Adults and Health Scrutiny Panel

Budget Scrutiny

Draft minutes from meeting on 12th December 2013.

The Cabinet Member, Cllr Vanier, introduced the Adults and Public Health Budget.

The Panel then heard from Beverley Tarka, Acting Deputy Director, Adults. The following points were noted:

- Line 3 Some vacancies have been help in admin and business support which are not being used as savings.
 - Reorganisations have taken place in order to manage with less staff. This has included new Job Descriptions for some staff and greater flexibility of staff to work across services.
- The deletion of cooks posts was reversed following representation from residents and Cllrs.
- Line 5 The changes to the re-ablement service are due to the hours where there is more demand for the service. This has been a consensual change.
 - The change is a more effective way of working as a 'down time' had been identified in the middle of the day.
- Line 6 This is a centralisation of the framework i IT function.
- Line 7 The Panel were assured that the 3 day timeline for payments would remain.
- Line 8 With regards to the Care & Placement saving proposal:
 - There had been some slippage with achieving savings and therefore the savings were now anticipated to be achieved over a two year period.
 - Savings were still intended to be delivered by 15/16.
 - Work had been done in this area previously in Learning Disabilities.
 - Each care package negotiation is accompanied by an up to date assessment of need before costs are negotiated.
 - A tool which is used to do this is the London Care Fund Calculator.
- Line 9 There is a 65%/35% split between Adults and Housing in respect of this saving and involves only purchasing essential items.

Key discussion points noted:

- The Panel queried why the papers presented to the panel did not reflect the fact that the Care and Placement Budget savings were now split over 2 financial years.
- The Panel queried whether there would be some flexibility in the savings to ensure that should anyone's needs have increased at the point of reassessment then these would be incorporated and was assured that this would be the case, but that negotiations would also take place in these cases to ensure that the care package represented value for money.
- The Panel was informed that the process was done in Learning Disabilities a few years ago and that approx £250k savings were identified. It was also informed that Learning Disability

packages are often about 1/3 higher in cost than other care groups and that this did not reflect value for money.

- It was noted that some people's care package had not been reviewed in a number of years and therefore there was a need to ensure that these represented value for money.
- There is an element of culture change in the piece of work, including ensuring that staff look more holistically at care packages.
- Adults also inspects provision to ensure it is providing value for money.
- Adults are also doing work jointly with housing on uneconomic voids replacing high cost placements with tenancies for service users.
- The 50 cases mentioned for review in the Care and Placement budget piece of work are high cost placements but not the end of the exercise.
- The Panel queried when more information would be available on savings relating to staff efficiencies, noting that the proposed cooks deletion did not immediately come to light. The Panel were informed that the proposed deletion of the cook was based on a model which had been carried out in learning disabilities and where it worked well, as cook provision was seen as being institutional. However, the service had recognised that the proposal would not work in older people and therefore withdrew the saving.
- Other staffing efficiencies was dependant on factors such as vacant posts and service developments such as personalisation whereby service delivery had changed, but roles had not necessarily changed alongside them.
- With reference to line 7 (financial assessments) the Panel was informed that the changes would take place in April 2014, however Adults and Children and Young People Teams would merge before that. The teams would come under Corporate Finance and as much as possible would be automated so a 3 day turnaround time would be maintained, subject to information being input correctly. It was felt that the change would be beneficial to the process as staff will be under one finance structure.
- The Integrated Care Fund has been renamed as the Better Care Fund.
- Adults are working with the CCG, Whittington Health and North Middlesex Hospital around winter planning – this includes having social workers 7 days a week, beds have been block booked to prevent delays and a dedicated team who meet regularly together to monitor progress. The aim is that the way of working goes beyond the winter.
- The Haringey Integrated Care Fund/Better Care Fund plan will be ready for early 2014, this will include reablement.
- The Care and Support Bill includes a national eligibility criteria.
- There is a need to shift the emphasis to prevention this is being discussed with health colleagues already.
- Growth identified in the budget recognises demographic changes and capital programme investment.
- Growth to fund young people in transition is based on the number of young people who will be transitioning to adult services from children and young people services. The 16/17 line has been added as this year now forms part of the MTFP period.

Public Health Budget, presented by Dr Fiona Wright, Assistant Director, Public Health

- The £577k saving identified in the June Cabinet report includes £488k for overhead charges.
- Other savings idenitifed in the Draft December cabinet report include areas which would have received an uplift in the grant they are therefore foregone investments.
- Public Health has tried to minimise the impact of savings by spreading them across a range of services.

Draft December Cabinet, Panel appendix

- Line 5 this saving will be achieved by competitive re-tendering of the substance misuse contract.
- Line 6 this saving is due to the receipt of external funding this year.

Key discussion points noted:

- Line 7 It was noted that Panel Members were opposed to savings relating to the prevention of obesity due to obesity levels in the borough. Panel members were concerned that the savings could be perceived as complacency about an issue and queried whether the CCG could contribute.
- Line 3 The Panel queried whether schools would be willing to contribute approximately £1k each in order to off set the saving relating to healthy living education. The Panel were informed that health education had been cut back over the years and so schools input has already increased due to this.
- The Panel were informed that the current Public Health grant is £17.58million plus £680k base budget and that the grant element is due to increase in the next financial year.
- Overheads can be charged against the grant.
- The ring-fenced grant relates to 'activity that supports public health'.
- The Panel queried why over heads had not been charged previously to the public health budget and was informed that this was agreed at Cabinet in June to allow public health time to transition and settle in to the Council.
- It was noted that the Panel had not been able to scrutinise the public health budget during the last budget scrutiny process and had not been able to see the budget before it was agreed by Cabinet.
- The Panel agreed that there was a need to ensure they had a greater understanding of the public health budget and its relationship with the Council budget as a whole in order to effectively scrutinise it.
- The Panel were informed that the Health and Wellbeing strategy underpins and drives the public health budget spend.
- In relation to Line 1 (Health Intelligence) There is a Council wide review being undertaken on how intelligence is used across the board and how its use can be maximised.
- The Panel had been referred a savings line by the Children and Young People's budget ("Delete vacant 4YP Nurse post £64k saving"). As this area does not fall directly under Dr Wright the Panel requested further information
- It was noted that there would be very little left of the Council base budget input once the savings had been made and off-set with the increase in grant – it is effectively the Council base budget which savings are being made from as opposed to the public health grant allocation.

- Panel Members were concerned that:
 - \circ $\;$ It would be seen that the Council is making savings from a ring fenced budget.
 - The perception would be that public health grant money is being taken in order to fund other council services.
 - Central government would, in future years, cut the public health grant if it is being seen to subsidise other areas.

The following draft recommendations & comments to Cabinet were noted:

- Line 8 Care & Placements Budget
 - The Panel were reassured that savings to the Care & Placement Budget won't adversely impact on service users needs, however the Panel would like reassurance that there will be full involvement of service users, carers and families throughout the transition.
 - The Panel would be interested in receiving some case studies on service users whose care package had been reassessed and renegotiated and what the impact had been as part of its future work programme.
 - Feedback from service users on the impact of service changes as a result of savings should be an integral part of this piece of work.
- Line 7 Interim payments
 - The Panel recommends that a process be put in place in order to make interim payments should there be any delays in processing payments beyond the current three day turnaround.
- Line 5 Re-ablement
 - The Panel recommends that any recommendations from the forthcoming Keogh reablement work are taken on board.
- Integration The Panel welcomes examples given on better coordination and working together, however recommends that further work is done around integrating services.
- The Panel are concerned about the perception of making savings in public health.
- The £30K Schools Curriculum Development recommend engagement with schools to see whether they are able to input money in order to replace this saving.
- Savings 1-8 of the Additional Savings for Public Health totalling £243k are withdrawn as the Panel believes that these are short term savings which will have a longer term negative impact.

Agreed

- That the Panel would received the full breakdown of the public health budget via the scrutiny officer.
- That the Panel would receive information on the total Care & Placement budget.
- That London Councils would be contacted to see whether savings were being made across other public health budgets.
- That further information would be provided on the 4YP Nurse post deletion under CYP.
- Briefing on the Public Health budget in order for the Panel to have a greater understanding.