

APPENDIX G

CHILDREN'S AND ADULTS' SERVICES BUDGET RECOVERY BOARD

- G.1. Social Care budgets are facing the need to achieve large budget savings over the next three years while forging closer working with the CCG and the NHS, and dealing with an ever ageing population and increasing complexity of caseload. Management actions are already in place to attempt to recover the position by the end of the financial year, although there may still be some slippage into 2017-18 and beyond. The pressures reflect a continuation of those experienced in 2015-16.
- G.2. Public Health is funded through a ring-fenced specific grant totalling £28.2m in 2017-18. The allocation has reduced by £3m from 2015-16 to 2017-18, with a further reduction of £1.4m (5%) indicated by government for the period to 2019-20.
- G.3. An executive board headed by the chief executive has been established to provide oversight over the significant budget reductions and demand pressures experienced by the Children's and Adults' department.
- G.4. The increased pressures in Adult Social Care, in both level of demand and complexity of need, reflect the service pressures in adult social care being experienced across London and the country, and population increases of older people in Southwark. Implementation of the Care Act has increased levels of referrals, information and advice, and carers assessments. Inflationary market pressures have been felt by providers and the department has sought to protect quality of care and sustain local provision for residents.
- G.5. The department continues to mitigate demographic growth (in numbers of referrals and level of need) by promoting reablement and improved independence, increasing resident access of existing services in the community, utilising assistive technologies (such as telecare), and efficient usage of community-based services (such as homecare and extra care housing) to reduce the need for residential care. The department is also ensuring value for money by benchmarking unit costs against statistical neighbours, London and national levels to ensure that service provision is in line with national eligibility criteria.
- G.6. There are significant budget pressures in children's social care flowing from placements and staffing. There is a plan to reduce in year pressures in these areas and also to identify additional income, to the extent that this is possible given demand pressures and also the need to keep the service safe. The service is therefore developing a range of measures to reduce spend to budget beyond 2016-17 and into 2017-18 and the years beyond. This plan for reducing spend to within budget includes the following areas.
- Introducing controls over the recruitment of staff, in particular agency staff and also areas operating over establishment.
 - Improved management and procurement over residential placements and renewing the Independent Fostering Agency framework arrangements
 - Increasing income levels across a range of areas, most notably unaccompanied asylum seeker claims, housing benefits, inter agency adoption and payments by results.
 - Reviewing all relevant placement for continuing health care eligibility and funding

- For non statutory services and associated roles; making better use of these to reduce external spend, seeking alternative funding and if this is not possible ceasing the service
- Efficiencies with regard to back office supporting roles and associated costs
- Reviewing policies on carer allowances where they are more financially generous than statutory requirements and/or statistical neighbours
- Bidding for innovation grant funding for services where available
- Better alignment of the service, to improve early intervention and prevention, through integration of the Early Help Service.

G.7. Work is progressing on developing these areas and in identifying the indicative cost pressures that can be reduced and/or be avoided to reduce the gap between the actual spend the available budget. This is being reported in to the budget recovery board and the lead member.

Public Health

G.8. There is a continuing demand pressure in sexual health services, despite cost pressures being reduced where controllable through the expansion of community based services and more efficient methods of service delivery. A new London integrated tariff will be in place from April 2017 to reduce the unit costs of appointments and testing, very much in line with local developments in digital services such as on-line sexual health services for confidential home testing which has proven both very popular and effective.

G.9. Substance misuse services are being rationalised and the health checks team restructured to meet the decrease in public health grant in 2017-18. Referral pathways and remuneration models are being reviewed for services funded by the public health grant to provide service improvements and improved use of resources, to help contain overall public health demand pressures within government grant funding.