



## Budget Scrutiny Select Committee Inquiry agenda

Date: Monday 11 January 2021

Time: 10.30 am

Venue: via MS Teams

### Membership:

R Bagge (Chairman), D Anthony, M Appleyard, M Bateman, T Butcher, R Gaffney, G Harris, J Jordan, H Mordue, D Shakespeare OBE, M Smith, M Stannard and C Whitehead

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Agenda Item	Time	Page No
<b>1 Apologies for absence / Changes in membership</b>	<b>10:30</b>	
<b>2 Declarations of interest</b>		
<b>3 Background Papers</b> Please find below links to the Cabinet papers for 5 <sup>th</sup> January 2021, which provide information on the draft budget. There is also a link to the Council Tax Base report.		

### **Draft Budget Report**

<https://buckinghamshire.moderngov.co.uk/documents/s16046/Report%20for%20Draft%20Budget%20and%20Medium%20Term%20Financial%20Plan.pdf>

### **Appendix 1 – Buckinghamshire Council Revenue Budget 2021/22**

<https://buckinghamshire.moderngov.co.uk/documents/s16063/Appendix%201%20for%20Draft%20Budget%20and%20Medium%20Term%20Financial%20Plan.pdf>

### **Appendix 2 – Buckinghamshire Council Capital Programme 2021/22 to 2024/25**

<https://buckinghamshire.moderngov.co.uk/documents/s16064/Appendix%202%20for%20Draft%20Budget%20and%20Medium%20Term%20Financial%20Plan.pdf>

### **Appendix 3 – Proposed Budget Changes**

<https://buckinghamshire.moderngov.co.uk/documents/s16065/Appendix%203%20for%20Draft%20Budget%20and%20Medium%20Term%20Financial%20Plan.pdf>

### **Appendix 4 – Budget Consultation Results**

<https://buckinghamshire.moderngov.co.uk/documents/s16066/Appendix%204%20for%20Draft%20Budget%20and%20Medium%20Term%20Financial%20Plan.pdf>

### **Council Tax Base report**

<https://buckinghamshire.moderngov.co.uk/documents/s16060/Report%20for%20Council%20Tax%20Base.pdf>

#### **4 Leader (Councillor Martin Tett)**

- Welcome by the Chairman to the Leader and supporting officers
- Introduction by the Leader of the priorities and the overarching strategy for the budget
- Inquiry group questioning of the Leader

#### **5 Capital (Councillor Katrina Wood, Deputy Leader and Cabinet Member for Resources and Councillor John Chilver, Cabinet Member for Property and Assets)**

**11:45**

- Welcome by the Chairman to the Portfolio Holders and supporting officers
- Introduction by Portfolio Holders of their priorities and the overarching strategy for the budget

- Task & Finish group questioning of the Portfolio Holders

<b>6</b>	<b>Lunch</b>	<b>13:15</b>	
<b>7</b>	<b>Children's Services, Youth Provision and Education (Councillor Mark Shaw, Cabinet Member for Children's Services, Councillor Tony Green, Cabinet Member for Youth Provision, and Councillor Anita Cranmer, Cabinet Member for Education)</b>	<b>14:00</b>	<b>5 - 22</b>
	<ul style="list-style-type: none"> <li>• Welcome by the Chairman to the Portfolio Holders and supporting officers</li> <li>• Introduction by Portfolio Holders of their priorities and the overarching strategy for the budget</li> <li>• Task &amp; Finish group questioning of the Portfolio Holders</li> </ul>		
<b>8</b>	<b>Adult Social Care and Public Health (Councillor Angela Macpherson, Deputy Leader and Cabinet Member for Adult Social Care and Councillor Gareth Williams, Cabinet Member for Communities and Public Health)</b>	<b>15:30</b>	<b>23 - 50</b>
	<ul style="list-style-type: none"> <li>• Welcome by the Chairman to the Portfolio Holders and supporting officers</li> <li>• Introduction by Portfolio Holders of their priorities and the overarching strategy for the budget</li> <li>• Task &amp; Finish group questioning of the Portfolio Holders</li> </ul>		
<b>9</b>	<b>Date of next meeting</b>		

12 January 2021 at 10 a.m.

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# Budget Scrutiny Children's Services Revenue Budget 2021-22

11<sup>th</sup> January 2021



# Agenda

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# Children's Services Directorate overview

## Our vision

We believe that all children in Buckinghamshire, regardless of their background or circumstances, should have a happy and fulfilled childhood. They should enjoy school and family life, learn, belong, grow and achieve so that they enter adulthood ready, willing and able to achieve great things. We want our children and young people to know themselves well.

**Children's social care** - specialist social care services provide support to children in need of help and protection. Our services include statutory assessment and care planning for children at risk of significant harm, provision for looked after children and those leaving care, as well as youth offending, fostering and adoption services and delivery of in-house residential provision.

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**Education** –We adopt an all age approach starting from supporting the access to high quality early years provision through to the delivery of a diverse curriculum offer for young people, post 16. This includes supporting strong attainment in all our schools and the delivery of lifelong learning opportunities through Adult Learning. Our Family Support Service works with families to make positive changes to their lives and resolve problems at the earliest possible opportunity to prevent the need for statutory intervention. The Integrated Special Education Needs and Disabilities (SEND) Team carries out the statutory functions in relation to Education, Health and Care (EHC) needs assessments to ensure all vulnerable children and young people aged 0 – 25 receive the education support and provision required in order for them to achieve their full potential and prepare them for adulthood. In addition, the service is also responsible for delivering the Council's duty to provide sufficient early years and pupil places as well as managing the fair allocation of school admissions.

# Children's Services Directorate Context

- The work of the Directorate has always been diverse, demand led and challenging. The landscape in which we currently operate has changed beyond what anyone could expect.
- The child population continues to increase as do the levels of poverty children and families are experiencing. Layered on top of this is the immediate impact of Covid-19 and the lasting legacy this has on both the access to and delivery of services. As a result, the Directorate is experiencing a level of demand unseen before and if maintained over a sustained period, will create a significant challenge.
- In addition to demand pressures, the financial pressures facing Children's Services are well reported nationally. In 2019, the Local Government Association estimated that children's social care was facing a £3.1 billion funding gap by 2024/25 without the increased demand and activity as a result of Covid-19. More recently, the Association for Directors of Children's Services has stated that significant investment is required to stabilise, sustain and adapt services to meet the needs of the growing number of children, young people and families who need support and intervention in the wake of the pandemic and anticipated recession.
- The Directorate is on an improvement journey and we continue to strengthen services for children, young people and their families. Whilst there is more to do, we are confident in our understanding and knowledge of what needs to be done.



# Who and what the budget is spent on

*Data as at  
September 2020*

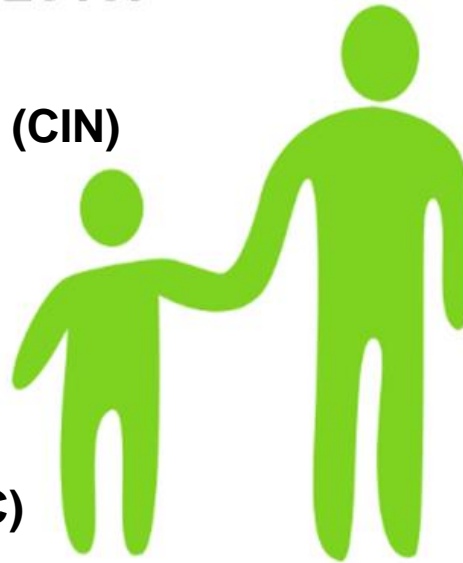
**995** children on a Child in Need (CIN) plan

**474** children subject to a Child Protection (CP) Plan

**488** Looked After Children (LAC)

**333** Care Leavers,  
of whom **72** are UASC

**305** Family Support Service cases (families) open



**189** In house foster placements

**21** Unaccompanied Asylum Seeking Children (UASC) aged under 18

**4,864** children with an Education, Health and Care Plan (EHCP), of whom **140** are LAC

**31%** agency staffing rate for qualified social work staff

# Revenue Forecast 2020-21 - Quarter 2

Service Area	Q2 Net Budget £'000	Year End Outturn £'000	Forecast Variance £'000	%	of which Covid £'000	of Which BAU £'000
Education DSG	0	0	0			
Education	30,426	34,627	4,201	14%	1,239	2,962
Children's Social Care	73,695	77,882	4,187	6%	1,842	2,346
<b>Total</b>	<b>104,121</b>	<b>112,509</b>	<b>8,388</b>	<b>8%</b>	<b>3,081</b>	<b>5,307</b>

The forecast at Q2 shows a projected overspend of £8.388 million, of which £3.081 million (37%) relates to Covid-19.

- The main non-Covid-19 variances relate to expenditure on Home to School Transport, External Placements for looked after children and accommodation costs for care leavers.
- The Home to School Transport budget is projected to be £3.9m overspent including Covid-19. The reasons for this include increased demand and complexity of need for SEN transport, reduced levels of income for discretionary travel following commercialisation.
- Placements budgets for looked after children are projected to overspend by £2.1m, including Covid-19 costs, as increased numbers of high cost placements have had to be made during the year.
- Dedicated Schools Grant (DSG) are projected to break even, pressures of up to £1.1m have been identified against the High Needs Block.



# Children's Social Care



# Financial risks & issues

- Increased pressures on the external placement budget driven by the increase in number of children who have had to be placed in External Residential Care placements.
- Unit costs of external residential care placements are increasing during this financial year as providers react to increases in demand and complexity. Small changes in the number of External Residential Care placements being made have a pronounced impact on budget projections and spend. These placements are used to care for the most complex, needy and high risk children and young people the service has to manage and keep safe.
- Accommodation costs for care leavers - the areas of high cost where activity is being targeted to reduce spend includes young people awaiting transition to Adults and bidding for Social Housing.
- Increased activity and costs of support for young people with disabilities.
- Continued pressures against the staffing budget due to agency staffing costs.

## ***Mitigating Actions***

- All alternatives to External Residential Care are explored, including using our own Children's Homes. It is important to state that high level of complexity, need and risk of the young people who need care often mean there are not immediate good enough alternatives.
- Work with Housing colleagues to enable young people to move into private rented accommodation without their status for public housing being prejudiced. This will enable young people to take up tenancies more quickly and reduce costs for the Council.
- Development of the Social Work Academy to increase numbers of permanent social work staff.

# Covid-19 Financial Impact and Risks

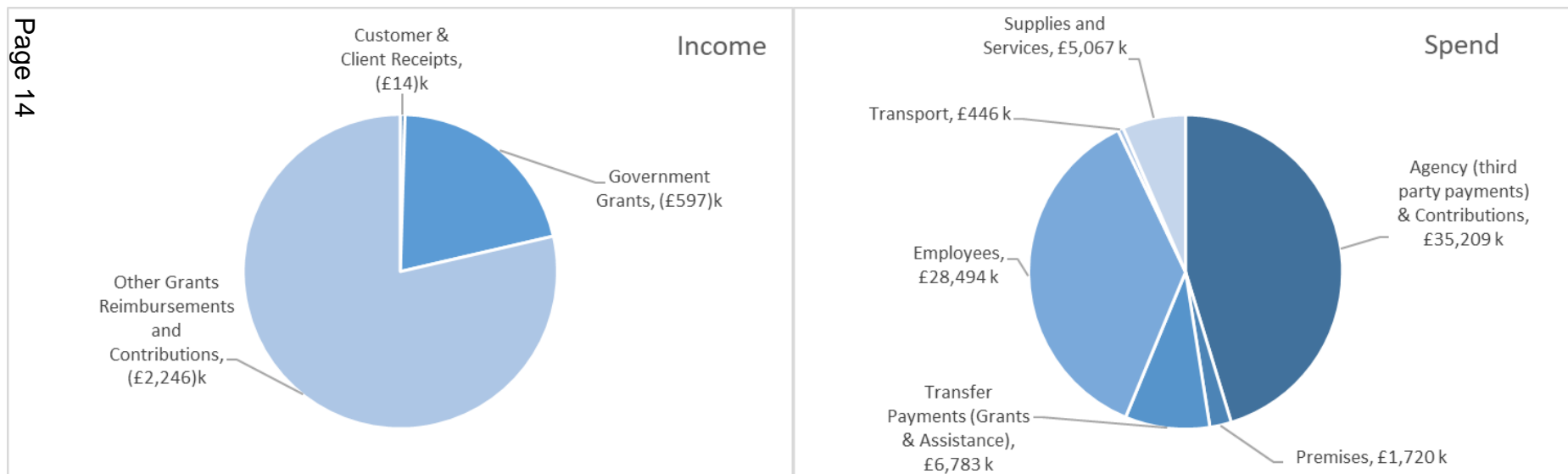
- The impact of the covid-19 pandemic has been to trigger a higher number of children and adults into emotional instability, this has resulted in a higher number of high cost external placements.
- It is not expected that a change between the response tiers will reduce the complexity of need for those children and families and therefore the financial impact is expected to last for more than one financial year.
- Unit costs of children's placements made since April 2020 are higher than those made prior to the start of the year due to increased complexity of need and limited availability of specialist placements.
- Costs of accommodation for young people leaving care have been further impacted by the Covid-19 pandemic as DfE guidance earlier in the year was for Council's not to move young people to individual accommodation where they could become isolated during the period of restrictions.
- There is a risk that there will be a continued increase in referrals to the Social Care service throughout this year as restrictions continue. This has, and will continue to, impact on caseloads, numbers of court proceedings and on placement availability and cost. There is some indication that the ability to release agency staff following recruitment to permanent posts may be reduced in front line teams to manage increases in workload.
- These risks are reflected in the budget proposals for 2021-22 and it is also proposed that the corporate contingency for high cost placements be increased to £2.5m.

# Proposed Revenue Budget 2021-22 – Children’s Social Care

## Appendix 1 – Proposed Revenue Budget

	2020-21			2021-22		
	Income £000	Expense £000	Net Budget	Income £000	Expense £000	Net Budget
Children's Social Care	(2,307)	76,097	73,791	(2,857)	77,719	74,862
Education	(7,469)	37,817	30,348	(6,619)	40,972	34,353
Education - DSG	(476,466)	476,466	-	(494,946)	494,946	-
<b>Grand Total</b>	<b>(486,242)</b>	<b>590,380</b>	<b>104,139</b>	<b>(504,422)</b>	<b>613,637</b>	<b>109,215</b>

Children’s Social Care budget highlighted in yellow; shown in context of whole of Children’s Services Directorate



# Proposed Revenue Budget 2021-22 – Children’s Social Care

## Appendix 3 – Changes to the Revenue Budget 2021/2

<b>Children's Services</b>		<b>Change £000's</b>
<b>Children's Social Care</b>		
Care Leavers Accommodation costs		1,000
Demand on client costs for Disabled Children		437
Develop in house semi-independent accommodation (under 18s)		(93)
Home working / Mileage / printing		(47)
Increased demand in statutory social care services due to demography and complexity		2,984
Reducing demand for legal services		(100)
Savings achieved in Accommodation Costs through joint work with Housing		(300)
Special Guardianship Orders		850
Staffing review / vacancy factor		(107)
Strategic review of all budgets across the service to identify the extent to which statutory services can be provided in a more effective and efficient way.		(250)

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- Increased pressures on placement budgets due to increased complexity of need and demand for external residential placements.
- Increased demand for Special Guardianship Orders – projected to increase year on year.
- Care Leavers accommodation costs – increases in numbers of care leavers requiring support, savings to be achieved through joint working with Housing and development of in house semi-independent accommodation options.
- Savings from reductions in legal costs and review of service are expected to be achieved.



# Questions





# Education



# Financial risks & issues

## Home to School Transport

- Home to School Transport budgets are projected to overspend by £3.9m in the current year.
- Demand and complexity for transport for pupils with SEND is increasing. Increased complexity leads to higher unit costs for transport with increased use of single occupancy and specialist vehicles.
- Income budgets in 2020-21 do not accurately reflect the levels of income from discretionary pupils following commercialisation of routes in 2019. Budget proposals for 2021-22 address this.

## Dedicated Schools Grant (DSG)

- Increased numbers of pupils with Education Health and Care Plans (EHCPs) result in pressures against the High Needs Block which funds support for pupils with SEND across all types of setting including mainstream schools, special schools and external specialist placements.
- At Quarter 2 risks of £1.1m have been identified against the high needs block with pressures against the budget for external placements and placements in other local authority special schools.

# Covid-19 Financial Issues and Risks

In the current financial year the impact of Covid-19 across Education budgets has been across the Adult Education and Home to School Transport services.

## **Adult Learning**

- The service has been impacted by a loss of fee income in 2020-21 for courses that could not be delivered during the summer term.
- For the 2020-21 academic year the service has implemented changes to reduce costs and ensure that courses can be delivered within the expected levels of fee income. It is currently estimated that 85% of activity can be delivered but numbers of learners will be lower than in previous years.

## **Home to School Transport**

- The service has been impacted by a loss of fee income in the 2020-21 financial year as schools were closed during the summer term. School closures also meant that additional payments were required to be made to commercial school bus route operators for income lost in the summer term.
- For 2021-22 budget setting it is assumed that schools will remain open and therefore there will be no loss of fee income. It is also assumed that government funding for any additional capacity on public networks to meet social distancing requirements will continue as required.

# Proposed Revenue Budget 2021-22 – Education

## Appendix 1 – Proposed Revenue Budget

	2020-21			2021-22		
	Income £000	Expense £000	Net Budget	Income £000	Expense £000	Net Budget
Children's Social Care	(2,307)	76,097	73,791	(2,857)	77,719	74,862
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Education budget highlighted in yellow; shown in context of whole of Children's Services Directorate

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# Changes to the Revenue Budget 2021-22

<b>Children's Services</b>		<b>Change £000's</b>
<b>Education</b>		
Actions to reduce Taxi supply costs		(169)
Bus Retendering Supply costs - Loss of income		317
Bus Retendering Supply costs - Reduced expenditure		(538)
Demographic Growth and Complexity - SEND Transport		3,589
Home to School Transport reduced income		850
Home working / Mileage / printing		(13)
Staffing review / vacancy factor		(31)
<b>Education - DSG</b>		
Additional Demand and Costs across DSG budgets		18,480
Additional funding to support the Schools Block and High Needs Block		(18,480)

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- Demand and complexity for SEND transport is estimated to increase costs by 10% per annum.
- Savings proposals arising from the re-tendering of bus routes are built into the budget proposals.
- Income budgets are to be rebased to reflect the expected levels of income following commercialisation and re-tendering.
- Additional funding has been allocated to schools and high needs budgets within the dedicated schools grant.



# Questions



# Budget Scrutiny 11 January 2021

## Adults & Health

- Adult Social Care
- Public Health





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# Adult Social Care





# Agenda

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- Quarter 2 Budget Monitoring 6
- Financial Risks and Issues 7
- Proposed Revenue Budget 2021/22 9

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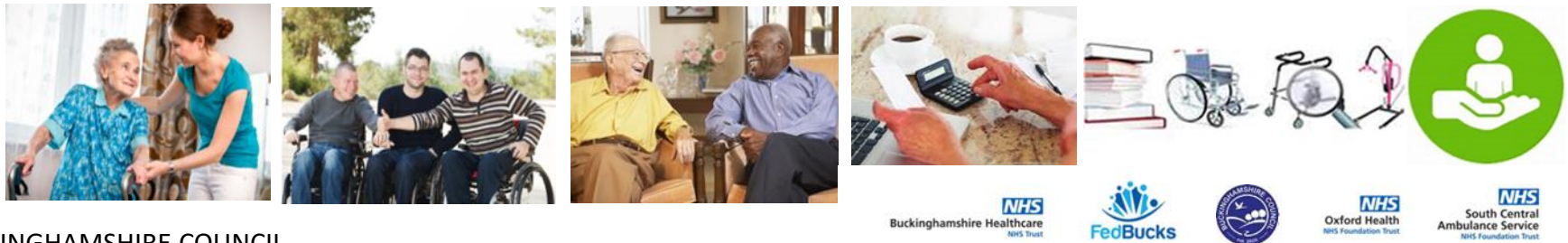
# Adults Social Care overview

The directorate helps to deliver all of the Corporate Plan priorities, with a primary focus on Protecting the Vulnerable.

The directorate is responsible for:

- Adult social care services: social work, occupational therapy, reablement from crisis, day services and respite care
- Integrated commissioning: commissioning a range of services and packages of care on behalf of adult social care, public health, children's services and the Clinical Commissioning Group (NHS)
- Quality, standards and performance: supporting frontline social care services in delivering the highest quality of services through workforce planning and delivery, systems modernisation and improvement, and practice quality

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# Adult Social Care overview

- As part of the frontline in responding to the Covid-19 pandemic the directorate has, and continues to, support residents, the Council and the wider health and care sector. This includes:
  - Setting up of an emergency respite centre to support care providers and the hospitals
  - Support to care providers, including developing the 'Enhanced Offer' with partners
- There are opportunities to build on positive changes, such as swifter decision-making and partners working closer together, for example extending the Discharge to Assess process (assessing people after discharge from hospital rather than while in hospital).
- National shortages of key roles impact on the Council's ability to recruit and retain social workers and occupational therapists. The directorate has a Workforce Strategy and a Quality Assurance Framework that are together helping us to better support our staff with practice, improve quality and develop the organisation as an employer of choice.
- Nationally the future sustainability of adult social care remains to be resolved. A government paper on long-term funding proposals has been much delayed.
- A significant change in legislation will see the introduction of the new Liberty Protection Safeguards in April 2022. The directorate will focus on planning during 2021-22 in preparation for this change.

# Adult Social Care 2020-21

## Quarter 2 – Budget monitoring position

Adult Social Care	Budget £000	Y/E Out- turn £000	Forecast Variance £000	%	of which COVID	of which BAU
<b>Adult Social Care</b>						
Integrated Commissioning	7,158	11,819	4,661	65%	4,976	(315)
Operations	135,096	140,014	4,918	4%	4,484	434
Senior Management & iBCF	4,268	4,073	(195)	-5%	0	(195)
Quality, Performance & Standards	2,732	2,732	0	0%	0	0
<b>Total</b>	<b>149,254</b>	<b>158,638</b>	<b>9,384</b>	<b>0</b>	<b>9,460</b>	<b>(75)</b>

- Overall position reported at 30 September 2020 shows:
  - £75k underspend in relation to ‘business as usual’ activity equivalent to -0.1% of the net £149m budget.
  - Pressures relating to Learning Disability (£1.3m) and Mental Health (£0.6m) in Operations, due to a demand growing ahead of budget on supported living placements. An action plan has been put in place.
  - The financial position has improved due to an emerging underspend in Older People in Operations, linked to the impact of Covid-19 on existing client numbers, funding arrangements with the NHS and a reduction in the normal anticipated level of growth in demand.
  - £9.46m net pressure in relation to additional costs from Covid-19.

# Financial risks & issues

- The care market is fragile in Buckinghamshire and nationally with increased risk of provider failure. We are in regular contact with both our 'block contract' providers and the wider market place and are looking at the future shape of the market.
- Providers rely on self-funders, and vacancies within care homes have increased as a result of Covid-19.
- Continued pressures exist in relation to National Living Wage, pension enrolment and potential impacts of the EU exit in relation to the labour market.
- There are increasing levels of unsecured debt
- Impact on our major programme of transformation

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## Trend of increasing demand:

- There are increasing numbers of people eligible for a service, both older (65+) people or people approaching adulthood
- The complexity of the needs of those people who are eligible is increasing
- There are increasing numbers of people eligible for council funding previously funded by the person themselves or by health
- The length of time people are living with support is increasing

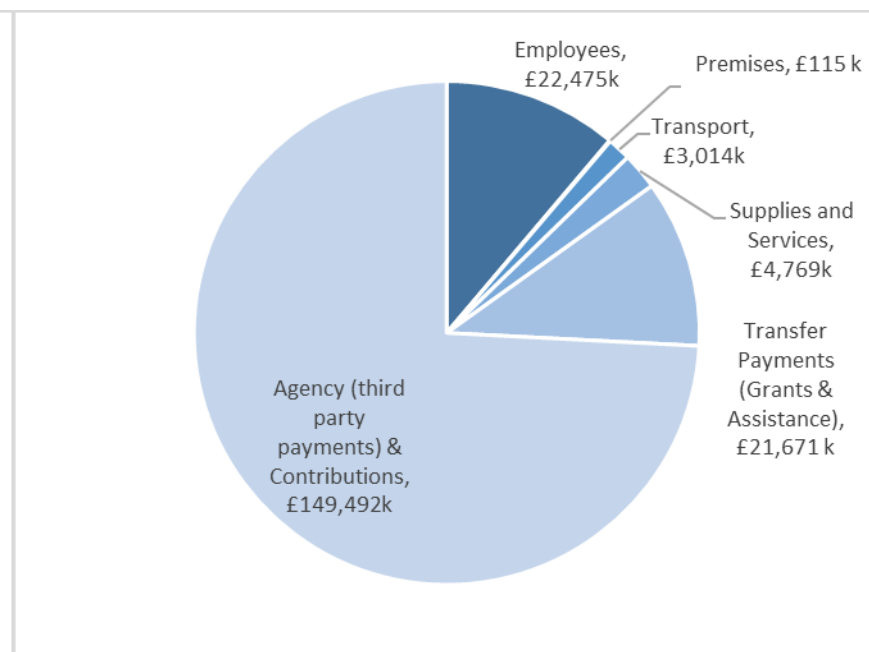
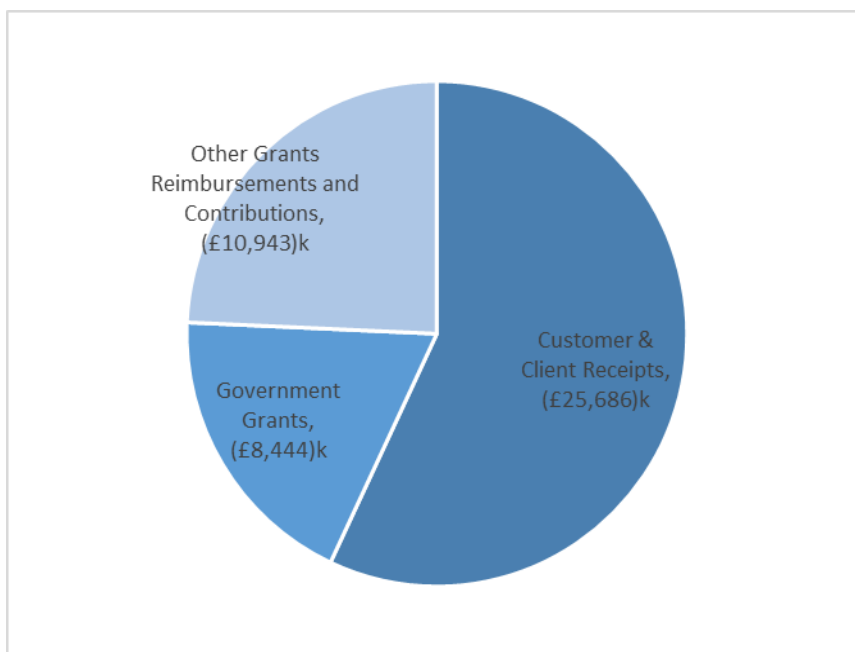
# Covid-19 Financial issues & risks

- A number of providers in financial difficulties have made contact with the Council. This includes both 'block' and 'spot' contract providers. There is a risk that an increased level of support may be needed for the provider market, both specific support and a more general baseline fee uplift.
- Covid-19 has resulted in growth in clients with a higher trend for nursing care, plus deconditioning of residents in the community as a result of lockdown restrictions means there is uncertainty around future costs and potential for growth in complexity.
- Impact of lockdown on the growth for our services such as Mental Health
- The process to speed up the discharge of patients from hospital beds into local authority beds is beneficial for the wider care system but could increase social care cost pressures in particular if there is a sudden growth in Covid-19 patients.
- Excess death rate in early part of the year has resulted in 1.1% reduction in the growth modelling for Older People. No further impact has been modelled due to the uncertainty around future waves, improvements in infection control, treatment and deployment of vaccinations within care homes.
- Market support has been provided to care home providers predominately for employee costs and PPE based on a claims process. In total we have received £11.589m from the phase 1 and phase 2 of the Infection Control Grant. It is assumed that this support would not continue.
- We have incurred one-off expenditure on staffing for safeguarding and reviews, and have income losses due to the closure of our Day Centres.
- We are tracking the impact on our transformation programme due to staffing being taken off change programmes and mobilised for emergency pandemic response.

# Adult Social Care Budget 2021-22

## Gross Income £45,073k

## Gross Expenditure £201,536k



# Appendix 1 Revenue Budget 2021/2

	2020-21			2021-22		
	Income £000	Expense £000	Net Budget	Income £000	Expense £000	Net Budget
<b>Adult Social Care</b>						
Integrated Commissioning	(1,443)	8,581	7,138	(1,443)	8,381	6,938
Senior Management & iBCF	(19,024)	23,287	4,263	(19,024)	23,168	4,144
Quality, Performance & Standards	(25)	2,759	2,734	(25)	2,759	2,734
ASC Operations						
Access	(4,630)	24,751	20,122	(4,630)	24,501	19,872
Mental Health	(2,398)	12,500	10,102	(2,628)	13,933	11,305
Older People	(13,251)	60,776	47,525	(14,331)	65,619	51,288
Learning Disabilities	(2,770)	53,896	51,126	(2,972)	56,981	54,010
Central Operations	(21)	6,193	6,173	(21)	6,193	6,173
<b>Adult Social Care Total</b>	<b>(43,560)</b>	<b>192,743</b>	<b>149,183</b>	<b>(45,073)</b>	<b>201,536</b>	<b>156,464</b>
<i>Public Health</i>	(21,363)	21,363	-	(21,363)	21,363	-
<b>Grand Total</b>	<b>(64,923)</b>	<b>214,106</b>	<b>149,183</b>	<b>(66,436)</b>	<b>222,899</b>	<b>156,464</b>

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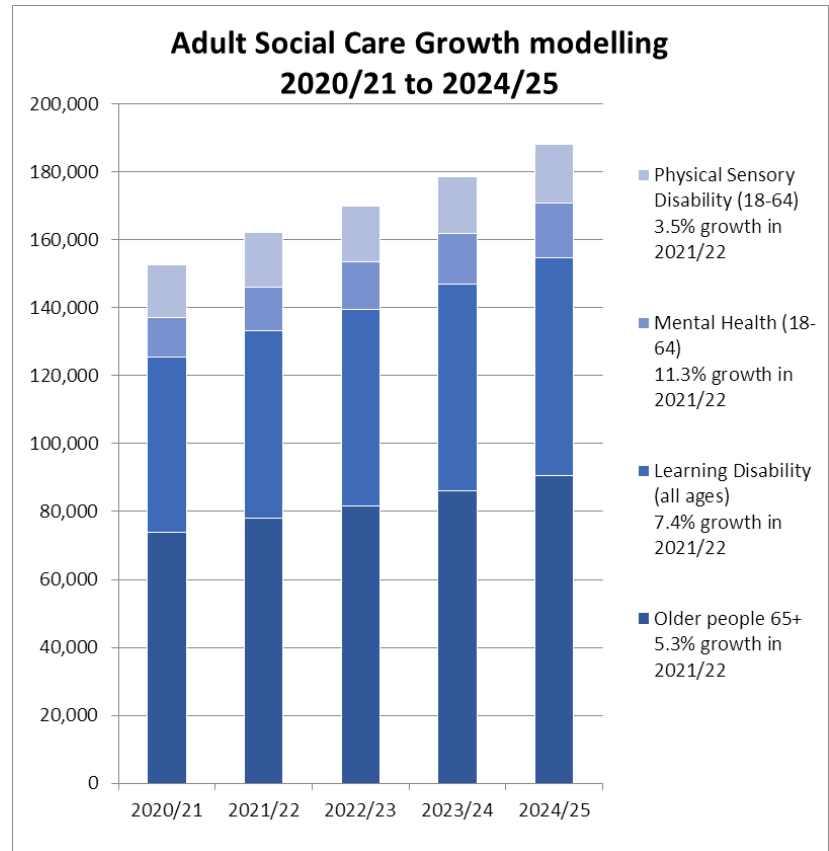
# Appendix 3 - Changes to the Revenue Budget 2021/2

<b>Adults and Health</b>	<b>Change £000's</b>
Demand growth	9,600
Savings from Home Working and reduction in Agency staff	(119)
Transformation Programme	(2,200)



# Details of Adult Social Care Demand Growth

- £9.6m net demand growth based on 'medium' case growth scenario covering:
  - Client volumes / FTE
  - Client complexity
  - Fee uplift
  - Covid-19 excess deaths
- Represents 6.3% growth overall
- % growth for client & complexity changes varies by client category with growth projected in particular around Mental Health.
- Covid-related excess deaths are included within the Older People 65+ at -1.1%
- Adult Social Care contingency increase proposed to £6m for 2021/22



# Details of Transformation Programme

- Programme has delivered over £10m of savings in last 4 years with a stretch target of £3.140m planned for 2020/21 (against the corporate target of £2.011m).
- Updated 4 year plan focuses on managing growth (cost avoidance) as well as savings including:
  - Managing demand growth through the most effective use of residential care, support living and other approaches, such as step down to supported living/general needs housing for Learning Disability and Mental Health clients in particular.
  - Reshaping of the residential market for older people by adopting a new procurement vehicle approach that will reduce variation in price
  - The 'Preparing for Adulthood' project linked to young people moving from Children's Services

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<b>Transformation Programme</b>	<b>2021-22 £000</b>	<b>2022-23 £000</b>	<b>2023-24 £000</b>	<b>2024-25 £000</b>
Managing growth & reshaping the market covering Older People 65+ and Learning Disabilities	1,300	900	900	900
Transitions growth and preparing for Adulthood	150	150	150	150
Community delivery model for Day Opportunities	0	0	0	250
Strength-based reviews and new Care packages	450	0	0	0
Other savings	300	488	250	350
<b>Total annual savings</b>	<b>2,200</b>	<b>1,538</b>	<b>1,300</b>	<b>1,650</b>
<b>Total cumulative savings</b>		<b>3,738</b>	<b>5,038</b>	<b>6,688</b>



# Questions



# Public Health



# Agenda

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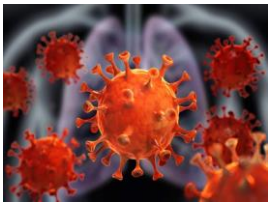
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# Public Health Overview

- Public health supports and challenges the Council and partners in improving the health and wellbeing of Buckinghamshire's residents
- As part of the frontline in responding to the Covid-19 pandemic, the directorate has, and continues to, support residents, the Council and the wider health and care sector. This includes:
  - Public health advice, guidance and support both locally and regionally
  - The local Outbreak Control Plan, the formation of the Health Protection Board, integration and analysis of data to enable risk assessment and led on prevention and control plans in high risk settings
- Priorities for next year include addressing the health inequalities that have been exacerbated by the pandemic. Actions will be needed to support the health and wellbeing of BAME communities, address food insecurity and help people stay healthy in light of Covid-19

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# Mandatory Public Health Functions

- Sexual and reproductive health services
- NHS health checks – screening for risk factors for diabetes, cardiovascular and kidney disease and dementia
- Mandatory health visitor child health reviews
- National Child Measurement Programme
- Local Authority role in health protection– infectious diseases, Chemical, Biological, Radiological and Nuclear (CBRN), emergencies
- Advice to NHS commissioners on health care commissioning
- Dental epidemiology survey
- Substance Misuse services - the commissioning of these services is a condition of receiving the Public Health Grant
- Production and publication of a DPH annual report on the population’s health
- Joint strategic needs assessment, health and wellbeing strategy and pharmaceutical needs assessment – health & wellbeing board duty

# Why it matters

- Good health is vital to the social and economic success of an area.
- Nationally 140 million working days lost each year to sickness absence costing £22bn per year.
- Good health contributes to safe, strong cohesive communities, educational attainment and the ability to find and remain in employment.
- It reduces demand on adult and children's social care services and health care services.
- Public health interventions can also have beneficial impacts on the environment including air quality, noise pollution and improve workforce productivity.
- The estimated national annual cost of health inequalities was £36 -£40 billion (lost taxes, welfare payments, costs to the NHS) in 2010. Health inequalities have widened since then.



# Why it matters- examples

- Unhealthy behaviours drive the development of long term conditions which account for 70% of the health and social care budget.
- Healthy behaviours reduce the risk of disability, frailty, falls, stroke and dementia thus reducing social care costs.
- Social care needs occur 10 years earlier in current smokers compared to people who have never smoked. Buckinghamshire Social care costs due to smoking estimated to be £6m per year.
- Parental alcohol misuse increases the risk of children being taken into local authority care and children are more likely to experience difficulties at school, develop mental health problems, consider suicide and become dependent drinkers themselves.
- Alcohol also increases risk of absenteeism and decreased productivity, domestic violence, crime and road traffic accidents and homelessness.
- Physically active people have better mental and physical health, educational attainment and increased productivity.

# Public Health 2020-21

## Quarter 2 – Budget monitoring position

Public Health	Plan £'000	Forecast £'000	Variance £'000	%
Sexual Health	4,466	4,266	(200)	(4%)
NHS Health Check Programme	452	452	0	0%
Substance Misuse	3,840	3,850	10	0%
Children 0-19 Public Health Programme	8,368	8,368	0	0%
Healthy Behaviours	986	908	(78)	(8%)
Other Public Health Services	701	652	(49)	(7%)
Public Health Team	1,769	1,502	(267)	(15%)
Other departments	781	1,105	324	42%
Public Health Grant	(21,363)	(21,363)	0	0%
Outbreak Control	1,995	1,995	0	0%
Test & Trace Grant	(1,995)	(1,995)	0	0%
<b>Grand Total</b>	<b>-</b>	<b>(260)</b>	<b>(260)</b>	<b>(1%)</b>

- Public Health **-£260k underspend** linked primarily to sexual health services £200k due to reduced out of area activity and the impact of Covid-19 lockdown as a result of travel restrictions.
- Resource has been transferred in-year to fund Public Health staff transferred to the Commissioning Service. The budget is being updated to reflect this.
- The underspend has subsequently been re-invested into providing a digital sexual health service for residents in Buckinghamshire.

# Financial risks & issues

## Demographics, population growth and health

- Buckinghamshire has an ageing and increasingly diverse population which affects health needs and requires a strong emphasis on prevention to keep residents healthy for longer. Increases in life expectancy are slowing in the county.

## Reorganisation of Public Health England and the future of the Public Health Grant

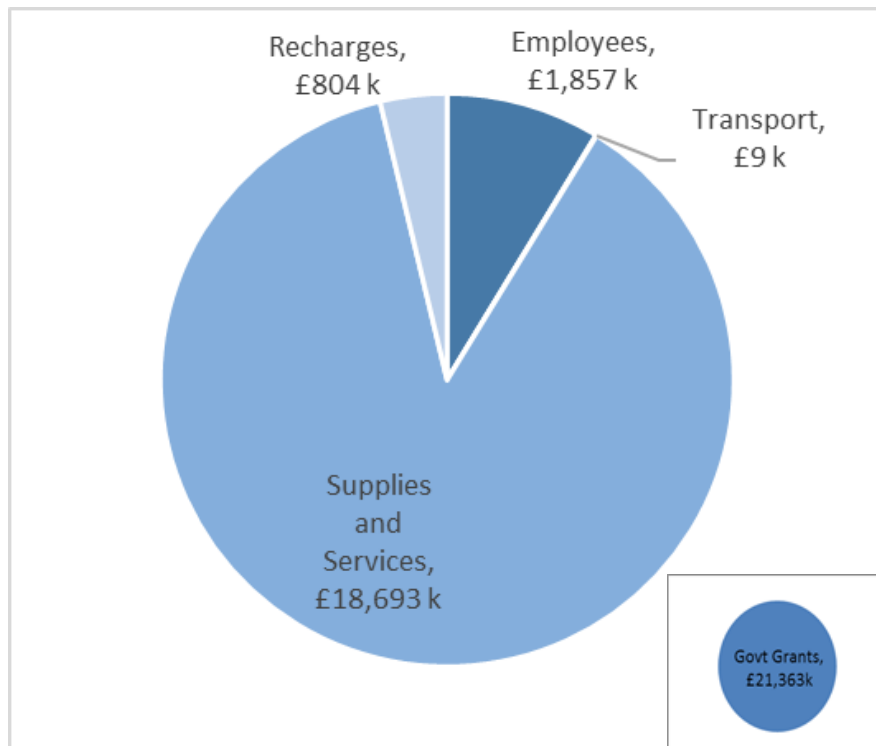
- A new institute for health protection merging PHE health protection function, NHS test and track and the Joint Biosecurity Service is being developed. It is unclear what the impact will be on our Public Health team.
- There is no clarity over the size of the public health grant for 2021 and beyond.

## COVID 19 pandemic

- Public health team focused on COVID response since March developing infection and outbreak control plan and COVID health and wellbeing recovery plan including development of local testing sites and local contact tracing. Much of this activity has been funded by ringfenced Covid-19 grants. It is likely that some of this activity will continue into next year, but the assumption is that if it does, it would be grant funded.
- Services had to adapt and move online where possible, some face-to-face services could not be delivered at same volume due to infection control measures.
- Significant adverse impact of COVID on mental and physical health of residents and adverse economic impact will worsen health further.
- Nationally COVID has widened existing inequalities in health and this is reflected locally in a widening of the life expectancy gap between our most and least deprived areas.

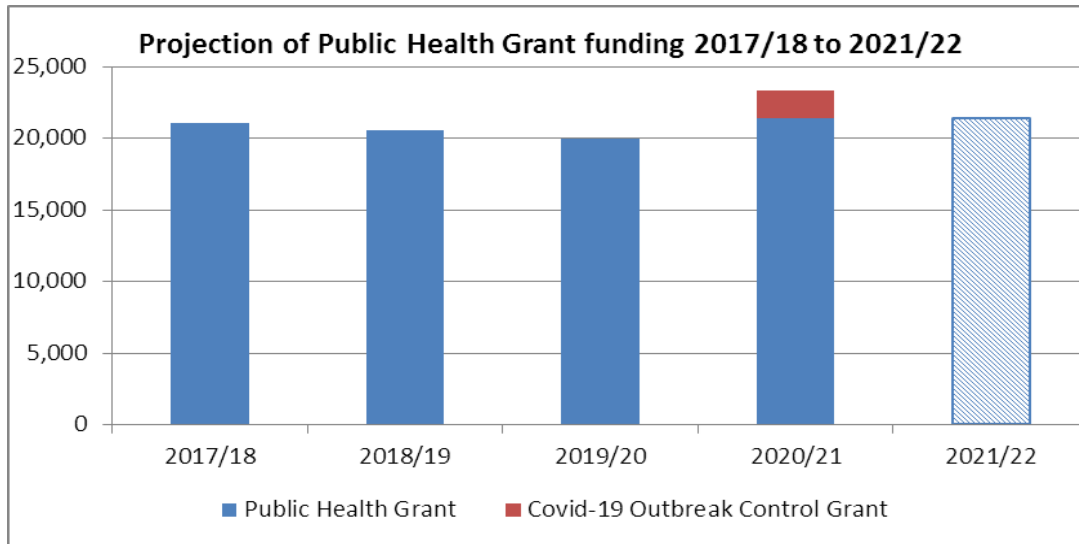
# Public Health Budget 2021-22

## Gross Income & Expenditure £21,363k



- Public Health is entirely funded by ring fenced grant, which has reduced significantly since responsibility passed from NHS to local authorities – 14% since 2015-16.
- Buckinghamshire's grant = **£38.81** per head of population compared to £64.74 nationally, £39.69 for CIPFA peers.
- Buckinghamshire is below its target allocation based on population need and has the 25<sup>th</sup> lowest allocation per head out of 151 local authorities (national range £31-£248).
- More than 82% of it is spent on mandated functions or activities.

# Appendix 1 Revenue Budget 2021/2



- It is assumed that the Public Health grant will continue at existing levels with announcement due by the end of the year.
- Funding had been reducing but increased in 2020/21 due to £1.3m funding for the 'Agenda for Change' pay award passported to NHS providers.
- A Test & Trace Grant of £1.955m was received to support Covid-19 infection and outbreak control plan.
- A planning assumption is that government funding will be provided for any specific Covid-19 activities going forward such as test and trace.



# Questions

# Glossary of Terms

Term	Meaning
<b>Access</b>	Access is the name of the service that includes the Adult Early Help Team that responds to initial contacts from members of the public and the Stoke Mandeville & Community Hospital Teams who support discharges from hospitals for Buckinghamshire residents.
<b>ASC Transformation</b>	A programme of change projects delivering improvements in service delivery and MTFP savings across Adult Social Care ('ASC')
<b>Block contracts</b>	A block contract agrees a given volume of business to a service provider, usually over a set period of time, and at a better value rate.
<b>Commissioning</b>	The contracting of care to provider organisations who are paid to carry out these services. This is as an alternative to services being provided directly by Buckinghamshire Council.
<b>Complexity</b>	Complexity in provision of social care is a measure of the extent to which an individual has significant, continuing healthcare or environmental issues such as chronic illness and disabilities, mental health or other societal risks
<b>Day Services</b>	Day services are provided both in-house and through external providers such as voluntary organisations. They include a number of activities and facilities that serve to benefit the people that attend them. For example they can help people with learning disabilities receive assistance and support with carrying out everyday activities away from their own homes.
<b>Deconditioning</b>	Typically deconditioning relates to the loss of muscle tone and endurance due to prolonged inactivity. Up to 65 per cent of older patients experience decline in function during hospitalisation. In addition, months of isolation and reduced levels of activity at home during the Covid-19 lockdown is likely to result in deconditioning.

<b>Term</b>	<b>Meaning</b>
<b>Deprivation of liberty safeguards (DoLS)</b>	Deprivation of liberty Safeguards (DoLS) are safeguards that form part of the Mental Capacity Act. They apply to people who are 18 years of age or over, living or staying in a care home or hospital who lack mental capacity to consent to arrangements for their care or treatment. DoLS are due to be replaced by new Liberty Protection Standards by April 2022.
<b>Discharge to Assess (D2A)</b>	The process whereby people are assessed after discharge from hospital rather than while in hospital in order to speed up the release of hospital beds.
<b>Direct payments</b>	Payments provided by the local council to a person who will then use the funds to meet their assessed needs, such as employing a personal assistant.
<b>Domiciliary care</b>	Care provided within a person's own home setting
<b>Excess death rate</b>	The difference between the observed numbers of deaths in specific time period compared to the expected numbers of deaths in the same time period.
<b>Food insecurity</b>	People who do not consume enough food each day suffer from food insecurity, which is when a person is unable to obtain a sufficient amount of healthy food on a day-to-day basis due to a lack of money or other resources.
<b>Health Protection Board</b>	The purpose of the Health Protection Board is to take overall responsibility for the multi-agency management of the Covid-19 emergency and to establish the policy and strategic framework within which lower tier coordinating groups will work.
<b>Integrated Commissioning</b>	Integrated commissioning includes staff to support the commissioning of Mental Health, disability, prevention, public health and wellbeing services. This also includes services to place people in care or broker care, commission services that support people to live in either in their own homes or homeless people, as well as commissioning telecare and equipment services. The service also commissions projects and to support the community, careers and supports volunteers.
<b>iBCF improved Better Care Fund</b>	The improved Better Care Fund (iBCF) is a programme spanning both the NHS and local government which seeks to join-up health and care services, so that people can manage their own health and wellbeing, and live independently in their communities for as long as possible.
<b>Nursing care</b>	Refers to long-term care given to a person who has needs which require registered nursing oversight and intervention



<b>Term</b>	<b>Meaning</b>
<b>Occupational Therapy</b>	Occupational therapy takes a “whole-person approach” to both mental and physical health and wellbeing and enables individuals to achieve their full potential by improving their ability to do everyday tasks
<b>Older people</b>	People over the age of 65
<b>Outbreak control plan</b>	The Outbreak Control Plan sets out ways in which the council, the local NHS and other partners aim to protect the most vulnerable and contain and manage future outbreaks of Covid-19.
<b>Provider</b>	A provider is an independent or statutory organisation that provides a range of care services for those in need.
<b>Reablement</b>	Reablement is short-term intervention for an individual who has been in hospital, had an illness or fall to help them recover their living skills and independence. Support is usually provided for up to one or two weeks but can be up to six weeks depending on the individual.
<b>Residential care</b>	Residential care refers to long-term care given to a person in a registered residential setting rather than in their own home or family home.
<b>Respite care</b>	Respite care is planned or emergency temporary care provided to for individuals to give breaks for families and other unpaid carers.
<b>Safeguarding</b>	Safeguarding refers to measures that can be taken to protect people with care and support needs from abuse or neglect.
<b>Section 117</b>	Section 117 aftercare is a legal duty that is placed on health and social services to provide aftercare services for people who have been detained for treatment under the Mental Health Act. It is the duty that comes in effect once the person has been discharged from the hospital.
<b>Social care</b>	Social care is any form of support or help given to someone to assist them in taking their place in society.
<b>Spot contract</b>	Spot contracting happens when a local authority purchases services as and when they are needed and on an individual basis for a person.
<b>Supported living</b>	Supported living refers to a range of services and community living arrangements designed with people with disabilities and their families to support them in attaining or retaining their independence and inclusion in their local communities.

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