

Appendix C - Category C Outline Business Cases

Reference	Department	Service area	Title	Equality Impact Assessment Required & Undertaken
C01	ASCH&PP	Older Adults	Reducing Community Care Spend - Older Adults	Yes
C02	ASCH&PP	Younger Adults Commissioning	Reducing the average community care personal budget - Younger Adults	Yes
C03	ASCH&PP	Younger Adults Commissioning	Reduction in long term care placements	Yes
C04	ASCH&PP	Younger Adults Commissioning	Reduction in cost of transport services	Yes
C05	ASCH&PP	Younger Adults Commissioning	Managing Demand in Younger Adults	Yes
C06	ASCH&PP	Younger Adults Residential	Residential Short Breaks Services	Yes
C07	ASCH&PP	Day Services	Day Services	Yes
C08	ASCH&PP	Day Services	Employment Services	Yes
C09	ASCH&PP	Joint Commissioning, Quality & Business Change	Various contract changes by the Joint Commissioning Unit	Yes
C10	ASCH&PP	Joint Commissioning, Quality & Business Change	Savings from the Supporting People budget	Yes
C11	ASCH&PP	Joint Commissioning, Quality & Business Change	Cease NHS short breaks service (Newlands)	Yes
C12	ASCH&PP	Promoting Independence & Public Protection	Reduction in Trading Standards staffing and increased income generation	Yes
C13	ASCH&PP	Promoting Independence & Public Protection	Targeting Reablement Support	Yes
C14	ASCH&PP	Promoting Independence & Public Protection	Various options to reduce the cost of the intermediate care service	Yes
C15	ASCH&PP	Promoting Independence & Public Protection	Notts Welfare Assistance Fund (NAAF)	Yes
C16	CFCS	Children's Disability Service	Children's Disability Service	Yes



1 SERVICE AREA

Personal Care and Support (Older People)

2 WHAT IS THE PROPOSAL?

A range of services are available for Older Adults to provide care and support in community settings. A key challenge is to ensure the right level of care is provided at the right time and in the right way. In some cases the Council over provides services (and over-funds personal budgets), thereby creating a dependency rather than enabling independence. See examples below where this happens. Past experience shows that the Council over provides/funds some services when Service Users (SUs) have long periods in hospital, or take holidays, and do not always provide timely reviews to ensure that support packages remain appropriate to the individual's needs. Some services such as home care can be over funded because providers under deliver actual care and SUs cancel some visits. There is a mechanism to recover funds where this happens on services directly commissioned by the Council but such a mechanism has not yet been developed when SUs are in receipt of a Direct Payment. The introduction of an electronic monitoring system across all home care providers revealed a 17% difference last year between the hours commissioned and the actual hours of care delivered.

This proposal seeks to address these issues by reviewing packages with the aim of reducing the Community Care spend across all areas. This would result in changes to:

- (i) Direct payments: various approaches will be explored, including reducing initial payments, targeting reviews to identify underspends, staff training, and aligning the cost of direct payment packages to the average cost of managed budget packages.
- (ii) External Day Care: reviewing provision commissioned externally from the Voluntary Sector.
- (iii) Home Care: A separate home-based services project will contribute to the reduction in spend on home-care. The Council will also review cases where there has been a rise in the number of people requiring additional care staff to undertake home visits, and explore ways of reducing the number of cases where there is a double up, and two carers support someone at home. Targeted staff training will facilitate this change, on the use of new techniques and equipment.
- (iv) Payments made under the Chronically Sick and Disabled Persons Act (CSDPA) 1970, which includes telephone line rental payments and payments for Talking Books. The Act gives Local Authorities a duty to assist disabled people with the provision of a whole range of services, including equipment and adaptations. Where people are no longer eligible, service provision will cease.

3 WHAT IS THE RATIONALE FOR THE PROPOSAL?

Direct Payments: No adjustments to direct payments are currently made to reflect the % 'slippage' of actual delivery by home care providers, which from years of experience working across the council with contracted providers is estimated at around 17.5%. This can happen for a variety of reasons, including service users taking holidays and time spent in hospital. This results in money 'sitting' in service user bank accounts, which then has to be retrieved following a review. This proposal will explore various approaches to address this including: 1) Reducing the initial payment, to reflect the predicted unspent ('slippage') element. This would reduce the need to claw back unspent monies on the scale that we currently anticipate. 2) Increasing the level and frequency of reviews to identify underspends. 3) Training so that staff provide an allocated amount that provides sufficient support to promote and maintain independence. We would also ensure that Direct Payment allocations are in line with comparable Authorities, and with the cost of average managed budget packages of care.

External Day Care: This proposal seeks to review existing provision commissioned externally from the Voluntary Sector, with the aim of reducing the overall cost.

Home care: There has been a rise in the number of people requiring 2 members of staff to visit due to their complex needs and moving and handling requirements. Extra training and use of 'new' equipment could mean that care could be safely delivered by fewer staff, and funds and home care staff redirected to where it is most needed.

Phone Rentals: The Chronically Sick & Disabled Persons is vague in specifying "assistance", and it is not necessarily the case that a local authority must pay for the rental and installation of a phone, eg the Council no longer pays for TV licences, but does make phone rental payments and payments for talking books to those who meet specific local eligibility criteria. A review will be undertaken, to identify any users no longer eligible to receive phone payments, eg as they now use a mobile phone. Payments will be stopped to those no longer eligible. A policy change is also proposed, so that assistance to obtain a phone continues, but not paying costs towards installation or line rental.

Talking Books: In addition, there are currently 780 users of the talking books services at a cost of £72 pp per year. The proposal is to review those receiving the service to identify those that could use other services that might be lower cost or free. For some, the review will identify that the provision of Talking Books is still required. For new service users, they will automatically be signposted to alternatives.

4 WHAT IS THE PERMANENT BUDGET?

GROSS
£000

26,321

NET
£000

19,189

5 WHAT ARE THE PROPOSED NET SAVINGS TO THE BUDGET?

	2014/15 £000	2015/16 £000	2016/17 £000	Total £000
Gross Saving	780	1,820		2,600
LESS Loss of Income	-25	-59		-84
LESS Costs of Reprovision	0	0	0	0
NET SAVING	755	1,761	0	2,516

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

13.1%

6 WHAT IS THE CURRENT PERMANENT FTE STAFFING?

15.5

7 WHAT ARE THE PROPOSED PERMANENT FTE REDUCTIONS?

0.0

8 COSTS (significant one off costs associated with implementing the project)

Temporary assessment staff time would be required to undertake reviews over the first two years of delivery, including the review of cases where there is a double up involving two carers. Further analysis will be undertaken to identify the preferred way of undertaking these reviews.

As required, training would be needed (eg to undertake Talking Book assessments, on the use of new equipment, and new ways of working). Dedicated resource would also be needed to focus on Direct Payments to identify underspends in Service Users' bank accounts, and ensure re-payment.

Investment in equipment may also be required.

9 WHAT IS THE IMPACT?

ON SERVICE USERS AND COMMUNITIES

(including considerations relating to deprivation & equality)

Direct Payments: Some service users will not have sufficient budget to fully meet their care needs, but it is assumed the majority have more budget than they need, as actual 'delivery' of support is often less than the commissioned/assumed package. Hence, the accumulation of surplus money in their bank accounts. This model has been implemented elsewhere in other Councils. Also, whilst the average adjustment figure used in the Council itself is 17% for home-care services, within the Direct Payment process the Council could lessen the impact by reducing the average to 10% less than the initial allocation. We could also manage an 'exceptions' process for those that could evidence they need all of their personal budget. We would do this by exploring holding a reserve amount that could be used to reallocate to Service Users who do require the full allocation of resources. The impact is anticipated to be low.

Reduction in External Day services: Reduction of people's packages of care could lead to a number of complaints and the Council could expect challenges from charitable organisations who advocate on behalf of Older Adults if we remove services from those people who have been assessed to need this level of support.

Home Care: The double to single care element will result in a less invasive service (i.e. reduction from two to one carers), improved dignity of care, reduced physical and social stress, increased flexibility in the care routine, and increased empowerment/independence of the customer/service user.

Telephone Rental Payments & Talking Books: Disabled people who meet the eligibility criteria for a phone rental payment and who are not able to use a mobile phone will keep their existing service. People who need assistance in future to get access to a phone will be helped to do so, but no new phone rental payments will be set up. All using the talking books service are visually impaired and the majority of users are older people who may be reluctant to use other services that might be lower cost or free.

ON OTHER ORGANISATIONS

External organisations impacted by this proposal include:

- External care providers: Providers will be affected by any reduction in the type or level of service that they are commissioned to deliver to service users. Where they refuse, packages will need to be re-commissioned.
- Health: As some of the care packages are jointly funded with Health, they will benefit from any changes to care packages that reduces the overall cost.
- Partners (including financial) involved in the Integrated Community Equipment Service (ICES) - double to single care element of the proposal may increase some equipment requests.
- Royal National Institute for the Blind will be impacted by the Talking Books element, who is the current provider of Talking Books, as, where appropriate, users will be signposted to other services.
- Visual Impairment Support Groups, who represent the views of Talking Books service users.

Statutory consultation with relevant stakeholders will be undertaken.

ON OTHER PARTS OF THE COUNTY COUNCIL

The double to single care element would need to dovetail with the new Home Based Services contracts, which will become effective from April 2014.

10 INITIAL EQUALITY IMPACT ASSESSMENT

Even if the proposals apply to everyone equally, could they have a disproportionate / adverse or negative impact on people with protected characteristics, (age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation). If so how?

This proposal will impact on older adults currently living at home or in community settings. No potential disproportionate impact on them is anticipated. Please see the impact section above for any potential adverse or negative impact.

The Phone Rental Payment element will impact on disabled people (as defined by Section 29 of the National Assistance Act 1948) who receive payments under the Chronically Sick and Disabled Persons Act. People who are too disabled to use a mobile phone will have their existing payments protected.

As above, the Talking Books element will impact on those with a visual impairment, the majority of which are elderly.

11 RISKS AND MITIGATING ACTIONS

- Service users may not have sufficient funds to fully meet their identified care needs. Potential challenge to the Council by Service Users who feel their Direct Payments have been reduced. Mitigated by undertaking reviews of existing service users to establish need and real cost of needs. Also reviewing bank statements of Service Users to clarify real/actual spend.
- Some people may experience a reduction in the amount of Day Services they can fund. Some smaller day service providers may not survive due to loss in income. Mitigated by working with providers to integrate provision, where possible, and reduce overheads.
- Potential increased demand for in house day services, mitigated by re-assessing service users to establish eligibility.
- Should the separate home based services project be unable to deliver on the proposals, and associated savings, then there is considerable risk as costs may well increase in relation to home care. However, this proposal will seek to align the cost of direct payment packages to the average cost of managed budget packages.
- Talking Books keeps service users up to date and helps to tackle social isolation. Whilst those no longer eligible to receive the service will be signposted to other alternative services, some may be reluctant to use these. Support groups are likely to oppose the proposal.
- Depending on the approach taken, the double to single care element could bring the following risks:
 - 1) If Council Occupational Therapy (OT) and social work staff are used to undertake this element, a reduced and dispersed OT staff group could result in increasing waiting times for OT assessments. However, the cases involved would not be extra cases but already known, either via review or new cases to the department. Therefore, this would not be extra work, just working differently. All OT assessment staff should be moving towards this new approach. Further work would be required with Health colleagues with regard to hospital discharges, to work to a similar approach to reduce double care cases coming out into the community, and to focus on a single care approach.
 - 2) If external specialists are used to implement this element, this could delay staff 'buy in' of the new approach. Initial time would be required for the external specialists to build up an awareness and usage of the Council's internal processes and pathways. In addition, two strands could be utilised, eg using external specialists to complete double care reviews and using in-house OT staff to complete double to single care approaches on new care package requests (or vice-versa). This would enable learning by in-house OT staff, whilst providing different aspects for learning from external specialists.
 - 3) If time is not allowed for care providers to disseminate the training to their care workers on new processes/equipment, this would result in reduced effectiveness of the project. This would be mitigated by setting timescales for staff training, and on-going experiential learning will become the norm, to inform on-going and future development of the double to single care approach.
 - 4) All options require the compliance/agreement of service users to engage in the new one carer approach, with potentially new types of equipment and/or moving and handling techniques. Good communication with service users and their families/carers will be undertaken. Timescales would also be built into the transition, to allow service users, carers and families to accommodate the changed approach.
 - 5) Risk of Integrated Community Equipment Service (ICES) partnership not agreeing to purchase specific moving and handling equipment to support the project. Discussions would need to be held with ICES management prior to the implementation of the double to single care element, to reach agreement to the procurement of specific equipment, with a view to it being added to the standard stock equipment list.
 - 6) Risk of agreement not being reached with the relevant external care agencies involved in those double care cases to work jointly towards the project objectives. This would be mitigated by joint working with the Home Based Service Team on the new contracts, to ensure consistent positive working practices that facilitate the enhancement of the service users' contribution in the development of their independence to the highest level.

1 SERVICE AREA

Younger Adults Personal Budgets

2 WHAT IS THE PROPOSAL?

This proposal involves:

- Reviewing the care packages of existing service users across all areas (i.e. Learning Disabilities, Physical Disabilities, Mental Health and Aspergers) to identify if their needs have reduced over time, and hence the amount of support provided can be reduced, or whether support can be provided in a different way (e.g. through use of Assistive Technology instead of 1-1 care).

In particular, the following types of support will be reviewed; homecare, external day services spend; high cost care packages; commissioned Direct Payment packages, with an initial focus on DP packages for those with physical disabilities. The scope will exclude residential and nursing care spend, internal day care, and internal respite care spend.

- The review of supported living care packages will be subject to the award of new contracts with an anticipated saving built into the life of the contract based on providers meeting outcome based support plans
- Identifying any unused accumulated direct payment funds in service user bank accounts, to inform if direct payment allocations to service users can be reduced.
- A separate home-based services project will contribute to the reduction in spend on home-care. We will also review cases where there has been a rise in the number of people requiring additional care staff to undertake home visits, and explore ways of reducing the number of cases where there is a double up, and two carers support someone at home. Targeted staff training will facilitate this change, on the use of new techniques and equipment.
- A review of payments made under the Chronically Sick and Disabled Persons Act (CSDPA) 1970, which includes telephone line rental payments and payments for Talking Books. The phone rental review will identify those no longer eligible for support, and in such cases payments will be stopped. A policy change is also proposed, so that assistance to obtain a phone continues, but not paying costs towards installation or line rental. For those receiving Talking Books, the review will identify those that could use other services that might be lower cost or free due to advances in technology and access to new information technology.

The overall aim will be to: 1) Reduce the average community care personal budget across all areas; 2) Provide enough support to promote and maintain independence; 3) Commission services that have average package costs in line with comparable Authorities. 4) Ensure that the average cost of direct payment packages are in line with the average cost of managed budget packages.

3 WHAT IS THE RATIONALE FOR THE PROPOSAL?

• As part of existing savings and efficiency measures, existing supported living packages are being reviewed to identify areas where support may have previously been over-commissioned, where service user needs have reduced over time, or where support needs could now be met differently. This work has generated savings of more than £1m to date, with minimal impact on service users. In addition, Nottinghamshire has been successful in supporting a high number of people to move from receiving managed budgets to direct payments. Despite such change, when compared to budget and performance benchmarking data of other comparable authorities:

- The average personal budget across Nottinghamshire's Younger Adults service is high.
- The unit cost of direct payments is high in physical disabilities and learning disabilities.
- The overall number of people in receipt of services is high

• In addition, a review of the average cost of direct payment packages compared to managed budgets shows that the former is considerably higher, especially in physical disability. Further work is needed to establish if those who opt for direct payments are receiving higher allocations, or if greater resource is being allocated to direct payment support plans (than managed services). Evidence also suggests that there are accumulated direct payment funds in service user bank accounts that are not being used. The new proposals will ensure that the service is funding the right amount of support at the right time.

• There has also been a rise in the number of people requiring 2 members of staff to visit due to their complex needs and moving and handling requirements. The proposed changes will increase the capacity of overall care and support within the community, to enable the authority to continue to provide support where it is most needed.

• There are currently 780 users of the talking books services at a cost of £72 pp per year. The proposal is to review those receiving the service to identify those that could use other services that might be lower cost or free. For new service users, they will automatically be signposted to alternatives.

4 WHAT IS THE PERMANENT BUDGET?

GROSS
£000

29,914

NET
£000

29,218

5 WHAT ARE THE PROPOSED NET SAVINGS TO THE BUDGET?

	2014/15 £000	2015/16 £000	2016/17 £000	Total £000
Gross Saving	1,155	1,470	875	3,500
LESS Loss of Income	-230	-292	-174	-696
LESS Costs of Reversion				0
NET SAVING	925	1,178	701	2,804

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

9.6%

6 WHAT IS THE CURRENT PERMANENT FTE STAFFING?

N/A

7 WHAT ARE THE PROPOSED PERMANENT FTE REDUCTIONS?

N/A

8 COSTS (significant one off costs associated with implementing the project)

This proposal will require additional temporary staff to undertake the reviews over the first two years of delivery. These staff would be required to undertake reviews and re-assessments of up to 4000 service users in receipt of community based social care services. This would include a review of cases where there is a double up involving two carers. Further analysis will be undertaken to identify the preferred way of undertaking these reviews.

As required, training would be needed (eg to undertake Talking Book assessments, on the use of new equipment, and new ways of working). Dedicated resource would also be needed to identify accumulated unspent direct payment funds in service user bank accounts. Whilst an internal cost, legal costs will increase, due to the likely increase in disputes.

Investment in equipment may also be required.

9 WHAT IS THE IMPACT?

ON SERVICE USERS AND COMMUNITIES

(including considerations relating to deprivation & equality)

- The main service group affected by this proposal are younger adults (aged 18-65) with learning disabilities, physical disabilities, mental health needs and Aspergers. Service users across the whole of the County will be affected. They will see:
 - A reduction in the number of hours support they receive.
 - Changes to the type of support they receive (e.g. more use of Assistive Technology instead of one-to-one support). The double to single care element will result in a less invasive service (i.e. reduction from two to one carers), improved dignity of care, reduced physical and social stress, increased flexibility in the care routine, and increased empowerment/independence of the customer/service user.
 - As part of the review work, every service user will have their individual needs reassessed to ensure they receive services that are appropriate to their needs. Services will only be removed or reduced if individuals have been assessed as no longer requiring them. Over the longer-term, any impact on service users as a result of any reduction in the number of commissioned hours will be managed through the care management and reviewing process. As all service users have a personal budget, if outcomes are different to predicted, this will be picked up when care packages are reviewed annually by social workers.
 - Support will be focussed on those carers who provide a substantial amount of care. As a result, some carers will have to provide more care for longer. As part of the review process, carers will be asked if they are able to provide care
 - Those impacted by the phone rental review are disabled people (of any age). Those who meet the eligibility criteria for a phone rental payment and who are not able to use a mobile phone will keep their existing service. People who need assistance in future to get access to a phone will be helped to do so, but no new phone rental payments will be set up.
- All people using the talking books service are visually impaired and the majority of users are older people. Alternative support will be identified where appropriate

ON OTHER ORGANISATIONS

External organisations impacted by this proposal include:

- External care providers: Providers will be affected by any reduction in the type or level of service that they are commissioned to deliver to service users. Where they refuse, packages will need to be re-commissioned.
- Health: As some of the care packages are jointly funded with Health, they will benefit from any changes to care packages that reduces the overall cost.
- Partners (including financial) involved in the Integrated Community Equipment Service (ICES) - double to single care element of the proposal.
- Royal National Institute for the Blind will be impacted by the Talking Books element, who is the current provider of Talking Books, as where appropriate users will be signposted to other services.

Statutory consultation with relevant stakeholders will be undertaken.

ON OTHER PARTS OF THE COUNTY COUNCIL

This proposal will increase demands on assessment and care management resources, at a time when a separate savings option is proposing changes to the care management structure and process.

It may also make it more challenging for Corporate Procurement colleagues to undertake their Supplier Relationship Management programme with key providers, as suppliers may be less willing to work with the authority to reduce their unit costs, if the level of business commissioned with them is reducing.

It is likely that increased legal challenge will require a higher level of support from the Council legal services

There is also a separate proposal that seeks to retender supported living services. As part of this separate proposal, providers will be asked to identify cases where service user needs may have reduced over time, or where support could be provided in a different way. This work will be separate to, but compliment this proposal.

The double to single care element would need to dovetail with the new Home Based Services contracts, which will become effective from April 2014.

10 INITIAL EQUALITY IMPACT ASSESSMENT

Even if the proposals apply to everyone equally, could they have a disproportionate / adverse or negative impact on people with protected characteristics, (age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation). If so how?

As above, the main service group affected by this proposal are younger adults (aged 18-65) with learning disabilities, physical disabilities, mental health needs and Aspergers. No potential differential impact is anticipated. However, this and any negative or adverse impact of the proposal on service users will be considered as part of the equality impact assessment.

The Phone Rental Payment element will impact on disabled people (as defined by Section 29 of the National Assistance Act 1948) who receive payments under the CS&DP Act. People who are too disabled to use a mobile phone will have their existing payments protected.

As above, the Talking Books element will impact on those with a visual impairment, the majority of which are older people.

11 RISKS AND MITIGATING ACTIONS

As above, the existing programme of package review runs until the end of March 2014, and additional temporary staff have been recruited to assist with this. If the work is to continue to end March 2017, additional funding needs to be secured to extend the work of the team. There is a risk that existing staff will seek alternative employment, as their contracts less than six months remaining.

In some cases it is likely that either providers and / or service users may dispute decisions to change care packages, and in some cases this may lead to legal challenge. The assessment work and subsequent support planning process will ensure that any decisions to change care packages are informed by current service user needs. The adoption of the County Council's proposed Use of Resources policy will help to provide a framework within which officers can make decisions and management escalation can be described.

There is a chance that the review of packages might identify unmet need, and hence costs will increase. Experience gained as delivering similar work over the past two years suggests that this is unlikely.

Should the separate home based services project be unable to deliver on the proposals, and associated savings, then there is considerable risk as costs may well increase in relation to home care. This proposal will seek to align the cost of direct payment packages to the average cost of managed budget packages.

Talking Books keeps service users up to date and helps to tackle social isolation. Whilst those no longer eligible to receive the service will be signposted to other alternative services, some may be reluctant to use these. Support groups are likely to oppose the proposal. Full statutory consultation will be undertaken with stakeholders, and their views considered as part of the decision making process.

Depending on the approach taken, the double to single care element could bring the following risks:

1) If Council Occupational Therapy (OT) and social work staff are used to undertake this element, a reduced and dispersed OT staff group could result in increasing waiting times for OT assessments. However, the cases involved would not be extra cases but already known, either via review or new cases to the department. Therefore, this would not be extra work, just working differently. All OT assessment staff should be moving towards this new approach. Further work would be required with Health colleagues with regard to hospital discharges, to work to a similar approach to reduce double care cases coming out into the community, and to focus on a single care approach.

2) If external specialists are used to implement this element, this could delay staff 'buy in' of the new approach. Initial time would be required for the external specialists to build up an awareness and usage of the Council's internal processes and pathways. In addition, two strands could be utilised, eg using external specialists to complete double care reviews and using in-house OT staff to complete double to single care approaches on new care package requests (or vice-versa). This would enable learning by in-house OT staff, whilst providing different aspects for learning from external specialists.



SUMMARY PROPOSAL

Proposal Ref.

C03

1 SERVICE AREA

Younger Adults - Residential and Nursing Care

2 WHAT IS THE PROPOSAL?

- Identify a target group of 120 people currently living in long-term care (out of a total of 847 across all user groups), who would benefit from a move to alternative provision. This will target high cost placements.
- Develop alternative models to residential / nursing care (including more supported living, more use of Shared Lives, more interim step up / down solutions for those leaving hospital and emergency cases).
- Review triggers leading to admissions into long-term care. Subsequently, to use this information to reduce the number of new admissions into long/term care.
- Continue to use Assistive Technology solutions in order to keep individuals out of residential care and/or to support them in moves out of residential care.
- Reduce the number of new out of county residential / nursing care placements, review existing high cost out of county packages, and move 30% of current out of area service users back home to Nottinghamshire.
- Develop outcome plans pre-admission or within a set time-frame post admission.
- Provide support to individuals with disabilities living with carers / family, to enable them to continue to stay at home for longer.
- Focus on provision of supported living (SL) services as an alternative to more expensive residential care option where overall financial benefit accrues.
- Target SL services where there is both an individual and economic benefit.
- Reduce overall average unit costs of SL.
- Consider a range of options to maintain people in the community.

3 WHAT IS THE RATIONALE FOR THE PROPOSAL?

A review of benchmarking data suggests Nottinghamshire has a high number of adults with a learning disability in residential care. The average cost of LD residential care spend per person is also high (Mental Health costs and placements are also increasing). Some of this is explained by the authority taking on former Health campus provision, and as a consequence of meeting Winterbourne Report requirements, and changes to continuing healthcare arrangements.

As part of a national drive to reduce reliance on residential care and facilitate more independent living, since April 2011 the Authority has been supporting suitable LD younger adults to move from residential care into supported living (37 people in 2012/13). Whilst this work has been successful in terms of the number of individuals moved, the outcomes to individuals and savings delivered, in some cases moves have increased costs as:

- Support costs may be high, to support individuals through the transition of living independently and gaining skills and confidence.
- It is hard to predict the end costs at the start of the process.
- In some cases, moves are forced by the closure of low cost residential care homes.
- A lack of suitable SL provision, pushing up supply costs.
- Agreements with housing providers may require payment of void costs when someone moves out or if there is a vacancy.

A review of budget and performance benchmarking data suggests that in Nottinghamshire: there is still a high number of individuals with LD in SL; the average cost of SL for LD individuals is average to high; and savings achieved from moves from res care into SL could be higher. This proposal seeks to address these issues by:

- Supporting individuals to stay at home for longer: through more use of home care and day centre provision, the use of Assistive Technology, provision of respite for carers, and increased use of Shared Lives.
- Only providing supported living services as an alternative to more expensive residential care options, and where financial benefit accrues: by identifying the tipping point of when SL is more cost effective than residential care or other alternatives, and revising guidance to staff to guide decision making.

There are current 93 LD service users placed out of county. When last reviewed in 2009/10, nearly 30% (28/96) of cases were identified as possibly suitable for moving back to Notts, but to date only 13 have been moved. Moving people closer to home can bring benefits to service users, helps with meeting the Winterbourne Report requirements, and can bring cost savings.

Preliminary work has been undertaken to identify triggers leading to entry into l/t care. This shows that placements are often an interim solution, until a l/t alternative can be found, compounded by the lack of suitable alternatives. Further work is needed to explore the triggers, to inform initiatives to reduce new admissions.

The scope of existing work will extend to PD, MH and Aspergers.

4 WHAT IS THE PERMANENT BUDGET?

GROSS £000	64,159	NET £000	54,718
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5 WHAT ARE THE PROPOSED NET SAVINGS TO THE BUDGET?

	2014/15 £000	2015/16 £000	2016/17 £000	Total £000
Gross Saving	650	650	500	1,800
LESS Loss of Income	-100	-100	-77	-277
LESS Costs of Reversion				0
NET SAVING	550	550	423	1,523

WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET? 2.8%

6 WHAT IS THE CURRENT PERMANENT FTE STAFFING?

N/A

7 WHAT ARE THE PROPOSED PERMANENT FTE REDUCTIONS?

N/A

8 COSTS (significant one off costs associated with implementing the project)

Staff resource will be required to undertake the work. A team of temporary posts (four Community Care Officers and one Senior Practitioner) is currently supporting permanent staff with delivery of the existing programme of work, with contracts due to end April to June '14 . Therefore, funding to extend the length of these contracts until March '17 will be needed.

As the scope of the work is to be extended, additional temporary posts will also need to be recruited. The separate proposal to dis-establish the County-wide teams will remove existing staff supporting delivery of this work. Therefore, if this is actioned before 2016/17, further additional temporary resource will be required.

Capital funding will also be required to help develop alternatives and to install Assistive Technology solutions.

Legal costs and temporary void costs will also be incurred.

9 WHAT IS THE IMPACT?

ON SERVICE USERS AND COMMUNITIES

(including considerations relating to deprivation & equality)

These proposals will impact on younger adults (aged 18-65) with learning disabilities, physical disabilities, mental health needs or Autism, currently living in residential care (or who may move into residential care). Those assessed as most suitable will be moved into alternatives, such as supported living. The proposals will apply across the whole of Nottinghamshire. However, the Out of County work is most likely to impact on neighbouring Counties.

Moves out of residential care are encouraged nationally, for suitable individuals, as this gives individuals more control over where they live, who they live with and how they wish to be supported. It also brings increased independence and social inclusion. Some people may be settled and more resistant than others to moves, leading to potential disputes and legal challenges. Those living out of county are most likely to be those on the ASD spectrum (Autistic Spectrum Disorders) and those with Challenging Behaviour, who may not cope so well with change. Those who have moved out of county to be close to relatives are unlikely to want to move back to Notts. Conversely, for some moves will bring them closer back to relatives and friends.

- For those currently living at home, they will be supported to stay at home for longer. Some will have less opportunity to go into supported living.
- For those currently living in residential care:
 - Where this is an appropriate and cost effective way of meeting their needs, they are likely to remain in residential care.
 - Where a move into supported living or other alternatives will bring benefits to service users and has an economic benefit, they may move into alternative provision.

As the carers of those with learning disabilities will be expected to look after them at home for longer, this will put more onus on family members and circles of support.

ON OTHER ORGANISATIONS

Residential and nursing care providers will see a reduction in business placed with them, and hence may not support some moves. Conversely, providers of alternatives will see an increase in business. Some of these providers will overlap. The Department's recent Market Position Statement and Choice of Accommodation Guidance, together with Corporate Procurement's Supplier Relationship Management (SRM) Programme, will help work with and guide providers through this transition.

Similarly, moving some individuals back to Notts will increase placements with local providers, and they will benefit from support, training and joint working with the authority to help facilitate moves.

The proposals will involve continued work with District and Borough Council (Planning, Housing, Housing Benefit) colleagues, to help encourage the development of alternative housing solutions and ensure the need for new residential care provision is evidence based.

Health colleagues will also be involved in the development of suitable alternatives, building on successful partnership work as part of the existing programme of works. Where packages are jointly funded, Health will benefit from any savings achieved.

There may be some resistance to the proposals from some Health colleagues (especially in LD and MH, where there is a culture of promoting residential care).

ON OTHER PARTS OF THE COUNTY COUNCIL

This proposal will need to complement similar activity being undertaken in Older Adults, as part of the Living at Home Programme.

These proposals may impact on Procurement initiatives to negotiate lower unit costs with key providers.

There is potential for a more holistic approach with Market Development and Care Standards Unit around commissioning and quality monitoring.

10 INITIAL EQUALITY IMPACT ASSESSMENT

Even if the proposals apply to everyone equally, could they have a disproportionate / adverse or negative impact on people with protected characteristics, (age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation). If so how?

As above, these proposals will impact on younger adults (aged 18-65) with learning disabilities, physical disabilities, mental health needs or Autism.

The equality impact assessment considers any potential disproportionate, negative or impact assessment across all of the service user groups affected by the proposal.

11 RISKS AND MITIGATING ACTIONS

Risk; It may not be viable to achieve an average of 40 moves per year over three years. Other savings options that are seeking to reduce the level of support provided in the community will make it more challenging to move people out of residential care. **Mitigation;** Developing targeted plans tailored to each individual and provider will inform the best strategy to take and which 40 service users to focus effort on.

Risk; Moves out of residential care will continue to be countered by unavoidable moves into residential care, the level of which cannot be anticipated. **Mitigation;** the work planned as part of this proposal, together with planned improvements to the service's ability to improve information on future predicted needs, should help mitigate this.

Risk; In some cases, the cost of moves into alternatives may be higher than residential care. **Mitigation;** focussing on high cost residential care placements, efforts to keep people at home, and the work proposed to reduce the cost of supported living.

Risk; A number of providers may fall out of the market. There may be an inability to shape the market, especially if some providers are unwilling to engage. **Mitigation;** Procurement's stakeholder engagement strategy will help address this.

Risk; Until the proposals are approved, and temporary transitional funding secured, retention of the existing temporary staff may be difficult, who, in the absence of permanent contracts, may leave to take up other permanent posts.



1 SERVICE AREA

Transport for Adult Service Users

2 WHAT IS THE PROPOSAL?

This proposal seeks to achieve **an overall saving** on the expenditure on transport within Adult Social Care, Health and Public protection, in order to reduce the forecast overspend of £1m via a number of initiatives including:

- 1. Review of the Transport Policy** to focus available resources on those in most need of support with transport costs
- 2. Increasing income from individuals** towards the cost of transport services and thereby reducing the County Council subsidy
- 3. Removing the provision of subsidised transport to lunch clubs** for people who are not assessed as having critical and substantial needs
- 4. Reducing the cost of transport provision**

The aims of these changes are:

- Ensure that transport services are only provided to individuals who cannot source alternative, independent travel.
- Reduce the proportion of community care costs expended on transport services and the overall level of subsidy provided by the authority
- Enable improved budget monitoring and financial management of transport expenditure

3 WHAT IS THE RATIONALE FOR THE PROPOSAL?

The transport budget is forecast to be overspent and must be rectified urgently to manage in year budget pressures and prevent future overspends. The following areas are being considered:

1. Subsidised transport to people who attend lunch clubs: 222 people receive subsidised transport to 20 lunch clubs at the moment. The attendees have not been assessed as eligible for service provision under Fair Access to Care guidance. Therefore, this discretionary provision will be removed. Information about community transport schemes will be provided to clubs (£85K per annum saving).

2. Transport Policy Review: Many people receiving transport support from the Council are in receipt of DLA Mobility Component. The current policy allows for this, however consideration is being made to withdraw this provision, other than in exceptional circumstances. This would remove automatic transport entitlement to 50%-66% of current recipients NB if this is pursued the following options will have the savings attached reduced due to fewer people being transported (£0.6m -£1m pa potential saving).

3. Some people receive transport to short breaks services: This discretionary provision may be removed, other than in exceptional circumstances (£200K pa).

4. Increasing income from service users and other agencies: The transport charge will be raised from £5 per day to £7 pd. The amount of total charge will be monitored to ensure that nobody falls below the minimum income level set by national government. Also the charge will be made to people who travel less regularly and to people who take a Direct Payment for transport. We will consider whether to enable people to pay half the charge for a single journey, as this is not possible at the moment. The charge made to Nottingham City and the NHS for transporting their clients will be reviewed (£200K pa saving).

5. Reducing the cost of transport: We will reduce the cost of internal fleet in various ways, including changes to drivers working patterns, reducing the number of vehicles in use, using vehicles more intensively over the day, ensuring people attend their nearest appropriate services, using alternative transport where it is more cost effective (£500K pa saving).

4 WHAT IS THE PERMANENT BUDGET?

GROSS £000	2,643	NET £000	2,643
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5 WHAT ARE THE PROPOSED NET SAVINGS TO THE BUDGET?

	2014/15 £000	2015/16 £000	2016/17 £000	Total £000
Gross Saving	0	0	0	0
LESS Loss of Income	0	0	0	0
LESS Costs of Re provision	0	0	0	0
NET SAVING	0	0	0	0

This proposal will not deliver any additional savings. However, it will seek to reduce the £1m overspend.

6 WHAT IS THE CURRENT PERMANENT FTE STAFFING?

TBC

7 WHAT ARE THE PROPOSED PERMANENT FTE REDUCTIONS?

TBC

8 COSTS (significant one off costs associated with implementing the project)

Costs for staff time are already met (i.e.. financial analysis, commissioning of new transport arrangements, management and HR support for changes which affect staff). Existing IT systems may need to be amended or updated to allow for improved cost transparency and capture of performance data.

9 WHAT IS THE IMPACT?

ON SERVICE USERS AND COMMUNITIES

(including considerations relating to deprivation & equality)

People who currently receive transport support span the whole range of client groups (i.e. people with learning disabilities, people with physical disabilities, people with mental illness and older people). As a result of these proposals, some of these service users would no longer be eligible for support with transport to access services. The proposals would apply across all geographical areas.

The proposals may mean more business is generated for external transport providers such as community transport and taxis.

ON OTHER ORGANISATIONS

Independent lunch clubs will no longer receive subsidised transport provision.

External social care providers e.g. day care services, residential care and supported living providers will be affected as fewer people will be eligible for transport support.

Nottingham City Council could be affected by the review of their transport charge.

ON OTHER PARTS OF THE COUNTY COUNCIL

NCC Fleet operations will be affected. There may be a reduction in the number of vehicles and drivers required alongside changes to the transport routes and times.

More transport from external providers may be required.

10 INITIAL EQUALITY IMPACT ASSESSMENT

Even if the proposals apply to everyone equally, could they have a disproportionate / adverse or negative impact on people with protected characteristics, (age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation). If so how?

As above, this proposal will impact on a wide range of Nottinghamshire adults with social care needs who receive Council support to travel. No anticipated disproportionate impact on service users with protected characteristics is anticipated. However, this will be considered further as part of the Equality Impact Assessment that will be undertaken on the proposal.

11 RISKS AND MITIGATING ACTIONS

Risk: There is a risk that service users would no longer use some services.

Mitigating action: This potential risk would be carefully monitored to allow action to be taken if this presented significant risk to individual wellbeing.

Risk: There is a risk that reduction in numbers of people using transport services may not have a proportionate reduction in funding commitment due to shared and other transport arrangements for example transport savings are only released when whole vehicles can be saved. Mitigation: All travel arrangements would be reviewed to ensure the most cost effective travel option.

Risk: There is a risk that removing transport from lunch clubs will mean the closure of those groups if alternative transport cannot be found. The preventative service offered by those groups will be lost. Mitigating action: Information on community transport will be offered to all the lunch clubs.

Risk: Changes to provision of transport may be challenged. Mitigating action: All policy changes will be fully supported by legal advice.

SUMMARY PROPOSAL

Proposal Ref.

C05

1 SERVICE AREA

Younger Adults - Managing Demand in Vulnerable Adults

2 WHAT IS THE PROPOSAL?

This proposal seeks to review the eligibility for some people who are being referred into the service. These tend to be individuals with mild learning disabilities, moderate mental health needs or other vulnerabilities who are prone to crisis in life events and often have chaotic life styles, but who may not have substantial and ongoing social care needs.

This will complement a separate savings proposal which seeks to further develop delivery of re-ablement in physical disability services. In tandem, the desired outcomes are to:

- Reduce the number of people requiring ongoing social care support.
- Ensure that all people who use social care funded services are eligible for support at the level required and only receive support for as long as is required.

3 WHAT IS THE RATIONALE FOR THE PROPOSAL?

As part of the Organisational Redesign programme in 2011, the specialist Vulnerable Adult Worker posts were deleted and responsibility for the assessment and care management of this group of adults was shared across all younger adults teams. Nottinghamshire County Council appears to support a high number of people compared to other similar authorities. It is now proposed to:

- Identify the number of service users in this cohort being supported by the service.
- Confirm current average expenditure on this cohort and determine if this expenditure is appropriate.
- Identify the number of new cases coming into the authority each year, the reason for referral, and any mitigating actions to prevent delay or reduce referrals.
- Review current levels and forms of support to existing service users, to confirm if they are still appropriate, and identify people no longer needing support.

Where current forms of support are no longer appropriate, alternative provision or case closure is required.

Where new individuals are coming into the service inappropriately, a change in the response of the services and revised access arrangements are to be developed.

4 WHAT IS THE PERMANENT BUDGET?

GROSS
£000

64,159

NET
£000

54,718

5 WHAT ARE THE PROPOSED NET SAVINGS TO THE BUDGET?

	2014/15 £000	2015/16 £000	2016/17 £000	Total £000
Gross Saving	175	200	0	375
LESS Loss of Income	0	0	0	0
LESS Costs of Reversion	0	0	0	0
NET SAVING	175	200	0	375

WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET? 0.7%

6 WHAT IS THE CURRENT PERMANENT FTE STAFFING?

N/A

7 WHAT ARE THE PROPOSED PERMANENT FTE REDUCTIONS?

N/A

8 COSTS (significant one off costs associated with implementing the project)

Time-limited staff resource will be required to undertake initial analysis work, and develop an action plan for managers. Finance and project support will be required to track progress against targets.

9 WHAT IS THE IMPACT?

ON SERVICE USERS AND COMMUNITIES

(including considerations relating to deprivation & equality)

This proposal will impact on adults with a mixed presentation of need, i.e. those that are not eligible for services from the learning disability, physical disability, Aspergers or mental health services. These may be individuals, for example, with mild forms of learning disabilities, that are presented to the service, e.g. because of substance misuse, or because they are homeless and have no other support network.

The impact on them could be:

- That fewer individuals are supported by adult social care services.
- Of those eligible to receive ongoing support:
 - They will only receive the level of support required to meet their presenting needs.
 - They will only receive this support for as long as is required.
- Of those currently receiving support, if assessment and review demonstrates that their needs have changed, or the form of support is no longer required, then they will be moved onto more appropriate forms of support or their care and support will come to an end.

The proposal will impact across the whole of Nottinghamshire.

ON OTHER ORGANISATIONS

This proposal may mean that the County Council cannot continue to support people whose actions and behaviours impact on other agencies such as District Councils, Police, Ambulance and other health agencies.

ON OTHER PARTS OF THE COUNTY COUNCIL

No obvious impact envisaged at this stage.

10 INITIAL EQUALITY IMPACT ASSESSMENT

Even if the proposals apply to everyone equally, could they have a disproportionate / adverse or negative impact on people with protected characteristics, (age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation). If so how?

Although the proposal will impact on the group of adults identified above, no potential disproportionate impact on them is anticipated. However, this and any negative / adverse impact will be considered as part of the equality impact assessment that will be undertaken on the proposal.

11 RISKS AND MITIGATING ACTIONS

Risk; There is a risk that some individuals may present with behaviours which challenge other services and or the public which may cause nuisance and possible anti-social and offending behaviours. **Mitigation;** In these circumstances people will need to take responsibility for their actions and other agencies/ organisations will need to determine appropriate alternative means of dealing with these situations.

Risk; There is a risk that an individual may 'fall through the net' and be subjected to significant harm due their vulnerabilities. **Mitigation;** The local adult multiagency safeguarding procedures should provide for people who may be at risk of significant harm. Safeguarding procedures do not rely on people being in receipt of services if they are in need of protection from significant harm.

1 SERVICE AREA

Short Breaks/Respite Care

2 WHAT IS THE PROPOSAL?

The County Council currently provides 37 bookable beds and 4 emergency beds across the County in 4 locations: Wynhill Lodge, Bingham; Holles Street, Worksop; Helmsley Road, Rainworth, Mansfield; and Kingsbridge Way, Beeston.

This proposal seeks to close the Kingsbridge Way Short Break Service in Beeston. In order to undertake this proposal it would be necessary to review the amount of nights respite care for the majority of service users, with some service users using alternative provision away from the in-house residential service. The proposal seeks to make use of under-utilisation in the remaining in house Short Break services, increase provision within the Shared Lives Scheme (carers are paid to support people as part of their extended family), make more use of the independent sector, and to offer alternatives to overnight respite accommodation, e.g. daytime, evening, and weekend sessional support.

The Residential Short Breaks service provides services to carers/adults with moderate to severe learning disabilities who are eligible for care services in Nottinghamshire. Short Breaks is a residential service registered with the Care Quality Commission. It aims to:

- Prevent long term admission to care and maintain people in their family homes with their family carers.
- Delay admission to long term care by supporting carers to continue caring.
- Enable family carers to continue in their caring role.
- Provide emergency residential accommodation in the event of breakdown of usual care arrangements.

This proposal also seeks to review the existing Short Break/Respite Care policy. This would be with the objective of changing the overall service offer, whilst ensuring that those most in need of the service continue to have their needs met. The intention is to match service users and carers to the right level and type of break to meet their needs.

3 WHAT IS THE RATIONALE FOR THE PROPOSAL?

Kingsbridge Way is the smallest of the Short Break services with 9 beds. It currently provides support to 63 people. Closing Kingsbridge Way removes provision in the south west of the county but maintains provision in the north, centre and south of the county thereby retaining coverage across the county. The service users who continue to use the services will be able to travel to their next nearest service, either in Rainworth or Bingham.

Closing this Short Breaks service will ensure that the remaining units will be operating more efficiently with higher occupancy rates. As more people take advantage of personal budgets and direct payments, we expect that people will exercise more choice about how they take their breaks, becoming less reliant on residential provision. Demand beyond the capacity of these units would have to be met through an increase in the provision through the Shared Lives Scheme and other service arrangements including independent sector provision.

Analysis in 2011/12 showed that the independent sector can provide respite care at more competitive rates for people with mild and moderate needs, whereas the local authority service has increased value for people with high and complex needs.

Reviewing the policy will ensure that breaks are effectively targeted according to levels of need. A change in policy may produce capacity within the in-house residential respite service, by signposting service users to other services which can meet their needs effectively, including the Shared Lives Scheme and independent sector provision.

4 WHAT IS THE PERMANENT BUDGET?

GROSS £000	4,184	NET £000	4,133
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5 WHAT ARE THE PROPOSED NET SAVINGS TO THE BUDGET?

	2014/15 £000	2015/16 £000	2016/17 £000	Total £000
Gross Saving	350	350	0	700
LESS Loss of Income	0	0	0	0
LESS Costs of Re provision	-100	-100	0	-200
NET SAVING	250	250	0	500

WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET? 12.1%

6 WHAT IS THE CURRENT PERMANENT FTE STAFFING?

101.6

7 WHAT ARE THE PROPOSED PERMANENT FTE REDUCTIONS?

19.0

8 COSTS (significant one off costs associated with implementing the project)
Potential redundancy costs to reduce the number of permanent staff.

The re-provision of services through other short break services, and Shared Lives will require funding. This will include the funding for placements and support for Shared Lives carers under these arrangements.

The supply of additional specialised equipment to support the needs of people transferring from the Kingsbridge Way services, and service moves across the county.

The policy review and development work will require staff time to be allocated.

9 WHAT IS THE IMPACT?

ON SERVICE USERS AND COMMUNITIES

(including considerations relating to deprivation & equality)

- The geographical area affected by these proposals will be countywide, though the greatest impact will be in the area served by Kingsbridge Way, which includes Broxtowe, Ashfield, Rushcliffe and Gedling. There is a likely impact in other districts as people who used this service are accommodated in other services.
- The closure of the Kingsbridge Way service will mean that the majority of people will not have a significant reduction in service, though it is anticipated that some reduction in service is likely.
- Reducing the available in-house service will reduce choice/availability of dates for those using the remaining facilities, particularly during the summer months when most carers seek breaks. This will impact on all service users not just those who currently use the Kingsbridge Way service. Service users will have to travel further to use the remaining services.
- The service group affected by this proposal are younger adults (aged 18-65) with learning disabilities and their carers.
- The closure of this service will incur additional travel time/cost for some users to access suitable alternative provision.
- As a result of the policy review, it is likely that there will be a change in the way short breaks are delivered to some service users and their carers. This impact will take the form of possible reductions in entitlement and a change to the type of break offered.
- There will be a specific impact on individuals or groups who identify with the following protected characteristics: disability. An impact assessment of the project on this group has been undertaken.
- Young people transferring to adult services may not receive the same level of support through residential breaks as they have been used to in Children's services.

ON OTHER ORGANISATIONS

Those that will be most impacted by this proposal will be the independent sector providers of short breaks/respite care for younger adults with learning disabilities, who will benefit from more provision being commissioned externally.

ON OTHER PARTS OF THE COUNTY COUNCIL
Corporate Property - potential release of buildings.

The Shared Lives Scheme will be required to build capacity for short breaks. The policy review may also increase demand on independent sector short breaks / respite care providers.

Service Commissioners will be required to source alternatives to in-house residential short break/respite provision.

10 INITIAL EQUALITY IMPACT ASSESSMENT

Even if the proposals apply to everyone equally, could they have a disproportionate / adverse or negative impact on people with protected characteristics, (age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation). If so how?

As above, this proposal will impact on younger adults with learning disabilities. No potential disproportionate impact on them is anticipated, though it is likely that additional travel time and cost will be incurred as a result of having to travel further to access services. This and any negative / adverse impact has been considered as part of the equality impact assessment undertaken on the proposal.

The EqIA also considers the impact on staff. However, once again, no potential disproportionate impact on them is anticipated.

11 RISKS AND MITIGATING ACTIONS

- If there are insufficient Shared Lives respite carers in place, the scheme will not be able to meet the change in demand that this proposal will generate. Investment in Shared Lives will be necessary to support the expansion of the scheme, though the amount needed is not known at present.
- There also needs to be sufficient capacity within the independent sector to meet the demand. Market testing would need to be undertaken with the independent sector to see whether it is able to meet requirements, further work will be required to understand exactly what will be required.
- A reduction in services may place more pressure on carers and their ability to sustain their caring role. This may mean some carers feel unable to continue in their caring role, and as a result increase demand for the Council to provide long term care and support. This will be mitigated by assessing service users and carers for breaks according to need.
- This proposal will also be affected by the proposed decommissioning of the Newlands Short Breaks Unit (NHS provision) in Newark, as there would be an expectation to reprovide capacity in other short break services. The proposal for Newlands is outlined in a separate business case. It is anticipated that, subject to this proposal, the existing cohort of service users will access the same range of services as people currently using the in-house service.
- The review of policy is likely to be unpopular with some carers and service users, who see the change of policy as a reduction in service and limitation in terms of choice. This can be mitigated by producing a policy which clearly lays out how short breaks will be delivered in terms of type and volume.



SUMMARY PROPOSAL

Proposal Ref.

C07

1 SERVICE AREA

Day Services

2 WHAT IS THE PROPOSAL?

The Nottinghamshire County Council Day Services offer good quality, affordable services that support individuals in ways that maximise their independence, by maintaining existing skills and enhancing wellbeing.

Over the last three years the day service has undergone a major refurbishment, efficiency and modernisation programme. This proposal seeks to achieve a further saving by :

- Removing the weekend services and offering alternative services during the working week.
- Closing some of the smaller services and satellite bases - Retford (Grove Street) service, Retford (Lawn View) Service, Southwell Service (formally known as Three Spires) and Beeston Day Service (formally known as Middle Street).
- Not re-opening the main base that is currently closed - Rushcliffe Day Service (formally known as BGR).
- Reducing the number of main bases, with the closure of Ollerton Day Service (Whitewater).
- Reviewing the ways of working to ensure consistency across the service.

The overall aim is to ensure:

- More efficient use of remaining day service bases.
- Reduced overhead costs.
- An equitable and affordable service offer.
- Reduction in the service delivery costs of direct services.

3 WHAT IS THE RATIONALE FOR THE PROPOSAL?

- This option seeks to close the smaller day service bases which have the least use, Retford (Grove Street), Retford (Lawn View), Southwell (Three Spires), Beeston (Middle Street) and the Rushcliffe main base (BGR), making better use of staffing and continuing to offer services from alternative bases.
- Closure of these services would have the lowest impact on service users and their families, as services could be delivered from the remaining day service bases.
- The service base, Grove Street, has high rental costs and is not suitable for people who have high/complex personal support needs. The security at this base is unsuitable for very vulnerable people. Service delivery could move to the Worksop bases which are purpose built and offer more opportunities for service users.
- The base at Lawn View is located within the St Michael's View care and support centre, where the day service area of the building is poor compared with other day services. Service delivery could be offered from the Worksop bases, offering purpose built facilities.
- The Southwell Service, Three Spires, is a very small older person's service based within a supported living complex. There are limited facilities at this base and the premises are not suitable for people with high/complex support needs. This service is under utilised. Service users could be accommodated at the Newark service.
- The Beeston Service is not required for the delivery of internal day services. There is the opportunity to work with charities to develop a community resource, freeing up this building for the Council.
- The Rushcliffe service at Bingham is currently closed with service users receiving their day services from other bases in Bingham, Broxtowe and Netherfield.
- The closure of the Ollerton service would help to deliver savings. Its present users of the service could be accommodated in either the Mansfield or the Newark services. Transport costs would increase.
- The weekend service is expensive compared to delivering the service within the working week. Generally, there is more family support for service users at weekends and there is flexibility to offer the carer a break during the week. Reviewing the way that staff work across the service will ensure consistency in hours of work and working patterns, which will help to deliver equitable services.

4 WHAT IS THE PERMANENT BUDGET?

GROSS £000	9,939	NET £000	9,421
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5 WHAT ARE THE PROPOSED NET SAVINGS TO THE BUDGET?

	2014/15 £000	2015/16 £000	2016/17 £000	Total £000
Gross Saving	350	220	490	1,060
LESS Loss of Income	0	0	0	0
LESS Costs of Re provision		0	0	0
NET SAVING	350	220	490	1,060

WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET? 11.3%

6 WHAT IS THE CURRENT PERMANENT FTE STAFFING?

282.0

7 WHAT ARE THE PROPOSED PERMANENT FTE REDUCTIONS?

13.70

8 COSTS (significant one off costs associated with implementing the project)

The following costs will be incurred, which will vary depending on the bases selected for closure:

- Closure and disposal costs. However, conversely there will be capital receipts, which will be assumed corporately.
- Redundancy payments to staff currently at bases that will be closed who will not transfer to alternative bases.
- Disturbance costs for staff currently at bases that will be closed, who will be retained and transfer to alternative bases.
- Potential reprovision costs for those service users displaced by the base closures and the stopping of the weekend service. However, it is anticipated that all displaced service users can be accommodated within other internal day bases.
- Increased transport costs, to transport service users to alternative bases, which may be further away.

9 WHAT IS THE IMPACT?

ON SERVICE USERS AND COMMUNITIES

(including considerations relating to deprivation & equality)

The geographical areas affected by these proposals are based on closure of some of the satellite Day Service bases (Newark and Sherwood, Southwell base; Bassetlaw Day Service, Retford sites; Rushcliffe Day Service, West Bridgford; and Broxtowe Day Service, Beeston site) and closure of one of the main Day Service base at Ollerton, in Newark and Sherwood.

Service users impacted by this proposal include people with learning disabilities, physical disabilities, those with mental health needs and older people (including some with dementia). The closure of some of the bases will impact on approximately 18% of service users, who would have to be re-located to other bases, unless they chose to purchase alternative external provision.

This will cause some disruption to service users, and is likely to increase journey distances for some and journey times. The ending of the weekend service will also require alternative service arrangements to be made in the week. Careful management and phasing of this process would significantly decrease the impact for service users.

The reduction of the internal service bases would potentially limit referrals for people wishing to start having a day service as well as limiting current users who might want to expand their present attendance. The reduction of service bases could also limit the option for transfer to the internal service from other providers, should this be required. This may result in less social engagement for some, therefore increasing the feeling of isolation and possibly increasing demand on other services.

A reduced service offer would impact on a carers' ability to continue to care for an individual, thus potentially increasing referrals for residential services. Some carers may be prevented from continuing in their own employment.

ON OTHER ORGANISATIONS

External day service providers may benefit from increased business, either through recommissioning of services by the authority (where service users can't be accommodated by other internal bases) or where service users choose to take a direct payment and procure an alternative provider independently.

ON OTHER PARTS OF THE COUNTY COUNCIL

Staff currently located at the bases proposed to be closed will be impacted. Following a redundancy selection process, some will transfer to the remaining bases whilst others will be at risk unless they secure re-deployment opportunities.

There could be more call for the use of Shared Lives, particularly in rural areas.

As transport routes will need to be changed, there will be an impact on transport providers.

10 INITIAL EQUALITY IMPACT ASSESSMENT

Even if the proposals apply to everyone equally, could they have a disproportionate / adverse or negative impact on people with protected characteristics, (age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation). If so how?

As above, this proposal will impact on people with learning disabilities, physical disabilities, those with mental health needs and older people (including some with dementia). The closure of services will incur additional travel arrangements to access suitable alternative provision. No potential disproportionate impact on them is anticipated. However, this and any negative / adverse impact on them and staff affected by the proposals has been considered as part of the equality impact assessment undertaken.

11 RISKS AND MITIGATING ACTIONS

RISK; Any reprovision that could not be accommodated within remaining basis would have to be externally commissioned. This will be mitigated by reviewing current service usage which should ensure that all displaced service users can be accommodated in alternative direct service (ie internal) provision.

RISK; There is likely to be an increase in complaints from service users, their carers and members of staff. Related to this, there may be higher staff turnover. Early and extensive engagement and consultation will be undertaken to reduce the impact on service users and the workforce as a result of the level of changes being placed on the service.

RISK; Further refurbishment work is planned as part of the current modernisation programme. If this is planned at bases that may close, this work needs to be halted. Similarly, potential externalisation, which was to be considered as part of the previous modernisation programme, may have to be put on hold whilst further service reduction is implemented.



SUMMARY PROPOSAL

Proposal Ref.

C08

1 SERVICE AREA

Employment Development Services - Iwork

2 WHAT IS THE PROPOSAL?

Since the introduction of national performance target NI146 to place more adults with learning disability within paid employment, the authority has invested in a special employment service, known as the i-Works Team. The team delivers individual job placement support and vocational training initiatives for adults with learning disabilities and those with Asperger's. This aims to support them into employment, thus helping to improve their health and well being, and support them to attain independence and citizenship.

There are currently 460 people supported across the County, and 148 of these people are in paid employment. The service operates from two project sites (Phoenix and Strawberry Fayre) and an Open Employment team (iWork) which covers all districts in the County.

This proposal seeks to:

- Close the Strawberry Fayre Project, re-commissioning the support it provides from Day Services.
- Close the Phoenix Project, re-commissioning the support it provides from Day Services.
- Review and rationalise the individual employment support service, iWork, to generate savings through streamlining activity.

The overall aim is to:

- Focus service delivery on paid employment outcomes.
- Ensure more efficient use of resources.
- Reduce overhead costs.

3 WHAT IS THE RATIONALE FOR THE PROPOSAL?

The iWorks service has proved to be successful in supporting people into employment but is a discretionary service. The work projects do not deliver paid employment. People who attend the projects have not moved on to paid employment and have either returned to traditional day services or stayed in continual training. If this service is to continue, then we would need to consider issues of employment law.

1) The Strawberry Fayre cafe currently supports 13 individuals and is supervised by 2 FTE Employment Support staff. The annual running costs exceed the income generated in this project, which the County Council must subsidise. Other options for the cafe have been considered, including another provider taking it over. These options will continue to be explored. However, if an alternative provider cannot be found within the next six to nine months, we would seek to end the current contract to deliver services.

2) The Phoenix Unit supports 17 individuals in assembly and packaging for local employers. The annual running costs exceed the income generated in the project leaving a trading shortfall which the County Council must subsidise. Due to employment regulations, and a reduction in orders, the continued operation is neither economically viable nor socially sustainable.

3) Disestablishing the iWorks Team has been considered but rejected as this would result in failure to meet with the expected outcomes and government standards relating to the employment for people with learning disability (PSA16 - NI 146). This would result in the Authority moving from the top quartile to bottom quartile performance. Therefore, the proposed option is to reduce the service offer by 30% to provide a good service without being excellent. As the national indicator is also a public health outcome indicator, it may be possible to consider alternative Public Health grant funding for this service.

4 WHAT IS THE PERMANENT BUDGET?

GROSS
£000

464

NET
£000

403

5 WHAT ARE THE PROPOSED NET SAVINGS TO THE BUDGET?

	2014/15 £000	2015/16 £000	2016/17 £000	Total £000
Gross Saving	200	0	0	200
LESS Loss of Income				0
LESS Costs of Reprovision	-20	0		-20
NET SAVING	180	0	0	180

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

44.7%

6 WHAT IS THE CURRENT PERMANENT FTE STAFFING?

13.0

7 WHAT ARE THE PROPOSED PERMANENT FTE REDUCTIONS?

6.0

8 COSTS (significant one off costs associated with implementing the project)

Closure and disposal costs will be incurred for the projects .

Redundancy payments for any staff affected by the proposal.

Reprovision costs will apply for those displaced by the project closures, either at in-house day service provision or with external providers. Reprovision costs have therefore been netted off gross savings.

9 WHAT IS THE IMPACT?

ON SERVICE USERS AND COMMUNITIES

(including considerations relating to deprivation & equality)

The geographical areas affected by these proposals are Sutton-in-Ashfield (location of Strawberry Fayre cafe) and Mansfield (location of the Phoenix project).The Open Employment team (I Work) covers all districts in the County.

Service users impacted by this proposal include people with learning disabilities and people with Asperger's. The closure of the projects would require alternative services to be re-provided for them (in day services). This will impact on parents and carers.

Generally, there would be a reduction in employment services available to people with a learning disability and Asperger's.

Staff located at the projects and in the iWorks Team would face redundancy, unless redeployed to other areas.

ON OTHER ORGANISATIONS

Whilst supervision at the cafe on weekdays is covered by NCC staff, the weekends are covered by an independent provider under a SLA. They will therefore be impacted by closure of the cafe.

ON OTHER PARTS OF THE COUNTY COUNCIL

Similarly, as the cafe operates under a service level agreement from The Mill Adventure Base (managed by NCC Youth Services), if it closes then the SLA will cease, and The Mill will have to find an alternative provider to run the cafe.

There may be an impact on social care commissioning budgets, as alternative services will need to be recommissioned.

There will be an increased use of internal Day Service provision.

10 INITIAL EQUALITY IMPACT ASSESSMENT

Even if the proposals apply to everyone equally, could they have a disproportionate / adverse or negative impact on people with protected characteristics, (age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation). If so how?

It is not expected that this would have a disproportionate impact. However, the impact of the proposal on service users and staff is considered in the Equality Impact Assessment

11 RISKS AND MITIGATING ACTIONS

Risk: that the cost of re-provision negates any savings that could be made. Mitigation - further cost / benefit analysis work will therefore be undertaken as part of this proposal's development. If all services are recommissioned from the internal day services then there should be no additional cost from recommissioning to the external sector.

Risk: there is likely to be an increase in complaints from, and disputes with, service users, their carers and members of staff. Mitigation; full consultation will be required with all those affected and impacted by the proposal.

SUMMARY PROPOSAL

Proposal Ref.

C09

1 SERVICE AREA

Adult Social Care Health and Public Protection,
Joint Commissioning, Quality and Business Support

2 WHAT IS THE PROPOSAL?

The majority (93%) of the Joint Commissioning Unit's budget is spent on contracts that the unit manages to provide a range of front line care and support services. These are services that people do not access using their personal budgets because it is not viable for providers to deliver the service in this way, for example, information and advice services.

This proposal aims to make savings of £500,000 by seeking cost efficiencies from merging services, negotiating reductions in volume of service, and/or seeking alternative means of delivering the service outcomes. The contracts affected are:

- 1) HIV and Aids Support.
- 2) Information, Advice and Advocacy contract held by Power.
- 3) Carers Emergency Respite - contract held by Crossroads to be maintained at current level of capacity.
- 4) Carers Universal Services contract held by the Carers Federation.
- 5) Integrated Community Equipment Service contract held by British Red Cross.

3 WHAT IS THE RATIONALE FOR THE PROPOSAL?

The following aim to minimise negative impacts on service users, retain viability for providers and, wherever possible, to improve outcomes and quality:

- 1) The HIV and Aids Support Service provides information, advice, sign posting and peer support opportunities. Social care contribute £18K to this partnership contract, which was originally funded by a national Aids Support Grant that has now ended. The contract ends in Mar 2014 and a review of services involving partners and service users began in 2012. The social care review recommendations are to fund a provider for two years to work with local groups to develop local community based peer support groups. These are a priority for service users. The work will ensure a more diverse range of support is available and will also provide assistance to groups to identify funding they can access. The £18k can then be withdrawn. This is a discretionary service and individual packages of support will continue to be provided to people with assessed social care eligible needs.
- 2) The Information, Advice and Advocacy service provides both discretionary and statutory advocacy. The latter forms the majority of this partnership contract, including the recent addition of Independent Complaints Advocacy Service (ICAS) in 2013. It is aimed to negotiate further contract efficiencies (£60k) from the full range of advocacy services. An effective single point of access is already in place with one lead provider who works closely with another partner associate. The aim is to strengthen this model to enable savings, whilst minimising reductions in the level of service.
- 3) The Carers Emergency Respite, Crisis Prevention and Unplanned Break Service is a 24 hour crisis service for carers, delivered to the person cared-for in their own home, until alternative longer-term arrangements can be put in place for the cared-for person or carer returns. The capacity for this service is greater than current utilisation, and the aim is to deliver £100k savings by removing funding where there is under utilisation.
- 4) Carers Universal Services provide information advice & support to individual carers & groups. Negotiation on a reduced volume of service is planned (£22k).
- 5) Integrate Community Equipment Service - demand for equipment is rising as more people with complex needs are supported to live at home longer. Partners have agreed a joint action plan to deliver savings and a Lean+ review of processes (£300k savings).

4 WHAT IS THE PERMANENT BUDGET?

GROSS
£000

3,329

NET
£000

2,917

5 WHAT ARE THE PROPOSED NET SAVINGS TO THE BUDGET?

	2014/15 £000	2015/16 £000	2016/17 £000	Total £000
Gross Saving	131	179	190	500
LESS Loss of Income	0	0	0	0
LESS Costs of Re provision	0	0	0	0
NET SAVING	131	179	190	500

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

17.1%

6 WHAT IS THE CURRENT PERMANENT FTE STAFFING?

0.0

7 WHAT ARE THE PROPOSED PERMANENT FTE REDUCTIONS?

0.0

8 COSTS (significant one off costs associated with implementing the project)

No. The work will be undertaken by existing staff in Joint Commissioning Unit

9 WHAT IS THE IMPACT?

ON SERVICE USERS AND COMMUNITIES

(including considerations relating to deprivation & equality)

Proposal involves a range of options; including ending funding into one service, reducing capacity of some services, and finding alternative means of delivery for some. The underlying principles in selecting these proposals have been to minimise negative impacts on people using services and their carers. However, this proposal will reduce service capacity.

The proposal will impact on all geographic areas of Nottinghamshire. As this proposal will stop the funding of one service and reduce capacity of some services it will impact service users who are vulnerable individuals in various ways, including those living on low incomes and those who may be homeless.

ON OTHER ORGANISATIONS

Proposals aim to maintain provider viability, where possible. The proposal does end funding to the HIV and AIDs Support Service partnership contract, holds capacity at current levels for the Carers Emergency Respite Service delivered by Crossroads, and reduces the volume of Carers Universal Services provided by the Carers Federation.

ON OTHER PARTS OF THE COUNTY COUNCIL

All contracts (except for the Carers universal services) are jointly funded with partners and will require negotiation with partners to withdraw adult social care budget funding.

10 INITIAL EQUALITY IMPACT ASSESSMENT

Even if the proposals apply to everyone equally, could they have a disproportionate / adverse or negative impact on people with protected characteristics, (age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation). If so how?

As this proposal will end on-going funding to one service, and reduce capacity of some services, it will impact service users who are vulnerable individuals in various ways. For example, some are those requiring HIV and Aids support, some of whom may be also be homeless and living on low incomes.

An Equality Impact Assessment has been undertaken on the proposal.

11 RISKS AND MITIGATING ACTIONS

Service Users: decrease in volume of services may impact on the health and wellbeing of people and their carers no longer able to access them: several of the changes focus on supporting people to self-help and become more independent, where possible. Need to ensure services are evidence based, and targeted at those who may benefit most. As part of the Care Bill consideration will need to be given to the new and extended responsibilities of local authorities in ensuring that there are sufficient prevention and early intervention services that ensure people do not require long-term services.

Carers: carers have been involved in developing joint plans to strengthen carer support and increase the number of breaks available and are likely to oppose the reductions. It will be necessary to keep carers informed and engaged with the process via Carer representatives and the virtual carer network.

Reputational: relationships with partners and providers will need to be managed throughout the process with robust communications. Most of the services are funded with partners and further impact analysis will be required to fully understand the implications of withdrawing Council funding, and in some cases exploring alternative income streams or models of service.

Providers: some providers may feel that a reduction will impact on viability of the whole service. Support to providers will be required to identify ways of making services more efficient e.g. reducing overheads, sharing support services or merging elements of service delivery. Negotiations around the County Council's financial contribution to the contract will require further discussions with Health commissioners.

Operational teams: reducing volume in some of these services e.g. carers information and advice, may increase work for operational teams and customer service centres.



SUMMARY PROPOSAL

Proposal Ref.

C10

1 SERVICE AREA

ASCH&PP, Joint Commissioning, Quality and Business Support - Supporting People/Early Intervention and Prevention

2 WHAT IS THE PROPOSAL?

- It is proposed that targeted discretionary prevention based services are recommissioned from Supporting People funding, based on evidence of services which reduce, delay or prevent the need for on-going care and support services. Housing related support, crisis intervention services (Supporting People funded) and other early intervention and prevention services will be reviewed against agreed priorities and resources redirected to enable savings of £4.2m. Services will be targeted at those vulnerable people that are most likely to benefit from them, in order to make best use of the reduced Supporting People resource.
- There will be a budget of £12.5m from the Supporting People budget of which £1.1m is to be transferred to the Children, Families and Cultural Services Department for the commissioning of services for homeless young people. A further £3.5m is to be transferred to other adult social care budgets (Community Care Support Budgets) for people who meet social care eligibility criteria and who require housing related support as part of a wider package of care, in accordance with the Council's statutory responsibilities. This proposal to deliver £4.2m of savings is therefore based on a remaining budget of £7.9m and involves the cessation of contracts for the following: i) drug and alcohol accommodation services; ii) offender accommodation services, including Mansfield quick access accommodation for offenders; iii) homelessness prevention floating support; and iv) homelessness move-on accommodation and quick access homelessness services at Potter Street in Worksop, Russell House in Newark, Sherwood Street in Mansfield, and Elizabeth House in Gedling.
- It would involve reductions to: mental health support services; and proposed new services for older people yet to be commissioned under the existing savings programme.
- Services commissioned in future would focus on four key areas: i) Short term preventative support for older people and tackling social isolation; ii) Mental health support services; iii) Prevention focussed support for vulnerable younger adults; and iv) Domestic Violence services.

3 WHAT IS THE RATIONALE FOR THE PROPOSAL?

The majority of services funded through the Supporting People budget are discretionary housing related support services and do not form part of the Council's statutory responsibilities.

In order to achieve the required level of savings, a significant reduction is proposed. However, this will still leave approximately £3.7m of funding to invest in targeted prevention and early intervention services.

It is important to ensure that future services have a strong evidence base of achieving outcomes that reduce demand for adult social care services, and that this is done as part of a wider strategy with partners to ensure best use of remaining funds, as part of the full range of Early Intervention and Prevention measures across the County. Therefore, the work is being supported by the Institute of Public Care (IPC) at Oxford Brookes University who are working with the Council and are identifying the research evidence base for the effectiveness of prevention services.

This will enable best use of resources to meet the requirements of the Care Bill duty on Local Authorities to provide services/take steps intended to prevent, delay or reduce people's needs for care and support, taking proactive steps, and making earlier interventions to reduce dependency, rather than just providing intensive services at the point of crisis.

4 WHAT IS THE PERMANENT BUDGET?

GROSS
£000

12,017

NET
£000

11,983

5 WHAT ARE THE PROPOSED NET SAVINGS TO THE BUDGET?

	2014/15 £000	2015/16 £000	2016/17 £000	Total £000
Gross Saving	1,000	2,000	1,200	4,200
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	1,000	2,000	1,200	4,200

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

35.0%

6 WHAT IS THE CURRENT PERMANENT FTE STAFFING?

3.0

7 WHAT ARE THE PROPOSED PERMANENT FTE REDUCTIONS?

1.0

8 COSTS (significant one off costs associated with implementing the project)

There is currently provision in permanent staffing establishments for 0.5 FTE Programme/Commissioning Manager and 1FTE Commissioning Officer. However, the new savings option would require continuation of funding for a temporary 0.5 Programme/Commissioning Manager post until March 2017, at a cost of £28,395 pa , Inc. on-costs and an additional 0.5 FTE Commissioning officer, at a cost of £23,553, Inc. on-costs.

Public consultation costs: which can be met from existing budgets.

The cost of IPC support is already covered by the Department.

9 WHAT IS THE IMPACT?

ON SERVICE USERS AND COMMUNITIES

(including considerations relating to deprivation & equality)

This proposal is likely to mean a reduction in housing related support services from the current £7.9m to £3.7m, which will mean a number of services will have to cease and other services will have to be significantly reduced. The impact will be greatest on users of homelessness and offender services, and will affect access to accommodation for single roofless people, and those needing support to prevent loss of accommodation, management money and debt, address social exclusion and manage health well-being (drug and alcohol use, mental health, general health and manage self-harm). Mental health support services will also be reduced under this proposal.

ON OTHER ORGANISATIONS

This proposal is likely to have a significant impact on District/Borough Councils in respect of homelessness provision, on health services in respect of current mental health and homeless service users, and on the Nottinghamshire Probation Trust in terms of access to supported accommodation, as part of planned reduction in reoffending.

It may also increase demand on a range of other service providers and community based organisations, and is likely to impact on the sustainability and viability of some providers. The largest provider of Supporting People funded services in the county is Framework Housing Association, who would lose over £3.5m of funding.

ON OTHER PARTS OF THE COUNTY COUNCIL

Any reductions to the mental health support service will impact on Mental Health Teams.

Reductions to Vulnerable Adults and Physical & Sensory Disability services are also likely to increase presentations and thus impact on assessment teams. May affect wider provider sustainability for those offering a range of services.

The 1.0 FTE reduction in staffing relate to 0.5 FTE located within the Procurement Unit and 0.5 FTE located within Adult Care Financial Services.

10 INITIAL EQUALITY IMPACT ASSESSMENT

Even if the proposals apply to everyone equally, could they have a disproportionate / adverse or negative impact on people with protected characteristics, (age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation). If so how?

This proposal will impact directly on a range of vulnerable adults who currently receive housing related support services. For example:

- Drug & alcohol
- Domestic Violence
- Gypsies & Travellers
- Homelessness & Homelessness Prevention
- Learning Disability
- Mental Health
- Offenders
- Older People
- Physical Disability
- Young People

11 RISKS AND MITIGATING ACTIONS

Reputational - relationships with partners will need to be managed throughout the process. Detailed discussion will be required to best manage impact, explore alternative funding options, and models of provision.

Political/reputational - high likelihood that proposals will be unpopular and trigger a wide response. Clear and detailed information will be required explaining the rationale and context for each element of the proposals.

Operational/Financial - independent support with researching evidence base from the Institute of Public Care, to ensure funding is focused on services that will deliver best outcomes. Need to assess potential impact on operational staff time, if services are reduced, including where service users may not be eligible for social care but may be vulnerable/chaotic.

Legal - need to explore all options for maintaining services that address service user needs without/with reduced on-going Council investment. A robust Equality Impact Assessment has been undertaken, and will be reviewed again following consultation. Wide consultation with service users and stakeholders will also be undertaken.

SUMMARY PROPOSAL

Proposal Ref.

C11

1 SERVICE AREA

ASCH&PP - Joint Commissioning Unit
Newlands NHS Short Breaks Unit

2 WHAT IS THE PROPOSAL?

To decommission the NHS short breaks unit which the County Council currently funds as a block contract and to commission alternative respite for the 18 individuals currently receiving a service from this Unit. The service provides accommodation based breaks for people with learning disabilities in order to support their family carers to have a break and continue in their caring role.

It is expected that the reprovision will be undertaken largely within in-house provision. It is anticipated that due to the high levels of need of these individuals, additional staffing may be required, hence £100k is being retained to meet this need.

Commissioning responsibility for the NHS short breaks unit was transferred to the County Council in 2012 as part of local implementation of the national Valuing People programme. Part of this policy was to promote independence and reduce the institutionalisation of people with learning disabilities who were unnecessarily in hospital and other health provision when their needs can be met within the community. It also meant that all short breaks provision was drawn together in one place, enabling more effective overview and commissioning.

3 WHAT IS THE RATIONALE FOR THE PROPOSAL?

The current service does not deliver value for money. It runs at a cost of £458,000 and currently supports 18 families, offering 160 weeks respite a year (average cost of £2,800 per week with utilisation of only 41%). While many of these individuals have a level of health need, the Council's in-house short breaks units would be able to support them with input from community nurses which is already available in the units.

There is currently sufficient capacity within in-house short breaks units to pick up and meet these needs. All other healthcare provided short breaks in other areas of the county were successfully transferred to the Council's in house services between 2003 and 2007.

The County Council currently provides 37 bookable beds and 4 emergency beds across the County in 4 locations (Wynhill Lodge, Bingham; Holles Street, Worksop; Helmsley Road, Rainworth Mansfield; Kingsbridge way, Beeston). These services provided breaks for 268 people in 2012. Each individual has an allocation of between 14 and 84 nights a year dependant on need. The cost of the Council's provided services is between £1,550 and £2,000 per person per week

4 WHAT IS THE PERMANENT BUDGET?

GROSS
£000

458

NET
£000

458

5 WHAT ARE THE PROPOSED NET SAVINGS TO THE BUDGET?

	2014/15 £000	2015/16 £000	2016/17 £000	Total £000
Gross Saving	175	175	0	350
LESS Loss of Income	0	0	0	0
LESS Costs of Re provision	0	0	0	0
NET SAVING	175	175	0	350
WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET?				76.4%

6 WHAT IS THE CURRENT PERMANENT FTE STAFFING?

0.0

7 WHAT ARE THE PROPOSED PERMANENT FTE REDUCTIONS?

0.0

8 COSTS (significant one off costs associated with implementing the project)
There would be some project management costs.

9 WHAT IS THE IMPACT?

ON SERVICE USERS AND COMMUNITIES

(including considerations relating to deprivation & equality)

Most of the 18 service users have been attending this unit for many years. There will be some initial disruption for them and their carers in getting to know a new service.

There is also likely to be greater restrictions and less choice on when the breaks are available to be booked, as the current low usage of the NHS unit means that it is easy to book specific weeks.

The greater utilisation of in-house services will mean some reduced choice of dates.

The Council applies a means-tested charge for services. Historically, NHS services have been provided free in line with national NHS policy, so it may impact on some service users' finances.

The length of journey will be reduced for the majority of Newland service users as they will live nearer to their most local Nottinghamshire County Council short break service.

ON OTHER ORGANISATIONS

NHS Trust will have staff to redeploy or make redundant with loss of income of £448k per annum.

ON OTHER PARTS OF THE COUNTY COUNCIL

Impact of increased demand to be picked up by in-house short breaks units and inter-relationship with a separate business case on the proposed closure of one of the in-house units. Also potential impact of increased demand for Shared Lives services, if this service is used as an alternative for some existing Newlands service users. Shared Lives is where people are paid to provide support within their own home.

10 INITIAL EQUALITY IMPACT ASSESSMENT

Even if the proposals apply to everyone equally, could they have a disproportionate / adverse or negative impact on people with protected characteristics, (age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation). If so how?

All 18 of the service users affected by this proposal will be adults with learning disabilities.

11 RISKS AND MITIGATING ACTIONS

Reputational risk: of service users and their families opposing the changes.

Potential political impact of dissatisfied carers: need to mitigate by explaining the rationale and being as flexible as possible in providing alternative breaks to fit with the families regular patterns and requirements. However, all other health provided short breaks ceased between 2003 and 2007, and successfully transferred to adult social care responsibility. There are no indications that this will be different in the transfer of services away from Newlands.

SUMMARY PROPOSAL

Proposal Ref.

C12

1 SERVICE AREA

- Trading Standards enforces a wide range of criminal and civil legislation to make Nottinghamshire a better, safer and fairer place, managing a broad range of risks and legislative duties on behalf of the County Council.
- The Service also supports legitimate businesses to help them trade well, not only regionally, but nationally and internationally.

2 WHAT IS THE PROPOSAL?

This proposal is to reduce the net cost of Trading Standards by **£487k**. This will be achieved by:

- **£270k** from the disestablishment of 9 Trading Standards Officer posts and a part-time Business Support Officer.
- **154k** increase in income generation.
- **63k** reduction in running costs.

3 WHAT IS THE RATIONALE FOR THE PROPOSAL?

The service currently targets resources on the issues causing the most detriment and in supporting those most in need. Additional income streams have already been developed to recover costs. This proposal seeks to target resources further and reduce running costs and increase income by:-

1. Further tightening the criteria for deciding what work and issues are to be tackled.
2. Reducing proactive activity to cover statutory work only - e.g. reduce disease plan testing, reduce some areas of anti-counterfeiting work, reduce inspectional work.
3. Stopping or reducing initiatives/projects that do not contribute specifically to core Trading Standards responsibilities (or where specific funding for the initiative is not provided), e.g. electric blanket testing and high levels of illicit tobacco activity.
4. Pursuing further opportunities for income generation that complement the objectives of the Service. The new Consumer Law Landscape may offer opportunities to raise additional income to offset the costs of providing the service.
5. Where appropriate and possible, recovering the costs incurred by the Service.
6. Try to find another provider from the voluntary or private sector to run the Buy with Confidence approved trader scheme.
7. Reduce the overall level of more complex prosecutions undertaken, seeking where possible to achieve compliance through other less resource intensive means.

4 WHAT IS THE PERMANENT BUDGET?

GROSS
£000

1,876

NET
£000

1,609

5 WHAT ARE THE PROPOSED NET SAVINGS TO THE BUDGET?

	2014/15 £000	2015/16 £000	2016/17 £000	Total £000
Gross Saving	292	195	0	487
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	292	195	0	487

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

30.3%

6 WHAT IS THE CURRENT PERMANENT FTE STAFFING?

46.8

7 WHAT ARE THE PROPOSED PERMANENT FTE REDUCTIONS?

9.5

8 COSTS (significant one off costs associated with implementing the project)

The proposal will require dedicated management time to reduce the numbers of staff, to further develop advice and guidance to support the public/businesses (e.g. further website development) and to develop further income streams. Support will also be required to streamline processes, to decommission existing services and to identify and work with appropriate independent sector providers to increase their provision.

9 WHAT IS THE IMPACT?

ON SERVICE USERS AND COMMUNITIES

(including considerations relating to deprivation & equality)

- This proposal will impact across Nottinghamshire. By its nature, the Service supports those who are most vulnerable, including low income groups.
- The Service will prioritise investigations against those rogue traders who deliberately set out to defraud older and vulnerable residents.
- The Service will have reduced capacity for preventative work to test for compliance in a particular market sector e.g. monitoring for unlicensed consumer credit activity.
- Fewer victims of rogue traders, fraud and scams will be offered direct support by the Service. The Service will focus on helping on the most vulnerable consumers facing the most serious detriment.
- The Service will prioritise animal welfare cases and focus on those where there is a threat to human safety, for example where animals are subsequently put into the food chain.
- The Service will focus on complaints involving a risk of animal disease (e.g. animal carcasses not disposed of correctly, and illegally landed animals), as opposed to those concerning purely animal welfare issues.
- The Service will generally not undertake formal enforcement action regarding counterfeit product where there is no safety/health risk to humans (unless there are other aggravating factors). The Service will though offer to work with trademark holders to help them to protect their rights, on a cost recovery basis where appropriate.
- The Service will prioritise animal welfare cases and focus on those where there is a threat to human safety, for example where animals are subsequently put into the food chain.
- The Service will further prioritise product safety complaints where there is the greatest risk of human injury. Proactive work around product safety, and the supply and storage of hazardous substances will be reduced.
- The Service will only offer basic guidance and support to businesses to comply with legal requirements in line with what is required as a minimum by law. Tailored advice and support will be offered on a cost recovery basis for businesses that would like more support.

The impact of the proposal on service users has been considered in the Equality Impact Assessment undertaken.

ON OTHER ORGANISATIONS

- The Service will have reduced ability to coordinate a joint response to problem solving. The Service will have reduced capacity to work on some initiatives, such as alcohol misuse and young people, reducing smoking prevalence, stimulating economic growth through supporting businesses, tackling obesity, and supporting older adults to remain independent.
- Individuals, families, communities, community groups and businesses will be expected to become more resilient and responsible for protecting themselves and others from frauds, scams and other crimes.

ON OTHER PARTS OF THE COUNTY COUNCIL

- Reductions in the Service's work is likely to result in an increase in residents' need for other public services. For example, repeat victims of doorstep crime often have a greater dependence on social and health care services. Reductions in the Service's work to tackle illicit and counterfeit tobacco and alcohol, or work to tackle the underage sales of tobacco and alcohol, may lead to a decrease in public health and increased demands on the healthcare system.
- The Service will need to reduce resource invested in supporting economic growth, for example initiatives such as D2N2 Local Enterprise Partnership 'Better Business for All' initiative, and also reduce the ability to support initiatives such as enforcement of environmental weight restrictions work and introduction of Lorry Watch Schemes.

10 INITIAL EQUALITY IMPACT ASSESSMENT

Even if the proposals apply to everyone equally, could they have a disproportionate / adverse or negative impact on people with protected characteristics, (age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation). If so how?

Whilst not a protected characteristic, this proposal may have a disproportionate impact on those living on a low income.

The Equality Impact Assessment on this proposal considers its potential impact on service users, staff and protected characteristics.

11 RISKS AND MITIGATING ACTIONS

RISK: Possible increased risk of animal disease outbreaks, food and feed contamination (e.g. counterfeit alcohol, animal feed contaminants), or storage of hazardous substances (including explosives and petroleum); other specific community safety related crime, such as bogus property repairers/doorstep crime, loan sharks, age restricted product sales to minors, and mass marketing scams. **MITIGATING ACTION:** the impact can be reduced by increasing public awareness of rogue traders, businesses, and trading practices, and the development of further schemes where a greater number of residents or organisations can provide more assistance to protect communities (e.g. Lorry Watch Schemes, 'Real Deal' Market Charter, Community Champion Network etc.)

RISK: Possible increased risk for vulnerable residents because of the reduced capacity to tackle criminals, which could result in higher levels of crime focussed on defrauding the more vulnerable, for example through doorstep crime, mobility equipment cons, or mass marketing scams. **MITIGATING ACTION:** Increasing the general public's awareness and specifically those who interact with those most susceptible, of rogue traders, trading practices, and self-help measures. The Safer Nottinghamshire Board to prioritise action across Partners to those areas or issues causing the most detriment.

RISK: The economic downturn means that crime levels may well increase. Further, businesses may be tempted to cut corners to increase profit. Reductions are likely to have significant long and short term health impacts, for example, counterfeit tobacco leads to significant increases in tobacco consumption (and thus increases in preventable disease and early death); the prevalence of counterfeit alcohol has potential for health problems, whilst the Service's food work contributes to strategies to tackle obesity. **MITIGATING ACTION:** Increasing the public's awareness of rogue traders and legitimate businesses, and the development of campaigns to reduce consumption of harmful products. The Safer Nottinghamshire Board to prioritise actions to address crime that causes the most detriment.

RISK: Reduced impact on the ability of the Service to reduce the risk of an animal disease outbreak occurring and managing an outbreak or incident when it has happened. **MITIGATING ACTION:** Working with local businesses to realise the importance of safeguards, and taking stronger action where breaches are found.

RISK: Reduced capacity to minimise the safety risks posed by the storage of dangerous product, such as explosives and petroleum. **MITIGATING ACTION:** Working with local businesses to realise the importance of safe storage.

RISK: Reduced capacity for the Service to deliver certain projects outside of the core business of the Service, such as Community Lorry Watch initiatives, the Buy with Confidence Approved Trader Scheme, and safety testing and replacement of electric blankets for older adults. **MITIGATING ACTION:** Signposting people to an independent/private-sector register of traders. Attract external funding to underwrite costs of these projects. Use of technology to ensure the work is carried out in the most efficient way possible, such as introduction of an automated lorry watch camera system to reduce the amount of staff time in monitoring breaches of weight restrictions.

RISK: Not realising sufficient income. **MITIGATING ACTION:** Develop additional income streams/funding sources and to recover more of the costs incurred of existing work where significant financial benefits are realised elsewhere in other parts of the organisation or in external organisations. The new national Consumer Law Landscape may offer new opportunities to deliver national projects that will contribute towards the overheads of the Service.

RISK: Reduced capacity to undertake Trading Standards functions. **MITIGATING ACTION:** Bring in more flexible ways of working, improve the ICT services available, and to help streamline business processes, in order to develop efficiencies to maximise Trading Standards Officer's time.

SUMMARY PROPOSAL

Proposal Ref.

C13

1 SERVICE AREA

The Short Term Assessment & Reablement Team (START).

The START service is a multidisciplinary social care reablement service covering the County and managed in 3 locality teams: Mansfield and Ashfield; Broxtowe, Gedling and Rushcliffe; Newark and Bassetlaw. These teams enable people to remain living as independently as possible.

2 WHAT IS THE PROPOSAL?

To reduce the capacity of the START service by 30%. This will be achieved by targeting the service to people who are likely to be eligible for on-going social care services (based on the Government's Fair Access To Care criteria) without undergoing a period of reablement.

3 WHAT IS THE RATIONALE FOR THE PROPOSAL?

In order to evaluate the future options for the provision of the START reablement service an independent review was undertaken by the previous national lead for reablement in the efficiency programme at the Department of Health.

The review found that efficiencies could be realised by improving productivity and utilising effective rostering systems, streamlining processes, and targeting the START programme to those in greatest need. This would then decrease the cost of providing the START service by 30%.

**4 WHAT IS THE PERMANENT
BUDGET?**

GROSS
£000

4,965

NET
£000

4,965

5 WHAT ARE THE PROPOSED NET SAVINGS TO THE BUDGET?

	2014/15 £000	2015/16 £000	2016/17 £000	Total £000
Gross Saving	0	755	755	1,510
LESS Loss of Income	0	0	0	0
LESS Costs of Re provision	0	0	0	0
NET SAVING	0	755	755	1,510

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

30.4%

6 WHAT IS THE CURRENT PERMANENT FTE STAFFING?

209.1

7 WHAT ARE THE PROPOSED PERMANENT FTE REDUCTIONS?

62.7

8 COSTS (significant one off costs associated with implementing the project)

This would require additional project to fully implement the efficiency savings.

Dedicated time through the Ways of Working Programme, mobilisation of the workforce, implementing ICT improvements, and a Lean+ review will be needed.

9 WHAT IS THE IMPACT?

ON SERVICE USERS AND COMMUNITIES

(including considerations relating to deprivation & equality)

This proposal will impact on older adults. It may:

- Potentially increase the length of time some people remain in hospital, as those with lower needs will no longer be eligible for reablement service, which could have allowed earlier discharge.
- Increase the number of people waiting to be admitted to hospital, if people are not being discharged sooner.
- Reduce the number of people benefitting from reablement, resulting in potentially higher rates of dependency and longer recovery times.
- Increase the pressure on carers and carer stress, resulting from lack of reablement and increased levels of dependency.
- Increase the pressure on assessment and care management teams.
- Potentially increase the length of time some people remain in hospital, as those with lower needs will no longer be eligible for reablement service which could have allowed earlier discharge.

The impact of the proposal on service users has been considered in the Equality Impact Assessment undertaken.

ON OTHER ORGANISATIONS

Potential increase in the numbers of delayed transfers of care.

Increased costs to Health to provide suitable reablement and rehabilitation services.

ON OTHER PARTS OF THE COUNTY COUNCIL

The proposal may have an adverse impact on the prevention agenda and the ability to deliver the Helped to Live at Home Programme. This could lead to an increase in the number of people needing long term social care support in the future.

10 INITIAL EQUALITY IMPACT ASSESSMENT

Even if the proposals apply to everyone equally, could they have a disproportionate / adverse or negative impact on people with protected characteristics, (age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation). If so how?

This proposal will impact on older adults, individuals with disabilities, and those living on a low income.

Any potential disproportionate, adverse or negative impact on service users and staff has been considered as part of the proposal's Equality Impact Assessment.

11 RISKS AND MITIGATING ACTIONS

RISK: Some people not being eligible for a reablement service. **MITIGATING ACTION:** the impact could be reduced by increasing the public's awareness of alternative sources of help and support through information on the public website and via the Customer Service Centre.

RISK: Increased numbers of complaints about delayed discharges from Health. **MITIGATING ACTION:** The impact can be reduced by the Council being clear that reablement services will be targeted to those people in the greatest need, and Health commissioning reablement for those people not eligible for social care provision, and improving access to health care rehabilitation provision.

RISK: The reductions are not consistent with the Prevention Agenda and the Help to Live at Home Agenda. **MITIGATING ACTION:** The service will be targeted to those people in the greatest need. Information and advice provided to people who are not eligible for social care support may be commissioned by Health.

RISK: Increased people needing long term Social and Health services **MITIGATING ACTION:** Work with Public Health and Health services to target services and support to those people in greatest need.

RISK: Not delivering the required efficiency savings. **MITIGATING ACTION:** Project Board to be established to monitor progress against deliverable support from Improvement Programme.



SUMMARY PROPOSAL

Proposal Ref.

C14

1 SERVICE AREA

INTERMEDIATE CARE: There are 6 intermediate care schemes in Nottinghamshire, providing 60 beds in Residential Care Homes, jointly funded by the Council and Health. The focus is to facilitate safe discharges to enable people to recover and receive appropriate rehabilitation before returning home and to prevent unnecessary hospital admission. The provision is provided in the six County Council Care and Support Centres, and in the six care homes managed by Runwood Care Homes.

ASSESSMENT BEDS: There are 31 beds that are aligned with the Intermediate Care beds. These beds are used to assess future needs and avoid unnecessary permanent admissions into a Care Home.

COMMUNITY HOSPITALS: There are 3 Community Hospitals that provide rehabilitation to patients discharged from the Acute Hospitals, but who are unable to return immediately to their own home to live independently.

2 WHAT IS THE PROPOSAL?

The proposal is to reduce the cost of each of the service area by:

INTERMEDIATE CARE / ASSESSMENT BEDS (2 OPTIONS)

1. To reduce the amount of Residential Intermediate Care and Assessment Beds funded by the Council by targeting the service on those that are likely to be eligible for long term social care support (based on the Government's Fair Access to Care criteria) and decommissioning the beds.
2. To explore if the Clinical Commissioning Groups would increase their contribution to the cost of running the schemes.

COMMUNITY HOSPITALS

To reduce the number of Social Care staff at the Community Hospitals by undertaking a review of the social work function and targeting support on those that are likely to be eligible for long term support.

3 WHAT IS THE RATIONALE FOR THE PROPOSAL?

INTERMEDIATE CARE AND ASSESSMENT BEDS

The current usage of both services averages between 70-80%. Therefore, the scheme could be reduced and the service rationalised.

Additional beds could be spot purchased if required. The independent sector have vacancies and additional services could be commissioned if required.

COMMUNITY HOSPITAL TEAMS

People are admitted to Community Hospitals from an Acute Hospital setting. Social care needs could be identified and discharge plans arranged by social care staff at the Adult Access Service based at the Customer Services Centre, and/or by social care staff in the Acute Hospitals.

Social care support will be focused and targeted on those people with the greatest need and who are likely to be eligible for social care.

Information and advice to support people not eligible for support could be provided at the Customer Services Centre and/or via the Council's website.

4 WHAT IS THE PERMANENT BUDGET?

GROSS
£000

4,289

NET
£000

4,094

5 WHAT ARE THE PROPOSED NET SAVINGS TO THE BUDGET?

	2014/15 £000	2015/16 £000	2016/17 £000	Total £000
Gross Saving	1,234	1,234	0	2,468
LESS Loss of Income	-694	-694		-1,388
LESS Costs of Re-provision	0	0	0	0
NET SAVING	540	540	0	1,080

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

26.4%

6 WHAT IS THE CURRENT PERMANENT FTE STAFFING?

24.1

7 WHAT ARE THE PROPOSED PERMANENT FTE REDUCTIONS?

2.5

8 COSTS (significant one off costs associated with implementing the project)

Support from the Improvement Team to streamline processes further, to decommission existing services and to work with the independent sector to shape the market. Support will be required from Communications to develop the information available on the internet.

Dedicated time through the Ways of Working Programme, mobilisation of the workforce, implementing ICT led improvements, and undertaking a Lean Plus review.

9 WHAT IS THE IMPACT?

ON SERVICE USERS AND COMMUNITIES

(including considerations relating to deprivation & equality)

1. Potential increase in the length of time some people remain in hospital, as those with lower needs will no longer be eligible for intermediate care and community hospital social work services.
2. Increase in number of people waiting to be admitted to hospital, if people are not able to be discharged sooner.
3. Reduction in the number of people who would receive intermediate care/assessment bed access, resulting in potential higher risks of dependency and longer times to recover.
4. Increase in the cost of commissioned packages from the provider sector.
5. Possible increase in number of assessments undertaken in assessments and care management teams.
6. Possible increase in the number of customers entering long term care.

The impact of the proposal on service users has been considered in the Equality Impact Assessment undertaken.

ON OTHER ORGANISATIONS

1. Potential increase in the numbers of delayed transfers of care through a reduction in community provision.
2. Increased costs for Health to provide suitable reablement services.

ON OTHER PARTS OF THE COUNTY COUNCIL

1. The proposal may have an adverse impact on the prevention agenda and the ability to deliver the Help to Live at Home Programme. This could lead to an increase in the number of people needing long term social care support in the future.
2. Increased capacity in the Procurement section to provide additional services on a spot purchase basis in the Independent Sector, and associated management costs.

10 INITIAL EQUALITY IMPACT ASSESSMENT

Even if the proposals apply to everyone equally, could they have a disproportionate / adverse or negative impact on people with protected characteristics, (age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation). If so how?

This proposal will impact on a range of service users with protected characteristics, including older adults and those with disabilities.

Any potential disproportionate, adverse or negative impact on service users or staff has been considered as part of the Equality Impact Assessment that has been undertaken on the proposal.

11 RISKS AND MITIGATING ACTIONS

RISK: Increase risk of complaints about delayed transfers of care from Health. **MITIGATING ACTION:** The impact can be reduced by the Council being clear that Intermediate Care and Community Hospital based social work services will be targeted to those people in the greatest need, and Health commissioning intermediate care for those people not eligible for social care provision.

RISK: A reduction in intermediate care and assessment beds is not in line with the preventative and helped to live at home agenda. **MITIGATING ACTION:** The service will be targeted to those people who are in the greatest need. Information and advice can be provided to people who are not eligible for support. Health may commission intermediate care for those people not eligible. The usage of the assessment beds is an average 70-80%, and on current demand the service can be reduced to meet needs.

RISK: Increased number of people needing long-term support from social care and health services. **MITIGATING ACTION:** Work with Public Health and Health services to target services and support to those people in greatest need.

RISK: Not delivering the required efficiency savings. **MITIGATING ACTION:** Project Board to be established to monitoring progress against deliverables and support from the Improvement Programme.

RISK: Capacity to undertake assessments and arrange discharges at the Customer Services Centre and from Acute Hospital settings. **MITIGATING ACTION:** As part of the existing improvements and efficiency measures, the Adult Access Service has increased the number of enquiries that can be resolved over the phone and through one off visits. Therefore this risk can be mitigated by increasing the number of cases resolved at the front end, and by developing social care clinics to maximise social care staff's time.

RISK: Increase risk of complaints from the public. **MITIGATING ACTION:** The impact could be reduced by increasing the public's awareness of alternative sources of help and support through information on the public website and via the Customer Services Centre.

RISK: The reductions are not consistent with the Prevention Agenda and Help to Live at Home agenda. **MITIGATING ACTION:** Work with Health and Public Health services to target services and support to those people in greatest need. Through the Ways of Working, mobilisation of the workforce, ICT led improvements and a Lean+ review, further efficiencies will be found to maximise social care staff's time to undertake assessments and core business activities.

RISK: If current contracts are cancelled and subsequently the Council has to purchase spot beds in addition, these may be at a higher price than the current contract. **MITIGATION ACTION:** Need to test and be confident in no. bed places required. Compare current contract costs to spot market rates in advance.

RISK: The Clinical Commissioning Groups may not agree to increasing their percentage contribution towards the cost of running the scheme. **MITIGATION ACTION:** Intermediate Care will be targeted at those people with the greatest need.

SUMMARY PROPOSAL

Proposal Ref.

C15

1 SERVICE AREA

Nottinghamshire Welfare Assistance Fund (NWAF). This fund is to provide emergency provision for vulnerable groups in hardship, e.g. homeless people.

2 WHAT IS THE PROPOSAL?

The proposal is to cease the scheme and to signpost people to alternative sources of support.

3 WHAT IS THE RATIONALE FOR THE PROPOSAL?

From April 2013 the Department for Work and Pensions no longer provided Community Care Grants or Crisis Loans. To replace this, the Government made funds available to provide emergency provision for vulnerable groups. The decision to provide the NWAF scheme is discretionary and support to vulnerable people can be provided by other means. Currently, the budget is forecasted to be underspent.

4 WHAT IS THE PERMANENT BUDGET?

GROSS £000	2,130	NET £000	2,130
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5 WHAT ARE THE PROPOSED NET SAVINGS TO THE BUDGET?

	2014/15 £000	2015/16 £000	2016/17 £000	Total £000
Gross Saving	2,130	0	0	2,130
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	2,130	0	0	2,130

WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET? 100.0%

6 WHAT IS THE CURRENT PERMANENT FTE STAFFING?

1.0

7 WHAT ARE THE PROPOSED PERMANENT FTE REDUCTIONS?

1.0

8 COSTS (significant one off costs associated with implementing the project)

The proposal will require dedicated management time to disestablish the scheme. This can be met within existing resources.

9 WHAT IS THE IMPACT?

ON SERVICE USERS AND COMMUNITIES

(including considerations relating to deprivation & equality)

The fund is one of last resort, as eligibility to the scheme requires applicants to have exhausted all other available support. Therefore, in terms of the proposals impact on deprivation, it could impact on a range of vulnerable adults, including victims of domestic violence, those on low incomes and those who are homeless.

The resultant changes to the Welfare Reform Act 2012, as they take effect, could see a further increase of people applying for assistance.

The fund also provides assistance for people either to stay in the community or to resettle into the community. This includes groups such as domestic violence victims and those resettled from institutions i.e. residential settings or prisons.

The impact of the proposal on service users has been considered in the Equality Impact Assessment undertaken.

ON OTHER ORGANISATIONS

Other organisations (including voluntary organisations, domestic violence and homeless charities, and Borough/District Councils) who support people in crisis may see an increase in demand for support, such as food banks.

Possible increased demand on support provided by the Department of Work and Pensions.

ON OTHER PARTS OF THE COUNTY COUNCIL

Social care and children's and young people's services may see an increase in referrals for people needing support in crisis situations, and to resettle them back into the community.

Community Safety and Public Health may see an increase in demand for support for vulnerable people, including domestic violence victims.

10 INITIAL EQUALITY IMPACT ASSESSMENT

Even if the proposals apply to everyone equally, could they have a disproportionate / adverse or negative impact on people with protected characteristics, (age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation). If so how?

This proposal may impact on a range of vulnerable adults, including those with protected characteristics, e.g. those living on low income, those suffering from domestic violence, those with disabilities, those that are homeless and people living in high risk flooding areas.

The Equality Impact Assessment on this proposal considers its potential impact on service users, staff affected, and protected characteristics.

11 RISKS AND MITIGATING ACTIONS

1) RISK: Increased risk of no crisis support being available to those most in need. MITIGATING ACTION: Work with third sector organisations and other services to target support to those in greatest need. The scheme is currently under-utilised.

2) RISK: The funding is only guaranteed for 2 years, so this may not be a permanent saving. Current levels of spend may influence future funding. MITIGATING ACTION: Future funding will be dependent on the outcomes of the comprehensive spending review. It is possible that the funding will continue.

3) RISK: The economic downturn means that the number of people facing financial hardship could increase. MITIGATING ACTION: The risk may be reduced by increasing the public's awareness of alternative sources of help through information on the public website and signposting people to organisations that support people in crisis.

4) RISK: The full effects of the resultant Welfare Reform changes have not yet been experienced; this could increase those seeking to access support. MITIGATING ACTION: The risk may be reduced by increasing the public's awareness of alternative sources of help through information on the public website and signposting people to organisations that support people in crisis.

5) RISK: Increase demand on social care budgets. MITIGATING ACTION: Signpost those applying to other sources of help by managing enquiries through the Customer Services Centre and increasing the public's awareness of the qualifying criteria for social care.

6) RISK: Increased risk of reduced support to domestic violence victims. MITIGATING ACTION: Work is currently underway to review the support available to those experiencing domestic violence across the Council, and any changes to the scheme will be fed into these discussions.



1 SERVICE AREA

Children's Disability Service

2 WHAT IS THE PROPOSAL?

This outline business case sets out proposals to review the Children's Disability Service (CDS).

Benchmarking data shows that Nottinghamshire spends significantly more than its statistical neighbours (comparable local authorities) on children with disabilities. A 30% savings target has been set for CDS over 4 years. There are no planned reductions in year 1 to allow full consultation with parents and carers.

A number of initial work streams have been identified, including:

- Understanding current need and forecasting future demand for services
- Consideration of options around personal budgets / direct payments
- Providing more flexibility and choice for parents and carers
- A comprehensive review of current service provision

The next stage will be detailed business planning including key milestones, reporting and monitoring arrangements, risk management and financial analysis for the individual work streams. Detailed consultation will take place throughout each phase.

3 WHAT IS THE RATIONALE FOR THE PROPOSAL?

The Children's Disability Service sits within Children's Social Care and provides support to children with a disability and their families who require both the services of a specialist social worker and specialist disability services. The Children's Disability Service brings together social work services with residential homes for children with a disability, homecare, sitting and befriending, occupational therapy, short breaks and direct payments. The main catalyst for the project stems from a combination of changing national policy and financial pressures.

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

A savings target has been set for CDS of 30% over 4 years (4th year outside of the timeframe of this OBC) to contribute to required budget reduction.

4 WHAT IS THE PERMANENT BUDGET?

GROSS £000	12,350	NET £000	11,800
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5 WHAT ARE THE PROPOSED NET SAVINGS TO THE BUDGET?

	2014/15 £000	2015/16 £000	2016/17 £000	Total £000
Gross Saving	0	1,180	1,180	2,360
LESS Loss of Income	0	0	0	0
LESS Costs of Reprovision	0	0	0	0
NET SAVING	0	1,180	1,180	2,360

WHAT ARE THE NET SAVINGS AS A % OF NET BUDGET? 20.0%

NB these figures profile 3 years only & do not include savings due to be made in the 4th year, when included, these increase the savings made to 30%

6 WHAT IS THE CURRENT PERMANENT FTE STAFFING?

233.0

7 WHAT ARE THE PROPOSED PERMANENT FTE REDUCTIONS?

TBC

8 COSTS (significant one off costs associated with implementing the project)

Further work followed by detailed consultation will be required during this project to detail the financial implications of each proposed option both in terms of implementation costs and also how this will contribute to the overall savings target.

9 WHAT IS THE IMPACT?

ON SERVICE USERS AND COMMUNITIES
(including considerations relating to deprivation & equality)

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

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

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

ON OTHER ORGANISATIONS

This will be considered as part of proposal development.

ON OTHER PARTS OF THE COUNTY COUNCIL

This will be considered as part of proposal development.

10 INITIAL EQUALITY IMPACT ASSESSMENT

Even if the proposals apply to everyone equally, could they have a disproportionate / adverse or negative impact on people with protected characteristics, (age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation). If so how?

Children's Disability Service - it is expected that an EqIA will be required due to the potential impacts on children with disabilities and their families of any changes to the way the Children's Disability Service is run.

11 RISKS AND MITIGATING ACTIONS

- The project is unlikely to deliver any savings in the first year.
- At this stage transition costs are unknown and may be greater than the £200k estimated
- Timescales to deliver savings could lead to risk of limited time to consult with parents, interest groups and other stakeholders
- It may not be possible to identify sufficient savings to meet the proposed 30% savings target by 2017-18.
- Nationally, it is unclear whether the personalisation agenda has achieved any efficiencies and implementation of personalisation may result in increased costs in the short term.