

**Meeting of the Executive Members for 11<sup>th</sup> December 2006  
Housing and Adult Social Services and  
Advisory Panel**

Report of the Director of Housing and Adult Social Services

**Social Services 2006/7 Service Plan and Budget 2<sup>nd</sup> Monitor report**

**Summary**

1. To provide the Executive Members with an overview of progress on Service Plans agreed in January 2006. This report covers service plans for social services and corporate services. Elements of the Corporate Services monitoring are also relevant to the Housing service plans.

The report highlights a significant reduction in the projected overspend notified at the first quarter monitoring and updates the Executive Member on action being taken to reduce expenditure.

**Background**

2. This report updates the 4 draft service plans for Corporate Services, Learning Disabilities, Older People & People with a Physical or Sensory Impairment and Mental Health. These are 3 year plans and should be regarded as work in progress. Updates to changes that will impact on 2007/8 are set out in the accompanying paper that looks at budget proposals for next year.
3. The annexes to this report show progress on the performance targets that will affect the star rating for 2007. Action has been taken to restrict expenditure to try to bring the budget back in line but that could have an impact on some key indicators e.g. the number of people supported at home.

**Consultation**

4. The report is for primarily for information and although no formal consultation has been undertaken many of the plans and proposals have already been discussed with partners.

## **Options**

5. This report is an overview of progress against agreed objectives and a report on the projected expenditure for 2006/7. Specific options are not being recommended to the Executive Member as part of this report.

## **Analysis of context**

6. Members will recall that the first quarter monitor forecast an overspend of around £1.7m with home care being the most critical area. Action has been taken in 3 main ways to address this overspend:
  - a) A complete restructure of the in house care services with the focus being on an initial enabling service (the Promoting Independence Team), a Home Support Service and a range of specialist services.
  - b) Tendering of 3 locality based home care contracts for ongoing support in the community
  - c) Ensuring that care packages are in line with the council's guaranteed standards.

The new services went live on 4<sup>th</sup> December but it will be several weeks before the new arrangements are fully in place.

7. This report confirms that we are still on line to reduce the overspend forecast at the end of the first quarter by about £1m. However, this cannot be completely confirmed until the actual expenditure figures for December and January are confirmed – to check that they are inline with the projected savings.
8. Initial meetings have been held with the Chief Executive of the Yorkshire and Humber Strategic Health Authority and the Chief Executive and Chair of the North Yorkshire and York Primary Care Trust – as well as with one of the non-executive Board members who lives in York. The senior management team is still being assembled at the PCT and there is not yet clarity about future accountability and partnership arrangements. The financial recovery plan is due to reduce the overall deficit of the PCT to about £24.5m in 2006/7 provided savings of over £42m are delivered. As yet no additional impact has been felt in terms of increased costs to the council but this is being kept under close review.

## **Older People and Physical and Sensory Impairment (See Annex1)**

### **Achievements in second quarter**

9. The second quarter reflects improved performance on key indicators relating to the provision of statement of needs and recording of ethnicity which was an indicator giving concern in the previous report. The performance on provision of equipment and reviews undertaken has been maintained at the same level and are in line with the targets. The increase in support to carers has now shown a 200% increase since June with the flexible services on offer. All key indicators, even those that have reduced in performance are still broadly in line with targets.

The changes in commissioning of home care are being implemented from week beginning 4<sup>th</sup> December. This involved in the second quarter:

- considerable consultation with staff before the introduction of new contracts
- the completion of the tendering activity to select three locality independent sector providers
- the substitution of meals on wheels services with frozen meals for the majority of meals service customers

10. The main achievements are as outlined below:

- The number of older people and people with disabilities admitted to registered care continues at a low level
- The delivery of services to carers has improved significantly with the introduction of the flexible services, 116 carers having received a service at the end of the second quarter, (an additional 80).
- The adaptations to Windsor House have been completed and staff recruited underway with new admissions due to begin in December.
- Delayed discharges for social care reasons have increased slightly over the second quarter but remain at a very low level when compared regionally and nationally. This will not yet reflect any impact of the reduction of intermediate care beds at Grove House and the Archways, due to the PCT financial recovery plan.
- Project planning continues for the re-provision of services at Huntingdon Road, with staff and customers are involved in the consultation processes that underpin this.
- Work to deliver assistive technology continues with important progress being made to improve disaster recovery arrangements . Consultation on the best use of the funding is suggesting that a targeted approach to help manage identified risks for customers is the most likely way forward.
- Planning activity has concentrated on the continued development of the long-term commissioning plan for older people and the authority has been involved in disseminating the outcome from this project through DoH seminars. The first draft will be presented to the Executive Member in January.
- The next phase of the Accommodation & Support strategy has been reported to members and further work will now be undertaken to develop specialist roles for the Local Authority EPH's.
- Customer outcomes have been further enhanced with 36 people with ill health or a disability from April to September 2006, benefiting from the Dispensary Fund administered by the Directorate, including support for respite holidays, furniture, bedding, carpet, mattresses, cookers, fridges and washing machines.

## **Critical Success Factors (CSF)**

11. The following are the CSF identified in the service plan and a comment on their current position.

12. Fair Access

Implementing fair access to care according to the agreed threshold and guaranteed standards has continued. Services have been withdrawn where these did not warrant provision under the guaranteed standards. This work enables the authority to be confident in the delivery of services consistently to a large customer group. It has also enabled the authority to release resources for distribution to others who meet the criteria. This has been a major project for the Assessment and Purchasing Teams and a potentially difficult period for customers affected. It is of significant credit to those teams that the changes have been managed without any risks to customers or significant rise in complaints.

This has resulted in the second quarter in a further reduction in the number of older people (BV54) and people with a disability (C29) helped to live at home. This may be reversed to an extent with the introduction of a new performance indicator and the home care restructure later in the year.

A review of the Advice and Information function has now been completed. This review has involved consultation with customers carers and the voluntary sector.

13. Improve staff retention and workforce planning

The adult services section will be heavily involved in a new Directorate workforce planning initiative. This is designed to promote much stronger links between the appraisal and staff development processes for what is a very large and diverse staff group with constantly changing requirements from national and local drivers.

The work with Active Health Partners continues and the average monthly sickness absence level in the second quarter is broadly the same as the first quarter.

14. Improve performance for Assessment Timescales and Care Package delivery

These are 2 of the key performance indicators which contribute to a council overall Performance Assessment.

In July additional action was needed to bring expenditure into line with budgets that resulted in the introduction of waiting lists for new customers where resources could not be released. This has had an impact on the key indicator requiring delivery of services within 28 days of the completion of the assessment. However this indicator is still within target. All those waiting for a care service are regularly contacted to ensure their needs have not changed.

Revised referral systems that have been introduced within the Occupational Therapy Service continue to reduce delays in assessments.

15. Improve joint planning and working with key partners.

There has been some continued involvement with the PCT future planning streams although the concentration within the PCT on its financial recovery plan and restructuring has extended the uncertainty in forward planning. The majority of joint planning during this quarter has focussed on producing the Local Area agreement objectives and agreeing the performance measures.

Joint planning to meet the requirements of the Older people's Strategy has continued through the partnership structures that include mental health for working age adults, older people's mental health services and the Older people's Partnership Board.

Planning has also been initiated with the PCT to develop stronger links at a primary care level with social care services.

16. Develop a more robust business planning approach

The work on the long-term commissioning plan for older people will shortly result in the production of a document that delivers a more effective needs assessments and match of service model and investment to needs.

The capacity for planning within the section remains low, with little planning time available to support the section and posts being held vacant due to the financial pressures.

A business change group has now been established to oversee the improvements needed within Adult services in readiness for the introduction of the new social care data base and electronic social care record policy. Staff have been made aware of this and will receive training as required.

The home care restructure and re-commissioning of external services is near to implementation and it remains an expectation that this will deliver efficiencies.

The specialisation of elderly person's homes through the Accommodation & Support strategy will improve outcomes for customers and give further efficiencies as the strategy develops.

### **Areas where performance did not achieve expectations**

17. The following areas are ones where performance has not met targets set or projects have slipped against their predicted timescale.

The number of people over 65 who have opted for Direct Payments has not yet increased within the current financial year. There have however been a number of recent enquiries for this and it is anticipated there will be some increase as a result..

The achievement of financial performance within budget is still a major challenge as described in the financial section. However performance has improved significantly since the first quarter with action being taken to ensure it is the guaranteed minimum standards that are being applied and to reduce demand through the introduction of waiting times for packages of care where people have moderate or substantial needs. During the period July to September , 4 people with moderate needs and 19 people with substantial needs had a waiting period of up to 4 months (moderate) or two months (substantial). Of these, only 3 were new customers and all other requests were for additional hours of support linked to increasing need. All customers who are waiting are contacted regularly and their position reviewed if their needs have changed. This has also had a slight impact on the performance of

the delivery of care packages within 28 days of completing assessments, as described in the appendix.

There remain concerns being expressed in respect of public information that is available on social care services not being fully comprehensive and up to date. This is being included in the review of Advice & information functions.

### **New external priorities or demands**

18. The following have been new priorities or demands requiring attention during the quarter, that were not reflected in the original service plan:

Preparation for the Mental Capacity act being introduced in April 2007. Guidance has been released and the City of York Council will be responsible for establishing the interagency co-ordination & training arrangements as well as commissioning the required independent advocacy service to cover the City. There is a small grant that is allocated to establish the infrastructure as this will be a small amount of £18,750, working in collaboration with north Yorkshire Council to jointly commission the service is being considered.

The changes to the way that the Commission for Social Care assesses authorities and regulates registered services will have a greater impact in the second half of the year as the authority prepares for the increased focus on:

- Assessing the commissioning capacity and arrangements within the authority
- The regulation and inspection role of CSCI emphasising outcomes of services.

The trend during the first quarter of the year, towards an increase in the level of reported adult abuse cases has continued to rise. There appears to be an increased awareness of abuse leading to more cases where staff have reported abuse by colleagues or family members. The most significant are of reporting has been one local nursing home where 6 reports of abuse were received over a 4 month period – all reports have been investigated and there has been a joint approach between the council and CSCI to address issues with the senior managers of the home.

### **Significant organisational issues**

19. The following issues are having an impact on the achievement of the service plan.

Financial planning for the medium term in context of budget pressures in 2005/06.

There may be financial risks from the PCT financial recovery plan unless the impact for social care is considered within a joint planning framework.

Staff availability and capacity to undertake essential preparation for new commissioning and service development plans.

Preparation for the introduction of the electronic social care record and replacement of the customer data base will require a significant commitment from operational

staff in the Assessment and Purchasing arm of the service and may have an impact on care management performance indicators.

Work is currently underway to improve information governance and information sharing protocols including the training of staff in information security.

## Prospects for next quarter

20. The dominant feature of the second quarter and the remainder of the financial year will be the impact of measures taken to bring expenditure back into line with the budget.

## Budget

21. The table below provides the approved budget and major variations which require reporting together with the actions required to contain expenditure within budget

OLDER PEOPLE & PHYSICAL DISABILITIES	Budget £'000	Variation £'000	Variation %
Community Support – continued effect of overspend in 2005/06. However, budget should come in line from 2007/08 due to reconfigured service. Overspend shown is against the phased budget up to 4 <sup>th</sup> Dec 06 when new service starts – see Action plan for savings target from 4 <sup>th</sup> Dec 06 to year end.	1,226	+1,074	
In House Home Care - continued reduction in hours per week due to difficulty in recruiting staff for evening and weekend work. New service to commence from 4th Dec 06 whereby in house team has target to reduce non contact time and non achievement of this target will increase year end overspend.	4,143	-29	
	5,369	+1,045	+19.5
Residential & nursing –decrease in Elderly placements offset by increase in Physical Impairment placements. Projection also takes account of £60k pressure due to deficit in income from North Yorks & York PCT for North Yorks Health Authority (NYHA) customers.	4,555	-71	-1.6
Direct payments –due predominantly to expensive packages for care in the West.	37	+162	+437.8
Staffing underspends – posts being held vacant to support overall Departmental position.	1,623	-108	-6.7
Elderly Persons Homes – overspending on pay (£281k) due to high levels of sickness in some homes (in some instances due to infections within units) plus continued pressure of staffing to minimum CSCI standards. This is offset by overachievement of income (£335k) commensurate with previous years' outturns. Income has dropped from previous quarter due to a number of high fee payers being discharged from homes.	2,413	-54	-2.2
Meals Service – due to transitional arrangements following the decision to transfer this service to an external provider.	6	+58	+966.7
Mobile Wardens and Warden Call – staffing pressure of £155k due to continued long term absence.	150	+150	+100.0
Repairs and Maintenance – due to increased cost of repair and maintenance work.	213	+29	+13.6

Equipment – budget managers holding back on non essential equipment to assist overall budget position	63	-32	-50.8
Catering – High occupancy in homes has resulted in increased spend on catering supplies.	100	+22	+22.0
Other minor staffing underspends in Yorkcraft	791	-20	-2.5
Other minor variations	4,217	0	0.0
<b>Total Older people &amp; Physical Disabilities</b>	<b>19,538</b>	<b>+1,181</b>	<b>+6.0</b>
Implementation of new Home Care Service realising savings through efficiencies within internal Home Care Service and improved financial terms of new contracts		-220	
Continued review of customers to ensure current eligibility criteria strictly adhered to. A further review is being done of customers receiving less than 2 hours home care per week		-48	
Maximising the usage and efficiency of the in house team before new service begins.		-21	
Introduction of a waiting list for all but the customers in critical need		-33	
Continued reduction in the use of agency staff		-17	
<b>Total Older People &amp; Physical Disabilities to find</b>		<b>+842</b>	<b>+4.3</b>

## Learning Disabilities (See Annex 2)

### Achievements

22. The following area should be noted.

- An internal service audit was undertaken in relation to the “Cornwall” judgement ( Health Care Commission and CSCI joint report on failings in Learning Disability Services – July 06).The Integrated Partnership measured well against this audit.
- We have maintained:
  - i. the number of people helped to live at home at a consistent level.
  - ii. The number of people receiving a direct payment
  - iii. The percentage of people receiving a statement of their needs
- There has been an improvement in performance in the number of reviews of service that have been undertaken
- The work training scheme- “A Break in the Park” (café scheme) which opened in July 06 is starting to attract more business, particularly in its outside catering scheme.
- A CSCI inspection at Flaxman Avenue respite centre found the service as good- with a few minor changes needed to reach commendable
- Stricter adherence to the application of eligibility criteria has been undertaken.
- A successful Carers day was held in the City, for carers of people with Learning Disabilities, and some local actions are being formulated to assist carers to get relevant supports.( One of the CSCI inspection recommendations)



- Work has begun in earnest on the next phase of modernisation of the day services within the city.

## **Critical Success Factors (CSF)**

23. The following are the CSF identified in the service plan and a comment on their current position

### The discharge of in-patients from the long stay units in Health

Over 60% of people have been discharged from NHS inpatient care- with a plan in place for the remaining in-patients through the next 18 months-2 years.

### To increase the number of people in work

There continues to be a modest rise in the number of people with a learning disability in work.

### Increase the number of people using individualised budgets or direct payments

The use of Direct Payments remains static at 19 for the customer group. Progress on Individualised budgets is good with some 3 people now using this method, and processes being put into place to increase this..

### Review & improve financial management information systems

Regular monitoring of budgets and performance indicators with service managers in situ. Regular liaison with finance support in place. The tracking systems and monitoring arrangements within the team have improved significantly and we are able to track spending effectively

### Improve joint planning and working with key partners.

The future of the Integrated service within the new PCT structure has been confirmed, with a re-signing of the Partnership Agreement, continuing City of York Council as the Lead Agency for Learning Disability Services.

## **Areas for Improvement**

24.

- The agreement of local targets to ensure measurements of success are easy to monitor- these to be agreed with the Partnership Board by the end of the calendar year
- To look at the way reviews are undertaken, based on a significant pressure area for maintaining numbers of reviews required as a performance indicator – a day to consider this with key stakeholders is being held in late November
- Achievement of financial targets has not occurred with increase in cost pressures as peoples needs increase and costs increase for service provision.
- Further work is required to improve a range of home based respite services- preliminary work has begun on this.

## Prospects for next 12 months

25. The following are the key opportunities and risks facing the service.
- The budget position continues to pose a significant challenge.
  - The continued modernisation of resources and systems- in particular the next phase of day service modernisation and respite services, and the use of individualised budgets will pose a significant opportunity in improving outcomes for people.

## Budget

26. The table below provides the approved budget and major variations which require reporting together with the actions required to contain expenditure within budget.

LEARNING DISABILITIES	Budget £'000	Variation £'000	Variation %
Community Support – a continued high level of number of customers receiving intensive support in their own homes	435	+67	
Offset by Supporting People & Continuing Care income		-202	
Residential & nursing – increase in number of individuals with complex care needs	<u>3,918</u>	<u>+162</u>	
	4,353	+27	+0.6
Direct Payments – budget overspent in 2005/06 and pressure continues as number of customers remains constant	140	+109	+77.9
Transportation of clients – budget overspent in 2005/06 and pressure continues as number of customers remains constant	120	+124	+103.3
Flaxman Ave – staffing overspent due to members of staff on long term sick and maternity leave	319	+42	+13.2
Day Centre staffing – underspend on Yearsley Bridge partially offset by small overspends throughout the other day services	412	-35	-8.5
Service Manager (provision) - holding back spend on non essential equipment to offset service overspend	87	-23	-26.4
Reduction in Supporting People funding		+255	+100.0
Other minor variations	2,708	0	0
<b>Total Learning Disabilities</b>	<b>8,154</b>	<b>+532</b>	<b>+6.5</b>
Accommodation Review		-65	
Maximise use of Independent Living Fund (ILF)		-17	
Reconfiguration of Supported Living Schemes		-55	
<b>Total Learning Disabilities to find</b>		<b>+395</b>	<b>+4.8</b>

## **Mental Health (See Annex 3)**

### **Achievements**

27. The following should be noted.
- The Partnership Board has been revised to match the formal Partnership agreement. The Board has now had two meetings.
  - Service remains on target with the main NSF service development objectives.
  - The provision of Statement of needs and reviews are well within target for the year.
  - The implementation of plans to restructure the rehabilitation and recovery services. This included the replacement of Redroofs with a supported living service, the opening of a recovery unit within Bootham Park, the movement of residents from Stray Garth to Acomb Gables
  - The reprovision of New Lane as a supported living scheme run by a Housing Association will follow when plans are complete.

### **Critical Success Factors (CSF)**

28. The following are the CSF were identified in the service plan and a comment on their current position.

#### Strengthen partnership arrangements with PCT

The Mental Health Partnership agreement has been revised and approved by Members. Protocols covering specific aspects of the policy are currently being put in place and the constitution of the Partnership Board being revised. The new agreement became operational on 1<sup>st</sup> April 2006.

#### Review & Improve financial management information systems

Revised financial arrangements were included in the revised partnership agreement and financial management arrangements have been put into place for 2006/07 budget management and reporting.

#### Improve staff retention and workforce planning i.e. Approved Social Workers (ASWs)

There are currently two staff undertaking ASW training. There are however some risks with delivery of this service as there are currently three vacancies. These have now been cleared for recruitment. The success of this will be reported in the next quarter.

The average sickness level in the last quarter has remained at the same level of 4.44% as with the first quarter. This is lower than the average level for Adult services overall.

#### Improve performance information

As with other areas of the adult services progress with information systems remains dependent on replacement to ISIS and introduction of Electronic Social Care Record

(ESCR). Data entry is still reliant on dual entry for a majority of social care information.

### Direct Payments

There has been an improvement in achievement against target with one mental health service user who has moved to Direct payments

## **Areas where performance did not achieve expectations**

29. The following areas are ones where performance has not met targets set or projects have slipped against their predicted timescale
- The recording of ethnicity is currently well below the target and will need corrective action.
  - The Council is working with NYCC and CSIP on an awareness raising day which is to be held on Nov 22 for staff within the L/As and NYYPCT. CSIP is leading work focusing upon how the barriers to improvement can be overcome for this customer group.

## **New external priorities or demands**

30. The following issues have impacted on the service planning.
- Impact of budgetary problems within both PCT and in social care services.
  - Planning for the Mental Capacity Act to be introduced in April 2007.
  - Planning for the Mental Health Act amendments due to be introduced in 2007.

## **Significant organisational issues.**

31. The following organisational issues have impacted on the achievement of the service plan.
- Changes in the PCT and Strategic Health Authority infrastructure.
  - Establishing the formal Partnership arrangements;
  - Financial planning for medium term in context of budget pressures in 2006/07 and savings required in 2007/08 period and impact of Supporting People changes.
  - Further organisational change;
  - Developing clear Pathways of care
  - Developing supported living schemes to improve the proportion of community based services.
  - Reconfiguration of the Community Mental Health Teams to 4 areas.

## Prospect for next quarter

32. During the next quarter those developments that have been implemented during the first two quarters will be consolidated.

## Budget

33. The table below provides the approved budget and major variations in accordance with the financial regulations.

MENTAL HEALTH	Budget £'000	Variation £'000	Variation %
Community Support – continued pressure to kennel dogs and other unusual costs (£26k) partially offset by customer contributions (£8k).	25	+18	+72.0
Residential & nursing – underspend due to death of several customers and the beds they previously occupied remaining vacant.	1,252	-56	-9.5
22 The Avenue – mainly due to vacancies	420	-58	-13.8
Social Work Team – posts being held vacant and difficulty in recruiting staff within certain teams	630	-38	-6.0
Rehab and Recovery team – small staffing overspend	65	+14	+21.5
Other minor variations	551	0	0
<b>Total Mental Health</b>	<b>2,119</b>	<b>-120</b>	<b>-5.7</b>
No action needed at this stage		0	
<b>Total Mental Health to find</b>		<b>-120</b>	<b>-5.7</b>

## Corporate Services (See Annex 4)

### Achievements

34. The following areas should be noted.
- The Draft LAA was completed in September as planned
  - Additional resources have been allocated to the Complaints team to help address the increased workload
  - Benefits advice team, who moved from Resources to HASS in the summer have increased the income of customers who are receiving non-residential services by almost £8,000 per week. This would equate in a full year to around £700k.

## Critical Success Factors (CSF)

35. The following are the CSF identified in the service plan and a comment on their current position. Some of the CSFs relate to social service areas.

### Replacement of Social Care recording system

The project is still on target for the new implementation date of the end of June 2007. There have been no new delays to the project

### Improved partnership with internal and external stakeholders

High level discussions are in progress with the new Primary Care Trust to establish shared processes to support joint commissioning.

Internal discussions with Heads of Services and their managements teams continue to agree priorities roles and responsibilities in shared work plans

### Supporting People programme

Retraction plan for ineligible Supporting People funding has now been agreed and is in the process of being implemented

Plans to develop new services for the agreed priority customer groups, and within the available budget, are under consideration.

There is no further news on future funding arrangements for the programme for DCLG, but current projections suggest the Programme will remain within balance for the next three years if the ineligible funding is retracted as planned.

### Improving attendance in Department

The joint management union working group is making good progress, and linking to the Council wide group looking at absence management. It is expected that some changes will be introduced within the department from early next year.

### [Easy@york](#) - Ensuring a effective engagement and transition

To date we have achieved all that has been required by the Programme, within the set timescales.

### Adult Services changes supporting and responding to the modernisation agenda

The tendering exercise for three locality home care providers was successfully completed in August, as planned. Preparations are now in hand to support the transfer of care between providers by December.

The long term (10-15 year) commissioning strategy for older people is still in development. The next stage will be to consult with key stakeholders.

Commissioners and finance staff continue to support the 'In Control' project for People with Learning Disabilities, which will pilot 'individualised budgets', a key part of the Governments White Paper.

### Gershon and efficiencies

Business Benefit realisation work continues for the Social Care Replacement Programme

Process improvement work has begun for the Charging, Benefits and Financial Assessments Teams, and it is anticipated that will deliver various efficiencies.

### Organisational Development

The toolkit for medium and small projects has now been developed and is ready to be used. It will be trialled initially and reviewed

## **Areas for Improvement**

36. A more rigorous prioritising of work to ensure that key actions are achieved.

## **New external priorities or demands**

- The Primary Care Trust Restructure continues to impact on joint working arrangements.
- The work on reducing overspends continues in adult social services requiring additional time from finance, management information and IT staff.

## **Significant organisational issues**

37. The following issues have impacted on the achievement of the service plan.
  - The HR team supporting HASS has experienced staff turnover and vacancies which has reduced their ability to support business areas and complete developmental work
  - There has been no Policy and Planning capacity over last 9 months, due to sickness and the loss of a post through budget savings and this has reduced the support available to the business to plan and prepare for service change and development

## **Prospects for next 3 months**

38. The agenda is large, and capacity stretched. Prioritisation will be essential to delivery of key actions

## **Budget**

39. Corporate Services spans both social services and housing functions such as Supporting People. The budget and major variations for the social services funding

which require reporting are set out below together with the actions to be taken to contain expenditure within budget

CORPORATE SERVICES	Budget £'000	Variation £'000	Variation %
Corporate Support – underspend on staffing due delay in appointing staff to the ISIS implementation team.	143	-13	-9.1
Finance - underspend on staffing due to vacant posts	478	-30	-6.3
Saving due to staff appointed on lower grade than outgoing staff	0	-30	0
Other minor variations	1,303	0	0
<b>Total Corporate Services</b>	<b>1,924</b>	<b>-73</b>	<b>-3.8</b>
Use of Departmental Contingency		-350	
<b>Total Corporate Services to find</b>		<b>-423</b>	<b>-21.9</b>

## Corporate Priorities

40. The original service plans agreed by the Executive set out details of the various corporate priorities that this set of service plans contribute to.

## Financial Implications

41. Summary Position - The original budget estimate approved by Members was £31.9m. After approval of savings and growth and other items, including insurance and recharge adjustments, the approved budget is £31.7m. This review indicates an overspend of £1,520k (4.8%) to the approved budget, compared to the first monitor which highlighted a potential overspend of £1,702k. If the actions being taken are achieved, the overspend could reduce to £648k, an increase of 2.2% to budget.

Growth and Savings - As part of the budget process members agreed growth items of £305k. In order to balance the council's overall budget, savings of £552k were also agreed. £49k worth of growth and £65k of savings have slipped due to delays in re-providing Windsor House as an EMI complex and retendering of the Community Support contract respectively.

Virements - The Director has been given delegated authority to transfer available resources of up to £50k from one budget head to another within the agreed delegation scheme. Individual budget holders use these virement rules throughout the year to amend budgets. Any avoidable overspends can therefore be met by identifying, or curtailing expenditure within other budget heads. The following variations have therefore been identified:

Description	£'000
Savings from new staff appointed on a lower spinal column point than the previous postholder	
<ul style="list-style-type: none"> <li>• Corporate Services</li> <li>• Learning disabilities</li> <li>• Older People &amp; Physical Disabilities</li> </ul>	+30 -3 -27



The Department is in the process in reconfiguring its Home Care Service. The new service is budgeted to break even over a full financial year and the overspend attributable to the Home Care Service should drop from £1,338k reported at Qtr1 to £625k by the year end. This projection has reduced significantly partly due to the targets set within the internal home care team. Savings should also be generated from the newly tendered external contracts partly due to the new arrangements whereby the independent sector providers will bill for actual contact time only. Previous arrangements with some providers allowed them to bill to the nearest fifteen minutes, irrespective of the time spent with the customer. It should be noted that if the efficiencies are not achieved within the in house team, if the contracted hours are not adhered to and if home care activity rises beyond the budgeted level, the overspend could once again rise towards the first quarter figure of £1,338k.

Further efforts continue to be made within the Department to reduce the overall overspend. Several posts are still being held vacant with only essential posts being released after authorisation by the Departmental Management Team (DMT).

## 42. **Other Implications**

### **Human Resources (HR)**

There are no immediate implications to report.

### **Equalities**

There are no immediate implications to report.

### **Legal**

There are no immediate implications to report.

### **Crime and Disorder**

There are no immediate implications to report.

### **Information Technology (IT)**

The issues related to IT are covered in the corporate services section of this report.

### **Property**

There are no immediate implications to report.

### **Other**

None

## **Risk Management**

43. The most significant organisational risks to be managed during this period will continue to be:
- The budget pressures and financial position as set out in earlier paragraphs
  - The implementation process for the new social care system

- The financial and organisational challenges affecting our main partner the PCT

## Recommendations

44. The Executive Member is asked to note and comment on the progress made in delivering Adult Social Services and Corporate Services plans.

Reason: To assure that the objectives for adult social services are being delivered in line with the agreed service plans

45. The Executive Member is asked to note and comment on the projected overspend on adult social services and the measures taken and planned to reduce this.

Reason: To ensure that robust plans are in place to bring expenditure on adult social services much closer to the approved budget.

## Contact Details

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### Chief Officer Responsible for the report:

Bill Hodson  
Director

Report Approved  Date 18/11/06

Debbie Mitchell  
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### Specialist Implications Officer(s)

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Wards Affected:

All

For further information please contact the author of the report

### Background Papers:

#### Annexes

1. Balanced scorecard for Older People and Physical and Sensory Impairment
2. Balanced scorecard for Learning Disabilities
3. Balanced scorecard for Mental Health
4. Balanced scorecard for Corporate Services