

Appendix A: Revenue Savings Programme

Line ref	Opportunity Area	Corporate Plan Priority: Fairness, Responsibility or Opportunity	Description of saving (2016/20)	Consultation (How are we consulting on this proposal)	Impact Assessment			Budget	Total savings (All years)					Variance Analysis
												2017/18	2018/19	
					Impact on Service Delivery	Impact on Customer Satisfaction	Equalities Impact	£000	£000	FTE	£000	FTE		
Efficiency														
E1	3rd Party Spend (Inc. Prevention)	Fairness	<p>Notting Hill Housing Trust (NHHT) and LB Barnet entered into a Surplus and Deficit (SDA) agreement dated 31/03/03 where it was agreed LBB would pay NHHT an annual revenue subsidy of £294k,in relation to building of care resource centres. The agreement expires on 31.3.2018, therefore, £294k contributes to the 3rd party efficiency savings line. The operation of the centres is not affected.</p> <p>The Surplus and Deficit (SDA) agreement dated 31/03/03 was drafted in acknowledgement that the cost of developing the new homes and resources centres to be made available to LB Barnet would not be fully covered by the profits resulting in a forecasted deficit. On resolution it was agreed that LB Barnet would make up the shortfall by way of revenue subsidy. The subsidy would be paid to NHHT in equal incremental payments, calculated based on the total shortfall divide by the number of years remaining of the 15 year contractual agreement which, at the time, stood at 9 years to commence in 2010 and complete in 2018.</p>	No service-specific consultation required.	The expiry of this contract is a commercial matter and will therefore have no impact on service delivery.	The expiry of this contract will have no impact on customer satisfaction	The expiry of this contract is a commercial matter and an equalities impact assessment is not required.	294	(294)		0		(294)	(100.00)%
E2	Staffing Efficiencies	Fairness	The saving in 2019/20 is anticipated from improved processes and productivity from the implementation of a new IT case management system.	This will be subject to formal consultation with staff Consultation material relating to previous years staffing savings can be found under item nine at: http://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=174&MId=8584&Ver=4	The new IT system will have been live for a year to ensure changes to processes have been successfully embedded and changes to staffing capacity can be implemented without impacting service delivery.	It is not expected that these changes will impact on customer satisfaction. Neutral impact	Full EIA will be undertaken as proposals develop and prior to commencement of formal consultation.	12,919	0		(213)	4	(213)	(1.65)%
E3	Transformation of Your Choice Barnet supported living and day-care services	Efficiency	Committee agreed a new contract with Your Choice Barnet which included a transformation of service model to deliver better outcomes. Savings in the first two years of the transformation programme have been delivered and in the final two years will continue with new services and helping individuals progress towards independence as well as more efficient use of buildings and some reductions in the unit price of care. None of the current services will close and any changes to individual packages will be agreed with individuals, families and carers. The Adults and Safeguarding Board took a report on the proposed savings in June (https://barnet.moderngov.co.uk/documents/s32576/Your%20Choice%20Barnet%20Agreement%20-%20FINAL.pdf). Paragraphs 3.1 – 3.20 detail the areas the savings will come from over the next four years and paragraphs 9.4 to 9.9 provide further details on the methods being used.	Service specific consultation and one to one engagement took place between June-September 2016. http://barnet.moderngov.co.uk/documents/s32576/Your%20Choice%20Barnet%20Agreement%20-%20FINAL.pdf	Impact on delivery positive as individuals will be supported to undertake new activities and live more independently. YCB will be using a person centred approach to ensuring that the aspirations for individuals are fully met.	Consultation outcomes indicated that people welcomed these changes but needed to be assured that service users would be well supported to make these changes. The committee report on implementation of the new models at YCB (6th November 2017) sets out the reaction of service users and families to the new models.	Initial equalities analysis has been undertaken and indicates there is positive or neutral impact on service users, service users with learning disabilities and their carers, as changes to services will enable them to have services that better meets their aspirations for greater choice, inclusion and employment. http://barnet.moderngov.co.uk/documents/s32576/Your%20Choice%20Barnet%20Agreement%20-%20FINAL.pdf The EIA has been reviewed and the impact remains unchanged. The EIA will be kept under review as proposals develop.	6,129	(343)		(596)		(939)	(15.32)%
Total Income									(637)	0	(809)	4	(1,446)	
I1	Better Care Fund	Opportunity	The Better Care Fund (BCF) is a programme spanning both the NHS and local government which seeks to join-up health and care services, so that people can manage their own health and wellbeing, and live independently in their communities for as long as possible. This is income allocated to Adult Social Care to help provide integrated health and care services. As part of the BCF pooled budget the council is expected to receive a minimum uplift, it is anticipated that at a minimum the council will receive an uplift of 1.9% or 148k in 18/19 .	Service specific consultation is not required.	There is no impact on service.	There is no impact on service.	There is no equalities impact.	7,939	(148)		(647)		(795)	(10.01)%
I2	iBCF	Opportunity	The 'Improved' Better Care Fund will continue to 19/20. In recent years, the council has seen a steady increase in referrals from acute hospitals. NHS referrals now account for 76% of all enablement use and over half of all adult social care referrals now come from the NHS. This income in the form of use of monies from the Better Care Fund. This avoids some reductions to adult social care that would be detrimental to the NHS.	Service specific consultation is not required.	There is no impact on service.	There is no impact on service.	There is no equalities impact.	5,373	0		(1,391)		(1,391)	(25.89)%
Total								7,939	(148)	0	(2,038)	0	(2,186)	

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Reducing demand, promoting independence														
R1	Savings through supporting people in the community as opposed to high cost care packages and residential placements	Responsibility	Continuation and further development of work to deliver savings through supporting older people in alternative ways, through a community offer of support, instead of high cost care packages and residential placements. This will be applied through our strengths based approach to existing and new service users and will lead to increased use of universal services, enablement, telecare, equipment and direct payments which cost less than traditional home care and residential care. Eligible needs will therefore be met by a lower personal budget. The savings will be delivered 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 and local clubs, for example.	Service specific consultation as part of the budget setting process for 2014/15 and 2015/16 budget, prior to the first year of the community offer initiative. https://engage.barnet.gov.uk/adult-social-services/community-offer One to one engagement and assessments will be carried out on a case by case basis.	Will lead to changes in the way in which the needs of eligible individuals are met but eligible needs will continue to be met. This is a continuation of an existing savings programme.	Eligible needs will still be met. However, some users/relatives may still prefer traditional care and find creative options less palatable	EIA/s for service user impact were undertaken in 2013 and showed a positive/neutral impact on service users. EIA updated in October 2015 and impact on service users (older adults, service users with physical disabilities and learning disabilities and mental health needs) remains positive/neutral. This will be reviewed and updated if required prior to implementation of future savings. Cases will be assessed and reviewed on a case by case basis.	32,355	(100)		(100)		(200)	(0.62)%
R2	Carers Intervention programme - Dementia	Responsibility	An intensive evidence-based model of support for carers of people with dementia, in order to increase carer sustainability, delay entry to residential care and manage adult social care demand. The saving is modelled on 10 couples per year, and delaying admission to residential care by 22 months. The programme to deliver support to sustain carers of people with dementia to stay in their own homes has been developed internally.	One to one engagement with service users to be undertaken on a case by case basis. Engagement is occurring throughout programme delivery with users of the service.	Positive - this enhances the carers offer	Should increase	Positive. The impact of this service is positive and expands support for carers in Barnet and should result in more adults with dementia to remain in their own homes. Feedback from couples going through the programme is positive. The EIA has been revisited and the impact remains positive.	1,881	(160)		0		(160)	(8.51)%
R3	Extra-Care 1 (Moreton Court)	Fairness	Generating general fund savings from providing specialist integrated housing for older people based on the provision of 52 flats with 50% high needs, 25% medium needs and 25% low needs. Saving is modelled on the difference between unit cost of residential care and extra care for 53 people.	Qualitative research completed with older people and visits to extra care housing schemes, involving officers from Commissioning and Procurement, together with service user and carer representation. This included focus groups with service users of a local extra care housing scheme. Individual assessments will be carried out on a case-by-case basis with residents entering the setting.	More choice for older people, reduced take up of residential care	Should increase	Equalities impact analysis has been undertaken and indicates there is a potential positive impact on service users over 65. The positive impact is highly likely based on outcomes from national ECH research / best practice.	7,234	(465)		0		(465)	(6.43)%
R4	Independence of Young People	Opportunity	Implement a 0-25 disabilities service that better brings together health, care and education to ensure that growth is enabled for 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. Thorough review of all young people currently placed in residential care and activity is underway to enable young people to move into more independent accommodation options, improving outcomes and reducing cost to the Adult Social Care budget. Savings from the new ways of working, designed to increase service user independence, are also expected.	Service specific staff consultation was undertaken in September 2015. Coproduction and research work has been underway with parent and carer representatives since March 2015. One to one engagement and reviews will be carried out on a case by case basis.	Should lead to better outcomes but may be difficulties in embedding new way of working.	Should improve independence of young people. Eligible needs and statutory duties will continue to be met. Some users and families may prefer traditional care and this could lead to reduced satisfaction.	Initial equalities analysis has been undertaken and indicates there is a potential positive impact on service users with disabilities. https://barnet.moderngov.co.uk/documents/s22214/0-25%20Disability%20service.pdf	28,949	(150)		(100)		(250)	(0.86)%
R5	Assistive Technology	Responsibility	Increased use of assistive technology (e.g. sensors, alarms, monitoring systems) both in individuals' homes and in residential and nursing care, is expected to lead to a reduction in care package costs (e.g. reduction in requirement for waking/sleeping nights). The Council has procured a partner to co-develop and implement this approach, which was implemented in April 2017.	Provider engagement has taken place prior to procurement. Working group of service users and carers has helped inform implementation approach.	Increased use of telecare/ assistive technology will support individuals to remain at home for longer, or reduce reliance on more traditional service types. Staff have been trained to identify service users who may benefit from assistive technology, and significant provider engagement is underway to introduce telecare into supported living and residential/ nursing care.	Telecare can enhance individuals' feelings of safety and enable individuals to remain independent and in their own homes for longer. However users and carers who prefer traditional care may be less satisfied.	Initial equalities analysis has been undertaken and indicates there is a potential positive /neutral impact on staff and service users (older people, LD, PD, MH). The EIA has been reviewed and the impact remains positive. This will be kept under review as proposals develop.	3,607	(500)		(500)		(1,000)	(27.72)%

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R6	Older Adults - DFGs	Responsibility	Increasing choice for older adults and for younger adults with disabilities - investment in an increased advice and support service promoting adaptations and making homes more suitable. Savings achievement will depend on effective targeting at suitable service users and through the use of the DFG grant, savings based on incremental impact of adaptation/move avoiding costs of enablement, increased homecare and residential care admission for c.20 adults.	Continuation of existing programme, consulted on within previous MTFS consultations. One to one engagement and assessments will be carried out on a case by case basis.	Should improve	Should improve	Initial analysis suggests that there should be a positive impact because the grant is designed to make improvements in housing for older adults and for younger adults with disabilities – This will promote choice and independence for these groups. Initial analysis also indicates that no staff and/or service user EIA is required because the proposal does not impact on service delivery or staff therefore it is not proposed to carry out further equality analysis.	4,206	(170)		(170)		(340)	(8.08)%
R7	Personal assistants	Responsibility	Increase the number of personal assistants in Barnet to provide a larger scale alternative to the use of 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 lower unit costs than home care agencies but assume all PAs are paid the national Living Wage.	One to one engagement and reviews will be carried out on a case by case basis.	Positive	Positive. Should improve - more choice.	EIA for service user impact has been undertaken and is currently showing positive impact on service users (older adults, people with physical disabilities and learning disabilities and people with mental health needs). The EIA has been revisited and the impact remains positive.	9,051	(50)		0		(50)	(0.55)%
R8	Support for Working age adults	Responsibility	Review support packages and develop support plans to increase independence, improve wellbeing and reduce costs. This is likely to include the following: step down accommodation setting to less intensive option e.g. residential to supported living, step up accommodation setting where there is a risk of carer breakdown, identify appropriate day opportunities for those in residential care, support individuals in gaining and maintaining employment, utilise care technologies to improve	One to one engagement and reviews will be carried out on a case by case basis.	Promotes independence and integration into communities. Will lead to changes in the way in which the needs of eligible individuals are met but eligible needs will continue to be met.	Moderate - likely to require changes to packages of care. Eligible needs will still be met but some users and their families may prefer traditional care and this could lead to dissatisfaction.	Equalities impact assessments for service user impact has been undertaken and shows positive /neutral impact on service users. The EIA has been reviewed and the impact remains positive.	28,949	(350)		(425)		(775)	(2.68)%
R9	Mental Health service users moving to step down/independent accommodation	Responsibility	Work has taken place to identify and review service users currently in high cost residential placements who have been identified as suitable for more independent living. Social Workers will continue to work with these individuals to ensure they continue to have all their eligible needs met but can become more integrated into their local community and enjoy greater independence. The saving is modelled on lower cost support plans as community alternatives are used instead of high cost care.	Individual consultation and engagement with individuals and their families as part of the care and support planning process. Service Users and families will continue to be at the centre of the process as any move-on plans are developed and supported.	There will be a need to secure suitable independent living accommodation. Social Care staff will need to deliver intensive recovery work to ensure services users develop skills to live more independently. Skills development will take place to ensure existing providers support the move on plans.	Satisfaction should increase for users who will secure more independence in their lives. However, satisfaction may decrease for those who prefer more traditional care.	Impact will be assessed on an individual basis. Should be a positive impact for individuals.	4,779	(250)		(375)		(625)	(13.08)%

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R10	Extra-Care Housing 2	Responsibility	Extra Care development of fully integrated service for older people to rent, offering a wide range of services as an alternative to more expensive residential care. Proposed scheme of 50 units based with 50% high needs, 25% medium needs and 25% low needs. Saving is modelled on a 10K saving per person per year, based on the difference between the costs of residential care and extra-care. Saving will be achieved if the scheme is targeted at those who would otherwise have their needs met by residential or other care.	Design principles agreed through consultation on Extra Care 1 (Moreton Court) will be applied in keeping with current best practice e.g. all flats fully wheelchair accessible. Service specific consultation will be undertaken if required. In addition Barnet Homes is carrying out a residents' consultation event on 25/10/17 about the identified site.	More choice for older people, reduced take up of residential care	Should improve	Full Equalities Impact Assessments will be undertaken as the site is confirmed and as potential residents are identified.	2,857	0		(400)		(400)	(14.00)%
Total									(2,195)	0	(2,070)	0	(4,265)	

Total identified savings								(2,980)	0	(4,917)	4	(7,897)	0
Savings Target								(5,161)		(4,497)		(9,658)	
Gap								(2,181)		420		(1,761)	

Original	(4,854)	0	(5,348)	4	(10,202)	
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Shortfall	1,874	431	2,305	
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