

Report to the Adult Social Care and Health Committee

02 February 2015

Agenda Item: 7

REPORT OF THE DEPUTY DIRECTOR FOR ADULT SOCIAL CARE, HEALTH AND PUBLIC PROTECTION

ORGANISATIONAL REDESIGN & RESOURCES REQUIRED FOR CARE ACT IMPLEMENTATION

Purpose of the Report

- 1. This report:
 - Outlines the level of staff reductions still required in Assessment and Care Management in ASCH to achieve existing saving proposals published in November 2013.
 - Gives a summary of the work undertaken to assess the staffing impacts of the Care Act and provides the detail of these findings.
 - Requests consideration of a different approach to implementing Organisational Redesign that accounts for the increase in staffing required for delivery of the Care Act.
 - Identifies the anticipated impact of the Care Act on three other key areas of service: Customer Service Centre, Adult Access Service and Adult Care Financial Services.
 - Requests approval for the establishment of new temporary posts, the extension of
 existing temporary posts, and amendments to existing temporary posts, to support
 delivery of the implementation of the Care Act and undertake the necessary
 transformation to manage the increased demand for assessment and service provision
 through the transformation of how services are delivered.
 - Details other key areas of demand impacting on service delivery and suggests ways these could be met.
 - Summarises the financial implications of all of the above points.

Information and Advice

2. The staffing reductions required to deliver the savings for Assessment and Care Management in Younger and Older Adults and the Reduction of Social Care staff in Hospital settings, were outlined in the section 188 notice published in November 2013 and the details of the reductions have been shared with Trade Unions and staff. A summary of the savings required are below:

- Assessment & Care Management, Older Adults (B01)
 Reduction of Social Care Staff in Hospitals (B03)
 Younger Adults Assessment & Care Management (B07)
 £ 196,000
 £1,000,000
- 3. The proposals for the above Outline Business Cases are to achieve the savings by staff reductions. The number of reductions required includes a number of vacancies, which lowers the number of physical staff reductions required. There are approximately 30 FTE vacancies that correspond with planned reductions. These vacancies have been held specifically, in order to achieve the required savings for 2014/15. The combined savings required for the business cases in Assessment & Care Management for 2015/16 is £264,000, pending final confirmation from Finance.
- 4. In a scheduled progress report to the Adult Social Care and Health Committee on Organisational Redesign on 8 September 2014, it was highlighted that before further reductions could be implemented to achieve 2015/2016 savings, there was a need to consider additional and new demands and other challenges placed on the department. Primarily this refers to the Care Act but also includes increases in existing demand that cannot currently be met, as well as work undertaken by teams that have been established on a temporary basis such as the Central Reviewing Teams and the Data Inputting Team (DIT).
- 5. Work to quantify the impacts outlined above has been in progress over the last few months and a workforce capacity model has been designed that calculates the additional levels of staff required to meet new responsibilities arising from the Care Act. The model takes into account any planned changes to the way the service will work in the future, such as mobilisation of the Adult Social Care workforce over the next year and other changes to ways of working in line with the Adult Social Care Strategy, such as offering various methods of assessments to service users, including on-line assessments, and telephone assessments and reviews.
- 6. The model has been developed by the Transformation Team, in conjunction with the Care Act Programme Team and Finance. The model is evidence based, using establishment information and statutory return data (RAP) to understand productivity per worker. This is multiplied by the anticipated increase in demand as a result of the Care Act to calculate additional FTE required. Once this initial figure is reached, further work is done with the service to apply some reasonable assumptions on how the additional work will be completed to mitigate and lower the initial figures. This includes changes to ways of working and efficiency savings expected from mobilisation of the social care workforce which are accounted for in the model.
- 7. The model has focussed primarily on Assessment and Care Management in the first instance but work has also been undertaken on the impact in the Adult Access Service, Adult Care Financial Service and the Customer Service Centre

Care Act Staffing Requirements

Assessment and Care Management

8. The modelling work to date shows that to meet the increase in demand as a result of the Care Act in 2015/16 an additional 43.2 FTE posts will be required in Assessment and Care Management. This includes an increase in a variety of assessment posts as detailed in the table below at a combined cost of £1,676,867.

Post	Care Act Requirements 2015/16 (FTE)
Advanced Social Work	
Practitioner	1.1
Social Worker	22.2
Community Care Officer	16.5
Occupational Therapist	3.4
Promoting Independence	
Worker	0.0
Team Leader	0.0
Total	43.2

9. The below table shows a comparison of FTE reductions required to achieve the Organisational Redesign savings (OBCs B01, B03, B07) against the increase in FTE posts required for the Care Act from April 2015.

Post	Org Redesign Reductions (FTE)	Care Act Requirements 2015/16 (FTE)	Difference (FTE)
Advanced Social Work			
Practitioner	1.7	1.1	-0.6
Social Worker	11.2	22.2	+11.0
Community Care Officer	13.9	16.5	+2.6
Occupational Therapist	0	3.4	+3.4
Promoting Independence			
Worker	5.3	0.0	-5.3
Team Leader	2.0	0.0	-2.0
Total	34.1	43.2	9.1

- 10. The above table shows that for the majority of posts the requirement of the Care Act exceeds the number of proposed reductions. Given this, it is proposed that the staff reductions planned for April 2015 are not implemented. This will mean that there will be no need for compulsory redundancies or to grant any voluntary redundancies across the Assessment and Care Management service and the skills and experience of the existing workforce will be retained to help the service manage significant increases anticipated as a result of the new Care Act legislation.
- 11. Details of exactly how the Care Act work will be undertaken is still being considered and the Care Act Programme Manager is currently preparing an options paper on the configuration of the workforce for consideration.

- 12. This approach will require some employees to move from their roles in existing teams to undertake the same or similar role in another team within the service. For example it is anticipated that there will be an increased need for assessment staff in Older Adults and there is a planned reduction in assessment staff in Younger Adults, these alternatives will be offered where the post is deemed a reasonable alternative for the individual in terms of skills required and levels of responsibility. This will be conducted in accordance with the Council's HR policy.
- 13. In order to achieve this movement across the department it is intended that the service would continue implementing the enabling process in line with Organisational Redesign enabling principles agreed with the Trade Unions. This includes operating on the grounds of least disruption to the service. Employees will be offered the opportunity to self-select moves to other available posts. Only where this is not possible will competitive interviews be undertaken and those displaced will be offered suitable alternative posts in the service.
- 14. It is intended that the original savings required from these OBCs will be removed from the permanent staffing budget, with the additional cost for the retained and increased staff being met by various sources of Care Act funding, some of which will be temporary.

Other areas impacted by the Care Act

15. In addition to calculating the impact of the Care Act on required staffing levels in Assessment and Care Management, the workforce model has mapped the impact on three other keys areas; the Customer Service Centre; Adult Access Service and Adult Care Financial Services, Strategic Commissioning, Safeguarding and Debt Recovery. Again there is still work to be done to understand exactly how the additional work will be completed and how the future workforce might be configured, however figures show that the below additional FTE posts will be required in 2015/2016.

Service Area	Additional FTE Required	Cost
Adult Access Service	2.3	£71,565
Adult Care Financial Services	6.5	£188,350
Customer Service Centre	4	£110,758
Safeguarding	1	£57,129
Strategic Commissioning	1	£49,172
Statutory Debt Recovery	1	£26,061
Total	15.8	£503,035

- 16. As a result of the increased resources required in these areas it is proposed, that some or all of the proposed reductions do not go ahead as planned.
- 17. This would affect the following Outline Business Cases:
 - Customer Services Centre (A28 proposed November 2014) a reduction of 8fte, 5fte at the level required for the Care Act.

- Adult Care Financial Services (A36 approved February 2014) a further reduction of 4fte to be implemented for April 2015)
- 18. As with the additional requirements in Assessment and Care Management it is envisaged that the cost of these additional posts should be met from funding for implementation of the Care Act but reductions from the permanent staffing budget can still be made to achieve the savings.
- 19. The Committee has previously approved changes to Home-based Services and the Multi Agency Safeguarding Hub, which need to be funded through the Care Act budget from 2014/15.

Total Cost	£90,729
Re grading of post in Home-based Services	£ 5,129
Reconfiguration of the MASH	£85,600

Care Act Programme resources

- 20. In May 2014 the Adult Social Care and Health Committee agreed funding for the Care Act Programme in 2014/15 of £328,956 until March 2015. Part one of the new duties and responsibilities under the Care Act need to be implemented with effect from April 2015. Over the last nine months, the programme has focused on ensuring the Council will be legally compliant with the new duties and responsibilities, and developing new ways of working to manage the demands from 2015 onwards. The second phase of the programme during 2015/16 will progress implementation of the new ways of working, such as alternative ways of delivering assessments and work with partners in the development of information and advice to the citizens of Nottinghamshire. The workforce will be reconfigured and new assessment activity planned in order to spread the load of the work during 2015/16. This will ensure new requests from self-funders can be managed within resources agreed. In addition, the major financial reforms will be implemented in April 2016 and new systems and processes will need to be designed, developed, tested and implemented. There are also critical financial and resource implications for the Council arising from these financial reforms which need to be fully modelled.
- 21. The composition of the programme team is based on the requirements to deliver key areas of work in 2015/16. It will continue to draw upon a range of expertise and knowledge to deliver key elements of the Care Act. For example, staff from Adult Care Financial Services will need to make a strong contribution to new work-streams both Charging for Support and Paying for Support.
- 22. Approval is also sought for the continuation of posts in the Care Act Implementation Programme Team. The posts are included in the table on page 7 of this report.

Current unmet demand

23. In addition to the requirements of the Care Act, it has become apparent through analysing performance data that there is a proportion of existing demand that presents to the department that is not currently being met within the existing staffing capacity.

- 24. This unmet demand falls largely in Occupational Therapy Assessments across both Older and Younger Adults' service areas. Waiting lists in this area are substantial and without additional resources to address these issues it is anticipated that these waiting lists will grow as demand for services increases.
- 25. Following work to understand the additional Occupational Therapy requirements in Young Adults' services it has been identified that an additional 1FTE post per locality would relieve the pressure on the service while work to streamline processes and change the operating model are undertaken, given the similar levels of pressure in the Older Adults' service the same rationale has been applied and a total of 7FTE Occupational Therapists are required at an annual cost of £302,946 p.a.

Existing Temporary Staffing Requirements

26. As well as posts required from April 2015 to implement the Care Act there are a number of other existing temporary post or teams within the structure that the modelling work assumes will continue and are required to meet the needs of the Care Act. These teams/posts are:

The Data Inputting Team
 1fte Team Manager- Adult Access Service
 £213,000p.a
 £ 52,000p.a

• 1fte Senior Practitioner Adult Care Financial Services £ 49,172p.a

27. The table on page 7 summaries all the additional posts required to meet new responsibilities arising from the Care Act that are proposed within the body of this report. The 86.7 FTE posts identified as additional resource required is not the number of staff that would need to be recruited. In the majority of cases there are already the staff numbers required. The 86.7 FTE represents the number of posts that funding is required for.

	T	Post Details	Г	
Area of Demand	Service Area /Team	Posts/Area	FTE Required	Cost 15/16
	Assessment & Care Management	Eligibility	10.0	£396,361
		Self Funder Assessments	24.4	£916,108
		Carers Assessments	2.8	£104,150
		Safeguarding	4.0	£173,690
		Prisons and Approved Premises	1.0	£43,278
		Transition Services	1.0	£43,278
	Adult Access Service	Adult Access Service	2.3	£71,565
Care Act	Adult Care Financial Services	Adult Care Financial Services Financial Assessments 5.5FTE DPA's 1FTE	6.5	£188,350
	Customer Service Centre	Level 2 Service Advisors and Management Support	4.0	£110,758
	Safeguarding Team	Designated Adult Safeguarding Manager (DASM)	1.0	£57,129
	Strategic Commissioning	Commissioning Officer	1.0	£49,172
	Statutory Debt Recovery	Statutory Debt Recovery Officer	1.0	£26,061
	MASH	Reconfiguration	0.0	£85,600
	Market Development	Regarding of HBS TM	0.0	£5,129
	Sub Total		59.0	£2,270,628
	Care Act Team	Programme Manager	1.0	£69,038
	Care Act Team	Project Manager	1.0	£52,000
	Care Act Team	Finance Business Partner	1.0	£49,172
	Care Act Team	Commissioning Officer	2.5	£122,930
	Care Act Team	Programme Officer	1.0	£43,278
Care Act Implementation	Care Act Team	Digital Officer	0.5	£18,474
	Care Act Team	Business Support Officer	0.5	£11,071
	Care Act Team	Direct Payments Commissioning Officer	0.7	£9,834
	Care Act Team	Direct Payments Community Care Officer	0.5	£0
	Care Act Team	Additional Non Staffing Costs	0.0	£10,000
	Sub Total		8.7	£385,797
Current Unmet Demand	Assessment & Care Management	Occupational Therapist	7.0	£302,946
Current Unmet Demand	Sub Total		7.0	£302,946
	Assessment & Care Management	DIT Team	10.0	£213,000
	Adult Access Service	1fte Team Manager	1.0	£52,000
	Adult Care Financial Services	1FTE Senior Practitioner	1.0	£49,172
	Sub Total		12.0	£314,172
otals		7	86.7	£3,273,543

- 28. Nottinghamshire County Council's funding allocation for implementation of the Care Act is expected to be £6.7m for 2015/16, of which £1.9m is to be allocated from the Better Care Fund.
- 29. The Department of Health has recommend allocations for the £6.7 million is set aside for certain elements of the Care Act. Early reports show that suggestions will be to allocate £1.8million for Early Assessments of Self Funders and £0.47million for Capacity building and Information from the overall total allocation of £6.7 million.
- 30. The Department of Health funding will also be expected to cover other costs of the Care Act, such as the cost of additional care packages for example for carers and arising from the new national eligibility criteria, and will not solely be for staffing resources.
- 31. It is also important to note that there is no guarantee of funding beyond 2015/16 for the Care Act. It is inconceivable that there would not be anything made available, but it is not known at what quantum, or on what basis, this would come. It is not expected that anything more will become clear until after the Comprehensive Spending Review following the 2015 General Election.

Other Options Considered

32. Given the significant increase to workloads that the new responsibilities arising from the Care Act will result in, the ability to achieve this without additional resources is not considered an option.

Reason for Recommendations

33 These recommendations are made to ensure that the Adult Social Care & Health Department have sufficient staffing resources to comply with Care Act legislation from April 2015 whilst still achieving the savings required for existing business cases.

Statutory and Policy Implications

34. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

35. The Financial Implications are contained within the body of the report.

Safeguarding of Children and Vulnerable Adults Implications

36. The request for additional resources contained within this report includes the resources required to meet the new and extended Safeguarding Responsibilities placed on the Council arising from the Care Act

Implications for Service Users

37. The additional resources requested within this report are required to ensure that the Authority is Care Act compliant and ensures the relevant service provision for Service Users requiring a service from the Adult Social Care and Health and Public Protection Department.

Ways of Working Implications

38. The report and the work undertaken to compile the report accounts for the new ways of working being rolled out across the Department.

RECOMMENDATIONS

That Committee:

- 1) approve the proposals for the establishment of 86.7 FTE additional post and extension of existing posts for 2015/16, as summarised in the table on page 7, to ensure that the Council meets the legal requirements of the Care Act from 1st April 2015;
- 2) approve the proposal to achieve existing savings proposals by reducing the permanent staffing budgets and agree that the Council's Care Act Funding Grants can be utilised to fund the additional posts required to implement the Care Act for 2015/16;
- 3) note the contents of this report for information relating to the Care Act.

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Constitutional Comments (LM 20/01/15)

39. The Adult Social Care and Health Committee has delegated authority within the Constitution to approve the recommendations in the report.

Financial Comments (to follow)

40.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Resource requirements for the Care Act Programme Team

Electoral Division(s) and Member(s) Affected

• All