

## Corporate Priority 2

## Empower all adults to live healthy, long and fulfilling lives

Ref	Proposal	2017-18 £000's	2018-19 £000's	2019-20 £000's	2020-21 £000's	2021-22 £000's	Total £000's	Current Budget	Current Staff	Delivery Risk RAG
2.1	Supported Housing Review	475	500	-	-	-	975	20,715	n/a	Amber
2.2	Osborne Grove	-	672	-	-	-	672	757	44	Red
2.3	Fees and charges review	199	115	84	-	-	398	n/a	n/a	Amber
2.4	Technology Improvement	750	250	-	-	-	1,000	n/a	37	Amber
2.5	Market efficiencies	987	200	-	-	-	1,187	52,766	n/a	Amber
2.6	New Models of Care		1,400	-	-	-	1,400	70,080	390	Amber
	<b>Total</b>	<b>2,411</b>	<b>3,137</b>	<b>84</b>	<b>-</b>	<b>-</b>	<b>5,632</b>			

## Supported Housing Review

Priority	2 & 5
Current Service Area	Supported Housing Commissioning
Responsible Officer:	AD Commissioning
Reference:	Supported Housing Review
Type of saving:	New Delivery Model
Version:	1.0

Impact on Residents	Outcomes
Maximising independence	Better use of Council resources
Greater choice for service users	Support responsive to user needs

PROPOSAL
<p><b>Proposal:</b> Supported Housing stock in the borough is not currently used for users with moderate needs in a way which moves people through levels of support and maximises their independence. The proposal is to move users with moderate needs, where appropriate, into independent tenancies with support and to free up to 29 supported housing units for people with high level care needs who might otherwise require residential care.</p>
<p><b>Rationale:</b> As part of the Supported Housing review project it has become clear that supported housing resources are not being maximised. There are currently 58 units of housing-related support accommodation for people with learning disabilities. It is estimated that about 50% of the people living in this supported housing type have lower support needs and minimal, if any, social services involvement.</p> <p>If those who are able to manage living more independently were supported into their own tenancies via a proposed Keyring scheme (independent tenancies in a cluster with a community support worker), 29 suitable properties would become available for people moving on from residential care. The remaining 29 properties are recommended to remain as a preventative supported housing service for people with mild to moderate learning disabilities who are unable to live independently or with parents/carers.</p>

SUMMARY			
<b>Base Data</b>	<b>Financial Data</b>	<b>Workforce Data</b>	
	<b>£000</b>		<b>Data</b>
<b>Current budget</b>	20,715	<b>Employees</b>	n/a
<b>Savings/Invest</b>	<b>£000</b>	<b>Change in employees</b>	
Year 1	£475	Year 1	n/a
Year 2	£500	Year 2	n/a
Year 3	£0	Year 3	
Year 4	£0	Year 4	
Year 5	£0	Year 5	
Total	975	Total	0

### Key benefits - financial and non-financial

#### Financial:

If existing Housing Related Support units were available for supported living accommodation for people moving out of residential care, an estimated annual saving of £34k per person could be made based on average weekly unit costs and the assumption that a rationalised Housing Related Support contribution of £150 pppw would continue in all units (Housing Related Support contribution of £7,800 per annum has not been added to the estimated annual saving although it would save a further £225k against current ASC spend over the 2 years if considered separately).

A phased transition process, re-purposing 29 units and transitioning 29 people over two years would create savings in Year One of £475k and in Year Two of £500k.

#### Non-financial:

Maximising independence and autonomy for adults with learning disabilities who are living either in residential care or other types of supported housing. This would rebalance preventative supported housing for this client group with the understanding of the need to support people in settings with the most appropriate level of support, enabling them to transition from residential care and higher levels of support where possible.

### Procurement strategy

No procurement strategy is needed, contracts exist between providers and the council already for accommodation based services for people with learning disabilities. There is a question of how the commissioning of services will change moving forward once budgets are fully integrated.

A strategy will be required for moving on those people currently in supported housing units who are able to move into more independent living through the Keyring scheme.

### Internal dependencies and external constraints

#### Dependencies:

The proposal would require sufficient lead-in time to support those in current Housing Related Support provision to move into more independent tenancies. The council needs to make a decision about offering some of those affected social lettings to speed up the process and also to ensure that moving those affected does not result in tenancy failures and additional costs.

It may be necessary to make changes to rooms to accommodate particular needs, this may incur additional capital costs but the amount is unclear until individuals are identified.

Additionally, the Housing Related Support Commissioning Team will need to be restructured as part of the change in commissioning and Budgetary responsibility. This process could run concurrently.

#### Constraints:

It is possible that Housing Related Support providers will not consent to this proposal. However, initial conversations with two of four providers have been positive and 3 of the 4 providers are already adult social care providers, so are equipped and engaged in the supported living market.

Cost Benefit Analysis (CBA)	2017-18 £k	2018-19 £k	2019-20 £k	2020-21 £k	2021-22 £k
Benefits Estimated (Savings)	475	500	0	0	0
Reduced benefits due to lead-on time (if applicable)	0	0			
Additional Cost Estimated	0	0			
Net Impact Cost/(Savings)	475	500	0	0	0
Cumulative Cost/(Savings)	475	975	975	975	975
Payback Period: N/A					

# Osborne Grove

Priority	2
Current Service Area	Prevention Services - Residential Nursing Home
Responsible Officer:	AD Commissioning
Reference:	Osborne Grove
Type of saving:	New delivery model
Version:	1.0

Impact on Residents	Outcomes
Continuity of provision	Best use of Council's assets to support scarce nursing provision in the borough
Local provision	Residents better able to remain connected with their local communities; families closer to provision

PROPOSAL
<p><b>Proposal:</b> Currently the weekly cost per bed at Osborne Grove is £1,214 which is higher than the average market rate of nursing care at £824/week. There is significant demand for nursing care and limited capacity in Haringey and locally. This has prompted consideration of whether the Osborne Grove site could deliver extra capacity. The site overall has been assessed as underused and offering potential for expansion either to create more nursing beds or extra care sheltered units, both of which are needed locally.</p> <p>Given the good location and condition of the site, an opportunity lies in making better use of both of the day centre and car park, for example through: leasing out the space to an independent provider; converting the space into supported living accommodation; building additional nursing care, extra care or supported living accommodation across the site.</p> <p>An options appraisal is underway to maximise the number of units which can be offered from the site, to reduce unit costs and to maintain care in a sustainable way. In each of the options, the current nursing care capacity of 32 beds would be maintained. Any additional capacity created would either be of nursing beds or extra care sheltered housing units, which could include shared or outright ownership models. Options range from procuring an alternative provider to develop out the site and/or to provide care to maintaining the current model and capacity.</p>
<p><b>Rationale:</b> <b>Modelling suggests that:</b></p> <ol style="list-style-type: none"> <li>Cashable savings are derived from the difference between the current cost of the service (£1,214/person per week) to fixing this cost to the market rate (£824 is assumed) with additional savings potential from 19/20 if rent is charged;</li> <li>The potential income that could be generated from each of these strategies ranges from £30K -£100K / annum.</li> </ol> <p>There are a variety of potential options to be explored within this broad proposal and an options appraisal is underway. The range of savings associated with different options are £0 to £672k.</p>

SUMMARY			
	Financial Data		Workforce Data
<b>Base Data</b>	<b>£000</b>		
<b>Current budget</b>	757	<b>Employees</b>	44
<b>Savings/Invest</b>	<b>£000</b>	<b>Change in employees</b>	
Year 1	0	Year 1	
Year 2	672	Year 2	n/a
Year 3	0	Year 3	
Year 4	0	Year 4	
Year 5	0	Year 5	
<b>Total</b>	<b>672</b>	<b>Total</b>	<b>0</b>

**Key benefits - financial and non-financial**

Local Provision.  
 Continuity for residents.  
 Market prices for in-house provision.  
 Making best use of Council assets.

**Internal dependencies and external constraints**

Depending on options analysis, may require consultation and member decision.

**Procurement strategy:**

This will depend on the outcome of the options appraisal.

<b>Cost Benefit Analysis (CBA)</b>	<b>2017-18 £k</b>	<b>2018-19 £k</b>	<b>2019-20 £k</b>	<b>2020-21 £k</b>	<b>2021-22 £k</b>
Benefits Estimated (Savings)		672	0	0	0
Reduced benefits due to lead-on time (if applicable)					
Additional Cost Estimated					
Net Impact Cost/(Savings)	0	672	0	0	0
Cumulative Cost/(Savings)	0	672	672	672	672
<b>Payback Period: n/a</b>					

## Fees and Charges Review

Priority	2
Current Service Area	Packages of Care and Direct Provision
Responsible Officer:	AD Adults Social Care
Reference:	Fees and Charges Review
Type of saving:	Increase in income
Version:	1.0

Impact on Residents	Outcomes
Higher charges for some clients	Maximising funding available for adult social care services

PROPOSAL
<p><b>Proposal:</b> To amend fees and charges to bring them into line with other London boroughs and to enable cost recovery where possible and appropriate.</p>
<p><b>Rationale:</b> Savings opportunities are:  <b>-Disability Related Expenditure</b> (£328k), Haringey currently operates a 65% (£35.82) disregard and this policy has stayed the same since 2004. Other authorities have reduced the DRE and the range is from a flat rate of £10.00 to a rate of 35% (£19.00). Haringey is proposing to operate a DRE of £40%, (£22.04) by 2019/20 (ie 55% (£30.31 per week) saving an estimated £129k in 2017/18, 45% (£24.80 per week) saving an estimated £244k in 2018/19.  <b>-Transport to day opportunities</b> (£61k) charging users, who have been assessed as having the ability to pay, for the full cost of transport as part of the charge for the overall package of care.  <b>-Self-funders administration fee</b> (£9k). We currently manage care provision for 64 full-cost service users (those deemed to have enough disposable income to full pay for their own care) and do not charge. The proposal is to implement an administration fee.</p>

SUMMARY			
Base Data	Financial Data £000	Employees	Workforce Data
Current budget	n/a		n/a
<b>Savings/Invest</b>	<b>£000</b>	<b>Change in employees</b>	
Year 1	199	Year 1	n/a
Year 2	115	Year 2	n/a
Year 3	84	Year 3	n/a
Year 4	0	Year 4	
Year 5	0	Year 5	
Total	398	Total	0

**Key benefits:**

Financial Savings

**Internal dependencies and external constraints:**

May need consultation

**Procurement strategy:**

None

<b>Cost Benefit Analysis (CBA)</b>	<b>2017-18 £k</b>	<b>2018-19 £k</b>	<b>2019-20 £k</b>	<b>2020-21 £k</b>	<b>2021-22 £k</b>
Benefits Estimated (Savings)	£199	£115	£84	£0	£0
Reduced benefits due to lead-on time (if applicable)					
Additional Cost Estimated					
Net Impact Cost/(Savings)	<b>£199</b>	<b>£115</b>	<b>£84</b>	<b>£0</b>	<b>£0</b>
Cumulative Cost/(Savings)	<b>£199</b>	<b>£314</b>	<b>£398</b>	<b>£398</b>	<b>£398</b>
<b>Payback Period: n/a</b>					

# Technology Improvement

Priority	2
Current Service Area	Adult Social Care / Commissioning
Responsible Officer:	AD Commissioning
Reference:	Technology Improvement
Type of saving:	New delivery model
Version:	1.0

Impact on Residents	Outcomes
Maximising independence	New service model to reduce costs and provide better care
Greater access to support in the community	Signposting residents to most appropriate sources of care

PROPOSAL - STRATEGIC CASE	
<b>Proposal:</b>	Using technology to maximise independence, including a particular focus on utilising Assistive Technology (AT) and online information to signpost and enable residents to self-assess.
<b>Rationale:</b>	<p><u>1. Assistive Technology (AT)</u>  Advances in AT can be used to improve the individual's quality of life, at the same time reducing the costs to Haringey. Areas being considered are:</p> <ol style="list-style-type: none"> <li>1) AT that can assist in helping someone with dementia living at home for longer than they currently are - this reduces reliance on residential care.</li> <li>2) Reduction in home care hours where assessments indicate that AT can be beneficial for the service user, including reduction in double up care.</li> <li>3) Exploration of using AT to replace sleep in or waking night staff in Supported Living accommodation</li> </ol> <p><u>2. Online information and self-assessment</u>  Developing a more accessible and comprehensive online information and advice offer will help to signpost to support in the community and reduce the number of contacts coming through to adult social care. An easy to use self-assessment tool will ensure that users are signposted to community support where appropriate, and unnecessary assessments are reduced. Cost-benefit analysis of this approach in other LAs shows significant savings can be made.</p>

SUMMARY			
	Financial Data		Workforce Data
<b>Base Data</b>	<b>£000</b>		
<b>Current budget</b>	n/a	<b>Employees</b>	37
<b>Savings/Invest</b>	<b>£000</b>	<b>Change in employees</b>	
Year 1	750	Year 1	n/a
Year 2	250	Year 2	n/a
Year 3	0	Year 3	
Year 4	0	Year 4	
Year 5	0	Year 5	
<b>Total</b>	<b>1,000</b>	<b>Total</b>	<b>0</b>

**BENEFITS CASE**

**Key benefits:**

**Financial** - Work elsewhere has indicated that AT can create savings for the authority, both around costs for existing service users and also those that are new to the service. The anticipated annual savings are calculated at being £800k in respect of older persons, and £200k in respect of working age adults. Cost-benefit analysis in Plymouth against online information and self-assessment has shown savings from reduced contacts. A robust business case specific to Haringey is being developed.

**Non-Financial** - The use of AT and online information and assessment promotes independence and improves quality of life. These activities enable residents to find support in the community and to remain in their home, deferring moves into Residential Care or receiving other packages of support when they are not necessary.

<b>Cost Benefit Analysis (CBA)</b>	<b>2017-18 £k</b>	<b>2018-19 £k</b>	<b>2019-20 £k</b>	<b>2020-21 £k</b>	<b>2021-22 £k</b>
Benefits Estimated (Savings)	750	250	0	0	0
Reduced benefits due to lead-on time (if applicable)					
Additional Cost Estimated					
Net Impact Cost/(Savings)	<b>£750</b>	<b>£250</b>	<b>£0</b>	<b>£0</b>	<b>£0</b>
Cumulative Cost/(Savings)	<b>£750</b>	<b>£1,000</b>	<b>£1,000</b>	<b>£1,000</b>	<b>£1,000</b>

**Payback Period: N/A**

## Market Efficiencies

Priority	2
Current Service Area	Adult Social Care / Commissioning
Responsible Officer:	Head of Strategic Commissioning
Reference:	Market Efficiencies
Type of saving:	Efficiencies / savings
Version:	1.0

Impact on Residents	Outcomes
Reduced subsidy for meals on wheels	Best use of resources
Commissioning for outcomes so that care and support can be more flexible and responsive	Increased independence even in high need settings and Care will be responsive to changing levels of need

PROPOSAL - STRATEGIC CASE
<p><b>Proposal:</b> Through 5 different approaches, reduce costs incurred in commissioning packages of care for clients.</p>
<p><b>Rationale:</b> Reduce the cost of care packages through:</p> <ol style="list-style-type: none"> <li>1. Implementing a new approach to residential and nursing procurement to reduce costs working with boroughs across North Central London.</li> <li>2. Gaining leverage on providers in Learning Disabilities and Mental Health to negotiate price reductions in existing packages with an increased focus on maximising independence.</li> <li>3. Developing new care and delivery models for people with the most complex needs and behaviour that challenges.</li> <li>4. Changing the terms of the residential placement agreement to reduce the amount Haringey will pay when service users are hospitalised in line with comparator boroughs; a one off debt recovery from care homes against hospitalisation of service users.</li> <li>5. Ending the subsidy for meals on wheels. There are a range of options available for people needing support to access a hot meal during the day. Going forward the role of the Council will be to help the individual to decide which meals option they want to take up and this will be explored as part of the assessment and support planning process. Users will be able to access culturally specific meals, with a range available as part of the options being explored both for delivery and in the community. We are seeking to ensure consistency of costs but some currently appear more expensive. This will need to be considered as part of the EqIA. Where a luncheon club is an assessed need and the user is eligible for adult social care transport will be arranged.</li> </ol>

SUMMARY			
	Financial Data		Workforce Data
<b>Base Data</b>	<b>£000</b>		
<b>Current budget</b>	52,766	<b>Employees</b>	n/a
<b>Savings/Invest</b>	<b>£000</b>	<b>Change in employees</b>	
Year 1	987	Year 1	n/a
Year 2	200	Year 2	
Year 3	0	Year 3	
Year 4	0	Year 4	
Year 5	0	Year 5	
<b>Total</b>	1,187	<b>Total</b>	0

**BENEFITS CASE**

**Key Benefits:**

1. Managing residential and nursing costs down across the North Central London cluster through a shared approach to purchasing, price banding and use of dynamic purchasing system. Reduction of costs from current position to costs in line with comparators yields £515k cost savings per annum.
2. It is estimated that c£500k of recurring savings can be negotiated. This estimate is based on the level of spend, the higher than average unit costs and the levels achieved in other areas. This is likely to be realised with half the savings achieved in 17/18 and the remainder achieved in 18/19.
3. Introduction of commissioning using both Positive Behaviour Support and Progression models: both offer very intensive support in first 12 weeks of transition into a supported living setting with a focus on outcomes which can be delivered with lower levels of care.
4. Haringey Council currently uses a residential placement agreement that specifies the Council will pay for 100% of service user fees for two weeks after hospitalisation, 90% of fees for the subsequent six weeks and 50% thereafter. These terms are more generous than other councils. It is recommended that this clause is changed to 100% for the first two weeks, 90% for the subsequent two weeks and then 50% thereafter. This will yield £50k per annum. It is also estimated there a one-off debt recovery of £50k (achieved in 17/18) where care homes have failed to notify Haringey of hospitalisation beyond two weeks.
5. An annual £122k could be realised through ending the subsidy for meals on wheels.

<b>Cost Benefit Analysis (CBA)</b>	<b>2017-18 £k</b>	<b>2018-19 £k</b>	<b>2019-20 £k</b>	<b>2020-21 £k</b>	<b>2021-22 £k</b>
Benefits Estimated (Savings)	£987	£200	£0	£0	£0
Reduced benefits due to lead-on time (if applicable)					
Additional Cost Estimated					
<b>Net Impact Cost/(Savings)</b>	<b>£987</b>	<b>£200</b>	<b>£0</b>	<b>£0</b>	<b>£0</b>
<b>Cumulative Cost/(Savings)</b>	<b>£987</b>	<b>£1,187</b>	<b>£1,187</b>	<b>£1,187</b>	<b>£1,187</b>

**Payback Period: N/A**

## New Models of Care

Priority	2
Current Service Area	Adult Social Care / Commissioning
Responsible Officer:	Director of Adults Social Care
Reference:	New Models of Care
Type of saving:	New delivery model
Version:	1.0

Impact on Residents	Outcomes
Greater emphasis on prevention of needs escalating	Synergies from joining up services
Greater independence for service users	Better use of resources within a clear operating model

PROPOSAL - STRATEGIC CASE
<p><b>Proposal:</b>                      There are potentially substantial savings achievable across Priority 2 from moving to an integrated model of delivery. The largest element of this will be savings made through integration with (i) Haringey CCG, (ii) Wellbeing Partnership with Islington Council and CCG and (iii) additional savings across North Central London cluster.</p> <p>There are additional potential savings as a result of proposals to redesign adult social care through (i) further reductions in new packages of care through a more preventative approach linked into primary care and community services (ii) further staff reductions as part of the service redesign, including through more integrated ways of working. This would include at services provided currently through Adults Social Care, Public Health and the Clinical Commissioning Group.</p>
<p><b>Rationale:</b>                      These proposals are at an early stage of development. Nonetheless, other authorities in London have been developing collaborative partnerships with neighbours or with health partners and these have indicated scope for doing things better together and saving money through having more resource overall to use flexibly and innovatively. The savings proposed for Haringey draw from those achieved in models elsewhere.</p>

SUMMARY			
Base Data	Financial Data £000	Employees	Workforce Data
<b>Current budget</b>	70,080		390
<b>Savings/Invest</b>	<b>£000</b>	<b>Change in employees</b>	
Year 1	0	Year 1	
Year 2	1,400	Year 2	15-20
Year 3	0	Year 3	
Year 4	0	Year 4	
Year 5	0	Year 5	
<b>Total</b>	<u>1,400</u>	<b>Total</b>	<u>15 - 20</u>

**Key Benefits:**

Collaborative working.  
 Opportunity to redesign services.  
 Minimise costs on transactions between organisations.  
 Efficiencies and synergies.

**Internal dependencies and external constraints**

None

**Procurement strategy**

n/a

<b>Cost Benefit Analysis (CBA)</b>	<b>2017-18 £k</b>	<b>2018-19 £k</b>	<b>2019-20 £k</b>	<b>2020-21 £k</b>	<b>2021-22 £k</b>
Benefits Estimated (Savings)		£1,400			
Reduced benefits due to lead-on time (if applicable)					
Additional Cost Estimated					
Net Impact Cost/(Savings)	<b>£0</b>	<b>£1,400</b>	<b>£0</b>	<b>£0</b>	<b>£0</b>
Cumulative Cost/(Savings)	<b>£0</b>	<b>£1,400</b>	<b>£1,400</b>	<b>£1,400</b>	<b>£1,400</b>
<b>Payback Period: N/A</b>					