

### Extract of Minutes from Adult Care and Well Being Overview and Scrutiny Panel Meeting 14 November 2017

**258 Budget Scrutiny: Reviewing the 2017/18 Budget Position for Adult Services and Public Health**

Attending for this Item were:

Adrian Hardman, Cabinet Member with Responsibility for Adult Social Care  
Sander Kristel, Director of Adult Services  
Frances Howie, Director of Public Health  
Rob Wilson, Senior Finance Manager  
Pauline Harris, Senior Project Officer

A presentation was given which gave Members some context, highlighting in particular the need to work with partners in the NHS, private and voluntary sector to support activity for all residents. In summary:

- Worcestershire had a higher than average number of residents aged 65+
- The numbers were predicted to grow by 34% by 2020
- 4,859 residents were on the Dementia register and by 2030 there was a predicted increase of two thirds
- Life expectancy by 2021 was likely to be higher than national figures (81.8 for men and 85 for women)
- 2,413 people were recorded as having a learning disability.

In Adult Services:

- 1,900 people received Nursing or Residential Care
- 2,600 people received Domiciliary Care
- 1,200 people received Direct Payments
- 2,342 Safeguarding Alerts were received in 16/17, with 65 assessed as High Risk
- Prevalence of depression was significantly higher in the County than England, at 9%
- 30 Young People with Disabilities transferred into Adult Services each year.

The Adult Social Care and Public Health Net Budget for 2017 -2018 was stated as £131.1m, with services for Older People and for Learning Disabilities taking up £124.2m in total and covering 4,856 service users.

The budget was a particular challenge, in line with the national picture, as the adult social care budget was totally demand-led. A shortfall in savings delivery targets

of £3.3m was due mainly to timing issues and this year had seen an increase in demand and cost for services for Older People. Directorate Reserves would have to be used but there was a risk of further overspending if growth continued.

The Public Health Ring Fenced Grant was national funding which had clear grant conditions on mandated duties. Services included sexual health, drug and alcohol services, health visitors and oral health. The future of the Grant was uncertain, however it was suggested that an extension to 2020/21 was hopeful but with a continued downward trajectory in the amount of grant funding.

In the ensuing discussion, the following main points were made:

- The Better Care Fund (BCF) was a national funding stream worth £34.5m to Worcestershire in 2017/18 with the intention of integrating local health and care services. £11.8m was transferred to the Council in 2017-18 and £4.6m was passported to District Councils to deliver Disabled Facilities Grants. The remainder was kept by Clinical Commissioning Groups. Funding was available for a further three years until 2019/20, however, the amount by then was lower. Projects delivered under this funding stream were signed off by the Health and Well-being Board
- The overall financial picture for the Directorate was challenging. With increasing demand and duty to provide services for those residents who were Care Act eligible, it was also difficult to predict when a person would require services or the level of need
- An increase in provider services (for example Older People Home Care or Residential and Nursing) had an immediate effect on the budget
- It was vital to appreciate that although the budget was important, outcomes for individuals was the core business and behind the numbers was a person in need
- The Gross Budget was £186m and the difference between that and the Net Budget of £131m was due to Self Funding residents, which provided both risks and opportunities
- It was reported that nearly all of the BCF was spent on transfers of care. Considerable effort was put into managing the discharge of patients from hospital, where there were three pathways for patients leaving Hospital:

- Pathway 1 – back Home with little support
  - Pathway 2 – transfer to a Community Hospital
  - Pathway 3 – transfer to a Short Term Nursing Home
- Pressures in the system had resulted in around 300 nursing vacancies in Nursing Homes being reported and it was felt that stabilising the Care Market was vital
- Members were concerned about the level of Directorate Reserves highlighted for use this financial year, resulting in little left to cushion future challenges
- In response to a query whether administration costs can be applied, it was stated that legally, the Council cannot make a profit from charges set by providers
- The use of Assistive Technology was explored with Members welcoming the approach of potentially reducing costs in the future. Examples varied in complexity, from alert call buttons to robots to tackle loneliness
- There was a progressive workstream on Dementia, with an emphasis on living well with Dementia and early help to ensure residents were able to stay at home longer, however, the Director reported that numbers would only continue to rise despite this early intervention
- In response to a query about the higher incidence of depression than elsewhere, it was noted that Worcestershire residents had poor mental health outcomes compared to residents in other parts of the country. Some of this could be explained by a higher proportion of older residents in the County's population than elsewhere. With an ageing population there was concern that loneliness would become more prevalent potentially leading to increased poor mental health. The Panel was reminded of the Social Impact Bond and the proactive work being undertaken to tackle loneliness through Age UK and the Reconnections service
- Members who were also District Councillors commented that the Disability Facilities Grant was not always distributed in a timely manner and they would welcome a review. The Director of Public Health reported that there was a Housing Task and Finish Group under the Health and Well-being Board which was considering a number of issues relating to living independently and had also

highlighted this. It was due to report by the end of the calendar year and would include patient flow and waiting lists as part of this

- Members agreed with the Director of Adult Services when he voiced his deep concern about the budget pressures his service was under, especially given the demographic profile of the County in the coming years where further demand was expected. He suggested that outcome based commissioning and the 3 Conversation Model of Social Work were key in helping to manage the demand for services
- The Cabinet Member for Adult Social Care agreed that the financial pressure was extremely difficult to manage, especially as there was no scope to plan for the future and the financial picture beyond 2019 was a particular concern. There was a reliance of one off Government grants which was obviously not sustainable. He advocated a 3% increase on the precept as the funding would then be known and in the system
- It was clarified that the demand for services for people with Learning Disabilities had changed over time. The numbers of those with Learning Disabilities were generally more predictable since they were known from demand for Children's Services. However, service users were generally seeking more independent lives and employment opportunities. People were living longer which meant support was required for longer than previously
- The focus on independence and fulfilling a meaningful life was considered to be a positive step forward and Members supported this approach.

In answer to a query about the level of partnership working with the Office of the Police and Crime Commissioner, the Director of Public Health highlighted that a number of initiatives were cross organisation. The Office did contribute to the County wide drug and alcohol service.