

Appendix A
Category B Proposals

Reference	Department	Title	Committee	EqlA required and undertaken	Page Number
B01	Adult Social Care, Health & Public Protection	Community Safety: Reduction in Staffing	Community Safety Committee	Yes	1-4
B02	Adult Social Care, Health & Public Protection	Quality and Market Management: reduction in staffing	Adult Social Care and Health Committee	No	5-8
B03	Adult Social Care, Health & Public Protection	Improving collection of Continuing Healthcare Funding (CHC)	Adult Social Care and Health Committee	No	9-14
B04	Adult Social Care, Health & Public Protection	Alternatives to residential care for younger adults	Adult Social Care and Health Committee	Yes	15-18
B05	Children, Families & Cultural Services	Alternative Delivery Models for Children's Homes - Mainstream	Children and Young People Committee	No	19-22
B06	Children, Families & Cultural Services	Alternative Delivery Models for Children's Homes - Disability	Children and Young People Committee	No	23-26
B07	Children, Families & Cultural Services	Integration of Children's Disability Service (CDS) & Special Educational Needs & Disability (SEND) Policy & Provision	Children and Young People Committee	Yes	27-30
B08	Children, Families & Cultural Services	Family Service Integration	Children and Young People Committee	Yes	31-34
B09	Children, Families & Cultural Services	Changes to the Young People's Service mobile provision	Children and Young People Committee	Yes	35-36
B10	Children, Families & Cultural Services	Reduction in Youth Service Provision	Children and Young People Committee	Yes	37-38
B11	Children, Families & Cultural Services	Departmental Contracts Review	Children and Young People Committee	No	39-42
B12	Children, Families & Cultural Services	Community Partnership Libraries / alternative library provision	Culture Committee	Yes	43-46
B13	Children, Families & Cultural Services	Sports Development: removal of sports funding	Culture Committee	Yes	47-50
B14	Children, Families & Cultural Services	Reduction of Arts funding	Culture Committee	No	51-54
B16	Resources	Complaints Service Efficiencies	Policy Committee	No	55-58

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		Option Ref	B01
1. Service Area	Adult Social Care, Health & Public Protection		
2. Option Title	Community Safety: Reduction in Staffing		
3. What we propose to do and how we propose to do it			
<p>The Community Safety function for the Council is currently delivered by 4.8 full time equivalent (FTE) Community Safety Officers. The proposal is to reduce staffing by 1FTE post (20% reduction). This will require a re-prioritisation and re-allocation of Community Safety Officer roles and duties.</p>			
4. Why this option is being put forward			
<p>The cost of the Community Safety function per head of population is currently higher than a number of other County Councils in the class, indicating possible potential to reduce unit costs.</p>			
5. What is the impact?			
ON SERVICE USERS AND COMMUNITIES			
<p>Community Safety is a high priority for our communities, and for the Council. The Crime and Disorder Act 1998 places a duty on the Local Authority to consider community safety in all it does – the team is a key way of achieving this and joining-up the Authority's work.</p>			
<p>The proposal will impact on the Community Safety agenda and will require re-prioritisation of roles and duties.</p>			
<p>The proposal would result in a 20% reduction in the capacity of the team to deliver 3 roles:</p>			
<ul style="list-style-type: none">1. Coordinating and enabling the Safer Nottinghamshire Board, its Community Safety Partnerships, and other Groups that sit beneath the Board to reduce crime and disorder;2. Developing and delivering a range of initiatives the Council wishes to prioritise that tackle crime and disorder; and3. Managing the finance and performance of a range of initiatives on behalf of the Police and Crime Commissioner			

ON OTHER ORGANISATIONS / PARTNERS

Key partners include Nottinghamshire Police and the Police and Crime Commissioner. Police resources are also under pressure and this may result in a cumulative impact on Community Safety.

The Community Safety Officers also provide operational support to the Safer Nottinghamshire Board theme leads, facilitating the work to meet the cross cutting objectives (e.g. Hate Crime, Vulnerable People, Substance Misuse etc.). The leads are generally the Chief Executives and Corporate Directors of the District Councils.

The proposal would result in a 20% reduction in Community Safety Officer capacity within the Trading Standards & Community Safety Service to lead community safety partnership initiatives and support partnership initiatives led by other organisations/partners.

ON OTHER PARTS OF THE COUNTY COUNCIL

Community Safety Officers currently work closely with colleagues from across a number of County Council Departments (Community Development, Public Health, Adults and Children's Social Care), on cross cutting agendas such as Vulnerable People, Substance Misuse, Youth Issues, Reducing Re-Offending and Hate Crime.

The proposal would result in a 20% reduction in Community Safety Officer capacity within the Trading Standards & Community Safety Service, to support and promote other County Council initiatives.

COULD THERE BE A DISPROPORTIONATE IMPACT ON PEOPLE WITH PROTECTED CHARACTERISTICS? (Y/N) (*age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation*)

Yes.

The Community Safety team make a key contribution to partnership work to reduce Hate Crime within the County. The team provides support to the Safer Nottinghamshire Board Hate Crime champion. The accompanying Equality Impact Assessment explores the impact and mitigating actions in more detail.

DOES A FULL EQUALITY IMPACT ASSESSMENT ACCOMPANY THIS OPTION FOR CHANGE? (Y/N)

Y

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?	GROSS £000	268	NET £000	268
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WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Gross Saving	50	0	0	50
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	50	0	0	50

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

18.7%

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2016/17 £000	2017/18 £000	2018/19 £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?

4.8

WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?

	2016/17	2017/18	2018/19
	1.0	0.0	0.0

1.0

9. Risks and mitigating actions

Risks

A reduction in the County Council's capacity to contribute to and influence the wide range of Community Safety partnership initiatives within the county. Community Safety is seen as very important to local communities.

Mitigating Actions

A re-prioritisation of work currently undertaken by Community Safety Officers and re-allocation of duties to focus on the highest risk community safety issues and initiatives, and those delivering the most impact for the community. If the proposal is approved, the Council will communicate with key partners to inform them why the decision has been taken and how the Council intends to mitigate the impact.

10. Chief Officer Signoff

I confirm that in my opinion the option is realistic and achievable, and that known costs of implementation are included.

Signature

David Pearson

Date Signed

Nov. 2015

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		Option Ref	B02
1. Service Area	Adult Social Care, Heath and Public Protection		
2. Option Title	Quality and Market Management: reduction in staffing		
3. What we propose to do and how we propose to do it			
<p>This service monitors the quality of care and support delivered by care providers in Nottinghamshire. This service is delivered by 11 full time equivalent (FTE) Quality Development Officers (QDO) and this proposal is to reduce the number of QDOs by 3FTE. This would be achieved by changing quality monitoring processes to complement the Care Quality Commission's new approach, a new self-assessment tool and targeting support at providers who need to make improvements.</p> <p>The Council is committed to commissioning good quality care and support for Nottinghamshire citizens. We have developed and implemented robust processes and relationships with partner organisations to monitor the quality of care and support, which has driven up standards across the local authority boundary.</p> <p>In October 2014, Care Quality Commission (CQC) inspection methodology changed to completing comprehensive inspections and subsequently re-introduced a quality ratings system, where care provision is judged to be 'inadequate', 'requires improvement', 'good' or 'outstanding'. CQC have publicly indicated that they will have rated all registered adult social care settings by October 2017.</p> <p>By using the CQC ratings as the indicator of quality and fee payments (for older people's care homes) the Council would adopt a more targeted approach in relation to its audit process and refine the work of the quality development staff, and to complement the work of the national regulator whilst also achieving efficiencies through the development of a new way of working.</p> <p>A refined outcome focussed quality audit framework was successfully implemented in 2014/15 with care providers. This tool also lends itself for use as a quality assurance and self-assessment tool. It is proposed that this tool be issued to care providers annually for completion, which would then be returned to the quality monitoring staff to enable desk top analysis of the evidence submitted. This information would also include surveying the views of people in receipt of care and their relatives.</p> <p>Gathering and analysing this information, along with the CQC findings, would allow the Council to be sighted on the issues identified and faced in terms of challenges to quality for providers. It would also enable the quality monitoring staff to focus efforts to support improvements with providers, either through completion of responsive visits to the service or close liaison and support with the management in service specific action planning.</p> <p>Using the information and intelligence available would also help the Council fulfil its Care Act market shaping and oversight responsibilities as well as being able to respond flexibly to any referrals from Council staff regarding quality of care and support.</p>			

This approach would enable the Council to meet all contractual requirements, maintain a well-deserved and positive reputation for successfully challenging and decisively dealing with poor quality care delivery, offer assurance of quality of care and support provision and also enable the development of a flexible approach to supporting improvement, where needed.

4. Why this option is being put forward

The Council can adapt its quality monitoring processes to complement the regulator's recently refined approach. The underpinning legislation for health and social care provision indicates that the care provider retains responsibility for the quality of service delivery, as do the commissioners. The adjustment of process by the Council would give responsibility to care providers to supply evidence of the service delivered and its quality rather than depend on the Council to find and evidence this.

This change in approach has additional benefits of reducing potential duplication, enabling Council staff to be agile and responsive to situations and supportive to providers wishing to improve outcomes for our citizens.

By utilising the quality monitoring resource more effectively and efficiently through this changed way of working, fewer resources would be required to complete the quality monitoring work and therefore achieve efficiencies.

5. What is the impact?

ON SERVICE USERS AND COMMUNITIES

Communication and clarity of message is essential to enable the Council to retain public confidence in this approach.

ON OTHER ORGANISATIONS / PARTNERS

The messaging and understanding about a changed approach to quality monitoring is essential to our work with partner organisations such as the Clinical Commissioning Groups, Healthwatch and CQC to ensure all agencies are clear about the complementary nature of this approach.

ON OTHER PARTS OF THE COUNTY COUNCIL

The change in approach will have to be made clear to all operational staff, although it will allow the quality monitoring staff more opportunities to be responsive, therefore it is anticipated that this will be welcomed by staff in localities.

COULD THERE BE A DISPROPORTIONATE IMPACT ON PEOPLE WITH PROTECTED CHARACTERISTICS? (Y/N) (*age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation*)- no

Care Providers will be impacted because of the need to complete and return a self assessment tool. This is already part of their regulatory requirements and was introduced

and welcomed by providers as part of the last annual quality audit process. It is therefore anticipated that this will result in less work for care providers than supporting annual quality audits.

This tool (quality monitoring) also lends itself for use as a quality assurance and self-assessment tool and includes a requirement for providers to measure quality for the people they support, including those with protected characteristics.

DOES A FULL EQUALITY IMPACT ASSESSMENT ACCOMPANY THIS OPTION FOR CHANGE? (Y/N)

N

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?

GROSS
£000

661

NET
£000

661

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Gross Saving	45	0	0	45
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	45	0	0	45

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

6.8%

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2016/17 £000	2017/18 £000	2018/19 £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?

11.0

WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?

2016/17 2017/18 2018/19
3.0 0.0 0.0

3.0

9. Risks and mitigating actions

Risk:

Length of time CQC take to complete the quality ratings will impact on health and social care providers stated as attainable by October 2016.

CQC have recruited sufficient staff to enable the inspection programme to be completed

within the timescale.

Challenge of confidence in CQC's approach and ratings system and impact on this proposal.

Mitigation:

The previous incarnation of quality ratings proved problematic and CQC lost much public confidence through downsizing the organisation, being less visible and not completing comprehensive inspections. Learning has been achieved and the refined approach has been responsive to requirements.

Risk:

Adjustment of current quality monitoring staff to work across service areas rather than specific service areas, as is the current position.

Mitigation:

There will be a need to support learning and development of remaining quality monitoring staff to work across care homes for older people, younger adults, homecare and day services. Learning opportunities will be devised, delivered, implemented and competency evaluated to ensure an up skilled workforce is ready to complete the necessary work with, increased confidence. This will enable a more flexible workforce within the quality and market management team.

10. Chief Officer Signoff

I confirm that in my opinion the option is realistic and achievable, and that known costs of implementation are included.	Signature	Date Signed
	David Pearson	Nov 2015



		Option Ref	B03
1. Service Area	Adult Social Care, Health and Public Protection		
2. Option Title	Improving collection of Continuing Healthcare Funding (CHC)		
3. What we propose to do and how we propose to do it			
<p>To ensure that Continuing Healthcare (CHC) funding is accessible to all eligible Service Users, through robust and timely application of the national guidance. Where funding is agreed, ensure that processes between Health and the Council are systematic and efficient. Joint initiatives will be explored that aim to deliver efficiencies through more strategic, cost effective commissioning and / or joint demand management. This may include developing pooled budgets if this is assessed as beneficial.</p> <p>This will be achieved through:</p> <ol style="list-style-type: none">1. Improving processes and systems with Health partners<ul style="list-style-type: none">Ensuring that, where CHC or a joint package of funding between health & social care is agreed, timely, robust systems for recording, monitoring and collection are in place and that it is applied across all eligible services (i.e. not just care homes but also day service for example).2. Ensuring equitable access in line with legislation<ul style="list-style-type: none">Ensuring that all Service Users who are identified as being potentially eligible for CHC (or an element of health funding as part of a joint NHS / social care funded package) are referred and assessed appropriately and fairly. This will be monitored to ensure that eligibility locally is in step with the national average.3. Ceasing case management of fully funded cases<ul style="list-style-type: none">Ceasing arrangements for case managing fully funded CHC cases by Adult Social Care and Health (ASCH) staff. Once a case is identified as being fully funded the responsibility for managing the care package transfers to Health. ASCH would maintain responsibility for services outside of the care delivery e.g. safeguarding, adaptations.4. Consideration of joint arrangements with health (medium/long-term approach)<ul style="list-style-type: none">Assessment of whether a more joined up approach to CHC in the medium to long-term would deliver benefits and efficiencies. A pooled budget in itself would not achieve this, but may be a tool to support a shared, more robust approach to the strategic commissioning of quality, cost effective services and management of demand across agencies.			

4. Why this option is being put forward

1. Robust processes and systems with Health

Processes for the recording, monitoring and collection of CHC funding for cases that have been agreed at CHC panel are not always robust and systematic. As a result funding may be delayed or not claimed. Records show that currently £4.2m of income from Health is defined through audit processes as “at risk” (i.e. where the agreement to fund all or part of package has not been signed by / received from Clinical Commissioning Groups (CCGs)).

In practice the funding decision making is discussed with operational teams, who put in place the services that people need and the money is eventually collected. The current delay, however, in receiving the income does affect accounting processes and the Council’s budget. So more timely recovery of income would improve the Council’s budgetary position.

The delay is largely due to the systems of the CCGs being able to formally sign that they have agreed. The CCGs have now procured a new provider to undertake the work and have increased their in-house resources. Discussions are ongoing to speed up the formal sign-off process.

Work is already underway with the CCGs and finance colleagues to improve the approval systems and collection of income once it has been agreed at CHC panel. To date this work has focused on recovering £0.909m outstanding from 13/14 and £1.777m from 14/15.

There is also potential benefit in tightening up processes to ensure that all elements of the care package are discussed at CHC panels and that applications are made in a timely manner (e.g. to include transition funding for people coming out of hospital).

Further work to fully track the existing processes and identify opportunities for improvement may mean further income can be obtained from CHC or section 117 funding.

2. Ensuring equitable access

Although there is national Continuing Healthcare policy and guidance, the numbers of people accepted as eligible for CHC funding vary considerably across the country. There are some indications that eligibility in the Nottinghamshire County area is below the national average¹, so it is therefore important that all assessment staff are knowledgeable and confident about the application of CHC. Staff have access to online learning and some staff have previously received training from in-house and external trainers. Additional or refresher training would require funding, but the investment could improve outcomes for Service Users and the Council.

There may also be some benefit to re-raising the profile of CHC by appointing one of the Service Directors/Group Managers as strategic lead (N.B. a part-time operational lead post is set out later in this document as part of section 7: Implementation Costs).

¹ From data in *NHS Continuing Healthcare Activity Statistics for England, Quarter 4, 2014-15, Experimental Statistics* (June 2015) available at <http://www.hscic.gov.uk/catalogue/PUB17693/nhs-chc-eng-q4-2014-15-exp-rep.pdf>

3. Ceasing case management of fully funded cases

An investigation needs to be conducted into how many fully funded CHC packages are case managed by ASCH workers; where this is identified this practice should cease. Although this would not release cashable savings it would ease pressure on social work staff. ASCH staff would retain responsibility for services outside of the care delivery e.g. safeguarding, non-specialist adaptations, equipment and transport etc.

4. Consideration of Pooled Budget arrangements

Work is already underway to create a pooled budget for Transforming Care for people with learning disabilities (post Winterbourne View) programme. If successful, the model could be considered for other Service User groups, particularly people with mental health problems who are eligible for free services under section 117. For Transforming Care there are advantages as all 'eligible people' will be people subject to section 117 free aftercare, and as such, health and social care have a joint responsibility to fund services. Therefore having a pooled budget would enable individual support packages to be agreed in a timelier manner, without individual discussions about who is funding which element. This should support preventative work to avoid hospital admissions wherever possible. Principles of the funding for any pooled budget need be agreed i.e. partner contributions and protocols agreed in the event of an overspend.

For the wider population, unless all budgets were pooled and not charged for, there would need to be an assessment of each individual to see if:

- a) the individual met the criteria for funding from the pooled budget and then if so:
- b) a further eligibility assessment to see what element they should be charged for, as Health services are free, but a charge can be set against Council services.

Further work needs to be undertaken to ascertain whether any other Local Authorities and Health partners are effectively managing pooled budgets for Continuing Healthcare, and whether any cost savings have been generated as a result.

5. What is the impact?

ON SERVICE USERS AND COMMUNITIES

Potentially, more timely assessments and greater access to CHC funding in line with national CHC legislation and policy. Service Users who are eligible for NHS CHC are not charged for the service and would therefore benefit financially.

ON OTHER ORGANISATIONS / PARTNERS

- The improvement of finance processes should lead to fewer queries and delays with administration of CHC funding, which should also be beneficial to CCG finance departments. Moreover, CCG finance departments are less likely to be faced with a sizeable bill for CHC re-charges at the end of the financial year.
- Any increase to numbers put forward for assessment for CHC may lead to higher costs to the NHS and specifically local CCGs. CHC is an increasing budget identified as a risk to all CCGs and they are also seeking ways of reducing their spend on CHC.
- May reduce numbers of appeals and retrospective claims for CHC funding from service users and families as a greater number of people will have been considered.
- May increase workload for CHC provider (Nottingham City Care Partnership) as greater number of people will be referred and assessed.

ON OTHER PARTS OF THE COUNTY COUNCIL

Could create additional work for finance teams in monitoring and processing CHC funding.

COULD THERE BE A DISPROPORTIONATE IMPACT ON PEOPLE WITH PROTECTED CHARACTERISTICS? (Y/N) (*age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation*) - No

There could be a positive impact as more people may be assessed and become eligible for full or joint funding.

DOES A FULL EQUALITY IMPACT ASSESSMENT ACCOMPANY THIS OPTION FOR CHANGE? (Y/N)

N

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?

GROSS
£000

-22,749

NET
£000

-22,749

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Gross Saving	350	350	0	700
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	350	350	0	700

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

3.1%

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Capital Costs	0	0	0	0
Revenue Costs	63	63	13	138

Additional commissioning and finance time would be required to implement the proposed changes and develop Pooled Budgets.

To ensure all funding is being collected it is necessary to reconcile all Service Users' packages – this would require 0.5 full time equivalent (FTE) band 3-4 admin/finance officer (for the life of the project) to work alongside the existing finance officer collecting all outstanding funding.

An accountant (0.5 FTE band C) is also required to pursue the work on Pooled Budgets for years 1 and 2.

In addition an operational lead (0.5 FTE) is required for years 1 and 2 to work alongside the finance officer – it is suggested that this be at band C (Senior Practitioner).

Suggested role of operational lead:

1. Act as a departmental operational lead for CHC
2. Review inter-agency policy, practice and guidance
3. Review ASCH department's operational procedures
4. Deliver briefings & training on CHC to ASCH staff
5. Deliver expertise and support to ASCH staff regarding individual CHC cases
6. Monitor local performance and benchmark against regional and national data on CHC
7. Represent department at regional and local events and meetings if required
8. Work with finance colleagues to ensure efficient collection of income from CHC
9. Represent or deputise for ASCH managers on local and regional CHC panels
10. Assist in the development of Pooled Budgets for CHC for Transforming Care & Section 117 cases.

Breakdown:

0.5 FTE Finance Officer

0.5 FTE Accountant

0.5 FTE Senior Practitioner / Operational Lead

8. Projected Permanent FTE Reductions

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

0.0

2016/17 2017/18 2018/19

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

0.0 0.0 0.0

0.0

9. Risks and mitigating actions

Impact on income budget

The effect of increasing the number of fully funded NHS CHC cases (particularly if targeting the current jointly funded cases) may result in a small **decrease** in the income budget. In mitigation, it is projected that the Authority will be avoiding long term care costs and will therefore see a decrease in gross expenditure over time. This will be monitored.

Ensuring equitable access

The CHC budget is also an area of increasing spend presenting a financial risk to CCGs who are also now considering actions to manage this. There is a risk of increasing time being spent on debate about who is responsible for funding individual packages. In order to mitigate this, the Council is already working closely with CCGs to streamline and speed up decision-making processes so there is no unnecessary delay for people waiting for packages of care. Work is also planned to jointly agree how to best use both health and social care funding to commission services for people with complex health and social care services. One option to be explored is whether a health and social care pooled budget

would be of benefit.

Ceasing of case management of fully funded cases

If social workers no longer case manage people who are fully CHC funded (therefore the responsibility of health), social care will not have had an influence in identifying the services they receive. If the individual's health subsequently improves, this may mean that for a small number of people the Council has to fund all or part of a larger cost package than would have been the case had the Council been involved in initially deciding what the most appropriate services were. There is also a risk that health do not currently have enough of their own case manager capacity. In order to mitigate this, discussions will be held with health colleagues to agree how this change will be made.

10. Chief Officer Signoff

I confirm that in my opinion the option is realistic and achievable, and that known costs of implementation are included.	Signature	Date Signed
	David Pearson	Nov 2015



		Option Ref	B04
1. Service Area	Adult Social Care, Health & Public Protection		
2. Option Title	Alternatives to residential care for younger adults		
3. What we propose to do and how we propose to do it			
<p>To continue the programme of supporting people to move out of residential care and into Supported Living - primarily into specialist supported living services, but occasionally into 'ordinary' housing with outreach support.</p> <p>A total of 80 people to be moved over 3 years from 2017.</p> <p>Total cost saving of £700k – based on an average saving of £168 per week per package.</p> <p>In 2014/15, 40 people moved out of residential care into Supported Living with savings validated at £525K – a weekly average saving of £252. A more conservative average has been set on the assumption that there will be diminishing returns on this programme of work.</p> <p>There is a current programme of identifying people in residential care who could move on to Supported Living. A list of possible candidates is generated in a number of ways including:</p> <ul style="list-style-type: none">• the team working closely with some residential care providers• audits of residential care databases to identify potential mismatches between cost and need• referrals from community teams• referrals from the accommodation panel <p>The work requires:</p> <ul style="list-style-type: none">• reassessments of need (social care assessments)• Occupational Therapy environmental and housing assessments• work under the Mental Capacity Act in connection with 'where to live'• identification of suitable vacancies where appropriate• inclusion in new projects/developments where no suitable vacancy exists• use of the Accommodation Panel to prioritise referrals into vacancies and new developments. <p>The work is done on the back of a significant growth in new Supported Living developments through partnerships with housing providers and access to capital where required.</p> <p>An alternative route is to support the deregistration of residential care homes. Again this requires reassessment of need and worker under the Mental Capacity Act in addition to work with CQC. This is likely to support relatively small numbers of people to move on.</p>			

4. Why this option is being put forward

Evidence shows that:

- the programme supports the development of independence, in line with the Adult Social Care Strategy
- there are benefits to service users in terms of better life opportunities, more personal income, more housing security
- costs can be lower for the Council in Supported Living – this is because costs of daily living are funded through Service Users' own benefits and costs of housing are funded through housing benefit
- there is an ongoing programme of providers of Care Support and Enablement services reducing their costs with the potential therefore of further savings on an ongoing basis.

5. What is the impact?

ON SERVICE USERS AND COMMUNITIES

Supported Living is generally preferred by Service Users to residential care as they have more independence, choice, and access to higher levels of welfare benefits

ON OTHER ORGANISATIONS / PARTNERS

Potential to unsettle the residential care market

ON OTHER PARTS OF THE COUNTY COUNCIL

None identified

COULD THERE BE A DISPROPORTIONATE IMPACT ON PEOPLE WITH PROTECTED CHARACTERISTICS? (Y/N) (*age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation*) Y

DOES A FULL EQUALITY IMPACT ASSESSMENT ACCOMPANY THIS OPTION FOR CHANGE? (Y/N)

Y

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?

GROSS
£000

36,101

NET
£000

26,280

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Gross Saving	0	1,989	2,089	4,078
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	-1,689	-1,689	-3,378
NET SAVING	0	300	400	700

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

2.7%

7. Estimated Implementation Costs

The estimated implementation costs are staffing from the Supported Living team to work with Service Users who are currently living in residential care and assist them to live more independently. There is money already in the budget until half way through 2017/18 to fund these staff. The cost of staffing will be £36k in 2017/18 and £73k for the following two years.

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Capital Costs	0	0	0	0
Revenue Costs	0	36	73	109

8. Projected Permanent FTE Reductions

WHAT IS THE CURRENT PERMANENT FTE STAFFING?

0.0

WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?

2016/17	2017/18	2018/19
0.0	0.0	0.0

0.0

9. Risks and mitigating actions

Risk – non-delivery of savings

Mitigation – the savings have been profiled over 3 years to reflect the length of time and complexity of delivering new supported living accommodation so these savings should be deliverable over this timescale

Risk - Interdependency with reduction in residential care costs. If costs are reduced in residential care, this will impact upon potential savings generated from moving out

Mitigation – There will be close collaboration between the 2 projects – where people are identified for a move they will not be prioritised for a review of their residential care costs

Risk –some Service Users will cost more in Supported Living due to the reduction in economies of scale in support

Mitigation – Careful targeting required

Risk – some packages are joint funded with Health. Work may not realise maximum benefit to the Council

Mitigation – funding split to be considered as a factor in prioritisation

Risk – new housing projects are subject to delays beyond our control

Mitigation – project management approach to new developments

10. Chief Officer Signoff

I confirm that in my opinion the option is realistic and achievable, and that known costs of implementation are included.	Signature	Date Signed
	David Pearson	Nov 2015

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		Option Ref	B05
1. Service Area	Children's Social Care		
2. Option Title	Alternative Delivery Models for Mainstream Children's Homes		
3. What we propose to do and how we propose to do it			
<p>The Council currently owns and manages the following mainstream children's homes</p> <ul style="list-style-type: none">○ Lyndene provides 4 beds○ Oakhurst provides 4 beds○ West View provides 4 beds <p>This proposal is for an internal restructure of the children's homes and exploration of establishing a Joint Venture (JV) with the private sector.</p> <p><u>Internal Restructure</u></p> <p>The suggested structure has previously been applied successfully by Clayfields Secure Children's Home management team to reduce their costs. It would continue to meet statutory / regulatory requirements to keep children and young people safe and enable staff to provide high quality care.</p> <p>Independent evidence gathered from current approved providers suggests a uniform staffing structure could be adopted across all three homes, which would see a re-balance of care posts and a reduction in overall establishment by 3.0 full time equivalent (FTE). It is estimated this would save £153,000 per year.</p> <p>The internal restructure could also be a beneficial precursor to the establishment of a joint venture with the potential to realise savings earlier.</p> <p><u>Joint Venture</u></p> <p>A JV would provide the Council with an opportunity to secure a long-term partner for the running of these homes. This would provide the Council with external expertise and allow the Council to retain a greater level of control / influence than could be achieved through full outsourcing.</p> <p>The savings that would be achieved through a JV would be subject to engagement with the market and are unquantifiable at this stage, therefore there are no JV savings included in this proposal.</p> <p>A JV also presents opportunities for revenue sharing as a result of potential growth, although in practice the opportunities for this appear to be limited for mainstream children's homes.</p> <p>The potential for a JV will be explored over the coming months through engagement with the market.</p>			

4. Why this option is being put forward

The County Council's mainstream children homes are consistently deemed to be of 'Good' or 'Outstanding' quality by Ofsted. However, homes run by the Council are unable to compete on cost with placements with external providers of the same quality.

The main reasons for this are:

- External providers operate successfully on a different staffing structure with fewer Senior Support Workers and more Support Workers than Council homes.
- The cost of enhancements paid to Council staff as part of terms and conditions are higher than those paid in the private sector.
- Council homes have capacity for up to 4 placements in each home whereas many of the external providers we commission have capacity for 5 children. This means they are able to staff their homes more flexibly according to demand and matching requirements.

The provision of these homes is not a statutory duty of the Council, although the Council does have a duty to provide a suitable placement for Looked After Children.

Many local authorities do not run their own residential facilities, but contract with the market.

The Council currently has 79 external placements, and the internal placements only account for 12% of the total.

5. What is the impact?

ON SERVICE USERS AND COMMUNITIES

Service users should see little impact on the service they receive.

If homes were operated via a joint venture, existing staff would Transfer of Undertakings, (Protection of Employment) regulations (TUPE) with the service ensuring that there was continuity of care for existing users.

ON OTHER ORGANISATIONS / PARTNERS

If homes were operated via a JV the Council may have less influence on prioritisation unless built into the contract.

ON OTHER PARTS OF THE COUNTY COUNCIL

If the homes were operated via a JV, the impact on the infra-structure required to support them would need to be determined.

COULD THERE BE A DISPROPORTIONATE IMPACT ON PEOPLE WITH PROTECTED CHARACTERISTICS? (Y/N) (*age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation*)

No

DOES A FULL EQUALITY IMPACT ASSESSMENT ACCOMPANY THIS OPTION FOR CHANGE? (Y/N)

N

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?

GROSS
£000

1,795

NET
£000

1,795

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Gross Saving	87	0	66	153
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	87	0	66	153

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

8.5%

Savings profile reflects the post reductions in 2016/17 and the pay protection in 2018/19.

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Capital Costs	0	0	0	0
Revenue Costs	100	0	0	100

Revenue costs for procurement costs and external legal advice.

8. Projected Permanent FTE Reductions

WHAT IS THE CURRENT PERMANENT FTE STAFFING?

45.3

WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?

	2016/17	2017/18	2018/19
	3.0	0.0	0.0

3.0

Staff remaining in the service post restructure would be subject to a TUPE transfer if a JV was established.

9. Risks and mitigating actions

Risk: Could potentially lead to loss of experienced personnel during the process (requiring replacement with expensive agency staff). This could impact on young people in placement as their keyworkers may be changed more times during the process.

Mitigating Action: Ensure proposals and rationale are transparent and that trade unions are able to be actively involved in supporting residential care colleagues. Pay would be protected for two years.

Risk: This proposal will reduce staffing in each home, this could have an impact on quality.

Mitigating Action: Ensure all stakeholders are aware that homes in the independent sector with 'Good' Ofsted ratings already employ this structure. The Council commissions placements with providers who operate in this way already and will continue to do so. Staffing levels will meet any regulatory requirements at all times.

Risk: Potential for community resistance.

Mitigating Action: Clear, constructive and timely dialogue with all stakeholders.

Risk: Lack of interest from providers leading to failure to secure appropriate bidders to take on the service due to TUPE considerations or other operational factors.

Mitigating Action: Engage with potential market candidates in soft market testing to assess likelihood of interest and establish potential barriers to bids.


Risk: Lower quality provision.

Mitigating Action: Contract can be specified to require good or outstanding Ofsted rated provision. The Council would still retain a level of control / influence in a JV.

Risk: Local authority is exposed if the cost of external provision rises.

Mitigating Action: The contract would need to be tightly specified. The Council would still retain a level of control / influence in a JV.

10. Chief Officer Signoff

	Signature	Date Signed
I confirm that in my opinion the option is realistic and achievable, and that known costs of implementation are included.		17/11/2015



		Option Ref	B06
1. Service Area	Children's Social Care		
2. Option Title	Alternative Delivery Models for Children's Homes – Disability		
3. What we propose to do and how we propose to do it			
<p>The Council currently runs the following homes for children with disabilities:</p> <ul style="list-style-type: none">○ Caudwell House provides 4 Looked After Children (LAC) beds and 8 short break beds (note: there is capacity to increase this to 6 x LAC beds and 10 short break beds).○ Minster View provides 6 LAC beds and 6 short break beds○ The Big House is a new facility, which provides 8 short break beds <p>This proposal is for an internal restructure of the homes for children with disabilities and exploration of establishing a Joint Venture (JV) with the private sector.</p> <p>The provision of these homes is not a statutory duty of the Council, although the Council does have a duty to provide a suitable placement for LAC where required. Many local authorities do not run their own residential facilities for children with disabilities.</p> <p><u>Internal Restructure</u></p> <p>The suggested structure would mean a permanent reduction of 8.4 full time equivalent (FTE) posts overall and would continue to meet statutory / regulatory requirements to keep children and young people safe and enable staff to provide high quality care. This proposal is estimated to save £266,000 per year.</p> <p>The internal restructure could also be a beneficial precursor to the establishment of a JV to potentially realise savings earlier.</p> <p><u>Joint Venture</u></p> <p>A JV would provide the Council with an opportunity to secure a long-term partner for the running of these homes. This would provide the Council with external expertise and allow the Council to retain a greater level of control / influence than could be achieved through full outsourcing.</p> <p>The savings that would be achieved through a JV would be subject to engagement with the market and are unquantifiable at this stage, therefore there are no JV savings included in this proposal.</p> <p>Demand for residential care and short break provision is now typically focused on small group homes rather than larger more traditional settings like Caudwell House and Minster View. A JV presents opportunities for revenue sharing as a result of potential growth.</p> <p>The potential for a JV will be explored over the coming months through engagement with the market.</p>			

4. Why this option is being put forward

There is not enough demand for services and the Council is unable to consistently sell capacity to other Councils. This low occupancy has led to increased operational costs.

External providers are more flexible in how they staff their homes and meet peak demand by increasing staff and decreasing staff in periods of lower demand.

The cost of enhancements paid to Council staff as part of terms and conditions are higher than those paid in the private sector.

Demand for residential care and short break provision is now typically focused on small group homes rather than larger more traditional settings like Caudwell House and Minster View. The Council does not have the capital required to acquire and develop small group homes required to replace Minster View and Caudwell House.

5. What is the impact?

ON SERVICE USERS AND COMMUNITIES

Service Users should see little impact initially on the service they receive, although over time as the provision potentially changes service users may need to receive support from a different setting. For example, homes for children with disabilities, would be preferable in small group homes. Existing staff would Transfer under the Transfer of Undertakings, (Protection of Employment) (TUPE) with the service ensuring that there was continuity of care for existing users.

ON OTHER ORGANISATIONS / PARTNERS

The Council with a partner could develop provision that was required within the region and therefore benefit partners.

One of the beds at Caudwell House is currently utilised and paid for by another local authority.

Bassetlaw Clinical Commissioning Group currently make a financial contribution towards The Big House and dialogue would be required before changes to service provision.

ON OTHER PARTS OF THE COUNTY COUNCIL

If the homes were operated via a JV, the impact on the infrastructure required to support them would need to be determined.

COULD THERE BE A DISPROPORTIONATE IMPACT ON PEOPLE WITH PROTECTED CHARACTERISTICS? (Y/N) (*age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation*)

No

DOES A FULL EQUALITY IMPACT ASSESSMENT ACCOMPANY THIS OPTION FOR CHANGE? (Y/N)

N

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?

GROSS
£000

5,048

NET
£000

4,511

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Gross Saving	266	0	0	266
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	266	0	0	266

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

5.9%

Savings profile reflects the post reductions in 2016/17. This is through a reduction in posts, with no pay protection anticipated and is based on the following structure changes:

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Capital Costs	0	0	0	0
Revenue Costs	100	0	0	100

Revenue costs for procurement costs and external legal advice.

8. Projected Permanent FTE Reductions

WHAT IS THE CURRENT PERMANENT FTE STAFFING?

132.5

WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?

2016/17 2017/18 2018/19

8.4 0.0 0.0

8.4

Staff remaining in the service post restructure would be subject to a TUPE transfer if a JV was established.

9. Risks and mitigating actions

Risk: Could lead to loss of experienced personnel during the process (requiring replacement with expensive agency staff). This could impact on young people in placement as their keyworkers may be changed more times during the process.

Mitigating Action: Ensure proposals and rationale are transparent and that trade unions are able to be actively involved in supporting residential care colleagues.

Risk: This proposal will reduce staffing in each home, this could have an impact on quality.

Mitigating Action: Ensure all stakeholders are aware that homes in the independent sector with 'Good' Ofsted ratings already employ this structure. The Council commissions placements with providers who operate in this way already and will continue to do so. Staffing levels will meet any regulatory requirements at all times.

Risk: Potential for community resistance.

Mitigating Action: Clear, constructive and timely dialogue with all stakeholders.

Risk: Lack of interest from providers leading to failure to secure appropriate bidders to take on the service due to TUPE considerations or other operational factors i.e. current under-utilisation.

Mitigating Action: Engage with potential market candidates in soft market testing to assess likelihood of interest and establish potential barriers to bids.

Risk: Lower quality provision.

Mitigating Action: Contract can be specified to require good or outstanding Ofsted rated provision. The Council would still retain a level of control / influence in a JV.

Risk: Local authority is exposed if the cost of external provision rises.

Mitigating Action: The contract would need to be tightly specified. The Council would still retain a level of control / influence in a JV.

10. Chief Officer Signoff

I confirm that in my opinion the option is realistic and achievable, and that known costs of implementation are included.	Signature	Date Signed
		17/11/15

		Option Ref	B07
1. Service Area	Children, Families & Cultural Services (CFCS)		
2. Option Title	Integration of Children’s Disability Service (CDS) & Special Educational Needs & Disability (SEND) Policy & Provision		
3. What we propose to do and how we propose to do it			
<p>This proposal is part of the Improving Outcomes Project, which aims to establish an integrated disability service for children and young people with a disability (age 0-25 years) that is high quality and value for money. Working with CDS, SEND and Health Disability Services to identify areas for joint working/integration to reduce duplication, improve service user journey and experience, share resources and identify efficiencies. This is in line with a national trend to integrate such services and improve the outcome for service users.</p> <p>This proposal is to undertake a structural review and does not seek to make any changes to the existing service offer.</p> <p>This proposal is to integrate two existing service areas: the CDS (Children’s Social Care division) and SEND Policy & Provision (Education, Standards & Inclusion division).</p> <p>This proposal seeks to achieve an initial £450,000 in savings by:</p> <ul style="list-style-type: none">• Reducing the number of employees from an establishment of 208 full time equivalent (FTE) (not including flexible workers), by 7.96 FTE predominantly from management tiers• Ensuring consistency across terms and conditions by aligning job descriptions across services• Developing structures that meet the Council's organisational design principles, including spans of control• Reducing duplication by ensuring teams that provide a similar function or work with the same children, young people and families are aligned• Exploring our current commissioning arrangements across SEND, CDS, Health & Looked After Children (LAC) Placements to ensure the authority achieves best value for money from external service providers• Ensuring support is located in the right place at the right time <p>A further £51,000 is proposed to be saved through the removal of the assisted boarding education framework. This is funded from the SEND budget, although it is for specialist performing arts students studying at a boarding school. The framework was established to support pupils wanting to go to boarding school.</p> <p>It is proposed that funding will continue for students currently being funded until the end of their boarding school placements.</p>			

4. Why this option is being put forward	
<p>Rationalising of these service areas will enable a more integrated working approach for colleagues supporting children and young people with disabilities and special educational needs and their families in Nottinghamshire.</p> <p>This proposal seeks to streamline existing staffing structures into an integrated structure, aligning those teams that provide similar support functions or teams that work with the same cohort of children and young people. This seeks to reduce duplication of effort and support that is offered across children's services to ensure a consistent, streamlined and holistic approach for children and families, in an attempt to reduce the number of different professionals involved in a child's journey. Teams will be integrated with a view to reducing the amount of employees at a management tier.</p> <p>The continuation of the assisted boarding education framework is not sustainable.</p>	
5. What is the impact?	
<p>ON SERVICE USERS AND COMMUNITIES</p> <p>It is not anticipated that there will be any adverse impact on service users and communities through the integration of CDS and SEND, rather it is anticipated that the support they receive will remain appropriate to their assessed need and that pathways and access points to services will be improved and clearer. It is anticipated that integration will lead to a holistic assessment and package of support for children and young people with disabilities, and reduce the number of times a family has to tell their story.</p> <p>ON OTHER ORGANISATIONS / PARTNERS</p> <p>It is not anticipated that there will be any adverse impact, rather, a streamlined structure should enable improved direct lines of communications between the Council and organisations and partners. A detailed communications strategy will be developed and enacted upon based on the Family Service Project communications which has been well received by partners.</p> <p>ON OTHER PARTS OF THE COUNTY COUNCIL</p> <p>There will be support required from the Programmes and Projects Team, Human Resources (HR), Finance and Property colleagues in order to support the implementation of the proposal.</p> <p>COULD THERE BE A DISPROPORTIONATE IMPACT ON PEOPLE WITH PROTECTED CHARACTERISTICS?</p> <p>Y – age and disability.</p>	
<p>DOES A FULL EQUALITY IMPACT ASSESSMENT ACCOMPANY THIS OPTION FOR CHANGE? (Y/N)</p>	<p>Y</p>

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?

GROSS £000	6,675	NET £000	6,500
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WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Gross Saving	150	16	335	501
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	150	16	335	501

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

7.7%

At this stage it is difficult to profile the split between staff reductions and pay protection because the structure is still to be developed and consulted on. It is anticipated that the staff reductions will be in 16/17 and could therefore be higher than £150,000. The savings from pay protection would not be achieved until 18/19.

The £51,000 saving for the removal of the assisted boarding education framework is profiled across 2017/18 and 2018/19.

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Capital Costs	0	0	0	0
Revenue Costs	0	0	0	0

Project resource (0.5 FTE Project Manager & 1 FTE Programme Officer) is already allocated from the Programmes and Projects Team and is sufficient to implement these proposals.

8. Projected Permanent FTE Reductions

WHAT IS THE CURRENT PERMANENT FTE STAFFING?

208.0

WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?

	2016/17	2017/18	2018/19
	7.96	0.0	0.0

7.96

This does not include the 97 employees that work on flexible contracts within the Homecare, Sitting & Befriending Service.

9. Risks and mitigating actions

Risk: Could have an impact on staff morale.

Mitigating Action: Every effort will be undertaken to ensure that employees and trade unions receive comprehensive communications throughout the process so that they are aware of developments, timescales and the reasons for any staff reductions. HR support will be available to those staff affected.

Risk: Potential for community resistance.

Mitigating Action: Clear, constructive and timely dialogue with all stakeholders.

10. Chief Officer Signoff

I confirm that in my opinion the option is realistic and achievable, and that known costs of implementation are included.	Signature	Date Signed
		17/11/15



		Option Ref	B08
1. Service Area	Family Service		
2. Option Title	Family Service Integration		
3. What we propose to do and how we propose to do it			
<p>The Family Service project was initiated to bring together family support provision from across Children’s Services into a new, integrated service arrangement. The new service has established a new operational model and staffing structure which will streamline existing services and deliver more consistent support for service users. The new service was launched at the beginning of November 2015.</p> <p>There is an existing business case for the Family Service to reduce expenditure by £1.1m by 2018, which was approved by members in 2014. This proposal is to save a further £257,000 saving to the existing business case.</p>			
4. Why this option is being put forward			
<p>These additional savings reflect the position of the service following the delivery of the business case approved in 2014, and specifically relate to:</p> <p><u>Increased income</u> – based on the modelling completed when the threshold for fines/ prosecutions for school attendance were amended we believe that this is a realistic income target. The additional costs of collection have been taken into account.</p> <p><u>Programme reductions</u> - the proposal will still allow the service to deliver the necessary statutory functions and to deliver a programme of early help activity to those families in the most need. It will also mean that we can continue to support universal settings to act in a “Lead Professional” capacity.</p>			
5. What is the impact?			
<p>These impacts reflect the outcomes from this proposal and the earlier business case approved in 2014.</p> <p>ON SERVICE USERS AND COMMUNITIES</p> <ul style="list-style-type: none">• Service users – emergency immediate financial support to families in need will be removed• Communities – the number of families receiving more intensive interventions will reduce and waiting times may increase. <p>ON OTHER ORGANISATIONS / PARTNERS</p> <ul style="list-style-type: none">• Voluntary and charitable sector – there could be an increase in demand• Universal services – there could be an increase in demand as thresholds change			

ON OTHER PARTS OF THE COUNTY COUNCIL

- Children's Social Care - possible increased waiting times and the scope of interventions available to social workers will reduce.

COULD THERE BE A DISPROPORTIONATE IMPACT ON PEOPLE WITH PROTECTED CHARACTERISTICS? (Y/N)

Y – Age and gender. This is covered fully in the accompanying Equality Impact Assessment.

DOES A FULL EQUALITY IMPACT ASSESSMENT ACCOMPANY THIS OPTION FOR CHANGE? (Y/N)

Y

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

GROSS
£000

9,039

NET
£000

5,947

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Gross Saving	257	0	0	257
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	257	0	0	257

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

4.3%

7. Estimated Implementation Costs**WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?**

	2016/17 £000	2017/18 £000	2018/19 £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?**

129.6

WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?

	2016/17	2017/18	2018/19
	0.0	16.5	0.0

16.5

Current staffing includes 3.5 proposed posts due to changes to changed threshold for attendance enforcement (approved Sept 2015)

9. Risks and mitigating actions

Risk	Mitigating Action
The increase in threshold and a lack of immediate financial support leaves families without the support they require.	<ul style="list-style-type: none"> Continue support to lead professionals in schools and other universal settings Make use of charitable and grant making organisations to assist families in urgent financial need and poverty
Increased waiting times and a reduction in the availability of resources means that families involved with social care do not receive timely and effective interventions.	<ul style="list-style-type: none"> Agree revised menu of interventions and prioritisation with social care and early help professionals Promote and expand peer support, web based and self-help methodologies
Decreased resources lead to the required outcomes for Troubled Families not being met and therefore increased financial pressure.	<ul style="list-style-type: none"> Close monitoring of performance information Ensure management roles in delivery of the programme are clear Develop contingencies through maintenance of a reserve
The increased level of vacancy level turnover is unrealistic.	<ul style="list-style-type: none"> Operate strict vacancy controls Cover vacancies due to sickness, maternity etc. within existing resources
The level of income predicted from educational penalty notices and court costs is not realised.	<ul style="list-style-type: none"> Proactive action with school to identify cases where fines are appropriate

10. Chief Officer Signoff

I confirm that in my opinion the option is realistic and achievable, and that known costs of implementation are included.	Signature	Date Signed
		17/11/15

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		Option Ref	B09
1. Service Area	Youth Service		
2. Option Title	Changes to the Young People's Service mobile provision		
3. What we propose to do and how we propose to do it			
<p>The proposal is to not replace two of the remaining five mobile youth facilities and remove their staffing establishment when they reach the end of their original anticipated lifespan on 01 April 2018. Work will be undertaken to seek to transfer the two mobiles to potential partners in the third sector to ensure the continuation of the provision in some form, at no cost to the Council.</p> <p>One of the current five vehicles is operated as a spare, to cover servicing and breakdowns, and therefore operates at a lower cost (£5,000) because there are no staff allocated to it. The four operational vehicles cost £49,250 per year each.</p> <p>This proposal would move to a minimal operating model of two vehicles, plus the spare at a cost of £103,500, with a saving of £98,500. These would be deployed to the eight most deprived locations that the current vehicles operate in.</p>			
4. Why this option is being put forward			
<p>The mobiles have a limited life due to natural vehicle deterioration whereas the building based youth work has more permanent lifespan.</p> <p>With vehicles reaching the end of their approximately ten year life span it is only feasible to replace and operate three of the current five vehicles (two plus one spare).</p>			
5. What is the impact?			
<p>ON SERVICE USERS AND COMMUNITIES; Under this proposal, some communities would no longer receive this service.</p> <p>ON OTHER ORGANISATIONS / PARTNERS: May increase pressure on voluntary sector youth organisations to provide new/extended provision, police/criminal justice due to possible increase in nuisance behaviour. There may be potential to support the voluntary sector to take over the operation of one or more of the vehicles.</p> <p>ON OTHER PARTS OF THE COUNTY COUNCIL: No significant impact</p> <p>COULD THERE BE A DISPROPORTIONATE IMPACT ON PEOPLE WITH PROTECTED CHARACTERISTICS? (Y/N) (<i>age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation</i>);</p> <p>Y - Age. This is detailed fully in the accompanying Equality Impact Assessment.</p>			

DOES A FULL EQUALITY IMPACT ASSESSMENT ACCOMPANY THIS OPTION FOR CHANGE? (Y/N)	Y
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6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?	GROSS £000	3,085	NET £000	2,958
WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?				
	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Gross Saving	0	0	98	98
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	0	0	98	98
WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET?				3.3%
Excludes the capital receipt from the sale of the decommissioned mobiles.				

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Capital Costs	0	0	0	0
Revenue Costs	0	0	0	0

8. Projected Permanent FTE Reductions

2.8 FTE on a Term Time Only basis, which equates to 2.25 standard FTE.				
WHAT IS THE CURRENT PERMANENT FTE STAFFING?	4.5			
	2016/17	2017/18	2018/19	
WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?	0	0	2.3	2.3

9. Risks and mitigating actions

Risk: Potential for community resistance to the proposal.

Mitigating action: The Youth Service's voluntary sector development team (2 full time equivalent) may be able to support and or facilitate voluntary sector provision in some locations that the service would be withdrawing from. Young people will be encouraged, where public transport is available, to access the Council Youth Service building based provision. There are also some faith based and uniformed organisations that offer activities to people in these areas, but this not a direct alternative to open access youth work.

10. Chief Officer Signoff

I confirm that in my opinion the option is realistic and achievable, and that known costs of implementation are included.	Signature	Date Signed
		17/11/15



		Option Ref	B10
1. Service Area	Youth Service		
2. Option Title	Reduction in Youth Service Provision		
3. What we propose to do and how we propose to do it			
<p>Proposal to transfer the provision to an alternative provider, or to close the Young People's Centres (YPCs) at Quarrydale (Sutton in Ashfield) and Zone Out (Worksop) from March 2018. This would bring these areas in line with other communities with one local YPC. This will save £95,000 from 2018.</p> <p>Quarrydale operates four evenings per week and Zone Out operates three evenings per week. The Zone Out staffing establishment also delivers provision at the Rhodesia (Worksop) voluntary youth club one evening per week, which will still continue under this proposal.</p>			
4. Why this option is being put forward			
<p>Sutton and Worksop are the only communities in Nottinghamshire with two Council operated and owned Young People's Centres. The Sutton Young People's Centre and Valley Young People's Centre in Worksop (both purpose built within the last 8 years) would remain in operation on 4 nights per week during term times.</p>			
5. What is the impact?			
<p>ON SERVICE USERS AND COMMUNITIES; Service users would have to access alternative provision.</p> <p>ON OTHER ORGANISATIONS / PARTNERS; May increase pressure on voluntary sector youth organisations to provide new/extended provision, police/criminal justice due to possible increase in nuisance behaviour. A voluntary disabled group currently has free use of Quarrydale YPC on one evening per week.</p> <p>ON OTHER PARTS OF THE COUNTY COUNCIL: No significant impact.</p> <p>COULD THERE BE A DISPROPORTIONATE IMPACT ON PEOPLE WITH PROTECTED CHARACTERISTICS? (Y/N) (<i>age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation</i>);</p> <p>Yes – age and disability</p>			
DOES A FULL EQUALITY IMPACT ASSESSMENT ACCOMPANY THIS OPTION FOR CHANGE? (Y/N)			Y

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?

GROSS
£000

3,085

NET
£000

2,958

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Gross Saving	0	0	95	95
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	0	0	95	95

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

3.2%

This doesn't include the loss of approximately £12k of income to the Library service from the letting out of Zone Out at Workstop Library.

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2016/17 £000	2017/18 £000	2018/19 £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?

2.53

	2016/17	2017/18	2018/19
WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?	0.0	0.0	2.53

2.53

9. Risks and mitigating actions

Risk: Young people don't use provision available in other locations.

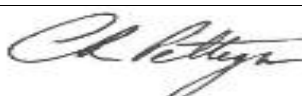
Mitigating action: The Youth Service's voluntary sector development team (2 full time equivalent) may be able to support and or facilitate voluntary sector provision in locations that the Council Youth Service would be withdrawing from.

There are also some faith based and uniformed organisations that offer activities to people in these areas, but this not a direct alternative to open access youth work.

10. Chief Officer Signoff

I confirm that in my opinion the option is realistic and achievable, and that known costs of implementation are included.

Signature



Date Signed

17/11/15



		Option Ref	B11
1. Service Area	Children, Families and Cultural Services		
2. Option Title	Departmental Contracts Review		
3. What we propose to do and how we propose to do it			
A review of all externally commissioned contracts over £50,000* total contract value to consider the:			
<ul style="list-style-type: none">• Impact of cancelling/ reducing the value of the contract• If there are clear measurable outcomes specified within the contract• If there are other similar contracts that could lead to a repackaging of the contracts into a bigger bundle• If the service could be provided in-house by changing internal structures/ capacity• If open book accounting can identify further efficiencies• To review the effectiveness of contract management arrangements			
The proposal is to save 3% of the total contract values.			
All contracts over £50,000 will be identified and reviewed by the Quality and Improvement Team/ Programmes and Projects Team with support from Corporate Procurement. Senior colleagues from the respective commissioning services will then be challenged to make a modest reduction without undue impact on service users through these revised arrangements.			
*The £50,000 level will be reviewed once more detail is gathered about the number of contracts in scope.			
4. Why this option is being put forward			
Some savings have already been delivered in individual service areas from cancelling external contracts and reshaping internal provision. A number of contracts may be historic and may have been rolled forward – so this is also an opportunity to see if all of the existing contractual arrangements remain fit for purpose, and to take corrective action where this proves not to be the case.			
5. What is the impact?			
ON SERVICE USERS AND COMMUNITIES			
These will have to be assessed at the same time as proposed changes to any contract.			
ON OTHER ORGANISATIONS / PARTNERS			
These will have to be assessed at the same time as proposed changes to any contract.			
ON OTHER PARTS OF THE COUNTY COUNCIL			
These will have to be assessed at the same time as proposed changes to any contract.			

COULD THERE BE A DISPROPORTIONATE IMPACT ON PEOPLE WITH PROTECTED CHARACTERISTICS? (Y/N)

These will have to be assessed at the same time as proposed changes to any contract.

DOES A FULL EQUALITY IMPACT ASSESSMENT ACCOMPANY THIS OPTION FOR CHANGE? (Y/N)

N

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?	GROSS £000	36,000	NET £000	34,917
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WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Gross Saving	0	250	830	1,080
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	0	250	830	1,080

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

3.1%

The above figures are based on identified contractual spend of £35m net during 2014/15, and also on achieving an average overall saving of 3% across the total spend. It is anticipated that this figure will vary from contract to contract; equally that some contractual savings are already accounted for in other proposals.

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Capital Costs	0	0	0	0
Revenue Costs	100	0	0	100

Revenue costs for additional contract management expertise. There will also be legal and procurement costs, which are not included in this figure.

8. Projected Permanent FTE Reductions

WHAT IS THE CURRENT PERMANENT FTE STAFFING?

0.0

WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?

	2016/17	2017/18	2018/19
	0.0	0.0	0.0

0.0

9. Risks and mitigating actions

Risks: Financial penalties of contract variations / termination.

Mitigating action: These will be considered as part of the decision making process. Legal will be engaged before any contracts are varied so that risks can be understood and managed.

Risk: Potential risk of legal challenge if terminating contracts is deemed unlawful; this includes Transfer of Undertakings, (Protection of Employment) (TUPE) risks / redundancy liabilities that may lead to one off costs.

Mitigating action: Legal Services will be engaged before any contracts are varied so that risks can be understood and managed.

Risk: Risk of service delivery failure and/or contract viability following contract reductions.

Mitigating action: Whilst all contracts over £50,000 total value will be looked at not all contracts will be changed – some will quite quickly be discounted because contracts are tight or the impact on services users is too great.

Risk: There is risk that there may be double-counting with existing business cases.

Mitigating action: A benefits realisation plan will be produced to avoid double-counting. There will also be close working with the corporate procurement team, finance, and programme and projects to ensure that savings are not counted twice.


Risk: Lack of capacity and/or the right skill set to form the teams allocated to support this work.

Mitigating action: The Group Managers for Quality and Improvement, Corporate Procurement and the Programmes and Projects Team will allocate staff with the appropriate skill set and ensure they have the capacity.

Risk: Contract / staffing costs going up i.e. with the introduction of national living wage.

Mitigation action: Identify those contracts exposed to cost increases.

10. Chief Officer Signoff

I confirm that in my opinion the option is realistic and achievable, and that known costs of implementation are included.	Signature	Date Signed
		17/11/15

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		Option Ref	B12
1. Service Area	Libraries		
2. Option Title	Community Partnership Libraries / alternative library provision		
3. What we propose to do and how we propose to do it			
<p>This proposal identifies £80k of savings (after taking account of loss of income and reprovision) from the continuing programme of establishing Community Partnership Libraries (CPLs).</p> <p>The pursuit of CPLs and other means of reducing the direct financial responsibility on the Council from maintaining the existing library network is currently being successfully applied to 8 libraries, where CPLs are in the act of being established. Communities have engaged to develop a sustainable partnership, based on reduction of costs. The actual level of cost reduction varies in each case but for Level 3 libraries evidence suggests an average saving to the Council of £10k per annum.</p> <p>This proposal seeks to continue the CPL development programme across all Community Libraries with less than 20,000 annual visits in order to reduce their reliance on Council funding through the current CPL approach.</p> <p>The progress in implementing this programme will be kept under review. However, this approach maintains the current position with regard to the development of CPLs or alternative library provision (e.g. access points / mobile stop) by March 2018.</p>			
4. Why this option is being put forward			
<p>Latest CIPFA benchmarking indicates that Nottinghamshire County Council Libraries are now provided at average cost and are higher performing than national averages. Benchmarking also indicates a higher number of library buildings for the size of the population and lower levels of volunteering.</p> <p>Current agreed business cases aim to save £1.8m by 2016/2017, without closure of any library. In order to maintain this approach and make further savings the options are therefore very limited.</p> <p>Savings through reductions of staff and overall spend have been made since 2009 amounting to over £4.5m, without closure of any service points.</p> <p>The 8 CPLs currently being developed have been established without a threat of closure or having to carry out alternative provision, as communities have engaged to develop a sustainable partnership, based on reduction of costs.</p> <p>There are disproportional corporate costs tied into the delivery of services through small library buildings, ICT (especially data costs) and property maintenance costs.</p>			

5. What is the impact?

ON SERVICE USERS AND COMMUNITIES

Service users would see the local library services funded and / or delivered, in a different way.

ON OTHER ORGANISATIONS / PARTNERS

The number and range of organisations that library services work with could be reduced. However in smaller low use libraries this is limited and there are no shared service implications. Some leased library spaces will have an impact on the landlord, often parish Council or village hall.

ON OTHER PARTS OF THE COUNTY COUNCIL

Possible reduction in central support services, ICT, Communications, Property etc.

COULD THERE BE A DISPROPORTIONATE IMPACT ON PEOPLE WITH PROTECTED CHARACTERISTICS? (Y/N) (*age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation*)

Yes

DOES A FULL EQUALITY IMPACT ASSESSMENT ACCOMPANY THIS OPTION FOR CHANGE? (Y/N)

Y

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?

GROSS
£000

13,353

NET
£000

7,961

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Gross Saving	0	0	100	100
LESS Loss of Income	0	0	7	7
LESS Costs of Reprovision	0	0	13	13
NET SAVING	0	0	80	80

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

1.0%

A capital receipt would be received for the Council owned library properties that are disposed of should library locations change.

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2016/17 £000	2017/18 £000	2018/19 £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?**

185.0

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

2016/17 2017/18 2018/19

0.0 0.0 4.5

4.5

9. Risks and mitigating actions

Risk: The significant amount of work and ongoing support required by CPL does not generate full cost savings.

Mitigation: This can be mitigated with a firm zero cost approach.

Risk: Development of CPLs, Library Access Points or delivery via a mobile stop does not get community support.

Mitigation: This can be mitigated by early information and consultation during Council budget consultation process.

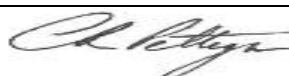
Risk: CPLs and alternative provision proposals do not receive local support.

Mitigation: This can be mitigated via budget approval and consultation process.

10. Chief Officer Signoff

I confirm that in my opinion the option is realistic and achievable, and that known costs of implementation are included.

Signature



Date Signed

17/11/15

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		Option Ref	B13
1. Service Area	Sports Development		
2. Option Title	Removal of sports funding		
3. What we propose to do and how we propose to do it			
<p>The proposal is to withdraw from the current secondment partnership with the County Sports Partnership (CSP) at the end of an extended secondment period, in March 2018. The savings will be realised at the start of the 2018/2019 budget year.</p> <p>This will result in a reduction of 3.3 full time equivalent (FTE). Replacement funding will have to be sourced via the County Sports Partnership (CSP).</p>			
4. Why this option is being put forward			
<p>Sports development is a discretionary role for the County Council.</p> <p>The 2015/2016 revenue budget for the Council's sports services is £216,000. A 50% reduction has already been agreed to be implemented by March 2017, leaving a £108,000 budget.</p> <p>The gradual withdrawal of funding has enabled the CSP to develop its role, as the County Council has reduced its historically high level of investment in sports development.</p> <p>The CSP will have a reasonable period of time (March 2018) to seek additional sources of funding.</p>			
5. What is the impact?			
ON SERVICE USERS AND COMMUNITIES			
<p>From a County Council perspective, the proposal will offer an opportunity to further work with the CSP to share resources and expertise to shape a joint offer and seek continuation funding beyond 2018.</p>			
ON OTHER ORGANISATIONS / PARTNERS			
<p>There will be an impact on the work and capacity of the CSP.</p> <p>Nottinghamshire County Council has forged a number of important strategic partnerships that in turn bring external resources for sports related activity into the County. Without a commitment from the authority to underpin work it could be argued that influence will diminish and as a result opportunities to benefit from national funding streams will not be realised.</p>			

ON OTHER PARTS OF THE COUNTY COUNCIL

No significant impact.

COULD THERE BE A DISPROPORTIONATE IMPACT ON PEOPLE WITH PROTECTED CHARACTERISTICS? (Y/N) (*age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation*)

Y – Disability.

DOES A FULL EQUALITY IMPACT ASSESSMENT ACCOMPANY THIS OPTION FOR CHANGE? (Y/N)

Y

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?	GROSS £000	148	NET £000	108
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WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Gross Saving	0	0	148	148
LESS Loss of Income	0	0	-40	-40
LESS Costs of Reprovision	0	0	0	0
NET SAVING	0	0	108	108

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

100.0%

The budget has been adjusted for existing proposal savings that have already been approved for future years.

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2016/17 £000	2017/18 £000	2018/19 £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?

3.3

	2016/17	2017/18	2018/19
WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?	0.0	0.0	3.3

3.3

9. Risks and mitigating actions

There is some limited mitigation in that time is being allowed to seek other funding to continue roles beyond March 2018. Some work programmes may be picked up by other staff employed in the CSP.

10. Chief Officer Signoff

I confirm that in my opinion the option is realistic and achievable, and that known costs of implementation are included.

Signature



Date Signed

17/11/15

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		Option Ref	B14
1. Service Area	Arts Development		
2. Option Title	Reduction of Arts funding		
3. What we propose to do and how we propose to do it			
<p>The Arts Development service, which is a discretionary role for the County Council, has seen a significant reduction since 2009 of around 90% (by 2016/17). The existing service currently delivers:</p> <ul style="list-style-type: none">• Rural touring programme – Village Ventures• Work that directly engages with children, families and adult to enable participation in art and culture• Earth and Fire Ceramics Fair• Nottinghamshire Arts Fund – provides advice• Grant seeking – brings external funding into Nottinghamshire and County Council• Big Draw programme across Nottinghamshire – reaches over 8,000 children• Develops bids for specific projects – for example NOW 14-18 Poppies tour, Disability Arts Funding, Grants for Arts – children’s theatre in Libraries <p>This proposal is to save £63,000 by reducing the Arts Development service to a single post of County Arts Officer (£55,000), together with the County Council's financial contribution to Village Ventures Rural Touring programme (£22,000), which would enable the County Council to continue to secure external funding, e.g. for the Village Ventures programme which itself attracts approximately £350,000, together with the capacity to pursue other opportunities to procure external funds.</p> <p>The single post will seek additional external funding/support and develop projects to provide access to the arts and creative activity across Nottinghamshire. In addition the post will work with voluntary groups and partners to maintain arts based programmes, e.g. Big Draw.</p> <p>Ongoing delivery of artistic output through the library network and through schools will be maintained where possible.</p> <p>It is projected that this proposal would gain £568,000 of external funding, giving a return of £3.05 for every £1 of the Council investment over a three year period.</p>			
4. Why this option is being put forward			
Arts development is a discretionary role for the County Council.			

5. What is the impact?

ON SERVICE USERS AND COMMUNITIES

ON OTHER ORGANISATIONS / PARTNERS

The Arts Council England, Live and Local (Rural Touring) and Ceramics community.

ON OTHER PARTS OF THE COUNTY COUNCIL

Rufford Country Park – loss of Ceramics Fair and related income / footfall.
Capacity within the Libraries Community Benefits Society (CBS) contract to deliver Arts and gain external funding.

COULD THERE BE A DISPROPORTIONATE IMPACT ON PEOPLE WITH PROTECTED CHARACTERISTICS? (Y/N) (*age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation*)
N

DOES A FULL EQUALITY IMPACT ASSESSMENT ACCOMPANY THIS OPTION FOR CHANGE? (Y/N)

N

6. Projected Net Savings to the Budget

The budget figures below have been adjusted for existing proposal savings that have already been approved

WHAT IS THE PERMANENT BUDGET?

GROSS
£000

708

NET
£000

140

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Gross Saving	0	0	63	63
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	0	0	63	63

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

45.0%

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2016/17 £000	2017/18 £000	2018/19 £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?**

2.5

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

2016/17 2017/18 2018/19

0 0 1.5

1.5

9. Risks and mitigating actions

Transition Earth and Fire to an independent provider / partner.

10. Chief Officer Signoff

I confirm that in my opinion the option is realistic and achievable, and that known costs of implementation are included.

Signature



Date Signed

17/11/15

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		Option Ref	B16
1. Service Area	Complaints and Information		
2. Option Title	Complaints service efficiencies		
3. What we propose to do and how we propose to do it			
<p>The proposal is to make savings of £42,000 by:</p> <ul style="list-style-type: none">• Efficiencies in the complaints service and reducing the use of independent complaints investigators (£12,000)• Reconfiguring the Corporate Complaints process into a one stage process and extending the initial timescales within which a complaint must be responded to, resulting in efficiencies to save 0.5 full time equivalent (FTE) at Band B• Identifying further staff for centralisation within the Information Governance function and making efficiencies in the way these services are delivered. It is hoped that this will result in a reduction of 0.4 FTE.			
4. Why this option is being put forward			
<p>The way in which complaints and information are addressed strategically has changed in recent years with a number of staff being centralised into the Complaints and Information Team. Through this process there has been an improvement in performance and more complaints are now resolved at the first stage of a complaint, saving on time and resources across the Council.</p> <p>This reduction in complaints resolved at stage one has resulted in fewer investigations required to be undertaken by independent complaints investigators and therefore some budget efficiencies in this area can be made.</p> <p>Further efficiencies are considered to be possible by changing the approach to Corporate Complaints (i.e. those complaints against the Council which are not governed by a set statutory process – broadly everything except Children’s and Adults). If this process was changed into a single stage process with a longer timescale for initial responses then it is estimated that marginal savings of 0.5 FTE post could be saved.</p> <p>Some staff remain in other departments whose roles and job descriptions may involve information governance and therefore further centralisation may be possible and could provide scope for some further rationalisation and marginal savings. This may not prove possible however and depends on further work to examine role and responsibilities.</p> <p>Further work is also required to carefully review the resources and approach to Information Governance across the Council and to better identify which staff are involved in these duties in all departments so that their combined impact can be made more effective by centralisation whilst still providing an opportunity for overall reductions.</p>			

5. What is the impact?

ON SERVICE USERS AND COMMUNITIES

Increased timescales for corporate complaints and a reduction in stages available for each complaint.

ON OTHER ORGANISATIONS / PARTNERS

Nil

ON OTHER PARTS OF THE COUNTY COUNCIL

Further centralisation of information governance staff following review of staff roles and responsibilities in this area.

COULD THERE BE A DISPROPORTIONATE IMPACT ON PEOPLE WITH PROTECTED CHARACTERISTICS? No impact identified.

age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation)

It is not anticipated that this proposal will have a disproportionate, adverse or negative impact on people with protected characteristics.

DOES A FULL EQUALITY IMPACT ASSESSMENT ACCOMPANY THIS OPTION FOR CHANGE? (Y/N)

N

6. Projected Net Savings to the Budget

WHAT IS THE PERMANENT BUDGET?

GROSS
£000

734

NET
£000

734

WHAT ARE THE PROJECTED NET SAVINGS TO THE BUDGET?

	2016/17 £000	2017/18 £000	2018/19 £000	TOTAL £000
Gross Saving	12	18	12	42
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	12	18	12	42

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

5.7%

7. Estimated Implementation Costs

WHAT ARE THE ESTIMATED IMPLEMENTATION COSTS?

	2016/17 £000	2017/18 £000	2018/19 £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?**

18.0

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

2016/17 2017/18 2018/19

0.0 0.5 0.4

0.9

9. Risks and mitigating actions

Key risks are:

- A review of staffing across the departments does not identify any additional posts appropriate for centralisation
- The information governance work cannot be contained within current resources
- The number of complaints increases or complaints are not resolved at the earlier stages so additional independent investigator costs are required.

10. Chief Officer Signoff

I confirm that in my opinion the option is realistic and achievable, and that known costs of implementation are included.

Signature

John Francis Ward

Date Signed

24.11.15

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