

# HASC: Adults' Health and Care Transformation to 2019 Revenue Saving Proposals

Graham Allen

Director of Adults' Health and Care

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# Summary

- Council and Departmental context
- Adult Social Care budget and T19 reductions
- Adult Social Care saving proposals
- Public Health budget reductions
- Risk and equality highlights
- Consultation key findings

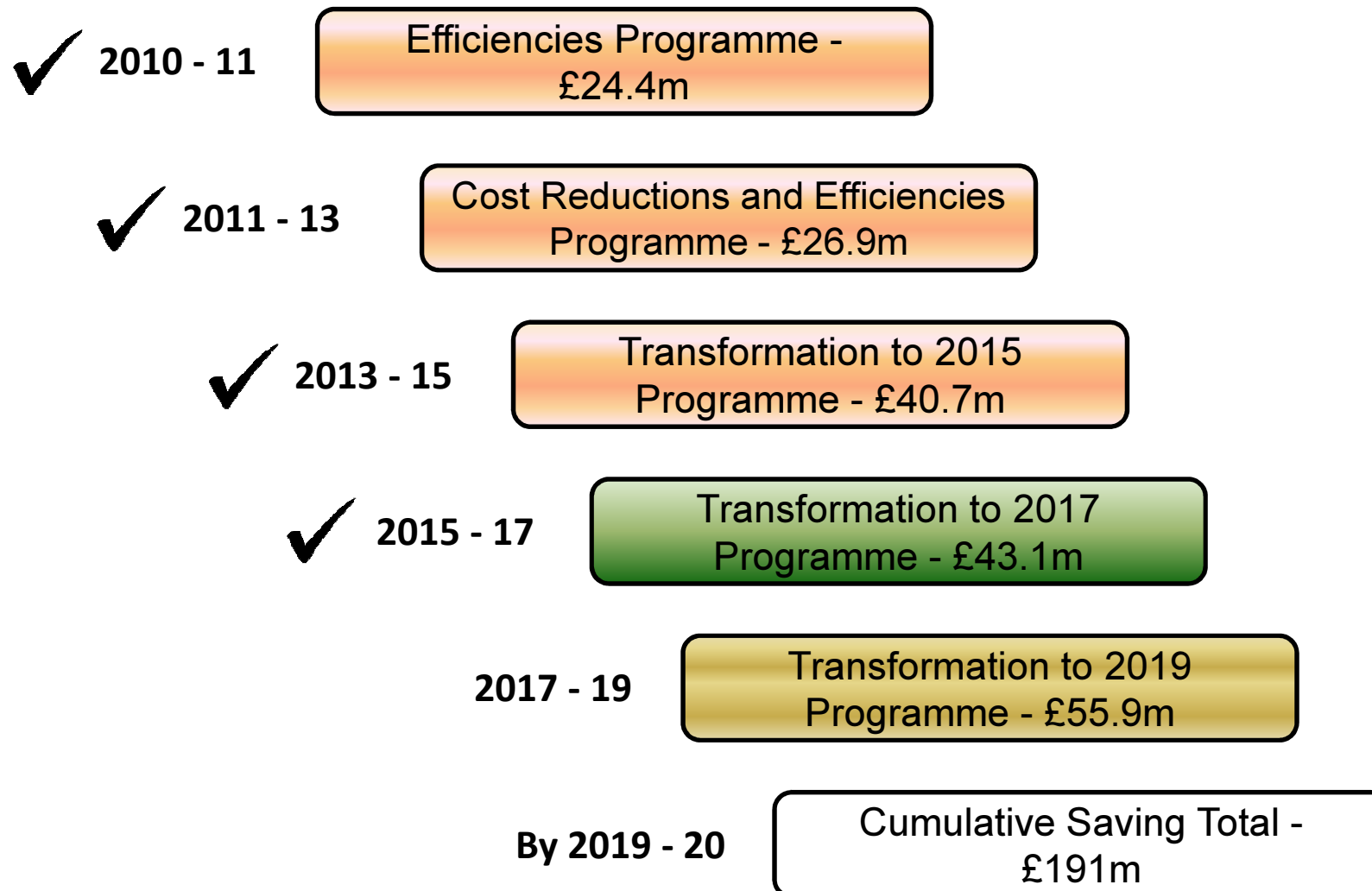
# Hampshire County Council Context

- Over the period 2010 – 2017 £340m saved across Hampshire County Council – proven track record in achieving required savings, whilst maintaining service provision
- Transformation to 2019 requires further savings of £140m, of which;
  - £20m already identified through a number of Treasury Management measures
  - Remaining £120m applied on a straight line basis (19%) across all departments
  - Adults' Health and Care share = £56m

# Departmental Context

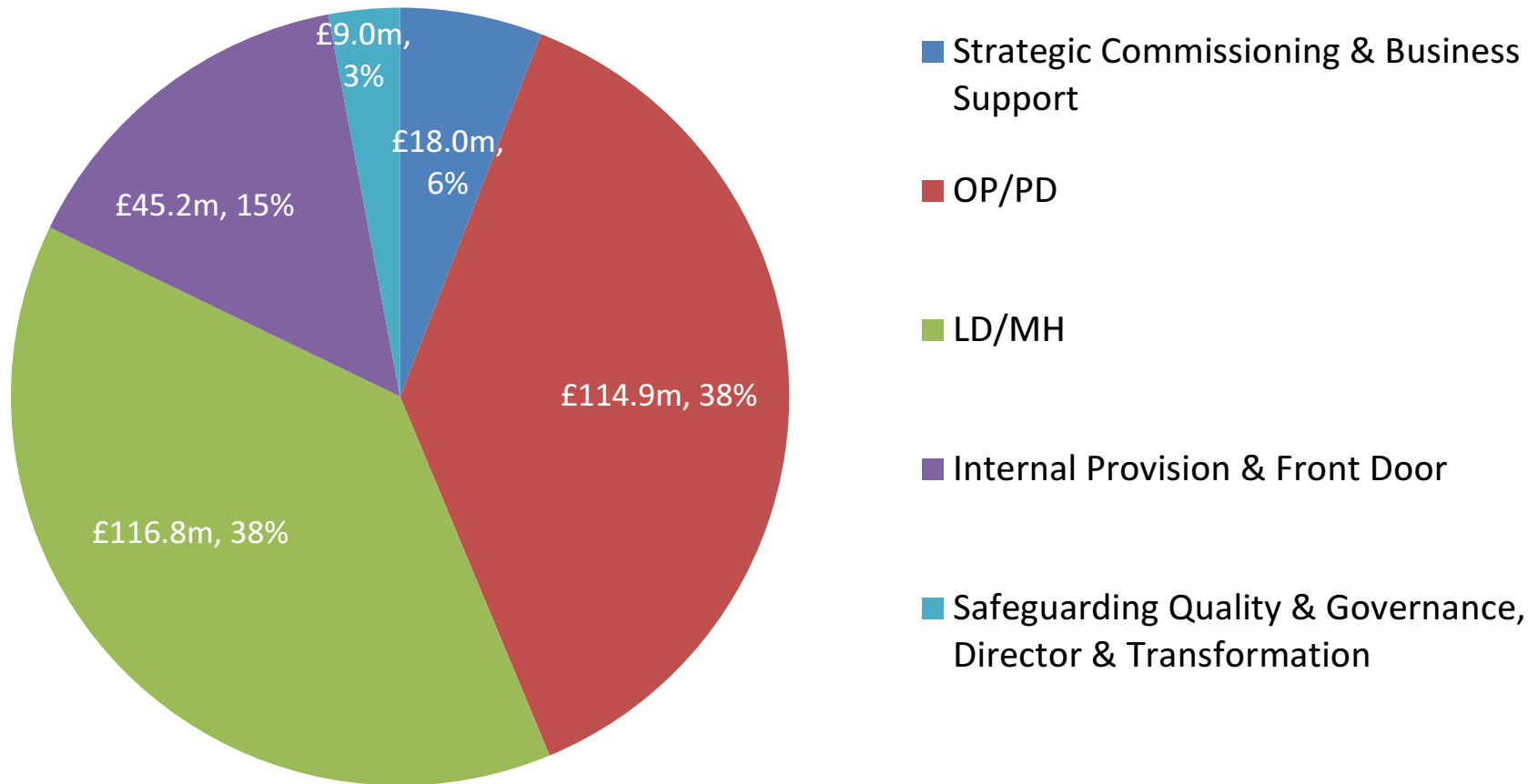
- Demography and complexity demand pressures
- Whole system pressures, alongside individual organisational challenges – these pressures can be summarised as;
  - **Quality / safety**
  - **Workforce**
  - **Financial challenge**

# Adult Social Care Reductions



# Adult Social Care Budget

Adult Social Care - Net Budget 2017/18 of £303.9m by Service Activity



# T19 Approach

- **Principles:**

- **Prevention:** Strengthen the prevention strategy to reduce and/or contain demand
- **Independence:** Increase the number of clients living independently and reduce the cost of care
- **Productivity:** Improve efficiency and productivity of the department's operations
- **External spend:** Increase outcomes and service efficiency from commissioned services

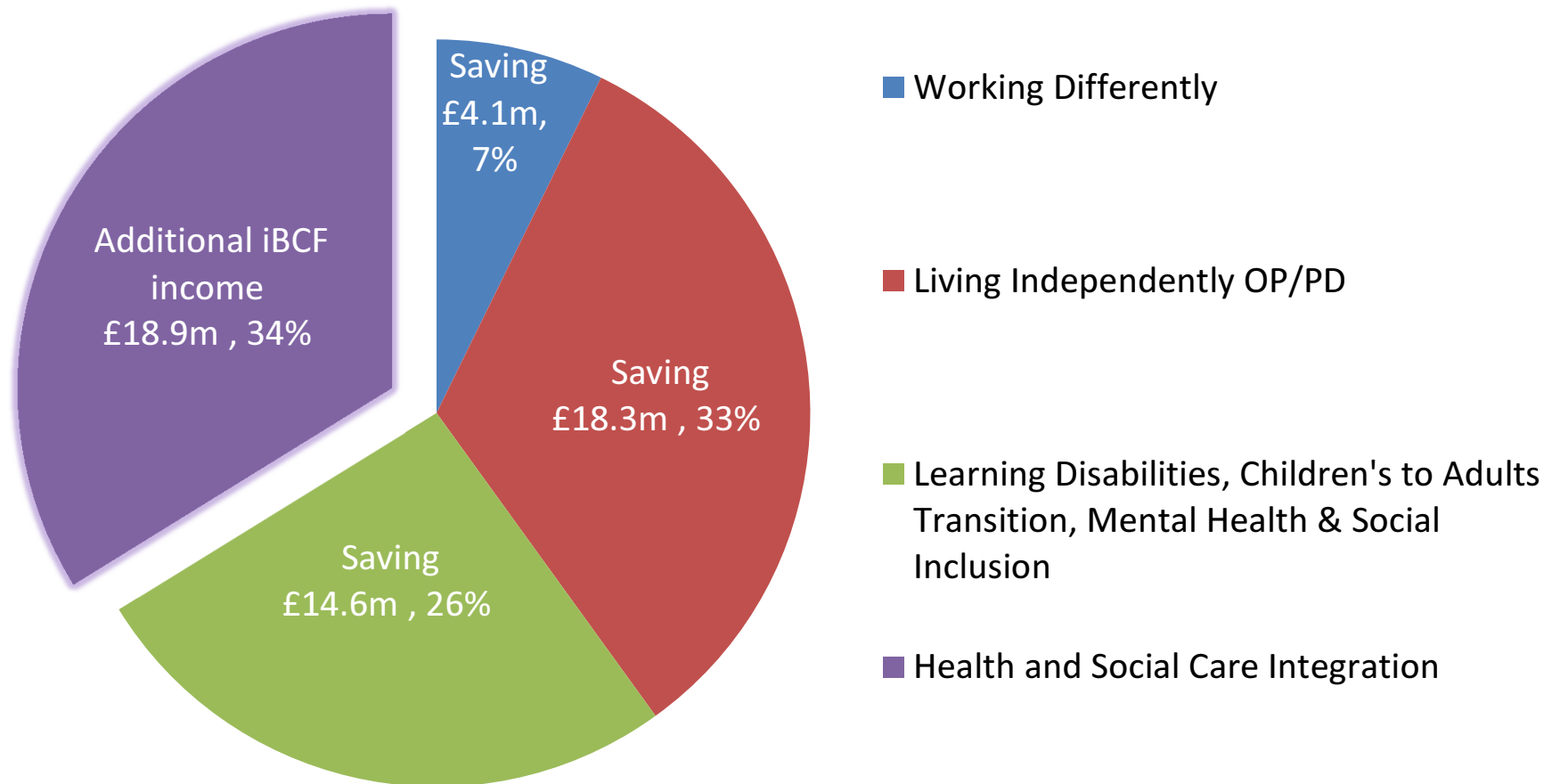
# Adult Social Care T19 Programme

- **Four main blocks within the proposals:**
  - Use of additional health and social care integration funding
  - Living independently (OP/PD)
  - Learning disabilities, children's to adults transition, mental health and social inclusion
  - Working differently
- **Underpinned by:**
  - Demand management and prevention



# Adult Services Tt19

Achieving £55.9m Tt2019 Saving Target by work-stream



# Health and Social Care Integration funding (£18.9m)

- Additional £18.9m national funding transfers into the Integration and Better Care Pooled Fund, from 2019/20 financial year
- Proposing to use this increase in the Improved Better Care Fund element to continue joint / integrated service delivery and protect core adult social care services

# Living Independently (OP/PD) (£18.3m proposed)

- Focus on strengths based approaches; intermediate care / re-ablement, increased capacity for short-term stays, Technology Enabled Care and extra-care to enable more people to return home and to need less ongoing support
- Consider increasing client contributions
- In-house service efficiencies
- Review of day opportunities and development of alternative provision

# **LD, Children's to Adults, MH and Social Inclusion (£14.6m proposed)**

- Support people into more flexible and modern ways of living that provide much greater independence; including employment and accessing wider community support
- Continue work with Children's Services and providers to support young people in transition; children's to adults
- Engaging with district councils to redesign Social Inclusion (homeless) services when they come to an end in March 2019 – HASC working group assisting review

# Working Differently (£4.1m proposed)

- Entire department workforce - working differently through increased use of technology, modern / flexible / mobile working, automation, business process efficiencies and some activity ceasing
- Projection of circa 150 FTE fewer posts, based upon current operating model
- Staff levels will be managed down through 'natural' turnover, redeployment of staff and voluntary redundancy where possible

# Demand Management and Prevention

- Containing and reducing demand for services will be key within a reducing budget
- There will be a focus on initiatives and investment to help individuals and communities to do more for themselves, including access to better advice and information
- Key function to be further developed with the Voluntary and Community Sector and people who use services.

# Public Health Savings

- Additional £4m of Public Health savings required by 2019/20
- Public Health grant will be £49.5m after total cash reductions of £8.3m since 2015/16
- These budget reductions are being taken forward on a different timescale from T19 and will report to the Executive Member for Public Health

# Risk Highlights

- Risk that changes in the Department's service offer may reduce (or may be perceived to reduce) – managing the message and maintaining outcomes is key
- Adult social care case law turns upon circumstances in individual cases and as such some areas of risk are by their nature less predictable – oversight of practice and working with people and their representatives and co-producing are vital



# Equality Impacts & mitigation

- **Health and Social Care Integration:**
  - Largely positive and will mainly benefit older people, people with life long conditions and people with disabilities
- **Living Independently (OP/PD):**
  - Impact: Some older people and people with physical disabilities may receive less formal domiciliary, residential and nursing care with greater expectations on families and communities – this may increase safety/wellbeing risk
  - Mitigation: Working with partners, a range of approaches will be taken to seek to increase or maintain people's independence for longer and there will be ongoing investment in Demand Management and Prevention
- **Learning disabilities, children's to adults transitions, mental health and social inclusion:**
  - Impact: Fewer service users will be supported in residential care in favour of more flexible supported living; respite and day services may change/reduce with alternative provision identified for the most vulnerable; and services for homeless people may also reduce
  - Mitigation: Packages of care will continue to be personalised to the needs of the individual; Direct Payments will be promoted to maximise service user choice; and district councils will be engaged to redesign Social Inclusion services for people who are homeless when the current service comes to an end in March 2019
- **Working Differently:**
  - Impact: There will be a reduction in the number of staff employed impacting on staff and potentially service users
  - Mitigation: Staff levels will be managed down through 'natural' turnover, redeployment and VR as well as the impact on service users will be minimised through process efficiencies and use of technology

# Balancing the Budget Consultation – Key findings

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- The majority of respondents (**65%**) **agreed** that the County Council should continue with its **financial strategy**.
- Responses were relatively evenly split between those who tended to support **changes to local services** and those who did not (**50% agreed**, 45% disagreed and 5% had no view either way).
  - Of all the options, this was respondents' **least preferred**.
- Two thirds of respondents (**67%**) **agreed** that the County Council should raise existing **charges** or introduce new charges to help cover the costs of running some local services.
- Over half of respondents (**57%**) **agreed** that the County Council should **lobby the Government** to vary the way some services are provided, and enable charging where the County Council cannot levy a fee due to statutory restrictions.
- Of all the options presented, generating **additional income** was the **most preferred** option.
- On balance, the majority of respondents (**56%**) **agreed** that the County Council should retain its current position not to **use reserves** to plug the budget gap.
  - Of all the options, this was respondents' **second least preferred**.
- Respondents would prefer the County Council to continue with its plans to raise **Council Tax** in line with Government policy (**50%** ranked this as their preferred approach to increasing Council Tax).
  - Of all the options, increasing Council Tax was respondents' **second most preferred**.
- More than half of those who responded (**64%**) **agreed** that the County Council should explore further the possibility of **changing local government structures** in Hampshire.

# Consultation net popularity of proposals when

- Respondents were asked to rank the seven options for balancing the County Council's budget by order of preference. The image below shows how the options were ranked overall – from generating additional income as the most preferred option to reducing and changing services as respondents' least preferred option.
- The rankings are based on how many times each option was chosen by a respondent as one of their **top three** preferred options.



**73%**  
Generating  
additional income



**47%**  
Increasing  
Council Tax



**45%**  
Introducing and increasing  
charges for some services



**44%**  
Lobbying central Government  
for legislative change



**43%**  
Changing local government  
arrangements in Hampshire



**28%**  
Using the County  
Council's reserves



**22%**  
Reducing and  
changing services



# T19 Key Messages

- Overall the complexities of the Transformation to 2019 programme will be delivered through three approaches (just about equal in terms of financial benefit);
  - Continue with and build upon the transformation created through T2017
  - Protect key services through application of the IBCF in order to achieve increased integration across social care and health
  - Undertake new transformational saving opportunities

# ...this will mean

- Strengths based approach – maximising independence
- Identifying and developing increased integration between social care and health, as well as other partners / stakeholders
- Positive staff engagement
- Investment in Prevention and Demand Management
- Increased use of technology and Technology Enabled Care
- Capital investment to enable new service models
- Co-production with service user groups / others
- Resetting of public expectations about what we can do and about how people's needs will be met

# Thank you

Graham Allen

Director of Adults' Health and Care

[Graham.Allen@hants.gov.uk](mailto:Graham.Allen@hants.gov.uk)