

## HEALTH AND SOCIAL CARE - Second revenue monitor 2011/12 (to 30 September 2011)

Service Area	Latest Budget	Forecast Outturn	Variance	Narrative	July 2011 Forecast	Variance from July 2011 Forecast	Notes
	£000	£000	£000		£000	£000	
<b>CARE MANAGEMENT</b>							
<b>1. Localities and Care Direct</b>							
1a Locality Assessment Teams	19,363	21,802	2,439	Care +£610k, Community outreach +£117k & Agency staff +£12k. Offset slightly by underspends on Nursing Care (£224k) & Direct Payments (£124k). Other variances + £10k.	2,371	68	
1b Care Direct	533	549	16	No material variances	(10)	26	
1c ECH	2,848	3,141	293	Overspends on care hours for ECH tenants in excess of contract +£324k. Additional Income of (£57k) for CHC placements and Service user contributions. Other variances +£26k.	293	0	
1d Other costs	1,198	756	(442)	Savings not achieved staffing +£390k less underspends on residential / nursing independent sector placements (£840k). Other variances +£8k.	(444)	2	
<b>Sub Total</b>	<b>23,942</b>	<b>26,248</b>	<b>2,306</b>		<b>2,210</b>	<b>96</b>	
<b>2. Hospitals, Safeguarding and Deprivation of Liberty</b>							
2a Hospitals	8,857	8,769	(88)	Underspends on salaries (£219k), Hospita Discharge Beds (£143k) & Nursing Care (£145k). Offset by overspends on Residential Care +£455k.	116	(204)	
2b Other	440	435	(5)	Other variances (£36k).	(5)	0	
<b>Sub Total</b>	<b>9,297</b>	<b>9,204</b>	<b>(93)</b>	No material variances	<b>111</b>	<b>(204)</b>	
<b>3. PSI, Asylum, Transitions, Carers, Care Brokerage</b>							
3a Physical and Sensory Impairment	8,552	9,803	1,251	Underspends on salaries (£119k). Offset by overspends on Home Care +£353k, Residential +£899k & Nursing +£92k. Other variances +£26k.	1,295	(44)	
3b Transitions	2,335	2,285	(50)	Overspends on CYPS recharges +£373k. Offset by underspends on Residential Care (£278k), Community Services (£97k) and Direct Payments (£125k); other variances +£77K	29	(79)	
3c Asylum Seekers	773	583	(190)	Vacancies (£34k). Underspends on rent (£226k) & subsistence payments (£91k) resulting in a reduced reimbursement of grant +£164k. Other variances (£3k).	(164)	(26)	
3d Carers	1,527	1,349	(178)	Overspend Transfer Payments +£50k. Offset by underspends on Third Party Payments (£231k), & an over recovery of Income (£88k). Other variances +£91k	(135)	(43)	
3e Other	709	797	88	Overspend on salaries +£88k	91	(3)	
<b>Sub Total</b>	<b>13,896</b>	<b>14,817</b>	<b>921</b>		<b>1,116</b>	<b>(195)</b>	

HEALTH AND SOCIAL CARE - Second revenue monitor 2011/12 (to 30 September 2011)

Service Area	Latest Budget £000	Forecast Outturn £000	Variance £000	Narrative	July 2011 Forecast £000	Variance from July 2011 Forecast £000	Notes
<b>4. Property Income &amp; Other</b>	(1,308)	(1,558)	(250)	Expected over recovery of Income (£250k).	(250)	0	
<b>Divisional Sub Total</b>	45,827	48,711	2,884		3,187	(303)	
<b>5. Learning Difficulties</b>							
5a Locality Teams LD	33,621	35,023	1,402	Overspends on Residential and Nursing (£912k), Comm Outreach +£891k, Direct Payments +£104k and Home Care +£122k. Offset by underspends on Daycare (£631k). Other variances (£4k).	1,653	(251)	
5b LD Other	(15,912)	(16,220)	(308)	LD and Health Reform Grant (£302k), other (£6k).	(20)	(288)	
<b>Sub Total</b>	17,709	18,803	1,094		1,633	(539)	
<b>6. Mental Health AWP</b>							
6a Mental Health Adults of Working Age	8,347	8,717	370	Overspends on Nursing & Residential +£271k, Accommodation Based Support/Respite/Outreach +£267k & Homecare/Daycare +£30k. Offset by underspends on Staffing / Recharges (£190k). Other variances (£8k).	356	14	
6b Mental Health Older People	5,034	5,455	421	Care +£59k & Direct Payments +£92k. Offset by underspends on Staffing / Recharges (£160k). Other variances +£15k.	304	117	
<b>Sub Total</b>	13,381	14,172	791		660	131	
<b>Divisional Sub Total</b>	31,090	32,975	1,885		2,293	(408)	
<b>CARE SERVICES (VB)</b>							
<b>7.CTC,Dom Care/Reablement Project, PCT/CQC Lead</b>							
7a Continuing to Care	3,255	3,031	(224)	Underspends on salaries (£159) which reflects activity reduction as well as the management of vacancies. This will be offset by increased independent sector spend. Underspends on transport (£25k), unbudgeted CHC income (£47k) and other variances +£7k.	(257)	33	

HEALTH AND SOCIAL CARE - Second revenue monitor 2011/12 (to 30 September 2011)

Service Area	Latest Budget	Forecast Outturn	Variance	Narrative	July 2011 Forecast	Variance from July 2011 Forecast	Notes
	£000	£000	£000		£000	£000	
<b>8. Residential/Longer Term Services</b>							
8a Residential Unit - School Rd	475	440	(35)	No material variances	(44)	9	
8b Community Meals Service	851	563	(288)	Underspends on salaries (£123k). Additional meals income (£120k). Other variances (£45k)	(243)	(45)	
8c LD Day Centres	3,424	3,868	444	Underspends on salaries (£155k). Day Centre Review Savings to be achieved of +£701k. Unbudgeted CHC income from PCT (£110k). Other variances +£8k.	460	(16)	
8d Supporting People	157	175	18	No material variances	(3)	21	
8e Longer Term Other	130	142	12	No material variances	9	3	
8f In House EPH/PWD Homes	10,801	10,636	(165)	Additional CHC income (£199k). Agency +£34k	(183)	18	
8g Residential and OP Day Services Other	266	229	(37)	No material variances	(47)	10	
<b>Sub Total</b>	<b>16,104</b>	<b>16,053</b>	<b>(51)</b>		<b>(51)</b>	<b>0</b>	
<b>9. SART, Westleigh, OP Day Services</b>							
9a Older People Day Centres	2,055	2,097	42	No material variances	47	(5)	
8b SART	164	151	(13)	No material variances	(2)	(11)	
<b>Sub Total</b>	<b>2,219</b>	<b>2,248</b>	<b>29</b>		<b>45</b>	<b>(16)</b>	
<b>10. Reablement (Jayne Clifford)</b>							
10a Residential Unit - Concord	925	944	19	No material variances	18	1	
10b STAR	2,504	2,042	(462)	Underspends on salaries (£464k) due to vacancies however recruitment is in progress. Other variances +£2k.	(501)	39	
10c Intermediate Care	3,463	3,319	(144)	Underspends on salaries (£165k). Other variances +£21k.	(179)	35	
10d Independent Living Service	2,762	2,752	(10)	No material variances	7	(17)	
10e Reablement Other	63	67	4	No material variances	4	0	
<b>Sub Total</b>	<b>9,717</b>	<b>9,124</b>	<b>(593)</b>		<b>(651)</b>	<b>58</b>	
<b>Divisional Sub Total</b>	<b>31,295</b>	<b>30,456</b>	<b>(839)</b>		<b>(914)</b>	<b>75</b>	
<b>11. Choice and Control</b>	(2)	(15)	(13)	No material variances	0	(13)	
<b>12. Corporate reduction in budget for pay inflation</b>	0	0	0		350	(350)	
<b>Divisional Total</b>	<b>31,293</b>	<b>30,441</b>	<b>(852)</b>		<b>(564)</b>	<b>(288)</b>	
<b>STRATEGIC PLANNING AND COMMISSIONING</b>							
<b>1. Commissioning Manager Longer Term Services</b>	151	150	(1)	No material variances	(5)	4	

HEALTH AND SOCIAL CARE - Second revenue monitor 2011/12 (to 30 September 2011)

Service Area	Latest Budget £000	Forecast Outturn £000	Variance £000	Narrative	July 2011 Forecast £000	Variance from July 2011 Forecast £000	Notes
<b>2. Strategic Commissioning Manager Reablement</b>	392	384	(8)	No material variances	(11)	3	
<b>3. Strategic Commissioning Manager Prevention</b>							
3a Supporting People	26,017	24,191	(1,826)	Underspends on payments to external provider: (£1,619k); internal providers HSC (£123k) & N&HS (£85k). Other variances +£1k	(1,749)	(77)	
3b Other	151	146	(5)	No material variances	(8)	3	
<b>4. Strategic Commissioning Manager MH/PLD</b>	1,955	1,933	(22)	No material variances	43	(65)	
<b>5. Strategic Planning Manager</b>	150	134	(16)	No material variances	(6)	(10)	
<b>6. Performance and Standards Manager</b>	557	510	(47)	No material variances	(80)	33	
<b>7. Programme Manager Commissioning</b>	205	217	12	No material variances	0	12	
<b>Divisional Total</b>	<b>29,578</b>	<b>27,665</b>	<b>(1,913)</b>		<b>(1,816)</b>	<b>(97)</b>	
<b>Other Services</b>							
<b>1. The Director</b>	588	641	53	Vacancies (£48k). Consultants Fees +£81k. Solicitors Fees +£17k. Other Variances +£3k.	58	(5)	
<b>2. Finance</b>	2,570	2,573	3	No material variances	0	3	
<b>3. Professional Development</b>	5,205	5,130	(75)	Underspends on salaries (£75k).	(71)	(4)	
<b>4. ICT</b>	2,028	2,026	(2)	No material variances	(2)	0	
<b>5. Legal Services</b>	163	153	(10)	No material variances	0	(10)	
<b>6. Other Services</b>	(3,340)	(3,758)	(418)	Net Income from 2010/11 less allocated (£442k). Other variances +£24k.	(418)	0	
<b>Divisional Total</b>	<b>7,214</b>	<b>6,765</b>	<b>(449)</b>		<b>(433)</b>	<b>(16)</b>	
<b>Action Plan savings</b>		0	0		(800)	800	
<b>Sub-Total</b>	<b>145,002</b>	<b>146,557</b>	<b>1,555</b>		<b>1,867</b>	<b>(312)</b>	
<b>Less capital charges</b>	<b>(1,086)</b>	<b>(1,086)</b>	<b>0</b>		<b>0</b>	<b>0</b>	
<b>Directorate Total</b>	<b>143,916</b>	<b>145,471</b>	<b>1,555</b>		<b>1,867</b>	<b>(312)</b>	

**DRAFT REVENUE BUDGET 2012/13**  
**(excluding budget savings proposals)**

**HEALTH AND SOCIAL CARE**

Activity	Base Budget 2011/12 (Outturn Prices)	Inflation	Virement	Other Variations	Budget 2012/13 excl. capital charges
	£000	£000	£000	£000	£000
<b>Care Management</b>					
<b>Localities and Care Direct</b>					
Locality Assessment Teams	18,981	155	0	(6)	19,130
Care Direct	533	0		0	533
Extra Care Housing	2,848			0	2,848
Other	1,568	16	(150)	35	1,469
	<b>23,930</b>	<b>171</b>	<b>(150)</b>	<b>29</b>	<b>23,980</b>
<b>Hospitals, Safeguarding and Deprivation of Liberty</b>					
Hospitals	8,857	156	(100)	(114)	8,799
Other	439	3	0	(10)	432
	<b>9,296</b>	<b>159</b>	<b>(100)</b>	<b>(124)</b>	<b>9,231</b>
<b>PSI, Asylum, Transitions, Carers, Care Brokerage</b>					
Physical & Sensory Impairment	8,464	36	(3)	104	8,601
Transitions	2,335	17	0	26	2,378
Asylum Seekers	761	13		(1)	773
Carers	1,508	4	(59)	(1)	1,452
Other	709		(110)	67	666
	<b>13,777</b>	<b>70</b>	<b>(172)</b>	<b>195</b>	<b>13,870</b>
<b>Property Income</b>	<b>(1,308)</b>		<b>(85)</b>		<b>(1,393)</b>
	<b>45,695</b>	<b>400</b>	<b>(507)</b>	<b>100</b>	<b>45,688</b>
<b>Learning Difficulties</b>					
Locality Teams	33,621	446	2	0	34,069
Other	(15,924)	4	0	0	(15,920)
	<b>17,697</b>	<b>450</b>	<b>2</b>	<b>0</b>	<b>18,149</b>
<b>Mental Health</b>					
Adults of Working Age	8,348	92	(50)	0	8,390
Older People	5,033	73	50	2	5,158
	<b>13,381</b>	<b>165</b>	<b>0</b>	<b>2</b>	<b>13,548</b>
	<b>31,078</b>	<b>615</b>	<b>2</b>	<b>2</b>	<b>31,697</b>
<b>Divisional Total Care Management</b>	<b>76,773</b>	<b>1,015</b>	<b>(505)</b>	<b>102</b>	<b>77,385</b>
<b>Care Services</b>					
<b>Continuing to Care</b>	3,254		(62)		3,192

**DRAFT REVENUE BUDGET 2012/13**  
**(excluding budget savings proposals)**

**HEALTH AND SOCIAL CARE**

Activity	Base Budget 2011/12 (Outturn Prices)	Inflation	Virement	Other Variations	Budget 2012/13 excl. capital charges
	£000	£000	£000	£000	£000
<b>Residential/Longer Term Services</b>					
Residential Unit - School Road	471	0	0	(1)	470
Community Meals Service	850	0	10	9	869
Learning Difficulties Day Centres	3,405	3	(10)	(5)	3,393
Supporting People	158	4	0	24	186
Other	153	0	(23)	2	132
In-House Elderly Persons Homes	10,182	26	269	(18)	10,459
Residential and Older People Day Services	244	0	86	2	332
	<b>15,463</b>	<b>33</b>	<b>332</b>	<b>13</b>	<b>15,841</b>
<b>Sickness &amp; Absence Reablement Team (SART), Westleigh, Older Peoples Day Services</b>					
Older People Day Centres	1,907	(2)	48	6	1,959
SART	164	0	(164)	0	0
	<b>2,071</b>	<b>(2)</b>	<b>(116)</b>	<b>6</b>	<b>1,959</b>
<b>Reablement</b>					
Residential Unit - Concord	924	1		(2)	923
Short Term Assessment & Reablement (STAR)	2,503				2,503
Intermediate Care	3,311	0	(14)	(2)	3,295
Independent Living Service	2,746		(145)	(29)	2,572
Other	63	0	0	2	65
	<b>9,547</b>	<b>1</b>	<b>(159)</b>	<b>(31)</b>	<b>9,358</b>
<b>Choice and Control</b>					
Programme Manager	(2)		105		103
<b>Divisional Total - Care Services</b>	<b>30,333</b>	<b>32</b>	<b>100</b>	<b>(12)</b>	<b>30,453</b>
<b>Strategic Planning and Commissioning</b>					
<b>Commissioning</b>					
Commissioning Manager Longer Term Services	151	0	2	0	153
Strategic Commissioning Manager Reablement	392	0	(21)	0	371
Strategic Commissioning Manager Prevention					
- Supporting People	26,017	0	0	(13,054)	12,963
- Other	150		2		152
Strategic Commissioning Manager Mental Health, Learning Difficulties	1,806	10	2	(2)	1,816
Strategic Planning Manager	150	0	(8)	0	142
Performance and Standards Manager	557		(4)	(1)	552
Programme Manager Commissioning	205		(80)		125
<b>Divisional Total Strategic Planning and Commissioning</b>	<b>29,428</b>	<b>10</b>	<b>(107)</b>	<b>(13,057)</b>	<b>16,274</b>

**DRAFT REVENUE BUDGET 2012/13**  
**(excluding budget savings proposals)**

**HEALTH AND SOCIAL CARE**

<b>Activity</b>	<b>Base Budget 2011/12</b> (Outturn Prices)	<b>Inflation</b>	<b>Virement</b>	<b>Other Variations</b>	<b>Budget 2012/13 excl. capital charges</b>
	£000	£000	£000	£000	£000
<b>Other Services</b>					
The Director	588			15	603
Finance	2,426	0	(106)	16	2,336
Professional Development	4,980		4	(80)	4,904
ICT	2,004	1		18	2,023
Legal Services	163				163
Other Services	(3,115)		614	(35)	(2,536)
<b>Total Other Services</b>	<b>7,046</b>	<b>1</b>	<b>512</b>	<b>(66)</b>	<b>7,493</b>
<b>Directorate Total</b>	<b>143,580</b>	<b>1,058</b>	<b>0</b>	<b>(13,033)</b>	<b>131,605</b>

## Budget Proposals 2012/13

Name of directorate:

Health and Social Care

	Proposed Change	Impact	Equalities impact reference	Net Budget 2011/12 £000	Savings Proposals 2012/13 £000
	<b>Savings Proposals</b>				
1	To streamline care management processes to deliver an improved and high performing care management function.	Realignment of the workforce to deliver a simplified and standardised customer pathway to make it easier for people to access self directed support.	HSC1	11,641	590
2	To review the shape and delivery of day opportunities for all service user groups which supports the delivery of self directed support.	An increased use of personal budgets across user groups leading to a more creative and flexible model of delivery.	HSC2	7,547	233
3	To revisit the Residential Futures programme and finalise a 3-year plan for the delivery of residential care in March 2012 .	Potential impact on current residents, subject to the contents of the plan.	HSC3	10,776	1,448
4	To work with care providers to review high cost packages, to ensure value for money.	Service users to continue to receive good quality packages but at a reduced cost.	HSC4	6,317	245
5	Improved commissioning of independent sector homecare through the introduction of a framework contract, exploring working with neighbouring local authorities.	Good quality packages for service users with greater coverage and better value for money.	HSC5	8,046	75
6	Review of community equipment service through joint commissioning with Health to ensure value for money. Reduction in care costs through increased use of Assistive Technology.	Improved choice to support independence.	HSC6	2,746	32
7	Ensure usage of standardised commissioning processes across all Health & Social Care commissioning activity.	Improved value for money across all commissioning activity.	HSC7	12,519	500
8	Creating alternatives to residential/nursing care by expanding community supported living and shared lives.	Increased community based living opportunities.	HSC8	15,822	586
9	Re-commissioning of Supporting People services	Commission only cost effective interventions and retender to ensure best value.	HSC10	12,958	1,360
10	Streamlining and sharing of business support functions with Children and Young Peoples Services (Enabling Hub).	Reduction in staffing numbers as functions are brought together.	CYPS14	1,949	100
11	Developing the service delivery model for community meals	Delivering improved choice at lower costs	No Equalities Impact	357	(25)
	Services not included in budget proposals			41,265	
	<b>DIRECTORATE TOTAL</b>			<b>131,943</b>	<b>5,144</b>



## Resources Scrutiny

9th January 2012

### Health and Social Care – Revenue Budget 2012/13

#### Questions

1. What do you see as the principle risks in your service area budgets for 2012/13? and what action is planned to mitigate these risks?
  - 1.1 The need for change is set against local demographic and financial drivers, alongside the introduction of personalisation to deliver choice and control for service users.
  - 1.2 The department has a major transformation programme to modernise services and deliver significant service improvement within Health and Social Care. The main areas of change as set out in the November Cabinet report 'Delivering An Effective Social Care System' are care management, day opportunities and residential care.
  - 1.3 Each area of the 2012/13 budget has been assigned a named lead officer to ensure the planned savings are actively progressed. The main risks are as follows:
    - **Streamline Care Management processes.(£0.6m)** . This involves the realignment of the workforce to deliver a simplified and standardised customer pathway, to make it easier for people to access self-directed support. A risk is that the new customer pathway may not be put in place in time to allow the full savings from realigning the workforce to be released.

Action taken to mitigate risk- active project/programme management to ensure successful implementation of the savings plan.

- **Supporting people (£1.4m)** has been identified as a saving in 2012/13 by commissioning only cost effective

interventions and retendering to ensure best value. This requires a revised commissioning strategy to be developed to ensure that future services are fully funded and limited resources are reprioritised. This may involve some services ceasing, being recommissioned or provided in alternative ways.

Action taken to mitigate risk – revised commissioning strategy, early involvement of stakeholders to establish commissioning priorities.

- **Residential Futures** (£1.4m) this involves revisiting the Residential Futures programme and finalising a 3-year plan for the delivery of residential care to come back to Cabinet in March 2012. This project is being actively project managed but until the proposals are finalised a full risk assessment cannot be completed. Given the downward trend in our use of residential care we have made a budget assumption of one home closure next year.

The phasing of the programme may also be subject to slippage depending on progress (e.g. time to carry out works, timeliness of consultation and dates of decisions about future actions)

Action taken to mitigate risk - active project / programme management, active budget monitoring on revenue and capital costs with regular reporting to the Executive Member.

- **Commissioning.** (£1.4m) Benchmarking data shows that Bristol spends more on care than comparable authorities and that there is significant potential for delivering improved value for money. Significant savings are planned from reviewing high cost care packages, improved commissioning of independent sector homecare through the introduction of a framework contract, ensuring the useage of standardised commissioning processes across all Health and Social Care commissioning activity and creating alternatives to residential/nursing care by expanding community supported living and shared lives. This will see a move

away from long term care in care home settings, towards community support and independent living.

Action taken to mitigate risk, active project/programme management to ensure successful implementation of the savings plan and active monitoring of the department's reviewing strategy. Revised commissioning strategies to ensure improved value for money.

- **Day opportunities (£0.2m)**

To review the shape and delivery of day opportunities for all service user groups which supports the delivery of self directed support. The impact would be an increased use of personal budgets across user groups leading to a more creative and flexible model of delivery. Until the proposals are finalised and returned to Cabinet a full risk assessment cannot be completed. The phasing of the programme may also be subject to slippage depending on progress (timeliness of consultation and dates of decisions about future actions).

Action taken to mitigate risk - active project / programme management, active budget monitoring with regular reporting to Executive Member.

- **Future demand and financial pressures.** Demographic changes and financial pressures are combining to increase the imperatives to deliver services in the most efficient way to avoid budget overspends.

Action taken to mitigate risk – Improved demand modelling to enable better understanding of future demands on resources. Help people to be independent for as long as possible. Provide easy access to information and advice. Empower people to support themselves and take an active role in their community. Maximise resources by working in partnership with service users, family carers and providers. Build community capacity so that people can make use of informal support in the community.

- **Unanticipated cost pressures** e.g. care providers not accepting the annual inflationary increase to care packages. Early negotiation of price increases with providers will help to ensure both affordability and that adequate resources are in place.

2. What are the latest projected over/underspends for the current year (Presumption November is the latest figures) . In particular, are you on target to deliver your directorate's share of the £28m savings this year and, if not, how are you managing spend to meet your overall approved budget.

2.1 HSC are currently reporting a forecast overspend of £0.3m. The Departmental financial position can be summarised as follows:

<b>Division</b>	<b>October Over / (Underspend) £'000</b>
Care Management	3,403
Care Services	(1066)
Strategic Planning and Commissioning	(2090)
Other	68
	315

2.2 There has been a regular monthly improvement in the financial position and that combined with reported downward trends in activity data indicates that the Directorate is on track to deliver on budget this year.

3. What are the most significant pressures affecting your budgets (including any impacting this year) and can you give assurances they have been fully accounted for in proposals for 2012/13 and the MTFP.

3.1 The main forecast overspends in the current year relate to independent sector residential/nursing care, home care and independent sector community support services. This has been

largely offset in the current year by significant underspends on staffing and Supporting People.

In next year's budget the ongoing adult purchasing commitments have been funded by the anticipated full year savings from the introduction of the Electronic Monitoring System in home care and a provision for growth set aside corporately.

4 How are efficiency savings going to be delivered, what impact is there on staffing and will the full year effect be delivered in 2012/13? Could more detail be provided?

4.1 Efficiency savings will be delivered as follows.

- Streamlining and sharing of business support functions with CYPS (£0.1m). The full year effect is in 2012/13. It is anticipated that there will be some posts deleted.

5 What are the major areas for service improvements with your budget? And what action is being taken to re-prioritise funds?

- To streamline care management processes to deliver an improved and high performing care management function. There is investment in IT in order to make care management savings.
- To review the shape and delivery of day opportunities for all service user groups which supports the delivery of self directed support. There is one-off investment in an implementation team that is funded corporately.
- To revisit the Residential Futures programme and finalise a 3-year plan for the delivery of residential care in March 2012. There is one-off investment in an implementation team that is funded corporately.
- Creating alternatives to residential/nursing care by expanding community supported living and shared lives. An element of the savings is reinvested to develop the service.

6. Is it planned to use reserves to balance any aspect of the 2012/13 budget? If so, how will this service be funded in future years?

The HSC budget proposals do not include the use of reserves.

7. Is there any non-recurring one-off monies supporting this year's budget which is not available next year?

- Social Care Reform Grant balances brought forward from previous years (£0.6m) are being used to support this year's budget but only to fund one-off costs.

8. Is it planned to create a reserve from this year's budget to finance future spending.

In the event that the Directorate underspends we may request that a reserve be created to support HSC transformation.

9. Have existing reserves and provisions been reviewed as part of the budget process, are any no longer needed? Can a list be supplied of those above £100k and their estimated balance at 31.3.12.

All existing reserves and provisions are still required. Those above £100k are:

Residential Futures £1.412m  
Transformation £1.007m

10. Are any increases in fees and charges planned that are above inflation. If so, which areas?

There are currently no increases planned that are above inflation.

## Health and Social Care

This page gives an overview of planned spending for the next financial year (2012/13) for the Health and Social Care directorate and highlights major budget proposals from this department.

### Background information: Changing Social Care

- [Changing Social Care – briefing](#)
- [Cabinet Member – Dr Jon Rogers talks about delivering an effective social care system for Bristol](#)
- [Detailed report of three year plan which will be discussed by cabinet on the 24th November 2011](#)

### Overall and planned expenditure by division

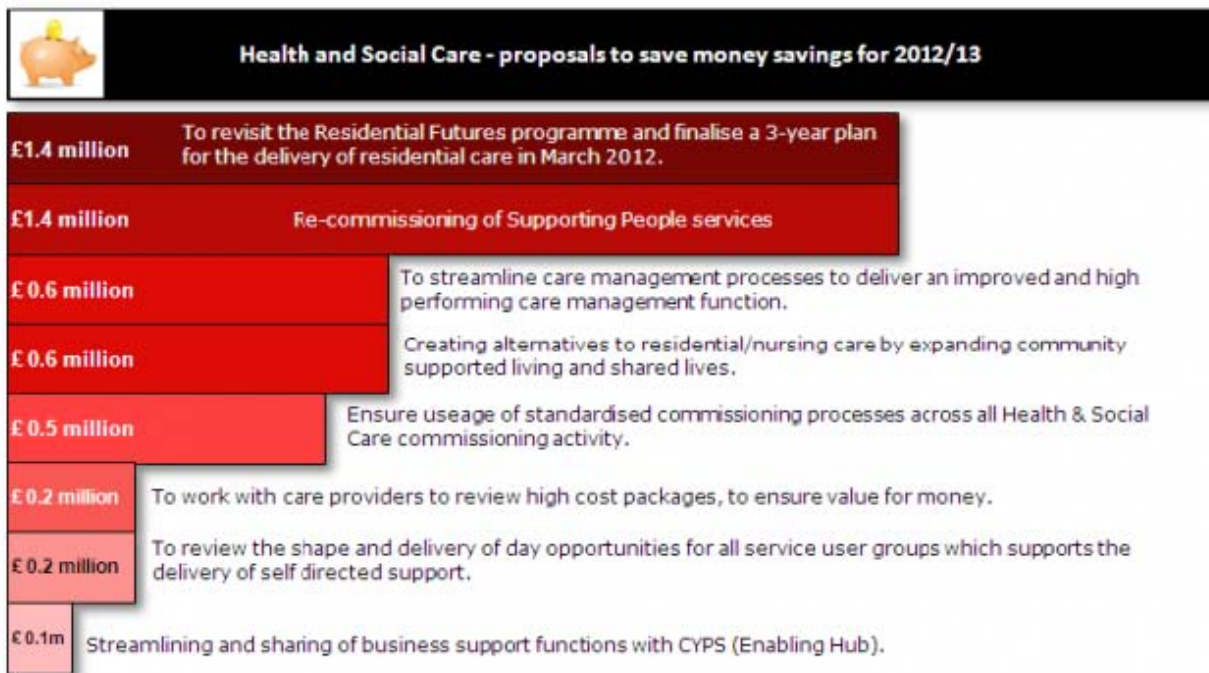
Health and Social Care's overall planned spend (net budget) for 2012/13 is £127.5million – **down 3.4%** from last year.



### Health & Social Care - planned expenditure by division

Name of division	Planned net spend in 2012/13 (£million)
Care Management	80.9
Care Services	30.7
Strategic Planning and Commissioning	15.9
<b>Total</b>	<b>127.5</b>

## Highlights of proposals to save money in 2012/13



### Savings proposals for next year - Health and Social Care

Brief description of saving	How much we can save (£million)
To revisit the Residential Futures programme and finalise a 3-year plan for the delivery of residential care in March 2012. This will reduce reliance on residential care and give older people more choice over the way their care is delivered	1.4
Re-commissioning of Supporting People services (housing related services for vulnerable people). The budget for this work is being mainstreamed across Health and Social Care and Neighbourhoods. This will allow us to integrate the former Supporting people services into a prevention programme	1.4
To streamline care management processes to deliver an improved and high performing care management function (make it easier for people to access self-directed support)	0.6
Creating alternatives to residential/nursing care by expanding community supported living and shared lives.	0.6
Ensure usage of standardised commissioning processes across all Health & Social Care commissioning activity	0.5
To work with care providers to review high cost care packages, to ensure value for money	0.2
To review the shape and delivery of day opportunities for all service user groups which supports the delivery of self directed support	0.2



The **equalities impact assessments** are accessible from the complete set of budget proposals

## **Health and Social Care – what we do**

### **Care management**

- Assessing social care needs and helping service users and carers to develop personal support plans. We provide a service to all residents including people in hospital, older people, people who have mental health needs, disabled people, people with learning difficulties and asylum seekers.
- We monitor and review support plans and care packages to ensure that they are still right to meet an individuals needs
- Ensure that the resources allocated to meet assessed needs are appropriate and used to meet the identified outcomes for service users and their carers. We can arrange a Direct Payment or can purchase services depending on the preference of the service user and carer
- Quickly responding to and investigating safeguarding concerns to ensure that vulnerable adults are supported by services that are safe.

### **Care services**

- Jointly provides intermediate care and reablement services with Bristol Community Health to allow service users to be more independent.
- Directly provides day opportunities, preventative and residential care services.

### **Strategic Planning and Commissioning**

- Defines the direction, and outcomes needed from our care providers
- Specifies and procures services for the local population, and monitors the quality of care delivered
- Also monitors and reports on the performance of the Directorate.