

Appendix B
Summary of Category C Savings Proposals

Ref	Portfolio	Committee	Title	2015/16 £000	2016/17 £000	2017/18 £000	2018/19 £000	Total Saving £000
C01	Adult and Health	Adult Social Care and Health	Direct Payments	98	1,671	-	-	1,769
C02	Adult and Health	Adult Social Care and Health	Older Adult Care Home Fees	-	750	-	-	750
C03	Adult and Health	Adult Social Care and Health	Development of Extra Care Housing and promotion of independent living in place of the current provision of 6 Care and Support Centres.	-	677	1,810	1,859	4,346
C04	Adult and Health	Adult Social Care and Health	Development of a single integrated meals production and delivery service	-	293	-	-	293
C05	Adult and Health	Adult Social Care and Health	Expansion of community-based care and support options	50	100	100	-	250
C06	Adult and Health	Adult Social Care and Health	Reducing the average cost of residential placements	500	1,000	1,000	-	2,500
C07	Adult and Health	Adult Social Care and Health	Strategic Commissioning - Review of Contracts	86	43	-	-	129
C08	Children's and Culture	Children and Young People	Children's Disability Services Review	-	-	1,180	-	1,180
C09	Place and Resources	Transport & Highways	Reducing Local Bus Service Costs	300	300	220	-	820
		Total		1,034	4,834	4,310	1,859	12,037



		Option Ref	C01
1. Service Area	Services for younger and older adults		
2. Option Title	Direct Payments		
3. Summary of Option			
It is proposed that the County Council will extend the use of pre-paid debit cards for providing a Direct Payment. Additionally it is proposed to reduce the budgeted spend on Direct Payments by 5%.			
4. Rationale / Evidence Base for the Option			
<div>1. People who are eligible for social care services have the option of the Council either arranging their care and support for them, or making a payment to them so that they can choose and purchase this for themselves. People choosing to arrange their services for themselves can now use a debit card which has their funding pre-loaded onto it to make paying for their services easier., The proposal is to move to these cards as the default option for all people using a Direct Payment, unless an exceptional case is made.</div> <div><ul style="list-style-type: none">• If people are assessed as needing support to manage their DP, the Council currently gives them money for this as part of their personal budget. People can choose their own provider for this support and the Council also has an accredited list of Direct Payment Support Service (DPSS) providers they can use.• People are now able to pay providers using a pre-paid debit card onto which the Council pre-loads their Direct Payment money. This has benefits for people using it as it automatically provides information to the Council's financial team. This means that people do not need to supply copies of bank statements to the Council, which would otherwise be the case. The card reduces the work associated with managing finances and helps more people to be able to do this independently, without the need for services from Direct Payment Support providers.• Some people are currently using DPSS providers for tasks that are relatively straight-forward, for example, to purchase care and support from an agency. Unless they are also employing Personal Assistants (PA) the pre-paid debit card could be used to enable them to carry out these tasks more independently.• The card can also more effectively manage money for people with fluctuating needs and is able to alert automatically the Council if funds are running low or are accruing unused in a person's account, which may trigger the need for a review and adjustment of the support plan and personal budget.• A model that promotes greater self-management of DPs will also promote people's independence and therefore support both implementation of the Adult Social Care Strategy and the Council's Corporate Digital Strategy.• The pre-paid debit cards offer the full range of banking services available from a conventional bank account.</div>			

- Alternative methods of supporting people to use their DPs will continue to be available.
 - The approach outlined complies with the current draft Care Act Guidance 2014 and will be reviewed to ensure that this remains the case following publication of the final guidance.
2. To over programme the Council's community care spend on Direct Payments (DP) by reducing the budgeted spend on DPs by 5% and seeking to recoup a minimum of 5% in unspent money to meet the reduced budget.
- Individuals, who decide to have their care needs met through a DP, receive 100% of the anticipated cost of their care and support package in their DP. In reality service users rarely use all of the care and support identified for them. This 'slippage' can occur for a variety of reasons including holiday, hospital admission, respite care, service user opting to cancel services or the provider failing to make the appointment.
 - No mechanism is currently in place to reflect a slippage rate for service users in receipt of a DP. This results in money 'sitting' in service user bank accounts, which then has to be retrieved following a review. This option for change seeks to reduce the Council's budgeted spend on DPs to reflect the predicted unspent element.
 - By introducing pre-paid debit cards as the default method of receiving a DP the County Council will receive alerts when a service user's balance falls or rises below an agreed level. Pre-paid debit cards enable the Council to receive spending reports directly from the card provider without the need for the service user to send in bank account statements, providing the opportunity to review if it is appropriate to recoup any funds that are not needed, or add additional funds.
 - The pre-paid debit card option will be discussed with service users already in receipt of a DP and individuals will be moved on to a pre-paid debit card on a case by case basis as part of normal review activity.
 - For those service users who receive their DP into a bank account, the Council will still require the service user to provide copies of their bank statements in order to understand the status of their account. In these instances a full review or audit of the DP bank account will be required and the service users will have to repay any excess money identified.
 - Based on the 2014/15 budgets, less the future savings already agreed, a 5% reduction would deliver approximate savings of £1.8 m.

5. What Will the Outcomes of the New Service Be?

All new DP recipients are currently offered a pre-paid debit card unless there are exceptional circumstances arising from individual needs. Extending this approach to existing DP users both supports self-management of DPs and reduces the level of administration for both the person using the service and the Council.

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?	GROSS £000	33,867	NET £000	33,867
WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?				
	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Gross Saving	124	1,697	0	1,821
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	-26	-26	0	-52
NET SAVING	98	1,671	0	1,769
WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET?	5.2%			

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Capital Costs	0	0	0	0
Revenue Costs	122	0	0	122

The cost associated with introducing pre-paid debit cards is estimated to be £26,000 a year. As this is an on-going cost, the annual cost has been factored into re-provision costs in section 6 above.

The implementation costs related to part 2 of this proposal (over programme the community care spend on Direct Payments and seek to recoup a minimum of 5% in unspent money to meet the reduced budget) are as follows:

- Temporary reviewing resource for one year of 4 FTE CCOs Grade 5. (assumes that only 40% of service users transfer to a pre-paid debit card in year 1 and that approximately 960 service users require a DP review or audit).

8. Projected Permanent FTE Reductions

WHAT IS THE CURRENT PERMANENT FTE STAFFING?				0.0
	2015/16	2016/17	2017/18	
WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?	0.0	0.0	0.0	0.0

9. Anticipated Impact

ON SERVICE USERS AND COMMUNITIES

(incl. considerations relating to vulnerable people and communities & equality)

- There is evidence that using pre-paid debit cards can improve access to a DP where a DP recipient is unable to open a separate bank account, as this is not required.
- Existing users of Direct Payment Support Services may not wish to change to a pre-paid debit card.
- The Council's policy to recover excess or unspent DP monies is not new. The option seeks to alter the way in which the Council targets the recovery of the unspent amount.
- Service users who would have had to use ongoing DP support service will have greater independence in managing their own finances.
- Service users concerns about having too much or too little money in their DP account will be addressed. This is a particular concern for people with fluctuating care needs
- The pre-paid debit card offers a safe and secure method for people to purchase their services
- Fewer people will require ongoing support to manage their Direct Payments from a DP support provider and the associated budgeted spend will therefore be reduced.

ON OTHER ORGANISATIONS / PARTNERS

The current accredited DPSS providers are not currently using cards but process all third party accounts through a banking process using a standard Sage business system to maintain separate individual accounts. They will need to re-align with the Council's offer for pre-paid debit cards or offer the existing service at a cost comparable to that associated with the new approach.

ON OTHER PARTS OF THE COUNTY COUNCIL

The main impact will be on the Council's Adult Care Financial Services Team who provide and manage pre-paid debit cards.

10. Initial Equality Impact Assessment

This proposal will affect older adults and younger adults with disabilities. An equality impact assessment has been undertaken for part 1 of this proposal which outlines mitigating action for any disproportionate, adverse or negative impact this proposal may have on these client groups. This includes the need to ensure that the current card provider's telephone service offers all groups access, including those with sensory impairments. The effect of part 2 of this proposal on protected groups has been considered and deemed to have no impact.

WILL A FULL EQUALITY IMPACT ASSESSMENT BE REQUIRED? (Y/N)	Y
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11. Risks and Mitigating Actions

- **Risk:** Possible challenges by service users, carers, suitable persons (these are people nominated to manage DPs where the service user lacks the mental capacity to do so) and providers who may prefer the current DP support model.
Mitigation: A training programme to support transformation and skills updates for in-house staff is in development and provider reviews are planned where the use of cards will be explored.
- **Risk:** The recovery of unspent monies described in the report is reliant on the wider roll out of pre-paid debit cards. If the Council was able to move only 30-40% of DP service users on to a pre-paid debit card, a process of individual reviews will still be required to identify unspent money.
- **Mitigation:** Contingency money to cover review activity in Year 1 has been built in to the proposal.



		Option Ref	C02
1. Service Area	Services for Older Adults		
2. Option Title	Older Adults' Care Home Fees		
3. Summary of Option			
To review the current five band pricing structure and produce a simplified care home fees structure which includes maintaining a quality recognition system. The review will include consideration of the requirements of The Care Act 2014.			
4. Rationale / Evidence Base for the Option			
<p>The Council's fee rates are based on five quality bands for both residential and nursing homes. This five-band fee structure has been in place since 2008. In addition, the Council introduced an enhanced payment for the Dementia Quality Mark in November 2013. This has resulted in a complex fee structure of 20 price points.</p> <p>A review of the care home fee structure is required which takes into consideration a number of factors including the new and extended responsibilities arising from the Care Act, 2014. The revised fee structure will continue to reward high quality care services.</p> <p>The Care Act requires local authorities to ensure that people are able to exercise choice and control over the services they receive, including services provided within residential and nursing care homes, and to ensure that the services are personalised and are meeting people's outcomes. At the same time, the Care Act requires local authorities to ensure the services they commission are cost effective and offer value for money. In accordance with these requirements, the review of the care home fee structure and fee levels will consider the following:</p> <ul style="list-style-type: none">• extending personalisation within care homes, including enabling service users to have a direct payment so that they can exercise choice and control over aspects of the care they receive within the care home• the position of the current care home market, including sustainability and provider viability, and consideration of the actual cost of care <p>The review will be undertaken within the context of the Council's budgetary position and the need to make further savings and within the context of the Council's strategic objective of promoting independence.</p> <p>In reviewing the five band pricing structure, the Council will consult on a more simplified fee payment structure which is transparent, equitable and consistent, not only for people who are funded by the Council but also for the benefit of people who pay for their own care. It is proposed that the Council will continue to implement a quality recognition system.</p>			

The average care home fee currently paid by the Council is £501.70 per week, while the mid-point of the current banding system for residential care is £471.00 per week. Should the Council move to a simplified flat rate system near to the current mid-point then the potential savings would be at least £650k.

Part of the process will include reviewing a small number of older adults' placements where the residents are currently funded at a different fee level outside of the current bandings framework. For example, those service users who have entered long term care as a younger person and stayed in the homes after reaching the age of 65. Younger adults' rates are usually higher than those paid for people aged 65 and over. Where needs are primarily related to age it may be appropriate to renegotiate fee levels. Based on seven placements identified to date, negotiating the fee at the older adults' rate may yield a saving of approximately £100k a year.

5. What Will the Outcomes of the New Service Be?

- A simplified fee structure would result in greater clarity about pricing and fee rates for Council funded service users and for self-funders.
- A transparent, equitable and consistent process to support personalisation in care homes and to enable some service users to access Direct Payments.
- It would simplify the process of payments for care home providers.
- No operational delivery changes are envisaged.
- A reduction to the Council of care home costs.

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?

GROSS	NET
£000	£000
69,705	42,427

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2015/16	2016/17	2017/18	TOTAL
	£000	£000	£000	£000
Gross Saving	0	750	0	750
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	0	750	0	750

WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET?

1.8%

The saving figure assumes that rates for all service users/placements are changed with effect from April 2016.

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Capital Costs	0	0	0	0
Revenue Costs	72	0	0	72

- 1 FTE Commissioning Officer/Market Development Officer at Band C
- 0.5 FTE Finance Officer/Data Analyst at Band C

8. Projected Permanent FTE Reductions

WHAT IS THE CURRENT PERMANENT FTE STAFFING?

0.0

	2015/16	2016/17	2017/18
WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?	0.0	0.0	0.0

0.0

9. Anticipated Impact

ON SERVICE USERS AND COMMUNITIES

(incl. considerations relating to vulnerable people and communities & equality)

- The fee and quality elements in the care home market will be easier to understand.
- For younger adults to older adults rates only – risk of increased costs through possible third party payments.

ON OTHER ORGANISATIONS / PARTNERS

Reduction in funding may mean that some care home providers would see a reduction in turnover

ON OTHER PARTS OF THE COUNTY COUNCIL

10. Initial Equality Impact Assessment

This will be ascertained in a full Equality Impact Assessment.

WILL A FULL EQUALITY IMPACT ASSESSMENT BE REQUIRED? (Y/N)

Y

11. Risks and Mitigating Actions

Risk: The proposal may be subject to challenge from care home providers.

Mitigating action: A robust consultation and engagement plan will be implemented to ensure that consultation is both broad and representative.



		Option Ref	C03
1. Service Area	Older Adults Care & Support Centres		
2. Option Title	Development of Extra Care Housing and promotion of independent living in place of the current provision of 6 Care and Support Centres		
3. Summary of Option			
<p>The Council is building on the success of existing Extra Care services within the county. This option proposes to develop extra care housing and alternative high quality care services in place of our current provision of Care and Support Centres. People will be offered choices so that they can continue to live in their local community.</p> <p>The Council has listened to local people and has committed to investing £12.65m to develop extra care housing. The purpose built, high quality accommodation which is designed to support people in later life is a real alternative to residential care.</p> <p>The overall aim of the Council is to enable people to live in their own home environment and as independently as possible without a social care support service. Extra care services provide people with the option to remain living independently whilst having access to care and support as and where they are needed.</p> <p>There is an over reliance on residential care services in Nottinghamshire, with almost 200 care homes providing for older adults.</p> <p>The Adult Social Care Strategy emphasises the need to keep people independent and ensure value for money.</p> <p>For those people who do need residential care provision, the local care market can provide sufficient capacity to meet people's needs.</p> <p>From 2015 onwards the Council together with external partners and the District and Borough authorities will be opening additional extra care facilities across the county. As these new extra care facilities are opened the current County Council operated residential care centres would be decommissioned.</p> <p>Should this option be approved following consultation, the County Council would no longer admit people to live at the centres on a long term basis. The care and support centres would focus on providing short term care and assessment services.</p>			

4. Rationale / Evidence Base for the Option

The overall aim of the Council is to enable people to live in their own home environment and as independently as possible. Whilst there will always be a need for long term residential care, it is thought that in the future this will only be for people with complex needs or with Dementia. Older adults have been saying for some time that they want to live independently at home.

In the Council's model of extra care people have their own front door, their own tenancy and the benefit of on-site care staff 24 hours a day. Their care can be as flexible as required to support their needs. For example, they can have planned care throughout the day and night and the ability to call for support at any other times if they need it.

There is also communal space at each of the schemes, so people can develop their own support networks. Some of the facilities include areas to meet up with friends and organise or take part in activities. These rooms can also be used to invite visitors such as a hairdresser or health professionals to undertake wellbeing clinics, chiropody etc.

The Council still owns and runs 6 Care and Support Centres formerly known as Residential Care Homes. Whilst the service provided is very good, the buildings are not modern and do not have the benefit of en-suite facilities for long term care residents.

If the homes were to be de-commissioned, then the long term care residents could be offered places at local residential care homes. There are between 1 and 22 independent sector care homes within a 5 mile radius of each home. The Council keeps information about the availability of residential care homes places across the county. Residents and their families will be provided with up to date information about what is available to them at the time and they would be supported when considering alternatives.

Some of the residents will also be offered a place in a new build Extra Care scheme. For example, the new build at Retford is two streets away from St. Michaels View. Residents at Kirkland's in Ashfield could be offered a place at either Darlison Court in Hucknall or Brownlow Road in Mansfield. Furthermore, residents at Leivers Court may be offered a place at St Andrews House in Mapperley.

Whilst it is acknowledged that not all residents will be able to consider Extra Care Housing as a suitable option, it is thought that some residents could be supported in this environment. People have moved from residential care successfully into an Extra Care Housing environment within Nottinghamshire. However, it would be down to individual choice and the Council will support residents and their families when they are considering the options available to them.

5. What Will the Outcomes of the New Service Be?

The alternative services could be a place in an independent sector care home that had full en-suite facilities - people could move in small friendship groups if desired - or a place at a new build Extra Care Scheme.

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?

GROSS
£000

8,447

NET
£000

8,160

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Gross Saving		3,292	4,868	8,160
LESS Loss of Income		-141	-185	-326
LESS Costs of Reprovision		-1,506	-1,982	-3,488
NET SAVING	0	1,645	2,701	4,346

WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET?

53.3%

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Capital Costs	0	0	0	0
Revenue Costs	0	58	0	58

- 1FTE Strategic Development Manager @ Band E
The post is already approved for 2015/16.

8. Projected Permanent FTE Reductions

WHAT IS THE CURRENT PERMANENT FTE STAFFING?

223.6

WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?

	2015/16	2016/17	2017/18
	108.6	115.0	0.0

223.6

9. Anticipated Impact

ON SERVICE USERS AND COMMUNITIES

(incl. considerations relating to vulnerable people and communities & equality)

Potential impact: loss of jobs for care home staff. The impact of this could be managed through staff from the centres having the opportunity of applying for posts with the new home based care core providers who will be servicing the Extra Care Schemes.

Community concern re: loss of local authority care home provision.

Service users would be offered an alternative service in an independent sector care home or a new purpose built Extra Care scheme where appropriate.

ON OTHER ORGANISATIONS / PARTNERS

Independent sector care homes would/could re: provide the support to the existing long term care residents; increasing demand.

Possible land swaps with district or boroughs councils if opportunities arise and sites are suitable.

ON OTHER PARTS OF THE COUNTY COUNCIL

Increased opportunities for other uses for the sites such as extra care or supported living.

10. Initial Equality Impact Assessment

Please see attached EQIA document

WILL A FULL EQUALITY IMPACT ASSESSMENT BE REQUIRED? (Y/N)
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Y

11. Risks and Mitigating Actions

- **Risk:** Concern from local communities regarding the loss of NCC residential care provision.
- **Mitigation:** The County Council is investing £12.65m in additional Extra Care Housing schemes across the county. Also, there are sufficient Independent Sector care homes in the County to accommodate the existing residents from the care and support centres.
- **Risk:** Concern that some residents' health could be adversely affected if they moved home.
- **Mitigation:** People would be offered the choice about where they moved to and they could also look to move in small friendship groups if they chose. Ceasing long term care admissions will reduce the number of people who would need to move home. Having a long lead in time will allow for individual planning and preparation with residents and families.

PROPOSED CHANGES FOLLOWING BUDGET CONSULTATION

Summary of Changes to Proposal

Amended option following consultation (29th Jan 2015)

There has been a widespread consultation about the proposal with meetings held at each of the centres for both residents and relatives and also the staff group. Meetings have also taken place with the CCG Governing Bodies, the 3 health planning areas of Bassetlaw, Mid Notts and South Notts other health forums, Trade Unions and also Ollerton Town Council.

Almost universally Extra Care Housing is welcomed as an alternative service for older adults. People want services that meet their needs in a flexible way and in their own home environment. The issue for some of the existing resident's families is that they do not feel that it will be an appropriate option for them following being in a residential care homes for such a long time. It was also raised by a number of relatives that it would be preferable if the homes accepted no more long term residents and just allowed the existing residents to stay there as long as possible. This would mean that fewer people would be affected in the future.

There was also concern about the effects on the residents that would have to move home whatever their choice. Some did think that Extra Care may be an option for their relatives but wanted there to be a local scheme e.g. in Ollerton itself as opposed to in the Newark and Sherwood District. A petition to retain Bishop's Court was commenced locally and handed in to the Council with 8500 signatures.

There is also concern about the lack of available short term care and respite care support in some areas within the independent sector with relatives and carers advising that they find it difficult to get a care home placement at short notice or reserve a place when they want to plan a holiday as care home providers prioritise long term care placements. Families also identified a lack of specialist Dementia care provision in some areas; this was of particular concern at the meeting at Leivers Court and Bishop's Court.

The formal feedback from the health Governing Bodies is very positive about the replacement of the care home service provision by Extra Care Housing. They also note that currently Extra Housing isn't used within the County to support short term assessment care and think it imperative that we continue to work within the private sector to support the current work on expedited and supported discharges from hospital.

The perceived poor quality in the private sector compared to NCC homes was also raised and that in some homes third party payments are required. Some people felt that their choice would be limited because of their financial status. Healthwatch Nottinghamshire advised that they support the expansion of Extra Care Housing. They showed concern that if the Council completely withdraws from residential care provision it could weaken the quality benchmark across the sector.

Taking in to account the current difficulties in the health and social care community and listening to the feedback from the CCGs, who are understanding of the Council's position however are concerned at the proposed timing of the closures some changes have been made. It would be very helpful across the three planning areas of Bassetlaw (North) , Mid

Notts and South Notts if one of the centres in each planning area could remain open for a longer period of time to enable the joint development of an intermediate care/ assessment/ reablement type service that will ultimately lead to the implementation of an integrated Transfer-to-Assess model of provision which will ensure timely discharges from hospital across the county. It will also enable further work to be undertaken to reduce the numbers of people going directly in to long term residential care directly from hospital.

There will also be an opportunity for the Council to undertake further analysis about the availability of specialist Dementia provision in some areas and develop the market appropriately. Similarly with the availability of short term care and respite support for service users and their carers.

On the basis of these requirements analysis of the six care and support centres was undertaken. The factors considered were;

- Geographic location
- Local confirmed Extra Care Housing scheme
- Locally planned Extra Care Housing scheme
- Ability to provide alternate services such as assessment beds
- Experience of integrated working
- Specialist Dementia provision experience
- Number of existing long term residents
- Availability of appropriate local alternatives in the independent sector e.g. 1-5 mile radius
- Individual cost of the care and support centre

The revised option proposes the following:

- On the basis of the analysis above, that three centres will remain open across the 3 planning areas in the Better Care Fund for three years. They are;;
 - Bassetlaw (North) – James Hince Court
 - Mid Notts – Bishop’s Court
 - South Notts – Leivers Court.
- Each of the other care and support centres will close when an Extra Care Housing scheme is built and available locally.
- No long term residents be admitted to any of the six care and support centres following the Council meeting
- Work will be undertaken to look at delivering an extra care housing scheme in Ollerton

The work to secure a local Extra Care scheme for each care and support centre is ongoing.

Extra Care scheme plans by district

Builds in progress

Gedling - St Andrews House

Newark and Sherwood - Bilsthorpe Bungalows

Mansfield - Brownlow Road

Ashfield - Darlison Court

Planned not yet started

Bassetlaw - Elizabethan school site Retford
 Broxtowe - Eastwood

Potential

Newark and Sherwood – Bowbridge Road Newark
 Newark and Sherwood - Ollerton
 Gedling - Rolleston Drive Arnold
 Bassetlaw - Worksop

Work will continue to deliver a local scheme to each of the centres.

The delayed timescales for Leivers Court in the South of the County, Bishop's Court in Mid Notts and James Hince Court in the Bassetlaw will The impact of adjusting the timeline means that whilst the savings profile will change to £677k in 2016/17 and £1,810m in 2017/18, £1,859 in 2018/19.

UPDATED Projected Net Savings to the Budget**WHAT IS THE PERMANENT BUDGET?**

GROSS
£000

8,447

NET
£000

8,160

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2015/16 £000	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Gross Saving		1,610	2,359	4,191	8,160
LESS Loss of Income		-80	-47	-199	-326
LESS Costs of Reprovision		-853	-502	-2,133	-3,488
NET SAVING	0	677	1,810	1,859	4,346

WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET?

53.3%

UPDATED Estimated Implementation Costs**WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?**

	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Capital Costs	0	0	0	0
Revenue Costs	0	58	0	58

- 1FTE Strategic Development Manager @ Band E
The post is already approved for 2015/16.

UPDATED Projected Permanent FTE Reductions**WHAT IS THE CURRENT PERMANENT FTE STAFFING?**

223.6

WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?

	2015/16	2016/17	2017/18
	66.6	42.0	115.0

223.6



		Option Ref	C04
1. Service Area	County Enterprise Foods (CEF)		
2. Option Title	Development of a single integrated meals production and delivery service		
3. Summary of Options			
The meals production and delivery service will be located onto one site with the distribution unit moving to the production site. This along with other changes will produce efficiency savings within the service.			
4. Rationale / Evidence Base for the Option			
<p>This is a valuable service to the community. CEF produces and delivers hot and frozen meals to Nottinghamshire residents in their own homes. The service comprises a production factory in Worksop and a distribution unit based in Rainworth. The service employs a total of 81 people (78.6 fte); 26 of these staff are disabled workers on the Work Choice programme.</p> <p>Although the authority does not have a statutory obligation to provide a hot delivered meal service, it does have an obligation to make reasonable provision to ensure people can access a meal either in their own home or elsewhere, when they have been assessed as being eligible for support and service from the Council. The service offered by County Enterprise Foods is one way that the Council chooses to meet this responsibility. The meals service is provided to any residents who want to use the service, whether or not they are eligible for support and service from the Council.</p> <p>In addition to the delivery of a frozen, chilled or hot meal, the delivery staff carry out a “safe and wellbeing check”. This is an additional benefit to Nottinghamshire residents and the Council as it helps to identify and resolve problems at an early stage. The check can result in carers and staff being alerted to a situation which they would otherwise not be aware of. The Council is proud of this checking system and understands the preventative value that it offers.</p> <p>CEF generates income through a) charging Nottinghamshire residents £3.95 for a delivered meal; b) producing meals for external organisations and c) grant income from the Work Choice programme.</p> <p>The income that the meals service generates annually has fallen short of meeting the service’s operating costs for a number of years. The net budget (or subsidy) for CEF in 2014/15 is £1,068,846. The service is currently forecasting to spend £730,000 in 2014/15 (due to scrutiny of all costs and unplanned income from a new external contract). Even taking this into account, the cost of the service is not economically sustainable for the County Council.</p>			

The current demand for meals does not utilise the full capacity of the Worksop factory unit. There is significant potential to increase capacity and therefore generate more income, which would reduce the overall subsidy required.

This proposal includes a number of initiatives which will produce efficiency savings within the service and generate new income. The range of proposals described in the document are anticipated to deliver savings in the region of £363k from changes to the staff structure and driver contracts, from savings on utilities and building costs linked to Rainworth and from the additional income generated by the small price increase. It is estimated that recurrent additional costs linked to the co-location proposal could amount to circa £70k resulting in net ongoing saving of approximately £293k a year.

1. Co-locate the production and distribution units to Worksop

The Council proposes that the two sites at Rainworth and Worksop are combined onto one site, as this will allow the service to make significant cost-efficiencies. The Council has considered the relevant factors (eg. locations, size and age of buildings, cost of re-location) and have also thought about the implications for the workers, as it would be very difficult for the disabled staff to travel to work in the factory, if their work base moved from Worksop to Rainworth. Taking all these issues into account, it is recommended that the Rainworth operation is moved to Worksop.

Some recurrent and one-off costs have already been identified and are described below; however the full costs of implementing this proposal will not be available until a fuller feasibility survey has been completed.

The savings due to this proposal will be realised from staff restructure (£120k pa, see 2c below for detail) and savings on utilities and building costs incurred by the Rainworth site (£41k pa). A small saving is also anticipated in fuel costs for the new delivery routes but further work is required to model this robustly.

Total savings forecast : £161k pa

These savings will be set against additional recurrent costs incurred by co-location.

Recurrent costs forecast :

- Lease of extra car parking for delivery vans working across north Nottinghamshire
Cost (based on sample quote for 28 vehicles at £12.50 a week x 52): £18k pa
- Possible lease costs for car parking of delivery vans serving mid and south Nottinghamshire, as the meals from the factory will be driven by lorry to this pick-up point, to prevent all the vans having to distribute out of Worksop.
- Any ongoing costs to secure the Rainworth building, once vacant tbc

One-off costs forecast :

- Travel and disturbance for driving staff (based on 20 staff travelling an additional 40 miles a day at 26p a mile over 2 years) £108k
- Change in vehicle requirement (2 additional oven vehicles at £20k each plus adaptations to 10 existing vehicles) £80k

- Cost to cease the operation on the Rainworth site, until any further usage can be identified. Cost to be confirmed on receipt of feasibility report due in late October.

tbc

2. Restructure of staffing, to include removal of some vacant posts, standardisation of drivers' staffing hours, restructure staff from 2 sites into 1 service.

a) Disestablish vacant posts

Disestablish vacant posts: 3fte (2fte at Grade 1, 1fte Grade 3) vacant posts at Worksop and 1.87fte vacant posts (1.6fte at Grade 2; 0.27fte at Grade 1) at Rainworth (4.87fte total).

Saving:

£92,545 pa

b) Standardisation of drivers contracts

Contracts for drivers will be revised to ensure that the hours worked reflect the level of work to be undertaken. This means that current contracted hours of work will be reduced, with the flexibility to increase the hours available when the level of work demands it. Driving staff contracts will be reduced to 20 hours a week, which is a reduction of between 2.5 and 12.5 hours a week. The total reduction in hours will be 50 per week (equivalent to 1.35fte).

Saving:

£26,461 pa

c) Restructure of staff from 2 sites to 1 service (as a result of co-location)

This will enable the service to reduce 5.26fte from Rainworth (based on mid-point of 1 x 37 hours at Band B; 1 x 32.5 hours at Grade 3; 125 hours at Grade 1), plus other small scale point savings.

Saving:

£119,881 pa*

**already counted at section 1.*

d) Removal of practice of drivers taking NCC vehicles home after delivery of meals

It is custom and practice that 28 drivers currently use a CEF vehicle to drive home and come to work.

The proposal is that all vehicles will be brought back to base at the end of a run. This may give a saving in fuel over a year, but is difficult to quantify at this point. This can be monitored over time. Advantages of the change are:

- Smarter working for the service, as all vehicles will be available on site when and where they are needed
- Fair and equitable treatment of all staff, since all staff will incur normal costs of getting to work and back home again

3. Small price increase to Nottinghamshire residents for the delivery of a meal

The cost of a delivered meal to a Nottinghamshire resident is £3.95. The same price is charged for a frozen and a hot delivered meal. No additional cost is charged to people who are not eligible for support from the Council under Fair Access to Care eligibility criteria. The price was increased to this level in April 2011.

The proposal is to increase the price by 30p (7.5% increase) to £4.25 per meal, to bring the price more in line with equivalent services made available by Local Authorities in the surrounding area. People would still pay the same price, whether they were eligible for support from the Council or not (i.e. eligible for services).

Local Authority	HOT MEAL PRICE* (Eligible clients)	HOT MEAL PRICE* (Clients not eligible)	FROZEN MEAL PRICE*	Is the price subsidised?
Barnsley and Doncaster	£5.65	£5.65	£4.00	NO
Derby City	£3.20	£5.10	£5.07	YES
Derbyshire	n/a	n/a	Via brokerage	NO
Leicestershire	£3.25	£6.95	£5.90	YES
Leicester City	£3.15	n/a	n/a	YES
Nottingham City	£4.35	£5.35	Varies according to the meal	YES
Rotherham	£5.15	£5.15	n/a	NO

*prices as at May 2014

The Council is suggesting a small price increase now, which we believe is justifiable for the following reasons:

- No price increase has been made since April 2011
- Other equivalent services are more expensive in other local authority areas in the region for non-eligible clients, and in three out of six local authority areas for eligible clients.

It is anticipated that 275,000 meals will be delivered in 2014/15. Assuming that meals numbers are maintained, a 30p increase in the price of a meal to £4.25 would generate additional income of : £82,500 pa

It is also proposed that a small price increase of 1.5% (based on Office for National Statistics reporting of Consumer Price Index at August 2014) is made in April every year to reflect costs.

4. New external contracts and grant income

The Council has won two new innovative business contracts to supply meals to Lancashire Fayre and a Swedish company called Romy. These two contracts are worth £287,500 pa and are confirmed for the next 12 months.

This new income will help offset some of the budget pressures in 2015/16 through the expected loss of the Nottingham City contract (£161,000 a year) from October 2014 and through the cessation of the Work Choice grant from central government (£124,800 a year) from October 2015.

These losses will be offset by the additional contribution towards overheads anticipated Work continues to identify new markets. CEF will focus on expanding the supply-only service i.e. production of meals and delivery in bulk to another delivery agent. For example, options include the NHS, providers who have won contracts with other local

authorities, and new providers of services to older people. The aim is to increase total production by 5,000 meals per week.

Earlier in October 2014, CEF was announced as the National Care Association's Catering Team of the Year 2014, so the Council anticipates that this award will help significantly to promote the business to potential new purchasers.

5. What Will the Outcomes of the New Service Be?

The subsidy required to operate CEF will reduce. The service will be restructured and various other measures will improve the commercial viability of the service, so that it is more likely to win additional contracts for work and become more sustainable into the future.

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?	GROSS £000	2,729	NET £000	1,069
WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?				
	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Gross Saving	0	293	0	293
LESS Loss of Income	0		0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	0	293	0	293
WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET?	27.4%			

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?				
	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Capital Costs	300	0	0	300
Revenue Costs	140	54	0	194

Still to be confirmed:

- One-off capital costs related to co-location to Worksop and cessation of operation on Rainworth site

Costs identified (totalled above) :

- One-off fleet requirements (circa £80k)
- One-off travel & disturbance (circa £108k)
- One-off driving staff hours buy out (£5.5k)

8. Projected Permanent FTE Reductions

**WHAT IS THE CURRENT
PERMANENT FTE
STAFFING?**

78.6

**WHAT ARE THE PROJECTED
PERMANENT FTE
REDUCTIONS?**

2015/16 2016/17 2017/18

0.0 11.5 0.0

11.5

9. Anticipated Impact

ON SERVICE USERS AND COMMUNITIES

(incl. considerations relating to vulnerable people and communities & equality)

The proposal will have an impact on all service users who have a meal delivered from this service, due to the proposed increase in price of 30p per meal.

ON OTHER ORGANISATIONS / PARTNERS

ON OTHER PARTS OF THE COUNTY COUNCIL

Any price increase will need to be communicated effectively to staff and appropriate changes will need to be made on any information for clients.

10. Initial Equality Impact Assessment

The proposal will impact on all adults currently receiving the meals service. The population is predominantly older people. 34% of these people are known to be eligible for receipt of support and services from the Council, so they will have protected characteristics related to disability or ongoing illness.

WILL A FULL EQUALITY IMPACT ASSESSMENT BE REQUIRED? (Y/N)

Y

11. Risks and Mitigating Actions

- There is a risk that the price increase could reduce demand for the CEF service. Alternative options might need to be offered to people who were eligible for support and service from the Council.
- In mitigation the Council continues to market the service and has been successful in being awarded contracts for the supply of meals.



		Option Ref	C05
1. Service Area	Services for younger and older adults		
2. Option Title	Expansion of community-based care and support options		
3. Summary of Option			
This proposal will deliver new person centred opportunities for people with eligible needs for low level support, to enable them to access local support and activity through partnership working across the public, private, voluntary and community sectors.			
4. Rationale / Evidence Base for the Option			
<p>This is a transformative proposal aimed at people who are eligible for service from the Council, but who need only relatively low levels of support to enable them to be socially included and active within their local community. The Council proposes to work in partnership with the public, private, voluntary and community sectors to develop new ways for people to be involved and get appropriate support, by offering alternatives to formal day service and community provision, which can lead to dependency and reliance on long term care.</p> <p>These alternative opportunities will assist people to maintain their independence and social networks in their local community for as long as possible, and so prevent or delay demand for long-term support.</p> <p>This proposal responds to the following key principles in the Adult Social Care Strategy :</p> <ul style="list-style-type: none">- good quality information and advice will be available to help people plan for the future, reduce the need for care services and maintain independence- we will share responsibility with individuals, families and communities to maintain their health and independence- we will enable people to live with the risks inherent in living independently- we will reduce the demand for institutional care and the need for long term care in the community by commissioning services that support independence- we will promote health and independence through joint working across the public sector <p>Redefining Your Council also stresses the need to use a diverse range of delivery models and partnerships to deliver the services that people need. The resulting new models from this proposal will meet people's outcomes, promote independence, reduce reliance on long-term social care provision and will cost less than current services. Therefore, it is expected that the Council will be able to reduce the cost of personal budgets over time.</p>			

Of the people currently using formal day service provision, 464 people have low level needs for support during the day (as defined by the day service matrix system). This means that they have outcomes to be met around social contact and background support, but have no personal care needs and do not need support with emotional or behavioural issues, other than general oversight and perhaps encouragement or motivation.

The average number of days attended each week is two days, or four sessions. This costs the Council £15.30 per day. Personal budgets attributed to these service users amount to £710k pa (over 50 weeks).

This proposal aims to support a proportion of these service users to access alternative community options which will:

- meet their needs around social inclusion
- encourage them to become more independent, build on their existing skills and abilities and share those skills with others
- enable them to build their social networks within the local community and become more confident to use local facilities.

Suggestions for alternative service provision include:

1. Expansion of the co-production model to the other client groups

This service has been developed over the last 2 years to provide a flexible, safe and supportive environment within the community for people who are struggling with their mental health, who may or may not be eligible for support from the Council under Fair Access to Care Services guidance.

People who use the service are seen as co-producers, influencing the development of it to suit their needs and preferences, and sharing decision-making. Networks are being developed around the county, to enable people to meet together for support in community locations, share skills (e.g. through time-banking) and to inform people about activities that are already taking place within the local community. Community organisations, including the voluntary sector, have joined the model as partners and are keen to develop activities that meet support needs. Examples of activities underway include drop-in groups, art groups, music classes, gigs and horticulture.

Early discussions have indicated that expansion of the model is possible but further exploration is needed to understand more about the needs of the people with low level needs currently accessing formal day services, so that a pathway out of day services can be developed. More understanding is also needed about the people who have been granted personal budgets for social inclusion-type activities, to see how they are using that funding at the moment and what alternatives could be developed. An additional strand of work will be to explore how to expand the remit of the service so that it becomes the social inclusion delivery mechanism for rehabilitation and reablement provision across Nottinghamshire.

For example, in the Broxtowe area, the co-production model could work with existing U3A (University of the 3rd Age) networks to explore how older people could be linked into these activities. The Alzheimer's Society has developed a memory café in the Beeston area. The Volunteer Bureau in Broxtowe is also working on a scheme to

combat loneliness, using volunteers to telephone elderly people living on their own. Libraries are also keen to reach out to people who want support and activity during the day.

Initial discussions have suggested that 2 x Scale 5 Community Care Officers would allow implementation of this co-production expansion to proceed across Nottinghamshire. They would have a specific remit to understand the needs of the types of clients that the service would need to support (i.e. people who are socially isolated, who may have a personal budget or who may be going through a period of reablement, and people with a low level of need attending formal day services) and then develop the appropriate networks and partnerships to support those needs through the co-production model.

2. Greater use of Shared Lives carers to provide support during the day

Shared Lives is a scheme that recruits people from the local community to welcome vulnerable adults into their lives, both on a short-term and long-term basis. Support during the day can be offered as part of this scheme. As an example, Essex County Council funds this type of scheme as a day service for groups of people who meet within the home of a paid host. This is run by Essex Cares Ltd.

3. Greater use of digital technology and social networking to link people together

The People and Places website is a new scheme which offers a secure web-based portal aimed at vulnerable people, to help them link up for activities and pool the resources in their personal budgets (e.g. sharing support staff). Features include:

- a community network
- Good Stories library
- search for a house mate
- time banking/skills match
- information on gadgets and Assistive Technology
- search for local self-advocacy groups across the country
- activity planners, online diaries and forum for creating and posting events
- feedback forums
- person centred planning tools.

This kind of forum helps people to find appropriate local resources and offers more choice and control, based on informed decision-making. People can create or join local groups, search for and share activities in the area, maintain friendships and search for new people who share their interests. Other uses are to exchange ideas, problem solve and learn from best practice. People can ask for help from others in relation to gaps in skills e.g. computer skills, social skills, basic literacy, public transport etc. The information held on the system can be used as a qualitative record of outcomes and achievements over time, as well as areas of difficulty.

Options for implementation costs

There are costs linked to the implementation of these schemes but there are many sources of funding available to charities and social enterprises to help with social inclusion, particularly for deprived areas. Therefore the Council could establish a partnership to develop these proposals, within which relevant partner agencies could

apply for funding. For example – Cecil Rosen Charitable Trust, Charles Hayward Foundation, Henry Smith Charity, JN Derbyshire Trust.

Advice from Economic Development colleagues is that this proposal may be eligible for European Social Fund funding under the category of Access to Quality Services and within the theme of objective T09, to enhance social inclusion and combat poverty.

5. What Will the Outcomes of the New Service Be?

The opportunities across Nottinghamshire will be expanded for vulnerable people to receive background support and engage in activity which develops skills, enhances social networks, strengthens physical and emotional health and well-being and gives carers a break.

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?	GROSS £000	<input type="text" value="4,070"/>	NET £000	<input type="text" value="4,070"/>
WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Gross Saving	50	100	100	250
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	50	100	100	250
WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET?	<input type="text" value="6.1%"/>			

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Capital Costs	0	0	0	0
Revenue Costs	61	61	0	122

- 2FTE Community Care Officers @ Scale 5

8. Projected Permanent FTE Reductions

WHAT IS THE CURRENT PERMANENT FTE STAFFING?	<input type="text" value="0.0"/>		
	2015/16	2016/17	2017/18
WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?	<input type="text" value="0.0"/>	<input type="text" value="0.0"/>	<input type="text" value="0.0"/>

9. Anticipated Impact

ON SERVICE USERS AND COMMUNITIES

(incl. considerations relating to vulnerable people and communities & equality)

People who have low level support needs and do not have personal care needs will be able to access community-based activities as an alternative to formal day service provision.

People with low level support needs who do not access any activities or support during the day will benefit from new local opportunities and this will help them to maintain their independence and skills, as well as widen their social network.

ON OTHER ORGANISATIONS / PARTNERS

This initiative will require considerable support and involvement from a wide range of partners in the community and voluntary sector. Current providers of formal day services may be impacted by a loss of business and income from these service users. Alternative schemes (e.g. co-production, Shared Lives) will come under increased demand for support and activity.

ON OTHER PARTS OF THE COUNTY COUNCIL

This initiative may impact on attendance at the County Council's day services from people with low level support needs. Any changes in attendance will impact on the requirement for transport.

10. Initial Equality Impact Assessment

People affected by this proposal include older people and people from all the disability groups (mainly learning disability but also physical disability and, to a lesser extent, those with mental health needs), where those people have relatively low level needs for support and inclusion. An Equality Impact Assessment has been undertaken and concluded that in the main the proposal will have a positive impact on these protected characteristics.

WILL A FULL EQUALITY IMPACT ASSESSMENT BE REQUIRED? (Y/N)
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Y

11. Risks and Mitigating Actions

Risk that alternative community options cannot be developed at sufficient scale to provide appropriate long-term support and activities for all the people with low level needs.

Mitigation: The Council will build on its success in supporting innovative alternatives such as the co-production initiative in mental health day services which gives greater control to service users in building and developing flexible community support services.

Risk of challenge from people with low level needs and their families, who do not wish to have their personal budgets reduced as alternative community activities become established.

Mitigation: People will be given greater choice of low level services available to them and will be provided with the opportunity to try alternative community options. The project will be planned to minimise the likelihood of these risks emerging as the project is implemented. Monitoring will take place to ensure that if the risks do emerge as issues, appropriate actions can be taken.



Option Ref		C06
1. Service Area	Services for younger adults - residential care	
2. Option Title	Reducing the average cost of residential placements	
3. Summary of Option		
<p>The Council will reduce the cost of care through negotiating with care providers about how we agree fees for individual service users. We will also consider how people's needs are being met currently and how they may be met differently in the future.</p>		
4. Rationale / Evidence Base for the Option		
<p>The Council continues to support the delivery of high quality services that promote people's wellbeing and are flexible and responsive to people's individual needs.</p> <p>The Adult Social Care Strategy emphasises that the Council should be providing support that reduces or delays the long term need for care and should be commissioning services that promote independence as much as possible.</p> <p>The net budget for residential and nursing home care in younger adults is £42m in 2014/15. There is already one savings project underway to reduce costs of residential care by £1.523m (net), which will be achieved by moving 120 people out of residential and nursing care into more cost-effective supported living arrangements.</p> <p>This proposal seeks to reduce the cost of the remaining packages through negotiations with the care providers, rather than by moving people into alternative living arrangements, which takes considerably longer to organise and is not appropriate for many people.</p> <p>Implementation of this option will involve the following.</p> <p>1. Carrying out focused reviews for residents with high cost care packages and significant additional support hours</p> <p>The aim of these reviews will be to agree with the provider how they can support people to promote their independence over time and reduce additional support where it is no longer appropriate.</p> <p>2. Working with providers to understand their staffing rotas</p> <p>Analysis will focus on whether the hours on the rotas reflect the total amount of individual support that the Council has agreed to buy for all the individuals' in the home. It will also consider how rotas vary when people are using other services during the day in order to ensure that the Council is not paying twice for support to the same person.</p>		

3. Reviewing how the Care Funding Calculator (CFC) is used

When any placement is costed, the Council will take into account what the normal level of staffing in the home is so that it is possible to work out what care and support tasks can be managed on a routine basis, before thinking about whether any additional staffing should be funded. The Council will review the level of allocation for different elements of the CFC formulae on the basis of good practice elsewhere.

4. Developing a culture that expects the promotion of independence over time

Fees are agreed when someone moves into a care home and the fee then remains the same for as long as the person lives in that home. Reviews do not currently consider how a person should be supported to become more independent over time, so that they will need less support within the home. The Council intends to foster a culture of promoting independence, so that all reviews consider how independence can be promoted and fees reduced over time.

5. Strategic review of the residential market for younger adults

The Council intends to carry out the actions listed above (1–4), alongside a strategic review of the residential care market for younger adults. This review will consider:

- the needs of younger adults within Nottinghamshire for support and accommodation, now and predicted, against the current residential market and supported living provision
- how residential care providers could better work alongside supported living providers, to help facilitate a model of increasing independence
- how many smaller specialist homes (and individual units) are needed to support people with complex behaviours, as well as how many homes catering for minority groups are required
- how the size of home and how staff are deployed in the home varies, and what we can learn from this about best value
- any advantages to be gained from block funding arrangements for certain specialist services
- the advantages that might be gained from agreeing set prices based on an average level of care
- whether banded rates for specific homes would be useful.

Working with neighbouring authorities could bring benefit to this option in terms of the approach they take to agreeing fees with providers in Nottinghamshire. Discussions with Derbyshire, Nottingham City, Lincolnshire and Leicestershire will commence at an early stage in order to agree some common principles.

5. What Will the Outcomes of the New Service Be?

Independence will be promoted for people living in long term care.

The cost of some of the higher cost packages will be reduced and the use of shared hours across homes will be maximised, where there are a number of high cost packages.

There will be a change in culture across the younger adults services, so that staff set the expectation that care and support costs will change once the period of transition into a new residential placement is over. Support costs will reduce as independence is maximised.

We will develop a market that better meets the needs of younger adults in Nottinghamshire, with residential services working along-side, rather than in competition with, supported living, to promote people's independence.

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?

GROSS
£000

51,194

NET
£000

41,929

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Gross Saving	500	1,000	1,000	2,500
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	500	1,000	1,000	2,500

WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET?

6.0%

7. Estimated Implementation Costs

Additional staffing is required to provide the necessary capacity to undertake the reviews and negotiations. Discussions are underway with our NHS partners, to seek a contribution of 50% (£76k per annum) towards the total cost of these staff, since they will share in savings made on the high cost packages to which they contribute funding.

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Capital Costs	0	0	0	0
Revenue Costs	76	76	76	228

A project manager will also be required to co-ordinate the strategic review and agree proposals for future costing of placements, alongside the staff undertaking reviews of current placements.

8. Projected Permanent FTE Reductions

WHAT IS THE CURRENT PERMANENT FTE STAFFING?

0.0

WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?

2015/16 2016/17 2017/18

0.0 0.0 0.0

0.0

9. Anticipated Impact

ON SERVICE USERS AND COMMUNITIES

(incl. considerations relating to vulnerable people and communities & equality)

The Council will be promoting the independence of service users by reducing their reliance on support hours that are no longer needed. It is possible that this may be met with resistance from some providers.

ON OTHER ORGANISATIONS / PARTNERS

NHS partners should benefit from more cost effective homes and a market that better reflects the needs of people requiring residential care.

Some residential home providers are likely to see a reduction in their profit margins.

As the authority is promoting independence and supported living, there is likely to be a change in the amount and type of residential homes required over time.

Residential home placements are more likely to be made for either a short term period only (i.e. a year or two, rather than lifelong) or because the person who needs the placement has complex needs that cannot be met appropriately through supported living. This may mean that some homes will decide to change client group, close or seek to de-register to become supported living.

ON OTHER PARTS OF THE COUNTY COUNCIL

None envisaged at this stage.

10. Initial Equality Impact Assessment

This proposal will apply to all younger adults in residential care across all of the following client groups: learning disability, physical disability, autistic spectrum disorders and mental health. It is not possible at this stage to identify if it will have a differential impact on one particular client group more than another. Therefore, a separate equality impact assessment has been undertaken as part of the review process.

WILL A FULL EQUALITY IMPACT ASSESSMENT BE REQUIRED? (Y/N)
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Y

11. Risks and Mitigating Actions

Risk of challenge, either by providers or service users/carers opposed to a change in the size of a residential care package.

Mitigation – the new Adult Social Care Strategy provides the framework for this proposal. Will also be mitigated through early engagement with providers, services users and carers.

Risk of overlap/double counting with other existing/new savings projects.

Mitigation - the project manager has oversight of all the activity in younger adults' residential care and manages the approach along-side the strategic review to ensure key messages are consistent and providers are involved in the process from the beginning.

Risk of other authorities moving people into homes at fees higher than we are agreeing thus undermining the negotiation process and strategic review.

Mitigation – develop partner relationships with neighbouring authorities regarding good neighbour commissioning and involve them in our strategic review.



1. Service Area	Strategic Commissioning
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2. Option Title	Review of Contracts
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3. Summary of Option

This option involves reviewing contracts relating to: 1) the Smile Stop Hate Campaign; 2) the continence training and awareness package for social care staff and carers; and 3) the provision of advice and information for carers in Nottinghamshire, with a view to jointly commissioning with Clinical Commissioning Groups a new Carers' Information, Advice and Engagement Hub.

1) The Smile Stop Hate Campaign:

This project has run for eight years with the aim of raising awareness of hate crime against people with learning disabilities in order to improve both their safety and independence. It has done this through working with people with learning disabilities and also the wider community. The project has run training in schools, attended community events and provided specifically tailored awareness raising sessions, for example, to the police. It has recently piloted a 'Safe Spaces' initiative which signs up business owners to their shops etc being a place that people with learning disabilities can go to seek help from if required. It has achieved its initial objectives and it is now timely to take this work forward within mainstream community safety work.

2) Continence training and awareness package for social care staff and carers:

A reduced, more focused level of training will be funded for social care staff and carers for one year whilst a full review is undertaken. The Continence Advisory Services (CAS) provided by NHS City Care and Nottinghamshire Healthcare Trust will provide a more targeted interim service, with a view to social care ceasing funding from April 2016.

3) Carers' Information, Advice and Engagement Hub:

Outcomes from four existing contracts will be re-commissioned in partnership with Clinical Commissioning Groups (CCGs) to develop a joint specification for a new Carers' Information, Advice and Engagement Hub, with the new service starting in August 2015. This will provide fairer and wider coverage of carer support, as well as being more cost effective. The CCGs and Nottinghamshire County Council will jointly consult and engage with carers, leading to less duplication and more coherent communication.

4. Rationale / Evidence Base for the Option

1. The Smile Stop Hate Campaign has been operating for eight years. The current Nottinghamshire County Council funding for this time-limited project is £20,000 per annum. It was originally funded by the Learning Disability Partnership Board on a grant basis, using the Learning Disability Development Fund. This specific ring fenced Learning Disability Development fund has now ended and the service is currently fully funded by adult social care.

It is recognised that this has been a valuable project in raising awareness of hate crime within both the learning disability population and the wider community, through training in schools and attendance at community events as well as training of the police. It has recently included a 'Safe Spaces' development, where staff working in shops, pubs etc. get basic awareness raising regarding the needs of people with learning disabilities, and are then able to offer help when people are out and about in their communities should they require it.

Since the work began there has been an increase in the amount of hate crime reported against people with learning disabilities in Nottinghamshire, showing awareness raising amongst people with learning disabilities is working. It is now timely to embed this work within other Community Safety approaches, rather than to continue as a discreet project. It is not a statutory duty of the Local Authority and there is no evidence of a direct impact of it stopping people needing social care or reducing their level of need. It does not therefore meet with social care's prevention priorities within the new Adult Social Care Strategy or Care Act.

Discussions with the Council's Community Safety Team, District Councils and the police have started to plan how the objectives of the work could potentially be delivered through other means as part of the wider Community Safety agenda. Temporary funding has been identified by the community safety partnership to enable work with the current provider to continue until the end of June 2015 to develop and implement this plan.

In addition, it is proposed to include the remaining uncommitted money from the Learning Disability Development Fund Funding (£20,000) as part of the overall saving.

2. Continence training and awareness package for social care staff and carers

The Continence Advisory Service (CAS) is currently funded by social care to provide training and awareness raising sessions for social care staff (Council and independent sector) as well as for family carers. The Council purchases this for South Nottinghamshire from NHS CityCare and in the North from Nottinghamshire Healthcare Trust. The total budget for this is £62,873 p.a.

The service provides information, advice, support, and training regarding continence issues. The services support both quality of care, whilst also giving staff and carers the knowledge to be able to identify, refer and prevent illness. Continence can have direct impact on the level of social care an individual requires and is one of the significant factors in people moving to residential care.

Whilst the Continence Advisory Services offer good advice and support, their courses now often run with high vacancy levels and means the service in its current form does not offer value for money. In addition, the current Service Level Agreements do not allow a targeted approach where individual providers / teams can access bespoke training. In addition, whilst continence is a significant issue, responsibility for continence promotion is a health, rather than social care responsibility. Discussions have therefore begun with the Clinical Commissioning Groups' contract lead as part of the current review of community services in the county.

It is recommended that:

- a reduced service continues to be funded during 15/16, but is targeted to support people most in need, pending further discussion on responsibility for continence training and awareness raising. The total cost of this would be £17,000, releasing savings of £45,873.
- the remaining budget of £17,000 is removed in 16/17, following discussions with the Clinical Commissioning Groups through their continence services contract lead.

3. Carers' Information, Advice and Engagement Hub

Currently the Council's social care service funds three separate contracts for the provision of advice and information for carers across the county, at a total cost of £150,477:

1. Universal Services for Carers - the Carers Federation is the present service provider
2. Giving a voice to carers of people with a learning disability - Independent Voices for Engagement is the present service provider
3. Support Service for carers of people with a learning disability - Mencap is the present service provider

In addition, the Clinical Commissioning Groups (CCGs) also fund carer support for the health related referrals into the Adult Carer Support Service. The current situation means that there is overlap between all the services provided, an unequal distribution of resources for carers and scope for more joined up working across health and social care. The proposal is to jointly commission with CCGs one new Carers' Information, Advice and Engagement Hub which will provide all of the above services.

5. What Will the Outcomes of the New Service Be?

1. Smile Stop Hate Campaign – the outcomes of project will be mainstreamed.
2. Continence Advisory Training - a reduced, more focused level of training which is in line with current demand will be provided for one year to social care staff and carers by the current providers. Running a reduced service for a year will enable key staff requiring the training and carers to continue to receive this pending the wider review of continence advisory services which is being led by Public Health.

3. Carers' Information, Advice and Engagement Hub will:

- provide a one stop shop for provision of information and advice for carers, signposting to appropriate services and facilitating onward referral
- provide assistance to carers to carry out online Carers Assessments
- provide personal development opportunities for carers including training group/community development
- facilitate engagement and involvement opportunities for carers with the local Clinical Commissioning Groups and the County Council.

The overarching outcome that this will deliver is to support carers in their caring role, with increased:

- number of carers identified
- number of carers assessed
- number of carers accessing information and advice
- number of carers being supported
- number of carers who are engaged and involved in shaping the future CCG and Council's carers' agenda
- satisfaction of carers with the information and advice they receive.

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?

GROSS
£000

253

NET
£000

253

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Gross Saving	86	43	0	129
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	86	43	0	129

WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET?

51.0%

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Capital Costs	0	0	0	0
Revenue Costs	0	0	0	0

8. Projected Permanent FTE Reductions

**WHAT IS THE CURRENT
PERMANENT FTE
STAFFING?**

0.0

**WHAT ARE THE PROJECTED
PERMANENT FTE
REDUCTIONS?**

2015/16 2016/17 2017/18

0.0 0.0 0.0

0.0

9. Anticipated Impact

ON SERVICE USERS AND COMMUNITIES

(incl. considerations relating to vulnerable people and communities & equality)

1. Smile Stop Hate Campaign. The project focuses on improving the safety of people with a learning disability. It is difficult to accurately measure its direct impact, but generally people say that they feel more aware of how they should be treated and are more likely to tell someone if they have not been treated well. Hate crime figures reported to the police have seen an increase since the project started. Any negative impacts of ceasing the project will be minimised by taking forward the work and embedding the learning from it, within mainstream community safety services.

2. Continence Advisory Service. The aim is to initially offer a reduced service, so there may be some staff or carers who may have to wait longer to be able to access training and/or advice, support and information about continence. Discussions are taking place with the aim of continuing to offer this service as part of the CCG overall specification for continence services from April 2016.

3. Carers' Information, Advice and Engagement Hub. The aim is for these contracts to be combined in order to provide a better service, offering fairer and wider coverage of support to carers. The savings will be delivered through economies of scale from joining together the existing separate contracts.

ON OTHER ORGANISATIONS / PARTNERS

1. Other community safety partners (e.g. Police, District Councils) will not receive the continued specific input that has been provided by the scheme, e.g. helping the police to develop user friendly hate crime reporting sheets and will need to ensure that learning from the project is fully embedded within their services.

2. The reduced budget will have an impact on the two organisations currently commissioned to provide the Continence Advisory Services, as they will receive less funding. This may also have an impact on Clinical Commissioning Groups (CCGs).

3. The new Hub will be more sustainable and provide a more consistent level of support to all carers. A joint approach to consultation and engagement of carers by health and social care will mean less duplication for carers, better communication and use of the information provided.

ON OTHER PARTS OF THE COUNTY COUNCIL

1. This project has contributed to the wider corporate community safety agenda

and could therefore have an impact on the community safety team within the Council.

2 & 3. Not applicable.

10. Initial Equality Impact Assessment

- 1. Smile Stop Hate Crime:** The beneficiaries of Smile Stop Hate Crime are people with a learning disability, who could therefore, be disproportionately affected by changes. Adult Social Care is working with the Community Safety Partnership to look at how the work of this project can be continued, either as a discrete project or as part of the wider hate crime agenda, and therefore it is anticipated that there will be no significantly negative impact on this protected group. The work of the project to date in raising the profile of hate crime against people with a Learning Disability is likely to continue to have a positive effect, due to more general awareness of this issue.
- 2. Continence Advisory Services:** As this is a reduced service for 2015-16, there may be some staff who may have to wait longer to be able to access training, and/or advice, support and information about continence. In the following year, from April 2016, unless the local NHS picks up the support provision of the service, the services will cease. This will have an impact on Social Care staff who will be unable to access Continence training and advice through the current route. This in turn may have an impact on the service users and carers in contact with social care staff who may not receive the most up to date and accurate advice about continence. It is possible that these carers and service users may have some degree of disability, either mental or physical, or are older adults (and therefore be in some of the protected categories) and may be disproportionately affected by changes. However, it is not expected that the impact will be significantly negative on these protected groups. Adult Social Care is working in partnership with Public Health and local Clinical Commissioning Groups to consider how this work can be picked up through the NHS. In particular, continence has been identified as an area for consideration under the NHS's Community services Review.
- 3. Carers' Information and advice :** Overall this will be an enhanced service, enabling a fairer and wider coverage of support to carers. Therefore the impact will be a positive one. With the merging of the 3 contracts, potentially carers of people with a learning disability may feel the loss of the Mencap and the Independent Voices for Engagement services, which will be decommissioned. Also these 2 organisations will experience a reduction in their funding.

The Carers Commissioning Manager has already been in conversation with the Learning Disability Carers Group, who were generally in favour of the proposal; and with the Carers Federation. The Learning Disability Commissioning Officer has been liaising with Mencap and the Independent Voices for Engagement to keep them informed.

The specification for the new service includes provision for carers of people

with a learning disability, and ensures a comprehensive and local service for all adult carers.

Overall the impact of the new contract will be a positive one, as the contract will ensure a more equitable coverage for all carers e.g. carers of people who misuse substances and seldom –heard carers.

WILL A FULL EQUALITY IMPACT ASSESSMENT BE REQUIRED? (Y/N)

Y

11. Risks and Mitigating Actions

1. Smile Stop Hate Campaign: Sufficient co-ordination of the safe spaces and time to embed the concepts will help mitigate the risk that the project does not have on-going impact in Nottinghamshire. This would aim to ensure that more people with a learning disability are able to feel safe going out and about on their own and leading independent life-styles.

2. A reduced level of training in continence advice will continue for one year whilst the overall review of Continence Advisory Services funded by Clinical Commissioning Groups is undertaken. There is a risk that following review, it is not agreed to include this element of service within the wider set of continence services. It is anticipated that negotiations will take place to look to include targeted training and awareness raising as a part of the new service offer.

3. Initial discussions with the Learning Disability Carers Group were generally positive. Contracts are due to expire and go out to tender, so current providers would experience the impact of this anyway. The Council routinely offers support to existing providers following the outcome of any tender process. All providers have been notified of this proposal.

The key mitigation is to work with the new provider to ensure that new service includes appropriate provision for carers of people with a learning disability and ensures a comprehensive and local service for all adult carers.



		Option Ref	C08
1. Service Area	Children's Disability Service		
2. Option Title	Children's Disability Services Review		
3. Summary of Option			
<p><i>A Review of Children's Disability Services received Full Council Approval in 2013-14 as part of business case C19 in the 2013-14 budget consultation. This proposal is to extend the current business case to include a fourth year saving in 2017-18.</i></p> <p>A thorough review of the service has highlighted that savings can be achieved in 2017-18 as the development of the service is likely to be over a 3-5 year period. Consultation will be undertaken on Options around personal budgets / direct payments.</p> <p>Benchmarking data shows that Nottinghamshire spends significantly more than its statistical neighbours (comparable local authorities) on children with disabilities. A 30% savings target has been set over 4 years.</p> <p>A number of initial work streams have been identified, including:</p> <ul style="list-style-type: none">• Understanding current need and forecasting future demand for services• Consideration of options around personal budgets / direct payments• Providing more flexibility and choice for parents and carers• A comprehensive review of current service provision <p>The next stage will be detailed business planning including key milestones, reporting and monitoring arrangements, risk management and financial analysis for the individual work streams. Detailed consultation will take place throughout each phase.</p>			
4. Rationale / Evidence Base for the Option			
<p>The Children's Disability Service sits within Children's Social Care and provides support to children with a disability and their families who require both the services of a specialist social worker and specialist disability services. The Children's Disability Service brings together social work services with residential homes for children with a disability, homecare, sitting and befriending, occupational therapy, short breaks and direct payments. The catalyst for this project is to provide better flexibility for young people and their families, who are in need of specialist disability services.</p>			

There are also some national policy drivers such as set out in the Special Educational Needs (SEN) White Paper and the Children and Families Bill. A key feature of the legislative changes is 'personalisation' enabling parents to have greater control over the services they would choose to meet their assessed needs, and for the local authority to stimulate a wider diversity of options for families to choose. The Bill includes provision to extend the age limit for this up to 25 years old.

5. What Will the Outcomes of the New Service Be?

A customer focused and user driven service which is more responsive to the changing needs and demands of both customers and stakeholders by providing:

- Greater flexibility and choice for children, families and carers.
- Early intervention and access to support without the need for social care involvement or intervention.

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?

GROSS
£000

13,031

NET
£000

12,815

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Gross Saving	0	0	1,180	1,180
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	0	0	1,180	1,180

WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET?

9.2%

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Capital Costs	0	0	0	0
Revenue Costs	0		0	0

8. Projected Permanent FTE Reductions

WHAT IS THE CURRENT PERMANENT FTE STAFFING?

227.2

WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?

2015/16 2016/17 2017/18

0.0

To be confirmed

0.0

To be confirmed

It is important to note that this options for change was previously consulted on, but for 3 years only. This proposal is to factor in a fourth year saving.

9. Anticipated Impact

ON SERVICE USERS AND COMMUNITIES
(incl. considerations relating to vulnerable people and communities & equality)

It is expected that any proposed changes to the way the Children's Disability Service is run will require an Equality Impact Assessment and consultation with relevant groups.

The potential introduction of personalisation over time is likely to have a positive impact on service users. This will enable families to have more input and control over how a child or young person is supported. However it is possible that budget reductions may result in a reduced service in some areas.

The detailed development of proposals will enable a full analysis of potential impacts on service users and appropriate action to be identified.

ON OTHER ORGANISATIONS / PARTNERS

This will be considered as part of proposal development.

ON OTHER PARTS OF THE COUNTY COUNCIL

This will be considered as part of proposal development.

10. Initial Equality Impact Assessment

Children's Disability Service - it is expected that an Equality Impact Assessment will be required due to the potential impacts on children with disabilities and their families of any changes to the way the Children's Disability Service is run. This will be completed once detailed options for change are developed.

WILL A FULL EQUALITY IMPACT ASSESSMENT BE REQUIRED? (Y/N)

Y

11. Risks and Mitigating Actions

Risk: Timescales to deliver savings could lead to risk of limited time to consult with parents, interest groups and other stakeholders.

Mitigation: Robust project management is in place, which involves mapping out timelines and key consultation and decision points.

Risk: It may not be possible to identify sufficient savings to meet the proposed savings target by 2017-18.

Mitigation: Further options scoping will determine the deliverability of these savings.

Risk: Nationally, it is unclear whether the personalisation agenda has achieved any efficiencies and implementation of personalisation may result in increased costs in the short term.

Mitigation: Close consultation has been undertaken and is ongoing with other local authorities to learn lessons from their approach.



		Option Ref	C09
1. Service Area	Transport and Travel Services		
2. Option Title	Reducing Local Bus Service Costs		
3. Summary of Option			
<i>The reduction will be achieved by withdrawing low performing services based on cost, usage and a number of socio-economic factors. In addition the frequency of some services would need to be reduced from hourly to two hourly and increased use of connecting services rather than direct services.</i>			
<p>To review and reconfigure the local bus service network to reduce expenditure by £720k between April 2015 and March 2017. This will be achieved through:</p> <ul style="list-style-type: none">• reviewing bus networks which were not part of the 2014 review (46 contracts with a value of £2m) to be completed by April 2015• monitoring the new contracts under a revised performance criteria (set out in the Transport & Highways Committee Report October14) to identify poor performance and consider withdrawal of these services by August 2016• provision of more connecting (rather than direct) demand responsive services or taxi bus especially in rural areas, (rolling programme), including Community Transport.• further use of the internal fleet to jointly operate local bus, social care and education transport, building on the successful integration of services this year• targeted marketing of high performing supported bus services with a view to increasing patronage and income to facilitate these services becoming fully commercial without continuing financial support from the Council. (April 2015)• introduction of a new North East Bassetlaw network. (April 2015) <p>This could lead to an overall reduction in the transport network (Nottinghamshire County Council supported and commercially provided).</p> <p>Bus operators have absorbed some of the current funding reductions but have also taken decisions to vary some commercial services to reduce costs. Further reductions could significantly affect the remaining local bus network with probable reductions and withdrawal of marginal commercial routes in rural areas. The County Council supported services will continue to provide access to essential services in mainly rural areas, however there would be no funding available to replace the commercial reductions or withdrawals. The Council supports around 100 services which are a mix of funding for marginal commercial services and local bus services which are predominantly rural .The changes may involve the following:</p> <ul style="list-style-type: none">- reductions in frequency and operating times (e.g. hourly frequency reduced to two hourly with limited peak hour trips)- withdrawal of peak hour and daytime commercial services- the withdrawal of some bus operators from the market limiting the provision of services and reducing competition which could impact on tender prices			

4. Rationale / Evidence Base for the Option

The current efficiency programme will reduce the local bus service budget by £1.8m to £4.2m by 2015/16. This has been achieved by service withdrawals £0.7m and reconfiguration £1.1m. The new network commenced in August 2014 and will operate to April 2016. Some £2m of services have not been reviewed and it is intended to do so over the next nine months including a significant area of work in North East Bassetlaw which has already started. Improved monitoring and data management of the services will enable future decisions on service retention to be more rigorous ensuring that service performance determines which services to continue supporting. The recent efficiency work showed that delivering services in a different way can deliver efficiencies.

5. What Will the Outcomes of the New Service Be?

- Continuing to provide access to key services albeit in a different way
- Comparable unit costs to other similar authorities is based on the CIPFA average data
- More robust monitoring and management of performance
- Further integration of services with the internal passenger fleet
- Continuing to provide high quality services maintaining our national recognition.

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?

GROSS
£000

25,043

NET
£000

18,416

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Gross Saving	300	300	220	820
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	300	300	220	820

WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET?

4.5%

This includes £100k of staff savings.

The net budget for local bus services in 2014/15 is £4.2m.

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2015/16 £000	2016/17 £000	2017/18 £000	TOTAL £000
Capital Costs	0	0	0	0
Revenue Costs	20	15	0	35

Revenue costs will be funded from the Bus Service Operators Grant (BSOG)

8. Projected Permanent FTE Reductions

WHAT IS THE CURRENT PERMANENT FTE STAFFING?

50.0

WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?

2015/16 2016/17 2017/18

0.0 2.0 2.0

4.0

9. Anticipated Impact

ON SERVICE USERS AND COMMUNITIES

The reductions will limit the transport options available to people especially low income households who rely on bus services. In some cases people may not be able to get to health services or work. This could impact on personal health and well-being, independence and mobility. It may require users to alter their travel passes and work arrangements.

ON OTHER ORGANISATIONS / PARTNERS

Service reductions will have an impact for bus operators, business, retail and leisure as well as impacting on development and growth.

ON OTHER PARTS OF THE COUNTY COUNCIL

If the opportunity to integrate is lost or not pursued further then Children Families and Cultural Services and Adult Social Care and Health will incur additional costs.

10. Initial Equality Impact Assessment

The proposals may have a higher impact on people who do not have any alternative travel options such as older people and people with disabilities.

Reduced opportunity for vulnerable people to undertake travel training.

WILL A FULL EQUALITY IMPACT ASSESSMENT BE REQUIRED? (Y/N)

Y

11. Risks and Mitigating Actions

- (a) The loss of services may affect other commercially operated local bus services due to revenue loss for the business.

MITIGATION: Work with the bus operators to agree sustainable solutions to retain the commercial network.

- (b) Changes to frequency and interchange may restrict access to key services.

MITIGATION: Intensive consultation/discussion with communities to identify any key issues and potential solutions.

- (c) Failure to provide new passenger data software leading to poor performance data.

MITIGATION: Ensure that the new software implementation is given priority.

- (d) Costs in the private sector increase above inflation.

MITIGATION: Could increase internal fleet operations or reduce services further.

- (e) Other County Council departments also face budget reductions which may include policy changes which could have unintended consequences for this option, leading to the loss of integrated routes.

MITIGATION: Ensure that all transport proposals are considered collectively.