

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

Business Unit	Adult Social Care Services	Proposal:	Back Office Efficiencies, Stricter Contract Management, and, Ops Frontline Staff & In-House Units
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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.

Name:	Trudy Corsellis	Position:	AD – Planning & Performance
Business Unit:	Operations Directorate - TCT	Department:	Business Planning & Performance
Date	2nd September '11		

Summary from Overall Proposal (Updated as required)

Proposals – Outline	Savings 2012/13		Implementation Cost Include brief outline + year incurred	Delivery In place 01/04/12 If earlier or later state date	Risks / impact of proposals <ul style="list-style-type: none"> Potential risks Impact on community Knock on impact to other agencies/partners/departments 	Type of decision*		
	Income £ 000's	Budget reduction £ 000's				Internal	Minor	Major
<ul style="list-style-type: none"> Generate back office efficiencies - Implement stricter contract management through: <ul style="list-style-type: none"> Greater use of St Kilda's Management of on-hold packages of care Rigidity of applying contract terms and conditions Frontline staff & in-house units 4% CRES Closure on in-house LD unit 		500	Potential redundancy costs if staff cannot be redeployed elsewhere	01/12 10/11	Back office efficiencies <ul style="list-style-type: none"> Fewer staff in post to manage change process Potential to impact on the quality and assurance processes in place Lack of knowledge and experience in remaining staff Greater collaborative working and reduced duplication of activity with SP team and DCC may mitigate the impact of staff reductions Stricter contract management: <ul style="list-style-type: none"> Less "choice" for clients as St Kilda's becomes the default option for respite and crisis care Additional fragility in the care home market as care is directed towards St Kilda's 	√		
		150						
		368				√		
		200						

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					<ul style="list-style-type: none"> Clients may find themselves charged for care they either fail to cancel or cancel at very short notice Pressure on frontline staff to actively manage packages of care for those clients requiring respite care or admitted to hospital Client faces lack of continuity of carer following admission to hospital (or respite care) as care packages will be “closed” if length of stay exceeds 7 days (or 14 days if agreement sought with Zone Manager). New package of care will be instituted on discharge. Potential for relationships to deteriorate with private providers as T&Cs enforced. If goodwill lost, instituting changes requiring their support 			

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					<p>becomes far more difficult and could fail. Requires careful balance and on-going dialogue.</p> <p>4% efficiency savings</p> <ul style="list-style-type: none"> Traditionally each department has been expected to achieve a 4% target – each year this becomes increasingly hard but has, to date, not required formal redundancies. <p>Closure of in-house LD unit</p> <ul style="list-style-type: none"> Impact on service reduction in LD have been discussed in greater detail in the LD saving schemes document. 	√		√
Savings/Costs	0	1,218						

Overall Saving 2011/12	£275k which is already incorporated into the above figure.
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(Please note a significant proportion of savings identified above arise from the Operational Staff and In-House Services budget which is currently outside of the commissioned spend risk share arrangement, e.g. back office efficiencies, 4% efficiency savings and closure of an in-house LD unit.)

Stage 1: Impact Assessment

No	Question	Details
1.	Additional details of proposed change – If required	Consultation for these areas will be covered by the schemes identified elsewhere.
2.	Who will this affect?	All client groups – though hopefully not large numbers.
3.	How will it affect them?	<p>Greater use of St Kilda's and closure of an in-house LD unit which will necessitate the transfer of clients to alternative venues which represents a change in current practice. Clients asked to pay for care cancelled at short notice is also a change in practice.</p> <p>Plans to achieve the 12/13 4% CRES target have yet to be discussed and so the impact is, at present, unknown.</p>
4.	Which vulnerable groups, if any, will be specifically affected?	LD and older people
5.	Will the proposed change make people vulnerable who might not be considered as such now?	Potentially
6.	What, if any, alternative provision available to those affected?	
7.	How many people do you think will be affected?	<p>Probability is the clients affected by these proposals are already being affected by the other schemes,</p> <ul style="list-style-type: none"> • Reduce expenditure on domiciliary care and day service clients • Reduction in care home placements • Reduce expenditure on clients with a learning disability • Policy adherence

No	Question	Details
8.	Knock on impact to any other agency / voluntary sector group?	Potentially voluntary organisations who are not meeting expected outcomes may see a reduction in their funding. Greater collaboration and reduced duplication between partner agencies is also expected.
9.	Any implementation / set up costs?	

Stage 2: Engagement

No	Question	Details
10.	Who do you need to consult / engage with?	Providers, clients, families and the public in general so they too understand the size of the challenges ahead.
11.	Are there any specific groups / agencies that will need to be consulted?	Voluntary organisations to ensure they provide value for money and are maximising the independence of clients wherever possible.
12.	Initial proposals for consultation / engagement?	<p>Awareness raising on:</p> <ul style="list-style-type: none"> • Size of challenge and managing expectations • Proposed schemes to meet the 4% CRES target in 12/13 • How to maximise the involvement and effectiveness of community organisations and voluntary groups <p>Public budget consultation has taken place. Public meetings were held as well as questionnaires sent to a “viewpoint” panel and also to members of the public.</p>

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		<p><u>Adult Social Care (Including Supporting People) - Public Meetings Data</u></p> <p><u>How would you spend the budget in this area?</u></p> <table border="1"> <thead> <tr> <th></th> <th colspan="2">Stay the same</th> <th colspan="2">5%</th> <th colspan="2">10%</th> <th colspan="2">15%</th> <th></th> </tr> <tr> <th>Venue</th> <th>Count</th> <th>%</th> <th>Count</th> <th>%</th> <th>Count</th> <th>%</th> <th>Count</th> <th>%</th> <th></th> </tr> </thead> <tbody> <tr> <td>Westlands</td> <td>5</td> <td>45%</td> <td>5</td> <td>45%</td> <td>1</td> <td>9%</td> <td></td> <td>0%</td> <td>11</td> </tr> <tr> <td>T.C.C</td> <td>10</td> <td>56%</td> <td>6</td> <td>33%</td> <td>1</td> <td>6%</td> <td>1</td> <td>6%</td> <td>18</td> </tr> <tr> <td>Paignton</td> <td>15</td> <td>71%</td> <td>3</td> <td>14%</td> <td>2</td> <td>10%</td> <td>1</td> <td>5%</td> <td>21</td> </tr> <tr> <td>Brixham</td> <td>20</td> <td>41%</td> <td>21</td> <td>43%</td> <td>5</td> <td>10%</td> <td>3</td> <td>6%</td> <td>49</td> </tr> <tr> <td>Dunboyne</td> <td>4</td> <td>57%</td> <td>1</td> <td>14%</td> <td>0</td> <td>0%</td> <td>2</td> <td>29%</td> <td>7</td> </tr> <tr> <td>Total</td> <td>54</td> <td>51%</td> <td>36</td> <td>34%</td> <td>9</td> <td>8%</td> <td>7</td> <td>7%</td> <td>106</td> </tr> </tbody> </table> <p><u>Public Questionnaire:</u></p> <p>Adult Social Care - How would you spend the budget in this area?</p> <table border="1"> <thead> <tr> <th></th> <th>Questionnaires</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>15% reduction (£1,582,500)</td> <td>14</td> <td>6%</td> </tr> <tr> <td>10% reduction (£1,055,000)</td> <td>15</td> <td>6%</td> </tr> <tr> <td>5% reduction (£527,500)</td> <td>91</td> <td>37%</td> </tr> <tr> <td>Stay the same</td> <td>124</td> <td>51%</td> </tr> <tr> <td>Grand Total</td> <td>244</td> <td></td> </tr> </tbody> </table> <p><u>Petitions:</u></p> <p>A petition containing approximately 800 signatures has been received from SPOT. The petition addressed to the Mayor requests that the decision to cut £45,000 a week from adult social care is reversed</p>		Stay the same		5%		10%		15%			Venue	Count	%	Count	%	Count	%	Count	%		Westlands	5	45%	5	45%	1	9%		0%	11	T.C.C	10	56%	6	33%	1	6%	1	6%	18	Paignton	15	71%	3	14%	2	10%	1	5%	21	Brixham	20	41%	21	43%	5	10%	3	6%	49	Dunboyne	4	57%	1	14%	0	0%	2	29%	7	Total	54	51%	36	34%	9	8%	7	7%	106		Questionnaires	%	15% reduction (£1,582,500)	14	6%	10% reduction (£1,055,000)	15	6%	5% reduction (£527,500)	91	37%	Stay the same	124	51%	Grand Total	244	
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13.	Consultation already started?	No																																																																																																		

No	Question	Details
14.	Resources available	Assistance sought with the involvement of community groups and voluntary sector organisations.

Stage 3 Agreed Next Steps

No	Action	Next Step	Decision
15.	Proceed with consultation / engagement?		
16.	Modify proposals for change.		
17.	Not to proceed with proposed changes?		