



Service Plan Template for 2008/09 (covering April 2008 – March 2011)

Service Plan for: Older People & Physical Disability Services

Directorate: Housing & Adult Social Services

Service Plan Holder: K Martin

Workplans: _____

Director: B Hodson

Signed off _____

Date: _____

EMAP : Housing & Adult Social Services

Signed off _____

Date: _____

The following service plan template must be no longer than 12 pages long. (excluding workplans)

Section 1: The service (1 page max)**INFORMATION, IN CONTROL, INDEPENDENCE****Service description**

Services include: -

Assessment

Community Care assessments which identify the needs of individuals and, where appropriate, their carers. Assessments follow a generic format, which can be expanded to include specialist assessments from Occupational Therapists and Sensory Impairment workers. The assessments forms the bank of information from which a care plan is developed and agreed. All people in receipt of services have a review 6 weeks after the start of services and then at least an annual re-assessment.

	2005	2006
Approximate number of referrals pa	2145	
Number of "open" customers	4600	
Number receiving service	3460	
%age with service	75	

ProvisionAdvice and Information

Advice and Information is available through leaflets, from staff at the Advice and Information centres, (managed by Housing), and the Assessment service. Written information can be made available in a range of formats and languages to meet the needs of people with sensory impairments from black and minority ethnic communities.

The service funds welfare benefits advice and financial assessments under the Fair Charging system. The service also financially supports a number of voluntary organisations to provide advice and information.

In House Provision

Services provided directly through in-house provision include housing support, home care, registered residential care, respite care, day services, equipment to aid daily living, minor and major adaptations to property, transport and supported employment. Our workforce is trained, or in the process of training to national standards.

Commissioning/Contracted Services

A significant range of services are purchased from the independent and voluntary sector and include registered residential and nursing home care; respite services; day care; personal or home care and transport.

Partnership Working

An increasing number of assessment services are carried out jointly with health colleagues. These include Hospital Discharge; Occupational Therapy services; Intermediate Care. We also have a number of assessment staff based within health settings such as Renal Social Workers, a care manager in the Accident and Emergency department of York Hospital, a care manager in a non-acute facility and within the PCT Intermediate Care unit and Fast Response Team. We also offer professional support to social workers employed by the Hospital Trust and the PCT. The integrated Community Equipment Loan service is an excellent example of partnership working.

Service objectives

The Adult Services for Older People and Adults with Physical Disabilities supports vulnerable people over 18 years old and their carers to achieve independent and fulfilling lives as citizens in their communities.

We will do this by:

- providing equal and effective access to services within eligibility that support an individual achieve a quality of life, well-being, independence and inclusion in the community they live.
- providing effective joined up services which allow vulnerable adults and their carers to take control over their own lives.
- Creating an environment that encourages individual choice in the services received, the way they are delivered and how they are arranged.
- ensuring assessments are comprehensive; sensitive to the diversity within our community; delivered promptly and fairly; involve people fully in a way which will reflect their views and wishes
- ensuring support and services are provided in a way that offers people as much choice as possible, recognising and supporting the crucial role of carers.
- promoting a culture of tolerance that is free from bullying, harassment and intimidation for customers and staff alike.
- working in partnership with other agencies to achieve a set of common aims; provide continuous improvement for our customers; provide a more seamless service for customers and reduce duplication
- deliver services which give value for money to the people of York
- ensuring that we contribute to the development of modernised social care in response to National Service Frameworks for Older People and Long Term Conditions and other related initiatives.
- ensuring that we have competent staff that are well managed and develop their skills and knowledge to provide a high quality service

Section 2: The Drivers (2 page max)

This section should represent a summary of the challenges (or drivers) that might affect future service delivery and/or performance over the next 1-3 years. This be based on stage 1 of the planning process (i.e. 'Investigate' stage).

Driver type	How might this affect our service	Sources
<p><u>SOCIAL INCLUSION AGENDA</u> Social Exclusion Unit - various initiatives relevant to adult social care:</p> <ul style="list-style-type: none"> • Health inequalities • Equality agenda 	<ul style="list-style-type: none"> • Increased emphasis on supporting people with disabilities into employment • Personalised support • The need to develop supported 	Disability Equality Plan White Paper SP strategy
<p><u>Modernisation of social care:</u></p> <ul style="list-style-type: none"> • Greater emphasis on the commissioning role of the LA • Greater emphasis on public health & prevention • Self- directed care and focus on outcomes • expansion of direct payments / individual budgets/ assistive technologies 	<ul style="list-style-type: none"> • Activity to achieve 7 outcomes of White Paper • Improved integration of health and social care • De-commissioning & re-commissioning services. • Shift in culture/practice • self-directed care • stronger links with primary care 	<p><u>Adult Services White Paper</u> (Our Health, Our Care Our Say- published early 2006</p>
<p><u>Improve carer support</u> New PIs introduced Revised National carer Strategy to be published early in 2008</p>	<ul style="list-style-type: none"> • Need to improve number of carer assessments undertaken, • Improve quality of carer assessment outcomes • supporting employment, training and leisure needs of carers • Revise flexible services to carers • Re-commission carers Centre • Revise carer representation forums 	Carers (Equal Opportunities) Act 2005
<p><u>ELECTRONIC SOCIAL CARE RECORD</u></p> <ul style="list-style-type: none"> • Second phase of the implementation of the electronic social care records in 2008 • Embedding phase 1 of the programme • Planning for implementation of the Mobile working and home care monitoring pilots in 2008/9 	<ul style="list-style-type: none"> • Changed recording practices for all social care staff • development of mobile working and hand held technologies • Substantial data loading to scan current files by agreed dated • integrated PCT/SSD systems eg integrated mental health record 	e-Gov't target
<p><u>Regulation of provision/commissioned services</u></p> <ul style="list-style-type: none"> • Inspection of older people's services in June 2008 • Introduction of new national PI's in 2008/09 • CPA audit in Jan/Feb 2008 	<ul style="list-style-type: none"> • Preparation for inspection April- June 2008 • Identify key local targets • Identify key PI's for inclusion in LAA 	CSCI DH
<p><u>DEMOGRAPHIC CHANGES</u></p> <ul style="list-style-type: none"> • Increase in longevity and complexity of care needs • Changing patterns of caring - fewer working age adults 	<ul style="list-style-type: none"> • Potential increase in community care assessments/services • Planning for future needs for • Increased demand for dementia services, complex care & functional 	long-term commissioning plan

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<p>to support aging population /more older carers</p> <ul style="list-style-type: none"> • Changing expectations • Isolation due to these changing family patterns 	<p>mental health services for older people</p> <ul style="list-style-type: none"> • Increased need to support carers effectively • Increased demand for independent supported housing. • Elderly Mentally Infirm – strategy 	
<p>National priorities for older people</p> <ul style="list-style-type: none"> • improve the standards of care • dignity and respect • personalisation • prevention • rehabilitation • specific service development: falls, strokes etc • The single assessment ensuring older people's care needs are assessed without duplication <p>Local priorities for older people include:</p> <ul style="list-style-type: none"> • more power and control to older people • Services that promote health & independent living • Widening the partnership beyond health and social care • Services that are more 'joined up' 	<ul style="list-style-type: none"> • The development of Out of Hospital and close to home services. • Older people want more say in their own care - i.e. more of a professionally supported approach rather than a professionally directed approach - this needs to be central to the Assessment, Care Management and Review process- self assessment is encouraged • Continued involvement/engagement of older people in planning and strategy - via the Partnership Board and the OP Assembly, & LAA structure • Continued development of Intermediate Care Services • Need to ensure services do not discriminate on grounds of age • Promoting improvements to quality of life for People in care • SAP Pilots currently in place, • Cross-agency project plan • Need to build into all related areas of ESCR implementation • Need to raise staff awareness of SAP and its implications 	<p>OLDER PEOPLE'S NSF</p> <p>White Paper 2006- OHOCOS</p> <p>York strategy- 'Never too old' 2006</p> <p>(Green Paper on funding roles & responsibilities is due 2008)</p>

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<p><u>Disability/long-term conditions</u> The NSF's for Long Term Conditions (Chronic & Neurological) - focus on the needs of people with neurological disease and brain or spinal injury. Integrated framework for health & social care delivery of local services to people with long-term conditions. Local partnership for provision of service model and appropriate pathways of care Standards to comply with in relation to sensory impairment Implementation, when passed of the Independent Living Act</p>	<ul style="list-style-type: none"> ○ A range of accommodation from supported housing to registered residential and nursing care ○ Opportunities to engage in fulfilling day time/vocational/leisure and community activities- modernisation of day care ○ Support to carers ○ Support at all stages of a condition ○ Integration of provision and processes where agreed ○ Government standards are providing tools for benchmarking of local services and frameworks for future development work ○ Development of a Centre for Independent Living 	<p>long term conditions national service frameworks- neurological & chronic; 'Improving the Life Chances of Disabled People' Independent Living Act White Paper 2006- OHOCOS</p>
<p><u>DELAYED DISCHARGES</u> System of reimbursement for delayed hospital discharges and removes local authorities' ability to charge for community equipment and intermediate care</p>	<ul style="list-style-type: none"> ● Regular partnership overview of the local health/care economy ● Use of grant to negotiate before April 2008 ● Focus currently on acute services – ● Work under way within non-acute sector 	<p>The Community Care (Delayed Discharges) Act</p>
<p><u>Mental Capacity</u> Implementation of sections of the mental health Act that amend the mental capacity Act- Deprivation of Liberty</p>	<p>Priority Action will be to have in place:</p> <ul style="list-style-type: none"> ● Identifying people to undertake the assessments ● Establishing process & training all relevant staff ● Coordination of implementation through a LA led Steering Group 	<p>Mental Capacity Act 2005</p>
<p><u>Develop services to become more appropriate & responsive to Black and minority community</u> Expand on connexions and networks that have developed in 2007/08</p>	<ul style="list-style-type: none"> ● Consultation links with Black and minority communities need strengthening ● Staff training ● Monitoring of performance through star blocker PI's ● Adapting services as indicated from the connections with BME community 	<p>Corp[or]ate objectives & CSCI standards</p>
<p><u>EMPLOYMENT/LIFE-LONG LEARNING</u> Implement ALI inspection action plan.</p>	<ul style="list-style-type: none"> ● Will have some implications for individual budgets ● Action Plan from ALI inspection to implement ● Review arrangements to support individuals within CYC. 	<p>. Welfare to Work 'Improving the Life Chances' NSF's</p>
<p>Corporate drivers</p>		
<p>Job Evaluation implementation</p>	<ul style="list-style-type: none"> ● Time required to resolve any outstanding issues beyond April 2008 	<p>National Pay Agreement</p>

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<p><u>Replacement day services</u></p>	<ul style="list-style-type: none"> • Closure of HRDC in May 2008 • Implement individual plans for current service users • Identify spaces to use • Support people with the movement. 	<p>Admin.and Accomm. review</p>
<p>Transforming York – Access to Services</p>	<ul style="list-style-type: none"> • Review content of Adult Service’s public information • Complete work with Corp support & CSED on the A&I & intake • Longer- term impact of first-stop shop unclear at this stage. • Preparation for direct access for customers through internet at later stage in programme development. 	<p>(Easy@york) CSED</p>
<p>Directorate Drivers <u>Long Term Business changes</u></p> <ul style="list-style-type: none"> • Strategic Needs Assessment & joint commissioning: <ul style="list-style-type: none"> ○ regional approaches to procurement ○ Improving Assessment & Review • Promoting Well –being • Embedding technology • Improved integration- LA/NHS • Improved partnership with 3rd sector • Financial balance 	<ul style="list-style-type: none"> • Developing longer term commissioning plans in conjunction with the NHS commissioning organisation • Collaborative commissioning with neighbour authorities. • Improved efficiency in operations • Support for smaller local services commissioned through 3rd sector • Closer links with corporate and regional procurement centres • Streamline assessment processes • ON-line access for customers • Resource difficulties if savings are taken in a cashable form. 	<p>Joint Commissioning with PCT; PBC & 3rd Sector</p>
<p><u>Independence Choice and Control</u></p> <ul style="list-style-type: none"> • Putting People in control • Developing system wide approaches to support choice • Carer support 	<ul style="list-style-type: none"> • Home support services Make further adjustments as required. • Modernise day service provision for people with physical impairment • Contribute to development of CIL by 2010 • development of individual budgets with replacement of HRDC • develop a plan for implementation of the ‘in control’ model across adult services by 2011 	<p>EMAP requirement Independent Living Act</p>
<p><u>Prevention</u></p> <ul style="list-style-type: none"> • role of Local Authorities in promoting health & protection of vulnerable adults • LAA objectives • carer support; community support and assistive tech. • Reforming emergency care through partnership with PCT • proactively case manage ‘very vulnerable’ people (aged 75+) their care needs to avoid hospital admissions • Fair Access to Care Services 	<ul style="list-style-type: none"> • Consultation on long-term care challenges • Include main themes and PI’s within the refreshed LAA. • Social care enhancement to Multi-disciplinary teams • Review commissioning of low level medical support • Fair Access through guaranteed standards and review of eligibility. • Closer links with primary care • Outcome focus • Build on good practice and implement agreed training plan through the Local safeguarding boards • Review & revise support systems to carers 	<p>Public Health White Paper 2004; White paper 2006 Community care Act 1990 Independent Living Act</p>

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<p>Quality and Excellence</p> <ul style="list-style-type: none"> • Staff & sector wide training • Leadership • Fitness for purpose of AS structures • QA systems & regular monitoring • Performance monitoring • Customer feedback 	<ul style="list-style-type: none"> • Adherence to & improvement in inspection outcomes against regulation standards • Older people's Service Inspection 2008 • CPA cross cutting themes • Resolving dual input issues in partnership services • Reducing sickness & absence • Monitoring performance against LAA objectives. 	<p>Performance assessment</p>
<p>Customer participation</p> <ul style="list-style-type: none"> • Developing & supporting robust customer forums & representation groups • Partnership Boards • Regular quality of life surveys 	<ul style="list-style-type: none"> • Increasing the involvement of tenants in housing strategy & management • Linking partnership boards into service planning (e.g. via the Local Area Agreement) • Developing an outcomes based approach to service delivery 	<p>Long-term commissioning plan Carer Strategy</p>
<p>Service Drivers</p>		
<p>Revision of care management approach to outcome focus</p>	<ul style="list-style-type: none"> • Plan to develop to meet personalisation & the prevention objectives 	
<p>OT Service management within LA to resolve whilst ensuring joint working continues.</p>	<ul style="list-style-type: none"> • Organisational and professional cultural changes • To review processes to streamline approach & reduce waiting lists 	<p>Targets for integrated equipment services</p>
<p>Fair price for care</p>	<ul style="list-style-type: none"> • Further adjustments as required 	
<p>PSI strategy development</p>	<ul style="list-style-type: none"> • Complete consultation & publish strategy in April 08 	
<p>Personalisation/Individual budgets</p>	<ul style="list-style-type: none"> • Lead provided by services for people with learning difficulties need to be reflected in day support for people with PSI then Older people. 	<p>White Paper;</p>
<p>Further development of the older people's accommodation & support strategy</p>	<ul style="list-style-type: none"> • Complete consultation • Remodelling of the accommodation and support services- • Further development of dispersed supported housing and extra care • Support developments to Discus Housing 	<p>White Paper Gershon</p>
<p>Maximising external income</p>	<ul style="list-style-type: none"> • Changes and efficiencies in the discretionary charging system • Developing potential bids for external funding • Effective use of grants 	
<p>Improving the Skills and competencies of Managers and Staff</p>	<ul style="list-style-type: none"> • Induction/Foundation training & NVQ training • Improve IT training and support to enhance basic IT skills • Application of appraisal system • Joint approaches to social care recruitment required across sector • Improve flexibility of staffing resources • Post qualifying training • Progression within revised pay & grading structure 	<p>Workforce Plan</p>

Section 3: Critical Success Factors (CSFs) (half page max)

Taking account of the service objectives in section 1 and the drivers identified in section 2, decide what is critically important for your service to achieve over the next 1-3 years? This might be

- something your service has to deliver or improve without fail, or;
- an enabling factor which will be a barrier to your staff delivering the broad service objectives.

CSFs for 2007/08	Why a CSF?
ESCR- electronic record keeping	To realize efficiencies in business processes, information storage and information sharing
Planning for modernization of Disability day services & development of strategy for Long-term conditions	To achieve delivery of alternative model of day service and movement from current day centre site by May 2008
Completion of consultation and implementation of components of the of long-term commissioning plan, related to: <ul style="list-style-type: none"> • role of CYC older people's homes • prevention & diversion from intensive support • support to carers 	To remodel service provision in a way that stabilises social care markets. Delivery of White Paper and targets Delivery of local OP strategy 7 LAA targets Matching resources available to known demand
Implementation of Mental Capacity Act amendment	National legislation
Joint commissioning and delivery with PCT (Pbc): <ul style="list-style-type: none"> • Older people with mental health problems • Rehab/intermediate care • Long-term conditions (inc. telecare) • Primary prevention 	Essential to release of funding for investment in alternative services
Implement action plan resulting from SAS and subsequent CSCI inspection	Critical to the improvement of customer outcomes

Section 4: Links to corporate priorities (half page max)

Improvement Statement (IS)	Contribution
Objective 10- customer focus	Implementation of mental capacity Act amendment and movement to individual budgets and self-directed care enhances customer choice & control. Improving key activity in assessing, reviewing and supporting people at home will enhance choice & independence Dignity in care campaign and target to improve achievement of CSCI standard 15 will improve quality of service Successful outcome from CSCI Inspection
Objective 12 – partnership working	Improved integration of social care with NHS services- Primary, Community & OP Mental Health will require enhanced partnerships Delivery of White paper inclusion agenda will involve corporate partnerships
Objective 7= improved health	Improved integration of social care with NHS services- Primary, Community & OP Mental Health will improve health of residents Achievement of CSCI standard 15 will improve health of care home residents

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Objective 8- supporting disaffected families	Improving support to carers will enable an increasingly marginalised group of people, many with young families to have improved quality of life
Objective 5- Increasing skills	Development of workforce strategy within HASS that will support the recruitment, retention and development of a skilled staff group
Objective 13- efficiency	ESCR; development of alternative service models, self-directed care; reduction of absence; review of EPH's ;stabilising independent sector fees will enhance efficiency improvement. Budget savings – home care.
Links to other plans	
List the higher level plans and strategies that your service area supports (i.e. a partnership strategy)	
<ul style="list-style-type: none">• Older People's long term commissioning plan• Local Area Agreement• York & Selby Older Persons strategy- 'Never too old'• Older people's Housing strategy• Discus bungalow replacement programme• Accommodation strategy• Transport Review• Supporting people Strategy• York & Selby carers strategy• Day services Modernisation Project• Social care record replacement programme• Public Information Review	

Section 5: Scorecard of improvement measures & actions (3 pages max)**Customer based improvements**

Customer Measures				
How will you check whether you are improving from a customer perspective? Please list any 'SMART' indicators (this should also include the target you want to achieve – for the next 3 years if possible).				
Measure	Current	2008/09 Target	2009/10 Target	2010/11 Target
NI 125 Achieving independence for Older people through rehabilitation/intermediate care	Baseline to establish			
NI127 Self-reported experience of social care users	Methodology to establish			
NI 128 User reported measure of respect and dignity in their treatment	Methodology to establish (CASSR)			
NI 130 Social care clients receiving self-directed support (Direct payments and Individual budgets	75 (current)			
NI 131 Delayed transfers of care from hospitals	3	2	2	2
NI 135 Carers receiving assessments or review and a specific carers service or advice and information.	Baseline to establish			
NI 136 People Supported to live independently through social services (all ages) –care managed and non-care managed and grant funded services, per 1,000 adults aged 18+	Baseline to establish			
NI 138 Satisfaction of people over 65 with both home and neighbourhood	Baseline to establish			
NI 139 People over 65 who say that they receive the information, assistance and support needed to exercise choice and control to live independently	Baseline to establish			
NI 141 Number of vulnerable people achieving independent Living (or SP PI)	Baseline to establish			
NI 142 Number of people who are supported to achieve independent living (or SP PI)	Baseline to establish			
HCOP8.3 Older People aged 65 or over with supported admissions on a permanent basis in the year to residential or nursing care per 10,000 of the population aged 65	58.4 (2006/07 baseline)	65	67	
HCOP8.6 Number of new users aged 65 and over who have 1 or more items of telecare equipment	Baseline to establish (LAA target 390)	520	630	

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Customer Actions

What are the main **customer** based actions you need to deliver in order to improve your services?
Please list improvement actions for next 12 months

Improvement action	Deadline
Start the development of self-directed care, further extension of direct payments and introduction of individualised budgets.	May 2008
Reprovision of day services for people with PDSI & Contributing to development of user led PDSI services (CIL) & one stop shop for support	May 2008
Start the development of an extensive range of statutory and voluntary community care supports	March 2009
Extended integration of service delivery and care pathway management with NHS	To be set
Development of housing options that extend the range of available sheltered, supported and extra care housing and telecare	July 2008
Improvements in quality assurance processes; Audit of EPH accommodation and staffing requirements	March 2008
Preparation for implementation of mental health amendment Act & DOL	March 2009
Improved quality/access to public information	December 2008

Process based improvements

Process Measures

How will you check whether you are improving from a **process** perspective?

Please list any 'SMART' indicators (this should also include the target you want to achieve – for the next 3 years if possible).

Measure	Current	2008/09 Target	2009/10 Target	2010/11 Target
NI 132 Timeliness of social care assessments	76.5	76.5	77	
NI 133 Timeliness of Social care packages to older people	85	92	93	
BV56 – D54 (PAF) % items of equipment and adaptations delivered with 7 working days	96	95	95	
BV58 (PAF D39) %age of people receiving a statement of their need and how they will be met (all customer groups)	92	93	94	
%age of adult users assessed and/or reviewed in the year that had ethnic origin missing or not stated	Less than 10%	Less than 10%	Less than 10%	
New or revised local policies and protocols required by Mental Capacity Act amendment	October 2008			

Process Actions

What are the main **process** based actions you need to deliver in order to improve your services?

Please list improvement actions for next 12 months

Improvement action	Deadline
<ul style="list-style-type: none"> Introduction of self-directed processes of assessment & care planning. 	To be set
<ul style="list-style-type: none"> Improved business processes of information provision and screening- link to A&I review and public information strategy and remodelling of initial point of service delivery 	To be set
Evaluation & amendment to review process	March 2009
Revision of policies & procedures	June 2008

Resource management improvements

Resource Measures

How will you check whether you are improving from a **resource management** perspective? This covers financial/budget/staff based improvements, such as cost, budget management, staff absence, etc.

Measure	Current	2008/09 Target	2009/10 Target	2010/11 Target
Achieve agreed saving target				
Increasing customer income				
Unit cost of employment services				
CP 14 - percentage of staff appraisals completed	90%	94%	95%	
BV 12 - days lost per year per FTE due to sickness absence	9%	8%	7%	
Percentage of staff registered social work staff receiving on average 30 hours post qualification professional development each year (90 hours over 3 years)	100%	100%	100%	
BV 16a - percentage of staff with a disability (Community Services as a whole)	5%	5.5%	6%	
BV 17a - percentage of staff from and ethnic minority (Community Services as a whole)	2%	2.5%	3%	
Local CP58 - percentage of voluntary turnover of staff	2.8	2.7	2.6	
S3: numbers of new staff undergoing Induction training (CM Review) newly employed staff within the first 6 months of employment	100%	100%	100%	

Customer Actions

What are the main **resource management** based actions you need to deliver in order to improve your services? You may also want to include staff broad workforce training and development issues for your service. This may have come out of the future challenges exercise you carried out in the planning process. *Please list improvement actions for next 12 months*

Improvement action	Deadline
<ul style="list-style-type: none"> Development of long-term service development and financial plan. 	July 2008
<ul style="list-style-type: none"> Provision of self-financing alternatives to care 	March 2009
<ul style="list-style-type: none"> Restructure of Adult Services management 	April 2008
<ul style="list-style-type: none"> Accommodation & support strategy development & implementation- 	October 2008
<ul style="list-style-type: none"> Revise absence management scheme 	March 2009
<ul style="list-style-type: none"> Proactive recruitment campaigns 	Ongoing
<ul style="list-style-type: none"> Agreed, implemented & refreshed training plans & review arrangements on progression 	March 2008
<ul style="list-style-type: none"> Develop strategy for employing people with a disability & Implement ALI action plan 	March 2008

Section 6: Resources (1 page max)

Please provide details of your resources:

- Staff numbers and budget to support your service improvements.
- Increases/decreases in capacity (financial and/or staffing) to support your service level objectives

The ability to deliver specific projects will be assessed at the beginning of the process using the standard project management toolkit. It is anticipated that changes in the adult service structure and unfreezing some posts will allow greater capacity for supporting developments from within the service and less reliance on external support.

- Recruitment issues

Recruitment of care staff within CYC & contracted care services is becoming increasingly difficult leading to a reliance on agency staff and potential for failures in care. The problems are particularly acute at week-ends.

Budget

	<u>2007/08</u>	<u>2008/09</u>
	£'000s	£'000s
Employees	14,136	14,104
Premises	679	694
Transport	1,153	1,154
Supplies and Services	16,068	17,417
Miscellaneous	2,333	2,296
– Recharges	2,116	2,074
– Other	217	222
Capital Financing	603	603
Gross cost	34,972	38,268
Less Income	14,309	14,859
Net cost	20,663	21,409

NB The budget shown for 2008/09 is only indicative as detailed proposals have not been finalised.