2021/22 Savings Monitoring Report Social Care & Health Scrutiny Committee 5th October 2021

1 Summary position as at : 30th June 2021 £300 k variance from delivery target

2021/22 Savings monitori				
2021/22	2021/22	2021/22		
Target	Delivered	Variance		
£'000	£'000	£'000		
1,125	825	300		
1,125	825	300		

2 Analysis of delivery against target for managerial and policy decisions:

Managerial £300 k Off delivery target
Policy £0 k ahead of target

	MANAGERIAL								
	2021/22	2021/22	2021/22						
	Target Delivered Varian								
	£'000	£'000	£'000						
Communities	1,075	775	300						
	1,075	775	300						

POLICY									
2021/22 2021/22 2021/2									
Target	Delivered	Variance							
£'000	£'000	£'000							
50	50	0							
50	50	0							

3 Appendix F (i): Savings proposals not on target

Appendix F (ii): Savings proposals on target (for information)

DEPARTMENT	2020/21 Budget	FACT FILE	2021/22 Proposed	2021/22 Delivered	2021/22 Variance	EFFICIENCY DESCRIPTION	REASON FOR VARIANCE
	£'000		£'000	£'000	£'000		

Managerial - Off Target

Communities

Adult Social Care							
Shared Lives	834	Shared Lives provides placements for individuals with Learning Disability or Mental Health issues with families that have been approved as Shared Lives Carers.	82	30	52	Stepping down three individuals from residential care to a Shared Lives setting will save approx. £50k to £60k per individual	Savings reprofiled to be delivered in later years as work was delayed due to initial COVID19 period. The Shared Lives Team structure is currently being reviewed to create additional capacity to progress this work. However, the likelihood is that restrictions may still impact on ability to deliver in full. However the likelihood is that restrictions may still impact on ability to deliver in full.
Right Sizing Supported Living	7,608	Supported living is provided for those individuals with a Learning Disability or Mental Health who need support with daily living tasks to remain in the community. Support is provided from staff in the setting which can range from a few hours to 24/7 in some circumstances. Promoting independence is a key aspect of supported living	23	15	8	Reviewing high cost placements and decreasing levels of support to promote independence and enhance daily living skills will result in cost savings e.g. reduction of 20 individual packages x 5hrs x £20 per hour = £105k	During COVID19 the accommodation projects have been on hold and we have been unable to undertake reviews for rightsizing or progress the deregistration with providers. This work will be picked up at pace but there will not be a full effect of the year's savings due to the months lost during COVID19 where essential business and safeguarding was prioritised over strategic work.
Right Sizing Residential	6,525	People may move into a residential home because their health has deteriorated or is so severe they are unable to look after themselves without 24/7 support, they are living with families who no longer able to support them or there are not alternative accommodation options. Some homes offer short term stays, but generally they provide long term accommodation. Approximately 200 individuals are accommodated in residential accommodation, a key objective for the service is to reduce the numbers in residential care, increase the range of alternatives and promote choice and independence for individuals.	200	100	100	Review packages of care and collaborate with commissioned services to promote independence, facilitate progression pathways and step down options whilst continuing to meet eligible need. To develop a sustainable accommodation marker and to maximise collaborative funding opportunities with health partners.	During COVID19 the accommodation projects have been on hold and we have been unable to undertake reviews for rightsizing or progress the deregistration with providers. This work is now being picked up at pace but there will not be a full effect of the year's savings due to the months lost during COVID19 where essential business and safeguarding was prioritised over strategic work. Work planned for 2021/22 remains the main focus of our work. However the likelihood is that restrictions may still impact on ability to deliver in full.
De-registration of Residential	6,525	Over the last year we have been working with several providers to maximise the independence of individuals in residential settings. As a result a number of residential providers are changing their settings to provide supported living which promotes independence and results in improved outcomes for those individuals.	60	30	30	De-registering independent residential settings to supported living, saving approximately £30k per individual per annum	During COVID19 the accommodation projects have been on hold and we have been unable to progress the deregistration with providers. This work will be picked up at pace but there will not be a full effect of the year's savings due to the months lost during COVID19 where essential business and safeguarding was prioritised over strategic work. Work is progressing to de-register a number of residential settings although this work was delayed due to Covid -19 so savings partially delivered. However, the likelihood is that restrictions may still impact on ability to deliver in full.
Direct Payments - Remodel	3,211	If individuals have been assessed as needing social services support they have the option of asking for a Direct Payment to purchase the care and support instead of receiving the support arranged by the local council.	75	10	65	The service is exploring potential innovative models for Direct Payments such as citizen directed cooperatives which could result in a more cost effective use of DP.	Focus during COVID19 has been to sustain the service and keep everyone safe, however tasks are now being picked up at pace to progress this
Staffing	344	In line with the modernisation of services the division has been undertaking a management and staffing restructure to ensure that we have the right number and appropriate skill set to deliver the new models of service	45	15	30	As part of management restructure and reconfiguration of services, reduction in some management posts.	Focus during COVID19 has been to sustain the service and keep everyone safe, however tasks are now being picked up a pace to progress this.
Domiciliary Care (in-house)	7,514	Domiciliary Care Services, also known as Homecare, provide practical or personal care for someone in their own home. This could be because health or mobility is declining, or a person may have been in hospital or they have a long term health condition. The in-house service currently provides around 35% of the market and provides over 4,500 hours of care every week to over 400 service users.	50	35	15	Domiciliary Care - delivering more care hours as a result of better rostering, reduction in sickness rates and ensuring vacancies are filled	Focus during COVID19 has been to sustain the service and keep everyone safe, however performance tasks are now being picked up at pace. Delivering more care hours remains a focus for the service. Detailed analysis and reporting tools have been developed to progress this.
Total Adult Social Care			535	235	300		

 Communities Total
 535
 235
 300

Policy - Off Target

NOTHING TO REPORT

DEPARTMENT	2020/21 Budget	FACT FILE	2021/22 Proposed	2021/22 Delivered	2021/22 Variance	EFFICIENCY DESCRIPTION
	£'000		£'000	£'000	£'000	

Managerial - On Target

Communities

On swanger 1,500 hours per week are delivered by in Assistance and confineding care agencies. Autural 251 individuals controls, controls and integration of the control of	Integrated Services		D. 11 To 20 Cont. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Residential Placement - increased Extra Care tacilities (Cartref Cymnes, Ty Dyffyn, Plas y Môr and Cwm Aur) for older people. A domiciliary care service is provided to those tenants living in the Extra Care facilities who require care and support. The aim of Extra Care is to avoid or delay the need for a residential care is provided in local authority and private sector care homes for individuals who can no longer live independently in the community. Depending on the nature of their needs, their placement may be made by the local authority or jointly with the health board, or entirely by the health board if they qualify for free continuing health care (CHC). Total Integrated Services Releasing Time to care in-house DC Spots A number of young people in our Learning Disability service are supported by two or three (in some circumstances) staff in relation to moving and handling activity. Currently independent providers are also commissioned to support this. Reduce reliance on external providers of complex Respite Respite care is provided for individuals with a Learning Disability by a number of external providers. A priority for the division is to increase the in-house options for respite which will be more cost effective and provider and providers of complex can do control in relation to respite which will be more cost effective and providers and providers, particularly those with Reduce reliance on external providers of complex as particularly those with Day services are provided for individuals with a Learning Disability by a number of external providers, particularly those with Day services are provided for individuals with a Learning Disability by a number of external providers, particularly those with Day services are provided for individuals with a Learning Disability by a number of external providers, particularly those with Day services are provided for individuals with a Learning Disability by a number of external providers, particularly those with Day services are provided for individuals with a	Domiciliary Care	13,329	 - Around 251 individuals receive care from two carers (known as "double handed" care). - In 2019/20, there were 174 individuals who receive a large package of care involving 4 calls per day. - Fulfilled Lives is a model of domiciliary care which has been developed for individuals living with dementia which has demonstrated that the service can maintain people living at home for longer than traditional domiciliary care. In 2019/20 there were 63 individuals receiving this service in some parts of the county, and the plan is to expand the service to cover the entire county. - The Reablement Service provides short term domiciliary care. The number of clients who received Reablement in 2019/20 was 530 and 55% leave the service with no long term care package. - Information, Advice and Assistance (IAA) and the Carmarthenshire United Support Project (CUSP) are both preventative services which support individuals to maintain their independence without the need for statutory social services. By increasing the proportion of referrals that go through IAA or CUSP, it reduces the demand on statutory services. - The specialist Continence service has been established within Community Nursing. By providing the right continence 	218	218	-To increase the percentage of clients exiting the Reablement Service with no long term care package from 44% to 55% by the end of 2021/22 To extend the Bridging Service across the 3 Community Resource Teams: 75 service users per quarter would receive this service -To reduce the number of clients receiving 4 or more calls a day by 11 per year - approx. 1% per year -To increase number of people with dementia receiving Fulfilled Lives service from 39 (March 2019) to 115 (March 2022) To reduce the number of clients receiving domiciliary care packages of less than 5 hours a week by 125 people (50%) in line with recommendations of Prof. Bolton -To increase the proportion of referrals receiving an Information, Assistance & Advice outcome to 20%, currently this equates to an additional 74 people per month). Assume this is achieved by increments of 1% from July to March in Year 1; Maintain in Year 2. -To increase the proportion of referrals receiving a preventative service through CUSP by an additional 5 people per month. Assume this is achieved by increments of 5 people from July to March in Year 1; Maintain in Year 2. -To reduce referrals to Brokerage from an average of 95 per month to 90 per month (5 fewer starters) - To provide specialist continence advice for identified service users to reduce the need for the existing level of domiciliary care (i.e. reduce one call per
Adult Social Care Releasing Time to care in-house DC S,025 A number of young people in our Learning Disability service are supported by two or three (in some circumstances) staff in relation to moving and handling activity. Currently independent providers are also commissioned to support this. Reduce reliance on external providers of complex Respite Respite Respite care is provided for individuals with a Learning Disability by a number of external providers. A priority for the division is to increase the in-house options for respite which will be more cost effective and provider individuals and carers with more Reduce reliance on external providers of complex Day Reduce reliance on external providers of complex Day services are provided for individuals with a Learning Disability by a number of external providers, particularly those with to increase the in-house options. Reduce reliance on external providers of complex Day Reduce reliance on external providers of complex Day services are provided for individuals with a Learning Disability by a number of external providers, particularly those with the choice and control in relation to respite options. Reduction of third party payments by operating Releasing Time to Care approach within day services which trains staff to be able to maximise the use of assistive relation to moving and handling activity. Currently independent providers. A priority for the division moving and handling activity. Providers of complex peeds the use of assistive relation to this activity. Reduction of third party payments by operating Releasing Time to Care approach within day services which trains staff to be able to maximise the use of assistive relation to moving and handling activity. Currently independent providers. A priority for the devices on the chondres of assistive relation to this activity. Reduction of third party payments by operating Releasing Time to Care approach within day services which trains staff to be able to maximise the use of assistive relation to s		774	extra care facilities (Cartref Cynnes, Ty Dyffryn, Plas y Môr and Cwm Aur) for older people. A domiciliary care service is provided to those tenants living in the Extra Care facilities who require care and support. The aim of Extra Care is to avoid or delay the need for a residential care placement. Residential care is provided in local authority and private sector care homes for individuals who can no longer live independently in the community. Depending on the nature of their needs, their placement may be made by the local authority or jointly with the health board, or entirely by the health board if they qualify for	100	100	0 Reduce residential placements by increasing the number of extra care new tenancies
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Releasing Time to care in-house DC 5,025 A number of young people in our Learning Disability service are supported by two or three (in some circumstances) staff in relation to moving and handling activity. Currently independent providers are also commissioned to support this. Reduce reliance on external providers of complex Respite Reduce reliance on external providers of complex Respite Reduce reliance on external providers of complex Respite Reduce reliance on external providers of complex Respite care is provided for individuals with a Learning Disability by a number of external providers. A priority for the division is to increase the in-house options for respite which will be more cost effective and provide individuals and carers with more Reduce reliance on external providers of complex Day Reduce reliance on external providers of complex Day Reduce reliance on external providers of complex Day Day services are supported by two or three (in some circumstances) staff in switch is used in support this. 30 0 Reduction of third party payments by operating Releasing Time to Care approach within day services which trains staff to be able to maximise the use of assistive technology, subsequently reducing the number of staff required to safely undertake moving and handling of individuals . This will reduce costs in relation to this activity. Respite care is provided for individuals with a Learning Disability by a number of external providers. A priority for the division to increase the in-house options for respite which will be more cost effective and providers and control in relation to respite options. Reviewing models of in house respite, staffing structures and collaboration with he to increase the respite offer, thus avoiding high cost independent provision to increase the respite offer, thus avoiding high cost independent providers for those with more of external providers for those with the page of the provision for those with the page of the provision for those with the page of the provisio						
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Reduce reliance on external providers of complex Day Day services are provided for individuals with a Learning Disability by a number of external providers, particularly those with As part of day service provision, the buildings will provide for those with most complex needs. The vision for those with the providers of complex peeds. The vision for those with the providers of complex peeds thus reducing the reliance on external providers of complex peeds. The vision for those with most complex peeds thus reducing the reliance on external providers of complex peeds. The vision for those with most complex peeds thus reducing the reliance on external providers of complex peeds. The vision for those with most complex peeds thus reducing the reliance on external providers of complex peeds. The vision for those with most complex peeds thus reducing the reliance on external providers of complex peeds. The vision for those with most complex peeds thus reducing the reliance on external providers of complex peeds. The vision for those with most complex peeds thus reducing the reliance on external providers of complex peeds. The vision for those with most complex peeds thus reducing the reliance on external providers of complex peeds. The vision for those with most complex peeds thus reducing the reliance of the reducing the reducing the reliance of the reducing		6,525	is to increase the in-house options for respite which will be more cost effective and provide individuals and carers with more	50	50	Reviewing models of in house respite, staffing structures and collaboration with health to increase the respite offer, thus avoiding high cost independent provision
most complex needs, thus reducing the reliance on external provisions.	Reduce reliance on external providers of complex Day Care	5,025	Day services are provided for individuals with a Learning Disability by a number of external providers, particularly those with the most complex needs. The vision for the in-house day service is that our building based service will cater for those with the	50	50	1 '

DEPARTMENT	2020/21 Budget	FACT FILE	2021/22 Proposed	2021/22 Delivered	2021/22 Variance	EFFICIENCY DESCRIPTION
	£'000		£'000	£'000		
Support Services						
Support Services	2,127	The service provides business support for Social Care. The functions include payment of creditors, management of transport and premises; the assessment and collection of income for residential and non residential services; and general business support	34	34	0	Rationalisation of staffing structure with the Business Support Unit
Support Services	2,127	The service provides business support for Social Care. The functions include payment of creditors, management of transport and premises; the assessment and collection of income for residential and non residential services; and general business support	6	6	0	Reduction in Supplies and Services budgets, by reducing postage and printing costs.
Support Services - additional saving	2,127	The service provides business support for Social Care. The functions include payment of creditors, management of transport and premises; the assessment and collection of income for residential and non residential services; and general business support	9	9	0	Reduction in Supplies and Services budgets, by reducing postage and printing costs. Additional £9k saving above original target
Support Services	1,424	The service provides business support for Social Care. The functions include payment of creditors, management of transport and premises; the assessment and collection of income for residential and non residential services; and general business support	18	18	0	Review of Transport for service users, making better use of the buses available, and increasing contracted-in work
Support Services - additional saving	1,424	The service provides business support for Social Care. The functions include payment of creditors, management of transport and premises; the assessment and collection of income for residential and non residential services; and general business support	25	25	0	Review of Transport for service users, making better use of the buses available, and increasing contracted-in work Additional £25k saving above original target
Total Support Services			92	92	0	
Communities Total			540	540	0	-

Policy - On Target

Communities

Day Services	LD & MH day services currently provide support for approximately 300 individuals across the county utilising 9 different site. The services provide opportunities for individuals to receive therapy, maintain their health and wellbeing, gain skills, socialist whilst also providing respite for carers. The review of day services has highlighted the need to develop community options and specialist services which will see a decline in the use of building based services. This will provide opportunities for us to develop intergenerational services in partnership with adult services within Coleshill and Manor Road and vacate the premises at Cross Hands.	50	50	Reduction of one building and more efficient use of current estate in community inclusion
Communities Total		50	50	0