

Report of the Director of Adult Social Care and the Interim Director of Public Health

2015/16 First Quarter Finance and Performance Monitoring Report – Health & Wellbeing

Summary

- 1 This report analyses the latest performance for 2015/16 and forecasts the financial outturn position by reference to the service plans and budgets for all of the services falling under the responsibility of the Director of Adult Social Care and the Director of Public Health.

Financial Analysis

- 2 A summary of the service plan variations is shown at table 1 below.

Table 1 – Health & Wellbeing Financial Summary 2015/16 – Quarter 1 – July

	2015/16 Latest Approved Budget			2015/16 Projected Outturn Variation	
	Gross Expenditure £000	Income £000	Net Expenditure £000	£000	%
	Adult Assessment & Safeguarding	43,029	15,326	27,703	-369
Adult Commissioning, Provision & Modernisation	28,730	6,198	22,531	-82	0.4%
Director of Adult Social Care	4,425	4,752	-326	+274	84.0%
Public Health	9,035	8,690	345	-59	17.1%
Health & Wellbeing Total	85,218	34,966	50,253	-236	0.5%

+ indicates increased expenditure or reduced income- indicates reduced expenditure or increased income

The following sections provide more details of the significant potential outturn variations and any mitigating actions that are proposed.

Adult Assessment & Safeguarding (-£369k / 1.3%)

- 3 There is a net projected underspend of £66k on staffing budgets due mainly to some posts being held vacant pending a review of the service.
- 4 Residential and nursing care budgets are projected to underspend by £157k. This is due to a projected increase in Continuing Health Care income being secured of £391k, offset by the costs of a projected net additional placement requirement for 9 customers in excess of the number assumed when the budget was set.
- 5 Based on the number of Deprivation of Liberty Safeguards (DoLS) assessments carried out to date there is likely to be an underspend on this budget of £128k.

Adult Commissioning, Provision & Modernisation (+£82k / 0.4%)

- 6 There is a projected overspend of £132k within Older People's Home budgets. This is due to net additional staffing costs of £186k, mainly in respect of care assistant costs that have been maintained beyond the originally budgeted for dementia matters pilot period (+£74k) and additional service manager costs (+£49k). This is partly offset by net additional income of £50k due to higher than expected occupancy levels.
- 7 Small Day Service and Supported Employment budgets are projected to underspend by £141k due mainly to staffing savings resulting from a number of vacant posts across the service. In addition, based on current and projected placement numbers, there is expected to be a net underspend of £65k within the Supported Living Scheme budgets.

Director of Adult Social Care and Central Budgets (+£274k / 84.0%)

- 8 The directorate's budget for 2015/16 includes a requirement to deliver savings totalling £1.3m from the on-going work being undertaken on service transformation. To date savings of £1,064k have been identified leaving a budget pressure of £236k. Other pressures within the director's staffing budget and redundancy costs account for the remaining £38k projected overspend.

Public Health (-£59k / 17.1% or 0.7% of gross expenditure budget)

- 9 Within Public Health, the main projected underspends result from the redesign of services within the Substance Misuse budget (-£40k), and reviewing the pharmacy contraception service (-£28k). This does not take account of the proposed in year reduction in public health grant as government is still consulting on the method for apportioning this reduction. If taken as a straight 6.2% reduction across all councils this would be approximately £510k for York.

Performance Analysis

Adult Social Care

- 10 The majority of adult social care performance indicators are either cumulative throughout the year, or only measured annually, and at this stage we are awaiting the release of the national benchmarking data (due later this autumn) to provide contextual information on York's progress. Due to major changes in indicators for 15-16, it would not be valid to make year on year comparisons for ASCOF indicators for Q1. As the new indicator suite becomes more entrenched, we will be able to provide more detailed updates. At this point indications are that performance is continuing to show the same positive trends as at year end.

Public Health Indicators.

- 11 The **GP Health Check** data for 2014/15 shows that in York the same percentage of patients are offered checks compared with the national average, but take up is significantly lower in York (39% compared with 49% nationally).
- 12 The latest data on **sexual and reproductive health** shows that **under 18 conceptions** are continuing to fall in York. The current rate is 17.7 conceptions per thousand women aged 15-17 which is lower than regional (29.1) and national (23.9) averages. The rate of **under 18 abortions** was also lower in the Vale of York area compared with the regional and national average in 2014. The detection rate for **Chlamydia** is lower in York: a smaller % of the 15-24 population are tested in York (19.6%) compared with England (24.3%) and the % of people who test positive (7.8%) is slightly lower than the national (8.3%) and regional (9.2%) averages.
- 13 Data on the **seasonal flu vaccine uptake** for 2014/15 shows that York has a higher uptake for 65+ and pregnant patients compared with regional and national averages but a lower uptake for under 65's at risk. The uptake for under 65's at risk has now fallen for four consecutive years from 52.7% in 2010/11 to 43.9% in 2014/15 and is a cause for concern.
- 14 The 2014/15 figure for **smoking at the time of delivery** for the Vale of York CCG was 10.8%. This represents 349 known smokers out of 3,231 maternities. We are similar to the national average of 11.4% but significantly lower than the North Yorkshire and Humber average of 16.1%. The Vale of York CCG is currently meeting the national ambition of 11% by the end of 2015. Within the City of York however, we are not complacent and women who smoke during pregnancy will be one of the key target groups for Stop Smoking initiatives in 2016.

- 15 The **Child Health Profile** was updated in June 2015. York performed well on a range on indicators however breastfeeding initiation was below the national average. Work is taking place with partners across the city to promote and sustain breastfeeding in York. This has seen breastfeeding support groups being established which saw 89% of mothers consulted feeling more confident breastfeeding in public. This focus includes working towards UNICEF Baby Friendly Initiative accreditation for the city by 2020.
- 16 The **Local Alcohol Profiles for England (LAPE)** were issued in June 2015. Compared with the national average, York has significantly better outcomes on a number of indicators including lower mortality from chronic liver disease, fewer alcohol specific hospital admissions and fewer claimants of benefits due to alcoholism. When compared with similar local authorities, however, York has more alcohol specific hospital admissions and more admission episodes for alcohol related conditions. A full Alcohol Needs Assessment is being undertaken at the moment which will inform action planning to reduce alcohol-related harm.
- 17 The new **Tobacco Profile** for York was released in August 2015. There are some new indicators which suggest that smoking prevalence may be lower in York than previously thought. A new measure based on GP records shows adult prevalence to be **15.8%** in York compared with the 18.8% figure obtained from the Integrated Household Survey. The prevalence of regular smoking in 15 year olds based on a new survey is **5.3%** in York compared with the previous modelled estimate of 9.6%. The **cost per successful quitter** in York is **£312** which is higher than the national average of £283. **Smoking Attributable Admissions** in 2013/14 decreased very slightly.
- 18 The **Public Health Outcomes Framework** was updated in August 2015. York's outcomes against the England average are favourable, particularly for the wider determinants of health and health protection. When similar local authorities are used as the benchmark for York rather than the England average, fewer outcomes are rated better (12% v 29%) and more are rated worse (23% v 4%). Premature and preventable mortality and life expectancy (males) are highlighted as issues for York when similar local authorities are used as the benchmark.

Council Plan

- 19 The information included in this report is linked to the Protect Vulnerable People and Build Strong Communities elements of the Council Plan 2011-15.

Implications

- 20 The financial implications are covered within the main body of the report. There are no other direct implications arising from this report.

Recommendations

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

Reason: To update the committee on the outturn financial and performance position for 2015/16.

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Approved

Y

Specialist Implications Officer(s) None

Wards Affected: *List wards or tick box to indicate all*

All

For further information please contact the author of the report

Background Papers

2015/16 Finance & Performance Monitor 1, Executive 27 August 2015

Glossary of Acronyms Used in the Report

ASCOF- Adult Social Care Outcomes Framework

CCG- Clinical Commissioning Group

DOLS- Deprivation of Liberty Safeguards

GP- General Practitioner

LAPE- Local Alcohol Profile for England

UNICEF- United Nations International Children's Emergency Fund