance and determines individuals' personal contribution to the costs of their community based personal care services. The policy requires that individuals are left with basic minimum income thresholds, which are nationally prescribed. Further protection is provided by a nationally prescribed 25% "buffer", which in B&NES is set above the required minimum at 30%. A very small amount of additional income could be generated by reducing this buffer back down to the statutory 25%.	Impact on the income of service users subject to the Fairer Contributions Policy, though these service users would continue to receive the income protection prescribed through national guidance.  Some impact on commissioning and finance capacity to implement change.	This amendment to the policy has now been implemented, as agreed.
375	455	A planned reduction of spend on purchasing the provision of personal care and support for older people, including those with dementia, adults with mental health needs, adults with learning difficulties and disabled adults, including those with sensory impairment.  Primarily achieved by reducing admissions to residential care, particularly for older people, including those with dementia, by improving access to preventative and early intervention and also, by ensuring that signposting, access to universal services and advice to	Some service users and their families/carers view admission to residential or nursing care as the "safe" (low-risk) option. Our staff will work to ensure that any concerns about community-based alternatives are addressed effectively. In order to reduce such concerns and mitigate any risks, it would be critical to ensure strong, effective preventative and early intervention services, pathway redesign, and improved signposting and access (including to self-funders) to financial advice.  Further investment of Section 256 funding as well as a strategic shift in the investment of a proportion of	An expansion of access to early intervention and preventative services, in particular integrated reablement and rehabilitation services funding through agreed use of Section 256 funding is being progressed as are other preventative services such as the

		all, including self-funders, is effective. This saving aligns with investment plans to develop preventative services.	Supporting People & Communities Funding would be appropriate in supporting the further development of this approach, which is in line with current national and local health and social care strategies.  Proposal will increase pressures on Commissioning Team and will require culture change programme for practitioners.	
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689		<p>Over the coming years, the Council will focus the money it has available on care for the most vulnerable adults to support their independence.</p> <p>As a result of this focus, there will be a reduction in the level of services which are not directly discharging defined statutory duties under Community Care legislation. Detailed proposals for 2014/15 will be worked up during 2013/14 and the estimated savings by "sector" set out below should, therefore, be treated with caution. Detailed proposals to be worked up during 2013/14 will enable consideration of:</p> <ul style="list-style-type: none"> <li>a) alignment with the Council's priorities;</li> <li>b) service performance, utilisation and value for money;</li> <li>c) engagement with providers, including views on how they might help deliver savings by for example</li> </ul>	<p>Proposals represent a shift in the focus of Supporting People &amp; Communities (SP&amp;C) funding away from lower level support and towards delivery of more mainstream adult social care objectives.</p> <p>There will be an impact on the people who currently use these specific services, such as older people, people who need support to enter or re-enter the workplace, people who need support to avoid/prevent homelessness, people who are socially excluded because of multiple/complex vulnerabilities such as mental ill health, disability, poverty, poor educational achievement &amp; poor housing.</p> <p>There will be an impact on a range of services which community organisations, as well as independent sector organisations, provide on our behalf.</p> <p>However, as we continue to target our</p>	<p>Over the last 18 months and by a range of means, the SP&amp;C team has communicated to all providers the likely implications of the Council's Medium Term Service &amp; Resource Plan 2013/14-15/16 and the requirement to make significant savings from the SP&amp;C budget. Since February 2013, the team has undertaken theme-based sector reviews with the intention of finding the required savings through a strategic approach rather than a top-slicing exercise. Using data on performance, utilisation and demand, feedback from providers and stakeholders (including service users) and intelligence on duplication of provision, the reviews aimed to inform the development of commissioning plans for 2014/15 onwards.</p> <p>Following carefully consideration of outcomes of this work, including with the Cabinet Member for Wellbeing it was agreed that in order to mitigate the overall impact of these savings on delivery of services targeted at more vulnerable people, it would be necessary to increase the saving to be achieved by reducing investment in generalist and</p>

		<p>working together more effectively to avoid duplication;</p> <p>d) the overall picture including how targeted investment is made to mitigate the impact of delivering the savings and, indeed, help deliver the savings; and</p> <p>e) work with other partners including the CCG to join up commissioning intentions and take a whole-system view including along care pathways.</p> <p>It is proposed that £500k be reinvested in order to mitigate the impact of proposals and enable the development of targeted services to realise savings from a)</p> <p>assessment/care management; &amp;</p> <p>b) further reductions in admissions to residential care. Estimated savings, by discontinuing or reducing services by “sector”, taking account of the application of £500k reinvestment/ mitigation are as follows:</p> <ul style="list-style-type: none"> <li>• Older people support, including ‘sheltered’ housing, estimated saving £449k -</li> <li>• Mental Health support, estimated saving £77k</li> <li>• Learning Difficulties support £20k</li> <li>• Physical &amp; Sensory Impairment support £11k</li> <li>• Young People estimated saving £61k</li> <li>• Ex-offenders/substance misuse estimated saving £42k</li> <li>• Generic (not age/client group</li> </ul>	<p>services towards more vulnerable people, there will still be an important part for the independent/ community sector to play in respect of delivering some of the £500k reinvestment in targeted advice/information; preventative services; and “pump-priming” third-sector organisations to recruit and support volunteers.</p> <p>Managing the de-commissioning of services represents a significant challenge to commissioning capacity.</p> <p>Officers will continue to examine this area of spend and the various contracts in place to seek to bring forward settings into 2013-14 if possible.</p>	<p>universally available advice and information. The target saving from the generalist advice and information service provision was, therefore, increased to £225,000. Council officers communicated this revised savings target to CAB B&amp;NES and discussed the likely implications both for the service and on the CAB as an organisation in detail in meetings and, also in correspondence.</p> <p>CAB B&amp;NES was given the opportunity to respond directly to the proposals to the multi-agency Commissioning Body, which met in September 2013 in order to review the recommendations arising from the sector reviews and associated savings proposals in order to inform the decision- making process. The Commissioning Body agreed the recommendation that the advice and information be re-commissioned in accordance with the recommendations arising from the review and proposed new model for advice delivery with an annual contract value of £182,000 delivering the required saving of £225,000. Other reductions were agreed at the same meeting by members of the multi-agency Commissioning Body in the context of the overall saving of £689k to be achieved from the SP&amp;C budget in 2014/15. The Commissioning Body, which comprises commissioning managers from Probation Services, Health, Housing and Adult Social Care, agreed these reductions in the context of the overall reduction in the SP&amp;C commissioning budget of £689k in 2014/15 and the need to mitigate the impact of these savings on targeted services to the most vulnerable people.</p> <p>For illustrative purposes only, services that</p>
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		<p>specific) estimated saving £160k.</p> <ul style="list-style-type: none"> <li>• Advice &amp; information estimated saving £118k.</li> </ul> <p>Total saving £841k.</p>		<p>continue to be funded from the SP&amp;C budget at an equivalent level to the saving from advice and information services include:</p> <ul style="list-style-type: none"> <li>• Floating support services for people with a learning disability and/or physical disability or sensory impairment;</li> <li>• Supported accommodation for people with mental health needs;</li> <li>• A tenure neutral older people's independent living service;</li> <li>• Floating support and supported housing for people with a learning disability;</li> <li>• Care and repair services for older people and those with a disability;</li> <li>• Day services for older people, including those with dementia.</li> </ul>
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500		Through more cost-effective home care contractual arrangements.	No direct impact on service delivery is anticipated from these changes to the contracting arrangements for home care.	The change to contracting arrangements has already been made, the only risk to delivery of this saving, is therefore, the continued pressure on adult social care commissioning budgets arising from demographic change despite provision in the 2013/14-15/16 MTSRP, including agreed use of Section 256 funding.
280		Reduce provision for inflation allowance in adult social care purchasing budgets from 1.75% to 1.25% with contingency of £280k held in reserves.	No direct impact on service delivery is anticipated as the Council has a statutory obligation to meet assessed and eligible care needs and is not proposing to make changes to adult social care eligibility criteria.	Commissioning managers will make best endeavours in negotiations with all providers to hold overall growth arising from inflationary uplifts to maximum 1.25%. However, the ability to meet the Council's statutory obligations within the budgetary provision is dependent on market forces, hence the contingency provision.
2,772	1,326	<b>ADULT SOCIAL CARE TOTAL SAVING</b>		

## HOUSING

2014-15 Saving £000	2015-16 Saving £000	How saving to be achieved	Previously Reported Impact to Service Delivery	Strategic Director's Update on Saving Proposal for November 2013 PDS Panel
39		Savings identified from the customer services workstream which looks at redesigning the customer pathway making better use of IT systems and implementing streamlined processes (including family information)	Yet to be determined. Service will transfer work to the customer service equivalent to this reduction	These savings are associated with the transformation project/customer services programme and split over the period 2013/14 and 14/15. Savings were predicated on a number of assumptions around the corporate provision of IT systems and other services. So far the delivery of these systems is falling short of expectations. As such the required saving is unlikely to be made through "efficiency" measures. Plans for delivery of an equivalent saving, through service reductions, are being worked on.
51		<p>£25k saving from ceasing the voluntary Accreditation Scheme for private rented accommodation.</p> <p>£26k saving from a reduction in staffing capacity in Housing Services.</p>	<p>We are changing our approach to ensuring quality standards in HMOs – this is currently being consulted on.</p> <p>The Accreditation Scheme provides landlords &amp; tenants with reassurance that a property meets minimum standards. Proposed additional HMO licensing areas cover a significant proportion of the accreditation properties. – as a result, the voluntary scheme will be stopped. Reduction in staffing capacity is likely to result in increased waiting times for some housing services.</p>	It is anticipated that the delivery of this saving in 2014/15 will be in accordance with plans.

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50		<p>As a consequence opportunities for further financial savings without impacting on service delivery are highly limited. Proposals to achieve this additional saving in 2014/15 are a combination of:</p> <ul style="list-style-type: none"> <li>• Reduce empty property recovery work and stop domestic energy efficiency work relying purely on government initiatives.</li> <li>• Reduce Disabled Facilities Grant/Housing Grant budget.</li> </ul>	<p>Increased waiting times and/or reduced access to financial assistance for essential repairs to elderly, low-income &amp; otherwise vulnerable residents' homes.</p> <p>LA benchmarking puts the current service provision in top quartile for service efficiency and cost effectiveness and it is highly unlikely that the saving can be achieved through further efficiencies.</p>	Detailed plan for achievement currently being worked on.
140		<b>HOUSING TOTAL SAVINGS</b>		