

#### **Health Overview & Scrutiny Committee**

19 December 2012

Report of the Director of Adults, Children & Education

# 2012/13 SECOND QUARTER FINANCIAL & PERFORMANCE MONITORING REPORT – ADULT SOCIAL SERVICES

#### **Summary**

This report analyses the latest performance for 2012/13 and forecasts the financial outturn position by reference to the service plan and budgets for all of the relevant services falling under the responsibility of the Director of Adults, Children and Education.

## **Financial Analysis**

- Within Adult Social Services budgets financial pressures of £3,783k are being projected. There was growth of £1,500k included in the adult social care budgets for 2012/13, but despite this it remains challenging to address the increase in demand for services. All areas of the directorate have been examined, and mitigation options within adult services of £1,165k have been identified, that bring the forecast outturn for the service down to £2,617k, representing 5.6% the £47,135k net budget.
- Pressure on Adult Social Care budgets is, of course, very much a national and a topical issue. In the last couple of months, one Council (Barnet) has attracted national publicity for publishing a graph that shows that within 20 years, its entire budget will be swallowed up by social care costs. The LGA has also conducted a more recent modelling exercise that predicts a 29% shortfall between revenue and spending pressures by the end of the decade.
- A further piece of work by the LGA indicated that Adult Care costs for York could increase 33% by 2020 and that being the case, even with a 2% increase in council tax each year, Adult Care would still account for half the council's expenditure in the 2019/20 financial year.
- The latest figures for demographic trends indicate that there has been an increase of over 30% in the number of over 85's between the 2001 and 2011 census data. Further projections indicate a further 9% increase in over 85's by 2015 and 21% by 2020 with a 35% increase in over 90's by 2020. This means not just an increase in the numbers of older people requiring care, but also more people having complex and more costly care needs for longer periods of time.

- The strategy to address these trends and their incumbent pressures has been to develop early interventions that address needs early and prevent the escalation into more complex care needs and more expensive care packages. This means that whilst the numbers of people supported by social care packages are not increasing, they have more complex needs so the costs of those packages are increasing. Local health provision is under strain and increasingly social care is being asked to support people who would previously have received health care support. With developments in medical science young people with complex needs are living for longer and moving from children's services to adult services, where they can need intensive support to keep them safe and able to live a full life. 35 young people have moved from children's to adult services in the last 2 years, which is a trend we would not have seen even 5 years ago.
- There is also a shared ambition across local government and health agencies to see health care delivered closer to home. This is underlined in York by the need to work as a community to address the budget deficit within the local health care system. The North Yorkshire and York Review highlighted the need for more joined up working and the need to reduce hospital admissions and lengths of stay. This approach does mean that more people will require social care support and this is currently an area of major concern as early discharge from hospital leads to people with complex care needs requiring very expensive care within their community.
- 8 We have seen increasing numbers referred from the hospital for discharge support over the last two years:
  - Average of 125 a month in 2010-11
  - Average of 135 a month 2011-12 and this trend is continuing
- People are leaving hospital on average 7 days earlier this year. This means that they require more social care for longer. This is a positive indicator for delivery of the care closer to home strategy, but progress in one part of the system brings pressures in other parts. Top level discussions are taking place with the GP commissioners and the Hospital Trust to consider this problem and seek mitigations.
- Homecare The Homecare service has been substantially redesigned and has been successful in signposting customers with low level needs to other forms of provision. This has meant that the number of customers has remained stable despite the growth in the number of potential customers, but it does also mean that the customers receiving the service have more complex needs. This is one reason why, despite unit costs going down following the outsourcing of the service weekly, spend on our home care contracts has increased from £54k a week in July 2011 to £80k a week in July 2012. This results in a forecast financial pressure of some £2,531k.

- 11 Residential and Nursing Care The number of admissions to care homes has remained fairly stable, but as predicted the demographic pressures and the increasing ability to support people at home for longer means people are needing more intensive support as they enter care homes. This is leading to higher costs in nursing homes and, for some residents, additional 1:1 support to keep them safe. In addition, unbudgeted fee increases of 1% have been approved in April and October. All these factors have resulted in a forecast financial pressure of £492k.
- 12 Demographic pressures are also evident in Adult Transport with a forecast overspend of £264k.
- 13 Vacancies in small day services (£220k) help offset the overall forecast Adult Services overspend.

#### **Mitigation Options**

- 14 All areas of the directorate have been reviewed and work is ongoing within the Directorate Management Team to progress on a range of mitigation proposals, although this is not without some potential impact on customers and services:
  - Vacancy freeze measures are being strictly enforced across the directorate, including relief staff and short term cover. Other expenditure will only be incurred to meet statutory obligations, or where the well being of a vulnerable person could be compromised.
  - Contracts for care provision are being reviewed and opportunities taken to reduce the level of contracted spend where possible, and demand allows.
  - Options for utilising reserves and grants will be taken where a consequent general fund revenue saving can be generated.
  - Charges for services are being reviewed to consider the options for increased income generation.
  - Vacant beds within our Elderly Persons Homes will be used whenever possible for planned respite care.
  - All options to delay the start of planned investment in new or revised services will be considered.
  - Decision making processes for care packages and support are being reviewed to ensure high cost arrangements are thoroughly scrutinised. All high cost packages have to be authorised by a Spend Panel, including The Assistant Director, Group Managers and Commissioning & Contracts Manager to ensure the needs are evidenced and eligible and that the costs are in line with market rates.

## **Performance Analysis**

Of the 24 in year indicators, eight are green, indicating that they have achieved expected target for Q2; six are amber which indicate that although the target for Q2 has been missed, they are within an allowed tolerance and 9 are marked as red which indicate that they have missed target and are outside of tolerance. Two measures have only Q1 performance noted as due to collection and verification processes nationally, information relating to Q2 will not be available until December 2012.

		11/12		12/13					
Code	Council Plan Link	Description of PI		Ye ar En d		Qtr 1	Qtr 2	Qtr 3	Year End
		Customers & Carers	Target	-	Target	10. 0%	13.5 %	17. 5%	
A&S1C Part2 (NPI 130)	Protecting Vulnerable people	receiving Self Directed Support (Direct Payments ONLY)	Actual	-	Actual	10. 6%	11.9	-	<b>20.0</b> %
A&S1C REGION AL	Protecting Vulnerable people	Customers & Carers receiving Self Directed Support (Direct Payments and Individual Budgets)	Target	-	Target	70. 0%	73.3 %	76. 6%	
			Actual	65. 9%	Actual	73. 6%	73.1 %	-	80.0
		Adults with learning	Target	67. 0%	Target	18. 5%	37.0 %	55. 5%	
A&S1G (NPI 145)	Protecting Vulnerable people	disabilities in settled accommodat ion	Actual	73. 1%	Actual	8.0	<b>19.8</b> %		74.0 %

			11/12		12/13				
Code	Council Plan Link	Description of PI		Ye ar En d		Qtr 1	Qtr 2	Qtr 3	Year End
A&S1E	Protecting Vulnerable	Adults with learning	Target	5.7 %	Target	2.8	5.5 %	8.3	10.0
(NPI 146)	people	disabilities in employment	Actual	10. 3%	Actual	2.7	8.4 %		%
		Permanent admissions	Target		Target	22	84	134	
A&S2A	Protecting Vulnerable people	ecting to residential erable & nursing	Actual	214	Actual	22	82		214
	Protecting	Admissions - Permanent	Target		Target	20	81	127	
	Vulnerable people	(65+) / Per 1000 pop	Actual	205	Actual	35	78		205
	Protecting Vulnerable people	/ulnerable / (18-64) / Per	Target		Target	2	3	7	
PAF C73			Actual	9	Actual	1	4	-	9
Delayed	Protecting Vulnerable people	Average weekly number of CYC Acute	Target	7.9 8	Target	7.9 0	7.90	7.9 0	7.00
Discharg V			Actual	8.6 9	Actual	10. 46	8.67	-	7.98 %
		Average weekly	Target	4.4	Target	3.8	3.8	3.8	
Delayed Discharg es 2	Protecting Vulnerable people	number of reimbursable delays (people)	Actual	4	Actual	5	4		3.8
Delayed Discharg es 3	Protecting Vulnerable people	Average Protecting weekly Vulnerable number of	Target	41. 44	Target	33. 3	33.3	33. 3	
			Actual	41. 25	Actual	52. 07	46.4 1		33.3
Delayed Discharg	Delayed Protecting Vulnerable people		Target	215 .5	Target	40. 0	98.0	152 .0	215
•		l dave d	days cost	Actual	.5	Actual	67. 70	125. 30	

			11/12		12/13				
Code	Council Plan Link	Description of PI		Ye ar En d		Qtr 1	Qtr 2	Qtr 3	Year End
		Timeliness of social	Target	-	Target	80. 0%	80.0 %	80. 0%	
A&SNPI 132 (Part1)	Protecting Vulnerable people	care assessment - Commence ment of Assessment within 2 weeks.	Actual	-	Actual	25. 0%	28.8 %		80.0 %
		Timeliness of social	Target	-	Target	80. 0%	80.0 %	80. 0%	
A&SNPI 132 (Part 2)	Protecting Vulnerable people	/ulnerable   assessment	Actual	-	Actual	42. 9%	51.4 %		80.0 %
A&SNPI 133	Protecting Vulnerable	Timeliness of social care	Target	90. 0% 88.	Target	90. 0% 89.	90.0 % 89.1	90. 0%	90.0
100	people	packages	Actual	6%	Actual	8%	%		70
		Carers receiving	Target	25. 6%	Target	6.3 %	12.5 %	18. 8%	
A&S NPI35	Protecting Vulnerable people	needs assessment or review and a specific carer's service, or advice and information	Actual	24. 0%	Actual	9.2 %	14.6 %		25.0 %
		Joint Assessment	Target	-	Target	20	15	10	_
A&S NPI35 a	Protecting Vulnerable people	s that are unlinked on Fwi to Carer - snap shot	Actual	21	Actual	20	32		0

			11/12		12/13				
Code	Council Plan Link	Description of PI		Ye ar En d		Qtr 1	Qtr 2	Qtr 3	Year End
	Drotooting	ecting Separate erable Assessment	Target	_	Target	180	150	125	
A&S NPI35 b	i Wilheranie		Actual	207	Actual	214	179		100
A&SD39	Protecting Vulnerable	Statement of	Target	96. 0%	Target	97. 0%	97.0 %	97. 0%	97.0
/ lacboo	people	Needs	Actual	96. 8%	Actual	96. 3%	96.7 %		%
A&SD40	Protecting Vulnerable	All services	Target	90. 0%	Target	22. 5%	45.0 %	67. 5%	90.0
AGOD40	people	Reviews	Actual	85. 8%	Actual	36. 9%	56.1 %		%
A&SD54	Protecting Vulnerable people	Equipment - 7 days	Target		Target	96. 0%	96.0 %	96. 0%	96.0
AQSD34			Actual	96. 8%	Actual	97. 1%	96.0 %		%
RAP A6	Protecting Vulnerable people	Assessment s missing Ethnicity	Target	5.0 %	Target	5.0 %	5.0 %	5.0 %	less than
IVAI AU			Actual	2.9	Actual	7.1 %	3.7 %		5%
RAP P4	Protecting Vulnerable people	Services missing Ethnicity	Target	5.0 %	Target	5.0 %	5.0 %	5.0 %	less than
INAF F4			Actual	3.8	Actual	3.7 %	3.5 %		5%
	Protecting	Number of vulnerable	Target	72. 9%	Target	72. 3%	72.3 %	72. 3%	
SPKPI1	Vulnerable people	people achieving independent living (%)	Actual	69. 1%	Actual	65. 5%	Dec 12		72.3 %
		Number of vulnerable	Target	98. 6%	Target	98. 6%	98.6 %	98. 6%	
SPKPI2	Protecting Vulnerable people	people who are supported to maintain independent living (%)	Actual	98. 4%	Actual	98. 1%	Dec 12		98.6 %

- Adults with learning disabilities in settled accommodation: Performance here has not reached target for Q1 and Q2. Some of this variation can be attributed to the way in which reviews fall due in the year, i.e. there are a larger proportion of reviews due in Q3 and Q4, however there is a reduction in the performance between this quarter and the same period last year. This may be attributed to the number of overdue reviews in quarter (51). Group managers are looking at ensuring that this backlog of reviews is dealt with.
- 17 Average weekly number of CYC Acute delayed discharges / Average weekly number of bed days / Total bed days cost. The pace and volume of hospital discharges continues to increase. The referral rate in September exceeded that of August, and for the year to date referrals are up over 8%. The measures taken to mitigate this trend have included increasing the capacity of the contracted out reablement service and work with health colleagues for earlier notification to allow anticipatory planning to take place to ensure prompt discharge.
- Timeliness of social care assessment Commencement of Assessment within 2 weeks. / Timeliness of social care assessment Completion of assessment in 6 weeks. These local measures are not performing as expected and have failed to reach expected targets in Q1 and Q2. The fall off in performance of some of the teams which were consistently high in this measure until this year, was expected to improve in Q2, but has not. The teams have had issues with timeliness in the early part of the year due to resources managing duty responsibilities; this issue was identified and responsibilities have now been moved, and should allow for improvement, however due to the backlog of assessments accrued in this area performance is likely to get worse before it gets better.
- 19 <u>Unlinked Carers and Carers Separate Assessment waiting list</u>. There remains an issue where carers have not been linked on the case management system. The numbers have risen again since Q1 which was previously on target. There has been a reduction in this waiting list since last quarter from 214 to 179 including new entrants and while short of target and identified in red, represents progress. The service is now working towards a joint client and carer assessment as good practice unless there is an identified need to do separate assessments.

#### **Council Plan**

20 The information relates to the 'Protect Vulnerable People' strand of the Council Plan 2011-15.

#### **Implications**

The financial implications are covered within the main body of the report. There are no significant human resources, equalities, legal, information technology, property or crime & disorder implications arising from this report.

#### **Risk Management**

The overall directorate budget is under significant pressure. This is particularly acute within Adult Social Services budgets. On going work within the directorate may identify some efficiency savings in services that could be used to offset these cost pressures before the end of the financial year. It will also be important to understand the level of investment needed to hit performance targets and meet rising demand for key statutory services. Managing within the approved budget for 2012/13 is therefore going to be extremely difficult and the management team will continue to review expenditure across the directorate.

#### Recommendations

23 As this report is for information only there are no specific recommendations.

Reason: To update the committee on the latest financial and performance position for 2012/13.

#### **Contact Details**

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Specialist Implications Office	er(s) None					

#### For further information please contact the authors of the report

Wards Affected: List wards or tick box to indicate all

## **Background Papers**

Second finance and performance monitor for 2012/13, Cabinet 6 November 2012 **Annexes** 

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None