Budget Proposals 2012/13: Internal Decision: Combined Impact Assessment: Initial Review (Part 1)

Business Unit	Adult Social Care Services	Proposal:	Reduction in care home placements
			(Residential and Nursing Homes)

The council and its partners are facing a significant challenge in the savings it needs to make over the next couple of years. This Impact Assessment Initial Review has been developed as a tool to enable business units to:

- Fully consider the impact of proposed changes on the community
- Be the basis for engagement with those potentially affected
- Ensure clarity on the extent of saving that can be made during 2011/12 commencing for 1 April
- Justify the Council's decision making process if challenged

This initial review will allow Councillors and members of the public to understand proposed changes so that they are best placed to provide their feedback.

Following this initial review and any consultation / engagement activity you have undertaken you must complete a Part 2 Review which is the second part to this Combined Impact Assessment. Together the whole impact assessment will evidence that you have fully considered the impact of your proposed changes and carried out appropriate consultation on those changes with the key stakeholders.

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Business Unit:	Operations Directorate - TCT	Department:	Business Planning & Performance
Date	2 nd September '11		

Summary from Overall Proposal (Updated as required)

	Savings 2012/13		Implementation	Delivery In place	Risks / impact of proposals • Potential risks	Type of decision*		
Proposals – Outline	Income £ 000's	Budget reduction £ 000's	Cost Include brief outline + year incurred	01/04/12 If earlier or later state date	 Impact on community Knock on impact to other agencies/partners/departme nts 	Internal	Minor	Major
Reduction in number of clients placed in care homes: Residential Nursing Death of preserved rights clients		300 30 200		On- going from 2010/11	Impact upon care home market with many homes already holding vacancies. Traditionally care homes placement numbers have fallen by approx.40 p/a during the last 4 – 5 years. (Preserved rights clients are those who have a right to continue living in a care home although they would not meet today's Fair Access to Care criteria. The right dates back, and is a consequence of, the 2003 Care in the Community Act.	√		
Savings/Costs	0	530			•			

Overall Saving 2011/12	Above figure incorporates £150k from 11/12
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Stage 1: Impact Assessment

No	Question	Details
1.	Additional details of proposed change – If required	This is a continuation of the Care Trust's work to enable more people to remain in their own homes by providing an expanded range of alternatives to residential placements. This includes increasing the availability of personal budgets to provide clients with greater control over how and where they receive their care, and developing a network of community and home-based care which is able to better meet clients' needs.
2.	Who will this affect?	 Older clients requiring long-term packages of care Residential and nursing homes
3.	How will it affect them?	 Enables more older clients to remain in their own homes with appropriate care packages developed around their needs For providers, reduced numbers of funded clients means reduced income from this revenue stream. Some care home provides may be required to diversify to remain profitable. Potentially, there may be the possibility of additional short-term placements as new models of care are created which reduce the length of stay in local hospitals.
4.	Which vulnerable groups, if any, will be specifically affected?	Older population (65+) with accommodation and with care needs which can be appropriately met within own home through domiciliary support.
5.	Will the proposed change make people vulnerable who might not be considered as such now?	No. Those who require more intensive, round the clock care will continue to receive this within a residential care setting, where this is the most appropriate for their needs.
6.	What, if any, alternative provision available to those affected?	Alternative provision to residential care already exists within Torbay, and is assisted by the work of the intermediate care and domiciliary care teams. Ultimately clients will always be given choice – to remain in their own home with care or move into a care home.

No	Question	Details
7.	How many people do you think will be affected?	Approx. 40 – 50 p/a
8.	Knock on impact to any other agency / voluntary sector group?	As already outlined, reduced reliance upon residential care beds may reduce income for existing providers. The Care Trust is working with providers to support them in diversifying their provision to meet developing needs and aspirations of clients and ensure their continued viability.
9.	Any implementation / set up costs?	N/A – please note though, as numbers decrease, vacancy levels are likely to increase unless home closures ensue. Higher vacancy levels may create further pressure on the Care Trust to increase weekly prices which are currently amongst the lowest in the country. Any price increase agreed has not been factored in to on-going budget requirements and will, as such, create further cost pressures.

Stage 2: Engagement

No	Question	Details
10.	Who do you need to consult / engage with?	The Care Trust does not believe consultation is necessary as this is a continuation of business. Clients for whom residential care is the most appropriate solution to meet their needs will continue to receive residential care.
11.	Are there any specific groups / agencies that will need to be consulted?	We are continuing to work directly with the residential care home sector to develop the most effective network of older people's care for Torbay
12.	Initial proposals for consultation / engagement?	N/A
13.	Consultation already started?	Work already underway with providers
14.	Resources available	Work led by Care Trust Commissioning staff

Stage 3 Agreed Next Steps

No	Action	Next Step	Decision
15.	Proceed with consultation	Outline support required from Business Services.	
	/ engagement?	Should the 20% threshold set out in the Choice, Cost & Risk Policy reduce as suggested, it is feasible our ability to enable clients to remain in their own homes decreases. This is because the cost of doing so becomes prohibitive as it exceeds the cost of a care home placement. (To remain at home at present, clients are allowed the cost of the care home placement plus up to a further 20% on top.)	
16.	Modify proposals for change.	Not relevant since this shift in working practice has been on-going for the last 4 years.	
17.	Not to proceed with proposed changes?	??	