

Appendix 2 a: Project Exceptions where the amount of savings at risk can be quantified – Reasons and Mitigating Action

Project	Reason for Exception	Mitigating Action
Reduction in long-term care placements	<p>Anticipated slippage of £0.262m from 2015/16 into 2016/17.</p> <p>Meeting the requirements of the Department of Health's Winterbourne View report has absorbed project staff resource and suitable supported living tenancies.</p> <p>It has also taken time to develop an effective list of approved housing providers. Whilst capital funding to develop new larger schemes will help to increase the availability of suitable accommodation, these take time to develop. Compounding this, two larger developments have been delayed.</p> <p>In tandem, the above has reduced the amount of suitable Supported Living accommodation available to facilitate project moves.</p>	Extensive work is being undertaken to engage with housing providers to develop new clusters of flats, and 62 new tenancies are anticipated by the end of 2015/16.
Reducing Community Care spend - Older Adults	<p>Anticipated slippage of £0.864m from 2015/16 into 2016/17.</p> <p>At the start of the financial year both the number of reviews being undertaken by the Central Review Team and the savings from these were less than over the same period during 2014/15. Whilst performance had since improved, more recently some of the team's focus has been diverted to other operational priorities that do not deliver savings.</p>	Additional resource is being allocated to the Central Review Team in order that reviews that deliver savings can continue whilst some of the Team are diverted temporarily to other departmental priorities.

<p>Reducing the Average Cost of Younger Adult Residential Placements</p>	<p>Anticipated slippage of £0.300m from 2015/16 into 2016/17.</p> <p>Delays in the recruitment of additional temporary staff to support project delivery have delayed the commencement of reviewing work.</p>	<p>Project implementation staff now in place. Savings achieved towards the 2015/16 target from the application of the Care Funding Calculator to date are being validated by Finance. In the meantime, it is anticipated that slippage into next year will total £0.300m.</p>
<p>Quality Assurance and Mentoring Package</p>	<p>The £0.075m savings target for 2016/17 is now deemed non-deliverable.</p>	<p>A new proposal for delivering the savings in a different way is currently in development.</p>
<p>Single integrated safeguarding support service</p>	<p>Following review, Project Sponsors are recommending that the two services work closer together to achieve efficiencies, but to retain the service in its current form.</p> <p>Therefore, the savings target of £0.070m is compromised.</p>	<p>Both the ASCH&PP Department and the CF&CS Department are to consume the target 50/50.</p>

Appendix 2 b: Project Exceptions where there may be some savings at risk but amounts are not yet known – Reasons and Mitigating Action

Project	Reason for Exception	Mitigating Action
Direct Payments (DP)	<p>Savings in 2016/17 may be less than estimated, based on the amount of unspent DPs re-couped this financial year to date from people's bank accounts. In addition, by then the re-modelled Resource Allocation System, ASCH Strategy, package reviews and more robust re-couping of surplus direct payments by Adult Care Financial Services (ACFS) will reduce the project's income potential.</p>	<p>Any potential savings shortfall in 2016/17 should be offset by reduced DP expenditure as a result of ongoing implementation of the ASCH Strategy by operational staff.</p> <p>The Direct Payments Policy was approved by Policy Committee in September 2015. Further staff guidance and information resources are being produced to support the increased take up of pre-paid debit cards and the recouping of surplus accrued funds. Further work will take place to design a staff training programme.</p>
Care Home Banding Rationalisation	<p>The original Option for Change envisaged that the remaining £0.1m savings allocated to this project were to be delivered through reviewing a small number of older adult placements where the residents are currently funded at a different fee level outside of the current bandings framework (i.e. service users who have entered long term care as a younger person and remained in the homes after reaching the age of 65).</p> <p>Work is being undertaken to review those service users in scope and assess where there may be potential to re-negotiate fees.</p>	<p>The work being undertaken to assess where there may be potential to re-negotiate fees will inform the level of savings that will be deliverable from this approach.</p> <p>Once the position is known, it is proposed that this project be closed and the remaining savings be either re-designated as low governance or managed as part of the <i>Reducing the average community care personal budget - Younger Adults</i> project.</p>

<p>Managing Demand in Younger Adults</p> <p>Development of reablement in Physical Disability services</p>	<p>Most of the projects' interventions lead to cost avoidance or a saving in staff time rather than cashable savings.</p> <p>Difficulties in identifying cases where savings can be made over and above either work previously undertaken by operational staff in Learning Disability Teams or the savings that are being delivered by Care Support and Enablement providers as part of the <i>Reducing the average community care personal budget - Younger Adults</i> project.</p>	<p>A new Younger Adults Reablement episode is being written on Frameworki which will allow a focussed, goal orientated approach across all Younger Adults teams that is time limited and aims to reduce or delay the need for longer-term care. It will also track and evidence outcomes from Younger Adult reablement interventions.</p> <p>Links are being made with a revised and expanded 'Promoting Independence for Vulnerable Adults' service that will commence in January 2016, to ensure alignment with the Younger Adult reablement pathway. Work is also being undertaken to tailor the pathway with the preventative and diversion work that will be undertaken at the Customer Service Centre.</p>
<p>Increasing income for Short Breaks</p>	<p>The £0.212m savings target assigned to this project relies on the Council's Short Breaks services for people with learning disabilities applying to become approved providers on the NHS Carers Breaks scheme. Once approved, the scheme will contribute towards the cost of the breaks taken in these units.</p> <p>Before the applications are submitted, the Department's Adult Access Team must review 120 carers of service users who use the Short Breaks service.</p>	<p>The Adult Access Team has agreed to undertake this work, though due to existing commitments this work cannot yet be undertaken. Therefore, there is a risk of slippage.</p> <p>However, the Short Breaks service is currently on target to spend within its reduced allocation for 2015/16.</p>

<p>Various options to reduce the cost of the intermediate care service</p>	<p>14/15 & 15/16 savings have been made by ceasing commissioning of independent sector bed based Intermediate Care and reducing funding to the County Health Partnership and the Bassetlaw Health Partnership for clinical services. To mitigate against the loss of bed based services, NCC care and support centres (CSCs) are being used for development of assessment beds.</p> <p>As achieving and maintaining the Intermediate Care savings relies partly on use of the CSC for assessment beds, when these close as part of the <i>Development of Extra Care Housing</i> project this service will be at risk unless Health picks up the cost of the assessment beds and these are provided in the independent sector.</p>	<p>Work is underway to forecast demand and model the service in the future.</p>
<p>Handy Persons Preventative Adaptation Service (HPAS)</p>	<p>The project savings target of £0.100m is predicated on reviewing and redefining the HPAS partnership, including seeking a proportionate financial contribution from Clinical Commissioning Groups (CCGs) to support the highest area of growth for the service, which is referrals to support hospital discharges, specifically to fit key safes rapidly.</p> <p>This revised funding arrangement has not yet been agreed with CCG colleagues.</p>	<p>Ongoing discussions with CCG colleagues.</p>