## **Budget Summary and Forward Plan**

Adults & Safeguardi	ing	2015/16 £	2016/17 £	2017/18 £	2018/19 £	2019/20 £
Base Budget Virements		102,912,312 1,084,355	96,927,667	95,951,450	94,455,083	93,270,265
		103,996,667	96,927,667	95,951,450	94,455,083	93,270,265
<u>Efficiencies</u>	Savings through supporting people in the community as opposed to high cost care packages and residential placements. The 'Community Offer' delivers savings through supporting people in the community and offering alternative ways to meet statutory social care needs as opposed to high cost care packages and residential	(858,000)				
EIA 1	placements. This will lead to increased use of universal services, enablement, telecare, equipment and direct payments instead of a traditional home care and residential care.					
	The 'Community Offer' will be delivered by multi-disciplinary teams of social workers, occupational therapists, telecare and direct payments advisors.  The net cost of supporting someone on a community alternative is cheaper than traditional care. This is an on-going initiative.					
EIA 2	Savings through supporting people in appropriate housing as opposed to high cost placements Reduction in cost of residential third party placements by: Innovative use of support and housing options to deliver savings whilst ensuring promoting choice and independence for customers. The savings proposals are:	(704,000)				
	Full year impact of Re-commissioning our Floating Support contract     Develop additional Sheltered Plus accommodation - Housing options will be subject to discussion and consulation with individual service users on their individual needs on a case by case basis.					
	Savings through supporting people by increasing investment in carers support to prevent/reduce the need for funded care Savings to be achieved through efficiently coordinating and personalising services for carers so that there is a clear 'Carers Offer' throughout the carers journey. This will help the carer sustain their role, and reduce the need to access specialist services including hospital and residential care.	(550,000)				
EIA 3	In 2012/13 2,179 carers had an assessment, of these it is assumed					
	that 25% support individuals that would otherwise be in residential care. Increasing this by 5% would generate sufficient savings to meet this target and aid people to live more independently with more choice and control. However this will in practice mean that people will receive lower cost packages which could be perceived negatively.					
	Savings through decreasing external third party expenditure on day care costs by increased access to universal leisure services and specific renegotiations  Savings to be achieved through:	(660,000)				
EIA 4	Partnership working with leisure services to offer more mainstream leisure activities reducing dependence on specialist day care provision, using a dedicated leisure co-ordinator.     Reviewing provision of transport in relation to day activities.					
	Savings through sharing funding arrangements with MHT	(401,000)				
EIA 5	Individuals who have received treatment under the mental health act on a section 3 at the point of discharge are subject to section 117 aftercare. There is an agreement currently that anyone subject to S117 will automatically be jointly funded between health and social care. The proposed changes would not impact on the Council's ability to provide these services.					
EIA 6	Savings through reduction in staffing costs Reductions in back office transactional functions through new ways of working and exploring new innovative models. Savings through HRA investment in new build which will result in	(300,000)				
	reduction in high cost placements Savings to be achieved through increasing independent living options for Younger Adults with physical/learning disabilities and Mental Health issues. This proposals includes a new build programme using HRA monies for wheelchair accessible housing	(1,010,000)				
EIA 7	and working with Barnet Homes and the private rented sector to source suitable accommodation for younger adults. Housing options will be subject to discussion and consultation with individual service users on their individual needs. Barnet Homes will carry out specific consultations with tenants and RE through the statutory planning process, where required.					
EIA 8	Savings from renegotiation of existing contracts Procurement savings achieved through: - working with providers to contain inflationary pressures	(600,000)				

	Savings through reduction in expenditure by working with CSG provider	(2,000,000)				
EIA 9	Stretch of demand management and efficiency saving proposals to be identified through working with CSG provider to improve efficiency and self service, targeting the following:  - Developing new model of Social Care in relation to Care Act  - Reducing demand for high cost placements by providing advice and signposting at first point of contact  - Reducing costs of third party spend through procurement activity					
	Combining Adults Social Care duty functions and elements of the assessment process with the Adult Social Care Direct in CSG					
EIA 10	Savings through reduction in placement costs for residents permanently settled out of the borough Where an individual has chosen, as they have capacity, or have moved to another authority in accordance with their families' wishes, (ascertained through a best interest decision where an individual does not have capacity), the receiving authority will be given 3 months' notice regarding transfer of responsibility, which includes any required social care funding. This proposal is not expected to neoatively impact service deliverv. Budget proposals for 2016-20 include efficiency savings on third party contracts by approximately 2% per annum. The main areas of contract spend in this area are for the provision of care. The overall budget envelope includes provision for contract inflation of 2.5% per annum, so this saving could be made either from containing inflation as a contract set acceptance of the provision of th	(838,000)	(665,783)	(652,467)	(639,418)	(626,629)
	on contracts, commissioning different models of service delivery or through improved contract management and negotiation of better rates. The bulk of contract spend in Adults and Communities is on contracts for care services with external providers, including Your Choice Barnet, Fremantle Trust, Jewish Care (the top 3 contracts by overall spend), home care providers, meals on wheels, equipment. There is only 1 block contract - for residential care with Fremantle trust. Other contracts are based on purchasing specific care for individuals (spot/personal budget) without guaranteed volumes. The remit of the Committee also includes contracts with the voluntary sector for prevention services (e.g. Age Uk Barnet, Carers Centre).					
	Budget proposals for 2016-20 include workforce efficiency savings of approximately 10% of the relevant delivery unit employee budgets. As government funding for local government services continues to reduce, all Council delivery units will need to review their workforce budgets to ensure that they can improve efficiency by 10% by 2020. Corporate initiatives such as the review of terms and conditions, and the unified pay project, will support delivery units in achieving this saving. Delivery units will also need to review performance management, use of agency staff, management layers and staffing levels p to ensure that this saving can be achieved.		(375,000)	(441,600)	(441,600)	(441,600)
	Identification of alternative delivery model(s) and / or shared service options that can reduce the cost of the adult social care system (staffing costs) and then better utilise the demand management levers (e.g. self-management, early intervention, telecare, enablement, creative support planning) to reduce care costs.		(226,434)	(579,000)	(579,000)	(578,000)
		(8,424,000)	(1,267,217)	(1,673,067)	(1,660,018)	(1,646,229)
Reducing Demand &	Promoting Independence  Continuation of the 'Community Offer' delivering savings through supporting people in the community and offering alternative ways to meet statutory social care needs as opposed to high cost care		(350,000)	(350,000)	(300,000)	
	packages and residential placements. This will be applied to existing and new service users. This will lead to increased use of universal services, enablement, telecare, equipment and direct payments which cost less than traditional home care and residential care. Service users will therefore receive lower personal budgets whilst ensuring eligible needs are met. The savings will be driven out by social workers incorporating elements in care and support plans which cost less than traditional care or that do not require Council funding. This might include support from volunteers, use of local clubs/libraries, as examples.					
	Helping older people with dementia to remain at home This proposal recommends investment in order to develop an intensive evidence-based model of support for Barnet carers of people with dementia, in order to increase carer sustainability, delay residential care and manace adult social care demand. Generating general fund savings from providing specialist integrated		(125,000) (95,000)	(125,000)	(125,000)	(125,000)
	housing for older people based on the provision of 52 flats with 50% high needs, 25% medium needs and 25% low needs.  Implement a 0-25 disabilities service that better brings together health, care and education to ensure that growth is enabled for		(125,000)	(125,000)	(125,000)	(125,000)
	young people with disabilities.  This should reduce the cost to adult social care arising from lower care package costs for those transitioning at the age of 18 over this period. than has been the case for past transitions cases.					
	Support to help people remain caring and in work by increasing support to carers and employers in the borough enabling carers to remain in work and caring. Savings are from cost avoidance of increased homecare support.  Increasing choice in retirement and for younger disabled adults - investment in an increased advice and support service promoting adaptions and moving to a more suitable home. Savings are based on incremental impact of adaptation/move avoiding costs of enablement, increased homecare and residential care admission.			(141,300)	(151,800)	(405,000)

	Increasing choice in retirement - 40% of people want to retire abroad + providing information & support through a national partner with appropriate expertise will help them realise this. Savings based on cost avoidance of homecare based on people taking advantage of the service and delaying their take up of social care.				(162,000)	(162,000)
	Develop methods of increasing numbers of personal assistants in Barnet, as an alternative to home care agencies. Service users directly employ the personal assistant and therefore are able to personalise and control their care and support to a very high level. Savings are based on an average reduction of care costs per user per year of £1,000, as a result of increased control of care and support plans and lower over head costs than home care agencies. Currently (October 2014), 1,788 service users receive their home care support from a home care agency.		(60,000)	(140,000)		
	Review support packages and develop support plans (with appropriate enabling / transition) to meet needs at a lower cost. This is likely to include the following: Increase the supply and take-up of supported living and independent housing opportunities supporting transitions from those currently in residential settings. Develop a more creative and cost effective review and support planning process. Ensure that this considers how technology can enable people with learning disabilities to live more independently. Improve the carer's offer and support planning process to ensure carers feel able to continue to support an individual for as long as they can. Stimulate the market to encourage providers who can effectively focus on enablement and development. Develop the employment support offer for adults with learning disabilities and ensure there are sufficient employment opportunities available in the borough.		(425,000)	(425,000)	(425,000)	(425,000)
	Reduction in grant funding for voluntary organisations providing universal / low level / early intervention services		(59,000)			
	universal/ low level/ early intervention services	0	(1,239,000)	(1,591,300)	(1,288,800)	(1,242,000)
<u>Service Redesign</u>	Integrated Care for frail elderly/over 50 years with long-term conditions The proposal to develop a 5 tier model to support the development of an integrated health and social care system for older frail people was agreed at the Health and Wellbeing Board in March 2014 and has formed the key element of the Council and CCG's national Better Care Fund plan.		(150,000)	(250,000)	(250,000)	(350,000)
		0	(150,000)	(250,000)	(250,000)	(350,000)
<u>Pressures</u>	Demographics pressures due to general trends and price as well as transitions of children joining adult service areas Deprivation of liberty safeguards (DoLS)	800,000 555,000	1,680,000	2,018,000	2,014,000	2,375,000
	 	1,355,000	1,680,000	2,018,000	2,014,000	2,375,000
Budget		<b>96,927,667</b> (7,069,000)	<b>95,951,450</b> (976,217)	<b>94,455,083</b> (1,496,367)	<b>93,270,265</b> (1,184,818)	<b>92,407,036</b> (863,229)