HAMPSHIRE COUNTY COUNCIL

Decision Report

Decision Maker:	Executive Member for Adult Social Care
Date of Decision:	23 September 2011
Decision Title:	Budget Monitoring, Performance and Workforce - 2011/12 Quarter 1
Decision Reference:	3202
Report From:	County Treasurer and Director of Adult Services

Contact name: Erica Meadus

Tel: 01962 846195 **Email:** erica.meadus@hants.gov.uk

1. Executive Summary

1.1. This report outlines the budget monitoring, performance and workforce position as at the end of quarter 1 (30 June 2011). Whilst this early position shows a forecast budget pressure, the department is confident that it will achieve the 8% savings target for 2011/12 with any shortfall delivered through further management action, and that final expenditure for the year will be contained within the available budget (including the central corporate risk contingency), based on the further work underway to evidence pressures and identify potential savings. This is in line with the pattern observed in previous financial years.

1.2. The projected outturn for 2011/12 is a net budget pressure of £7.335m (2.4%).The variance reported by each directorate is as follows:

	Current budget £000	**Quarter 1 forecast variance £000**	**%**
Director	1,288	86	6.7
Commissioning and Partnerships	37,615	(26)	(0.1)
Older People / Physical Disabilities	121,970	785	0.6
Learning Disabilities / Mental Health and In-house services	147,687	6,490	4.4
Winter pressures and other department contingency	1,397	0	0.0
Total	**309,957**	**7,335**	**2.4**

1.3. The most significant budget pressure relates to Learning Disability services (£5.9m of the £6.5m pressure forecast for Learning Disabilities, Mental Health and In-house services directorate). This is due to a number of factors including increased numbers of higher-cost residential placements than had been budgeted for (e.g. for transitional clients[1] and adults with Aspergers), lower attrition levels than forecast during the previous financial year, and increased complexity of clients, reflected in the cost of support packages being provided. Section 3 of the report provides further information on the pressures across this area of service.

1.4. The overall department position incorporates (for all service areas) an assumption that further demographic growth during the year will be in line with the departments budget provision for the remainder of the financial year (just under £13.9m). This will be monitored closely over the coming months to take in to account the actual number and cost of packages being provided.

1.5. The £13.9m assessment of demographic and complexity pressures did not include all of the possible impacts associated with demographic trends. Some of the impacts were considered to be more uncertain (e.g. the timing of increased demand, the extent of increased numbers of ordinary residence cases, increased learning disability needs and the level of winter pressures). It was agreed, therefore, that these risks would be managed through a central corporate risk contingency rather than allocating a cash limit to Adult Services.

1.6. The department is currently examining data for the first quarter of the year in order to provide greater insight into issues around complexity and demography and the unexpected costs arising from transitional clients. It is anticipated that a clearer picture will be available for the second quarter monitoring, which will inform how much of the central risk contingency may be released, subject to Cabinet approval.

1.7. During the remainder of the year management will be seeking to achieve additional savings (both one-off and ongoing), and expect to be able to deliver a balanced budget for the end of the year once any further demography and complexity pressures have been evidenced and funded accordingly.

1.8. In addition to the demand pressures outlined above, over the past two months we have seen a significant increase in safeguarding activity, in the main relating to institutional safeguarding. This is over and above the increased activity within safeguarding we have seen in recent years, and is in line with increasing numbers and complexity of people we support.

[1] Transitional clients relate to those who have transferred from Children's Services to Adult Services.

1.9. Significant variations for the end of quarter 1 are summarised as follows:

	Forecast variance this quarter £000	Para ref
OPPD purchased services	**785**	**2.1 to 2.7**

The forecast budget pressure for this area is £785,000. This includes £2m in respect of direct payments and a £1.8m on domiciliary care. This is largely offset by a £2.8m underspend on residential care, partly reflecting the continuing trend of clients remaining in their homes for longer and lower re-provisioning costs than budgeted. The actual number of purchased packages as at the end of quarter 1 (30 June 2011) was 10,313 for OP clients and 1,838 for PD clients, compared with budgeted packages of 10,977 and 1,878 respectively.

Learning Disabilities, Mental Health and In-house services	**6,490**	**3.1 to 3.11**

The forecast budget pressure for these services is £6.490m. This includes £5.898m against Learning Disability Services and £644,000 against Mental Health Services, which is partly offset by an underspend of £238,000 against In-house services. Other smaller variances against non-operational services and the budgets directly managed by the Assistant Director account the remaining variance.

Learning Disabilities

The forecast budget pressure for this area is £5.898m. This includes £3.7m on residential services and a £1.3m in relation to direct payments. The budgets assume some clients will transfer from residential to domiciliary care over the year in accordance with the strategy to increase client independence.

The complexity of clients supported by this service contributes significantly toward the forecast pressure, and was highlighted in earlier work undertaken by the department as part of the 2011/12 budget strategy, leading to the creation of a central corporate risk contingency.

Mental Health

The forecast budget pressure for this area is £644,000. This includes £95,000 against nursing care, £732,000 in respect of residential care and £256,000 in domiciliary care. The pressures in these areas were partially offset by £477,000 underspend against management and support.

In-house services

The forecast underspend for in-house services is £238,000. This includes underspends of £682,000 against nursing care, and £567,000 for day care, which are partially offset by budget pressures of £763,000 in respect of residential care and £109,000 for equipment and adaptations.

1.10. Specific service area issues are highlighted in the following sections of this report. In addition the following information is shown as appendices to this report:

1. Adjustments to Adult Services' revenue cashlimit
2. Forecast outturn across services
3. Progress on achievement of Efficiency Savings
4. Workforce.

2011/12 Revenue Budget

2. Older Persons and Physical Disabilities (OPPD) – purchased services

2.1. The current position for Older People and Physical Disabilities is a forecast budget pressure of £785,000 (0.7% of the budget). The variance by client group is as follows:

By client group	Current budget	Quarter 1 forecast variance	
	£000	£000	%
Older People (OP)	98,538	(1,928)	(2.0)
Physical Disabilities (PD)	23,432	2,713	11.5
Total	**121,970**	**785**	**0.7**

2.2. Appendix 2 provides a breakdown of the forecast budget pressure by care type. This shows that the net pressure of £785,000 includes approximately £2m in respect of direct payments and £1.8m on domiciliary care, which are largely offset by a £2.8m underspend on residential care. This reflects the success in avoiding residential care admissions and enabling clients to remain in their own homes for longer, a practice that continues to support our performance in reducing the number of people we place in permanent long term care.

2.3. An underspend of £1m against Assessment and Care Management expected to be achieved against vacancy management savings further offsets this position.

2.4. This year budget provision has been made for the expected demographic pressures due to the increasing elderly population. However, the planned budget savings targets have necessitated some ambitious efficiency plans which will be challenging to fully achieve.

2.5. The forecast includes an assumption that £6.2m of targeted efficiency savings will be achieved, but which are yet to be fully realised against operational services. This includes savings arising from the staff restructure as planned for in the budget (due to be fully implemented from October 2011), as well as reviewing the offer and procurement savings (part of this will also be achieved from October).

2.6. Voluntary redundancy payments in respect of the staff restructure are expected to amount to approximately £3.2m (£2.3m standard redundancy and pension costs plus £900,000 enhanced voluntary redundancy costs). At present these have not been included within the forecast outturn as it is anticipated they will be met from the departments 2010/11 underspend which was carried forward to 2011/12 (held in a separate department contingency) and the corporate contingency.

2.7. Significant variances for the end of quarter 1 are summarised as follows:

	Variance this quarter £000
Staffing	
Assessment & Care Management (A&CM)	(998)
Management & Support (M&S)	386
Total staffing	**(612)**

The forecast for A&CM and M&S assumes that £1.0m of planned savings will be achieved in relation to the OP/PD staff restructure, due to be implemented from 1 October 2011, and £500,000 of planned savings from vacancy management.

The underlying net underspend of £612,000 reflects additional vacancy management savings that have been achieved, partly as a result of not back filling maternity and sick leave.

Purchased nursing	
Older People (OP)	544
Physical Disabilities (PD)	45
Total	**590**

The forecast budget pressure primarily relates to higher than budgeted unit costs in all areas, including £1.2m against gross expenditure, which is offset by lower than budgeted client activity and a £1.1m overachievement of income targets. An additional three nursing reablement beds have been purchased in the North, with the agreement of the Director, due to extreme pressure at Frimley Hospital. The £74,000 cost is more than offset by under spends against the delayed discharges budgets (included in 'Other Care').

Purchased residential	
Older People (OP)	(2,124)
Physical Disabilities (PD)	(656)
Total	**(2,779)**

£1.0m of this underspend relates to the revised plans for in-house home closures, which have meant the re-provisioning budget provision is not fully required. However, this is offset by the slippage in the in-house savings target relating to these closures, which is reported outside of the OP/PD Directorate.

Achievements in reducing admissions to long term care led to a £700,000 underspend being brought forward from 2010/11 due to the additional funding provided for demographics and capital depleters not being required as more clients are helped to live at home, and the slower progression of people into residential care from domiciliary care. A reduction in the number of packages since March 2011 (25, from 12,176 to 12,151), has resulted in a further reduction in spend.

	Variance this quarter £000
Direct Payments	
Older People (OP)	434
Physical Disabilities (PD)	1,570
Total	**2,004**

The forecast budget pressure reflects the success of the Countywide rollout of Self-Directed Support (SDS) and drive to increase direct payment activity, with client activity rising significantly. Actual unit costs are also higher than budgeted.

Purchased domiciliary care	
Older People (OP)	660
Physical Disabilities (PD)	1,178
Total	**1,838**

Increasing demography and client complexity, combined with personalisation and enabling clients to live at home as an alternative to residential care wherever possible, is placing significant pressures on domiciliary care budgets. Whilst this has in part been offset by savings against residential care, there are a number of high cost domiciliary packages above the residential rate. An additional £5.1m was allocated to this service for demography growth during 2011/12 and it is currently assumed that this will be spent in full.

Actual unit costs are significantly over budget, and the full year effect of high cost packages agreed in the last financial year is contributing to the forecast pressure (domiciliary care was approximately £900,000 overspent in 10/11, before applying one-off funding received from Health).

Through development of the preferred providers model and the planned implementation of the Electronic Domiciliary Care Monitoring programme, £5.3m of savings have been targeted against domiciliary care as a result of the department reducing both the price paid and the number of hours provided, whilst still ensuring clients' eligible needs are met. The forecast currently assumes that these targets will be achieved in full.

Other services	**(218)**

The variance mainly relates to a £284,000 projected underspend against the budget for delayed discharge fines due to the success achieved by the hospital teams and the use of reablement beds, as well as the work being undertaken by the Community Response Team to avoid delays in hospital discharges.

3. Learning Disabilities (purchased services), Mental Health and In-house services

3.1. The current position for Learning Disabilities (LD) and Mental Health (MH) and In-house services is a forecast budget pressure of £6.5m (4.4% of the net budget).

	Current budget[2]	Quarter 1 forecast variance	
	£000	£000	%
Assistant Director	192	70	36.5
Learning Disabilities	91,028	5,898	6.5
Mental Health	10,105	644	6.4
In-house provider services	35,749	(238)	(0.7)
Non-operational services (various)	10,613	116	1.1
Total	**147,687**	**6,490**	**4.4**

3.2. Appendix 2 provides a breakdown of this forecast pressure by type of care. The most significant area of pressure relates to purchased residential services (£3.7m for LD clients and £732,000 for MH clients). A number of factors contribute toward the overall pressure for LD, including higher numbers of transitional clients than budgeted for (approximately 40 packages), partly due to a greater number of children and middle aged adults who have complex needs living longer, increasing numbers of clients with Aspergers and Ordinary Residence status as well as those aged 65 or over continuing to receive support. Higher package costs have further significantly impacted on the budget pressure forecast.

3.3. Whilst a number of these pressures were recognised by the department previously, information to support the growing complexity of some types of packages in these areas was not sufficiently developed at the time the budget for 2011/12 was agreed.

3.4. Forecast demographic pressures, due to the increasing population, that were funded as part of the 2011/12 budget strategy (£6.1m for LD and £1.1m for MH) are currently assumed to be spent in full during the year. However, in line with the expectation that more clients would be supported through either domiciliary care packages or direct payments this additional budget has been allocated against these service areas rather than residential care. This will be monitored through the year against actual packages agreed and these budget allocations will be reviewed when setting the revised budget.

[2] Current budget is net of income (e.g. Health)

3.5. The overall number of purchased care packages for clients with LD has increased significantly over the last three years as outlined below. The average number of packages budgeted for during 2011/12 (3,075) included funding for an additional 180 packages, as compared with the 2010/11 revised budget of 2,895.

	March 2009	March 2010	Revised budget *(October 2010)*	March 2011	2011/12 budget	June 2011	Variance to budget	
							+/(-)	%
Number of purchased care packages (LD)	2,587	2,727	2,895	3,053	3,075	3,086	+11	+0.4

3.6. As at the end of quarter 1 the actual number of packages was 11 above the number budgeted for. However, this excludes approximately 88 further packages for transitional clients which are expected to be provided during the remainder of the year (July to March). The estimated cost of these packages has been included in the forecast outturn.

3.7. The average weekly cost of purchased packages has also increased over this period, and is significantly higher for nursing care, residential care and direct payments than the weekly cost allowed for within the budget. This is partly due to the information needed to explain the complexity factors (contributing toward increased unit costs) not being fully developed when the budget was set.

	Budgeted average weekly cost (2011/12)	Actual average weekly cost: 2010/11	As at end of quarter 1 (2011/12)	Variance to budget	
	£	£	£	£	%
Nursing care	757	852	949	192	25.4
Residential care	1,023	1,165	1,242	219	21.4
Domiciliary care	460	455	481	21	4.6
Day care	173	136	133	(40)	23.1
Direct Payments	163	284	294	131	80.4
Other care	0	8	81	81	-

3.8. The department is currently examining further data available for the first quarter of the year in order to provide greater insight into issues around complexity and demography for LD clients. This includes reviewing the unexpected costs arising from transitional clients as well as high-cost residential placements. It is anticipated that a clearer picture will be available for the second quarter monitoring, which will inform whether a proportion of the central corporate risk contingency may be released, subject to Cabinet approval.

3.9. Within LD there is a cohort of people with very complex needs (either physical, mental or behavioural) who will require either joint funding (across health and social care) or who will be eligible to receive continuing health care funding. The department are working with the Primary Care Trust to determine these cases, as appropriate.

3.10. Voluntary redundancy payments in respect of the staffing restructures are expected to amount to approximately £900,000 for LD (including enhanced voluntary redundancy costs). These have not been included within the forecast outturn as they will be met from the departments 2010/11 underspend (held in a separate department contingency) and the corporate contingency.

3.11. Significant variances for the end of quarter 1 are summarised as follows:

	Variance this period £000
Learning Disabilities	**5,898**

The forecast budget pressure for this service is £5.898m, and incorporates assumptions around future demographic growth during the remainder of the year. This includes £3.7m on residential services and £1.3m in relation to direct payments. It is planned that some clients will transfer from residential placements to domiciliary care over the year to increase client independence in accordance with the strategy, so it likely the variances between these services will change during the year. The pressure on direct payments is mainly due to higher than budgeted average weekly costs.

The forecast outturn includes an assumption that £3.0m of efficiency savings will be achieved on staff reductions, reviewing the offer and procurement.

Mental Health	**644**

This includes a forecast budget pressure of £95,000 against nursing care, £732,000 residential care and £256,000 for domiciliary care (a total budget pressure of approximately £1.1m). This is partially offset by an underspend of £477,000 against management and support budgets.

The forecast assumes that planned efficiency savings of £550,000 will be achieved in respect of staffing and procurement.

In-house services	**(238)**

This includes an underspend of £682,000 against nursing care and £567,000 in respect of day care, which are partially offset by forecast pressures of £763,000 for residential care, and £109,000 for equipment and adaptations.

The underspend is mainly due to a number of vacancies currently being held, in preparation for the LD and OP restructure. However, a high level of vacancies has lead to a higher number of agency staff being used. There is ongoing monitoring of progress and development of a casual bank of workforce which will reduce the use of agency staff, reducing costs.

4. Department contingency (including winter pressures funding)

4.1. The departments contingency as at the end of quarter 1 amounted to £1.397m and includes:

	Current budget	Quarter 1 forecast variance	
	£000	£000	%
Winter pressures	648	0	0.0
Bad debt provision	152	0	0.0
Other committed contingencies	597	0	0.0
Total	**1,397**	**0**	**0.0**

4.2. Currently the full value of the contingency budget is forecast to be spent during 2011/12. However, if a proportion of this is not required during the later months of the year this will be used to reduce the departments overall forecast budget pressure.

5. Income

5.1. Income (including contributions expected to be received from clients) is forecast to exceed the budget by £1.737m (excluding internal recharges) as at end of quarter 1 (end of June 2011). The main reasons for this overachievement are summarised in the table below:

Source of income	Current budget	Quarter 1 forecast variance	
	£000	£000	%
Non residential charging	(10,250)	(321)	(3.1)
Client contributions to residential and nursing care	(60,609)	(930)	(1.5)
Health, Partnerships and Other Local Authorities	(16,468)	(493)	(3.0)
Other income	(34)	7	20.6
Total income [3]	**(87,361)**	**(1,737)**	**(2.0)**

Non residential charging (NRC) and client contributions to nursing and residential care

5.2. The NRC and nursing & residential client contributions are forecast to exceed budget by £321,000 and £930,000 respectively. During the last financial year there has been a steady increase in client activity (where contributions are assessed as being payable), as well as the average weekly client contribution increasing. The annual review of Financial Assessments is currently in the process of being completed, and it is likely, therefore, that this position could change (either a further increase or reduction).

[3] Excludes recharges within and to/from other department's.

Income from Health, Partnerships and Other Local Authorities

5.3. As at the end of quarter 1, income from Health, partnerships and other local authorities is forecast to exceed the budget by £493,000. The main reasons for this variation include:

- **Drugs and Alcohol Action Team (DAAT)** – income expected to be received from various funding streams has now been confirmed and is forecast exceed the original budget by £602,000. The budget will be amended to reflect the actual income now anticipated to be received

- **Health Income –** additional income amounting to £283,000 is forecast to be received from Health in respect of the Mental Health Contract as a result of the new S256 agreement. However, this increase is offset by an equivalent amount of expenditure, resulting in a nil impact on the departments bottom line position.

  The above increase is further offset by a £474,000 reduction in expected income for In-house services. This is mainly due to lower numbers of Health funded clients being forecast than had been budgeted for.

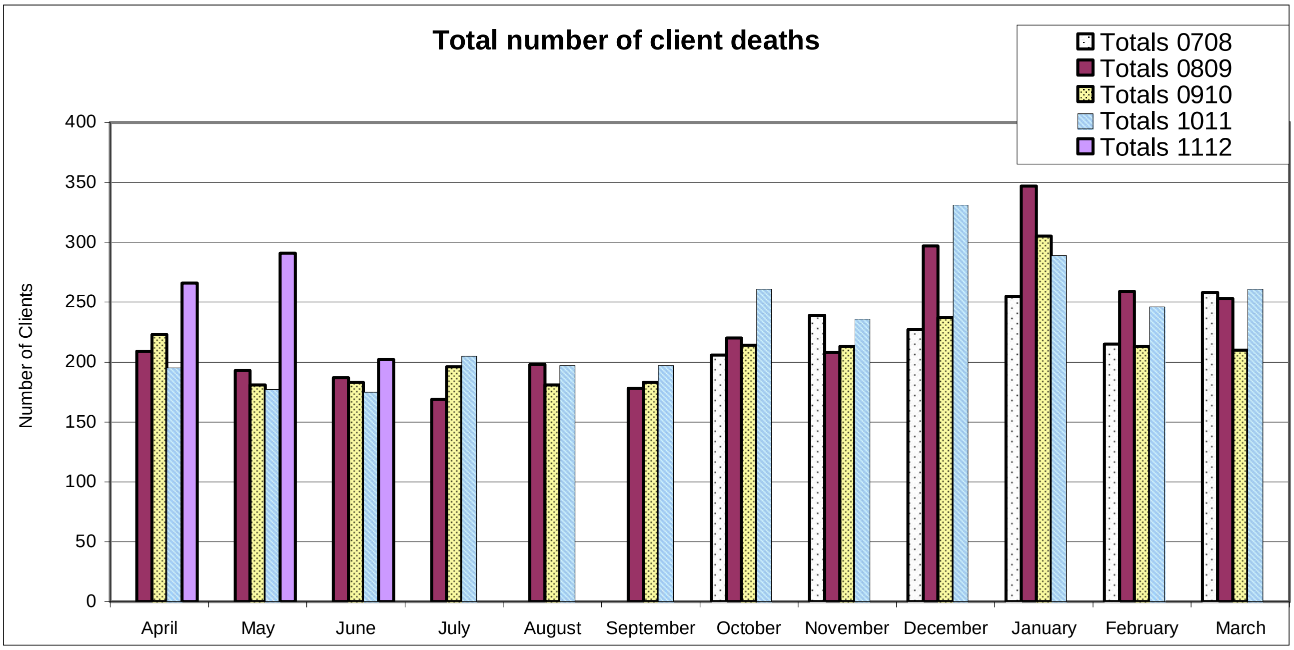
  There is also £82,000 of additional income for the Older Persons client group which relates to income received in advance for the Joint Hospital Intervention Scheme. This is netted off by an equivalent amount of expenditure.

6. Client care packages and average weekly cost

6.1. As at the end of the first quarter of the year, the total number of client care packages was 18,526. This compares with budgeted packages of 19,810 (i.e. 1,284 less than budget). The budget included funding for an additional 776 packages compared with the previous years revised budget, allowing for some demographic growth and where appropriate this has been committed in full within the outturn on the expectation that the number of packages will increase throughout the remainder of the year. However, the average weekly cost of packages is significantly higher than budgeted in places, contributing toward the underlying budget pressure forecast (for LD in particular). Any significant issues are outlined within the main service explanations in sections 2 and 3.

7. Attrition rates

7.1. Attrition rates for Adult Services for the start of the year are higher than during 2010/11, and this is mainly in OP services. This increase will also have had the effect of reducing some client package numbers as noted in section 6 of the report.



8. 2011/12 Efficiency savings

8.1. There is confidence that a significant proportion of the savings targets for 2011/12 will be achieved during the year (93% of the £25.410m target, of which 49% has either already been secured or is considered to be high confidence) and these assumptions are reflected fully within the outturn across the relevant services. The remaining difference of £1.7m will be managed through reductions in previously planned re-provisioning costs (£1.2m) and additional one-off and ongoing efficiency savings. Further information is provided within the relevant service areas of the main report (sections 2 and 3).

8.2. One particular area presenting a risk is the £3.0m target against the LD funding transfer. This target was based on all clients transferring from Health at the start of the year and the department being able to reduce the cost of client's packages. A number of these LD clients have not yet been transferred to the department, reducing the opportunity to achieve these savings.

8.3. As mentioned earlier in the report it has been assumed that savings around procurement, reviewing the offer, reassessments and staff restructures will be made. Actions are in place to achieve these savings and there is a reasonable confidence at this stage that these will be achieved in full. Appendix 3 provides an update on the current progress being made against the overall savings target of £25.410m for 2011/12.

9. Forecasting future demand

9.1. A review of current research studies has been undertaken to ascertain if there is a consistent base to be used to forecast complexity. This review identified that although there were some studies available, there was nothing consistent available to assist future planning across all client groups and types of care.

9.2. Further work has been undertaken to support and improve the departments approach to forecasting future demand for adult social care services and the outcomes of this work will be reflected within the 2012/13 to 2014/15 budget setting approach.

10. Understanding complexity

10.1. As outlined earlier in the report work is also progressing to further understand and evidence reasons for increased complexity in packages provided to clients, and therefore, the increasing cost of packages over the last two financial years.

10.2. A further update on this work will be provided to the Executive Member in the quarter 2 report.

11. Performance update

11.1. As part of changes to the national performance framework, the Adult Services DMT agreed that a set of local indicators be developed, designed to support the management of its business, while having regard to the developing national reporting framework for health and social care.

11.2. The core indicators currently being monitored show, as at the end of quarter 1:

- Continued progress on the roll out of SDS, with month on month increases in the percentage of clients in receipt of an individual budget and / or direct payment (rising to 39% of eligible clients, 21% of all clients)

- Overall the number of people with delayed discharge from hospital for social care reasons fell between April and June 2011. However, delays for social care reasons have increased as a percentage of all delays. Social care delays form a particularly high percentage in the North Hampshire NHS Trust and action is being taken to improve this situation. Availability of nursing care in the north of the County also appears to be an issue.

12. Workforce update

12.1. As at the end of quarter 1 there were 3,063 FTE in post, which is a reduction of 134 FTE from the position of 3,197 reported for the end of quarter 4 during 2010/11 (31 March 2011). Turnover for the first quarter was approximately 3.5%.

12.2. The average staff sickness level for the department is approximately 3.1 FTE days during the first quarter. The final position for 2010/11 was 13.1 days per FTE against the 2010/11 department sickness absence planned target of 12.0 days per FTE. This is higher than the average sickness rate of other department’s across the County Council, and this is partly due to the nature of the roles undertaken by staff working for the department (e.g. often working with and supporting clients who are unwell). The rate is also slightly higher than within equivalent Adult Service’s departments in other local authorities, although this is mainly due to the larger number of in-house residential homes the County Council manages.

12.3. Further information is provided in Appendix 4.

13. Recommendations

13.1. Note the early forecast position for the revenue budget as at the end of quarter 1 (30 June 2011).

13.2. Note performance for the year to date.

13.3. Note performance against sickness absence targets and the impact of the recruitment moratorium.

13.4. Note the positive progress made by the department around the delivery of the efficiency savings targets.

CORPORATE OR LEGAL INFORMATION:

Links to the Corporate Strategy

Hampshire safer and more secure for all:	Yes
Corporate Business plan link number (if appropriate):	
Maximising well-being:	Yes
Corporate Business plan link number (if appropriate):	
Enhancing our quality of place:	No
Corporate Business plan link number (if appropriate):	

Other Significant Links

Links to previous Member decisions:		
Adult Services Department Revenue Budget 2011/12	Reference 2502	Date 28 January 2011

Direct links to specific legislation or Government Directives	
Title None	Date

Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

Document	Location
None	

IMPACT ASSESSMENTS:

1. Equalities Impact Assessment:

1.1. The departments budget and performance strategies are developed in accordance with the Councils Equalities Policy and target the most vulnerable in society.

1.2. How budgets are used have a significant impact on the most excluded. The operational Directors have lead responsibility to ensure that impact assessments take account of the needs of these groups. The Head of Finance is a member of the Departmental Management Team, and part of her role is to contribute to these impact assessments. This budget monitoring report provides information on the progress of spending plans of the Directorate and will contribute to better outcomes for all.

2. Impact on Crime and Disorder:

2.1. The County Council has a legal obligation under Section 17 of the Crime and Disorder Act 1998 to consider the impact of all the decisions it makes on the prevention of crime. The proposals in this report have no proven impact on the prevention of crime.

3. Climate Change:

a. How does what is being proposed impact on our carbon footprint / energy consumption?

All relevant developments within the revenue budget and capital programme are subject to specific, detailed assessments. Energy conservation, and where applicable enhancing biodiversity, are priorities for all major building schemes and the revenue budget includes an allocation to specifically encourage sustainability initiatives.

b. How does what is being proposed consider the need to adapt to climate change, and be resilient to its longer term impacts?

Where appropriate capital schemes are planned with adaptation to climate change in mind, such as the inclusion of passive cooling through building design, rain-water and grey-water harvesting, drought resistant planting etc.

Where appropriate revenue efficiencies have been identified with climate change in mind, this includes travel, food wastage in in-house homes.

Appendix 1 Cash limited budget

Budget movement's in quarter 1			£000
Original budget as at 1st April 2011 (from budget book)			**314,064**
Type of Movement	**Reason**		
Inter departmental transfers	-	County Treasurers to Adult Services (DFU and FAB)	121
	-	Adult Services to Chief Executives (Corporate Communications)	(180)
	-	Adult Services to Chief Executives (Blue Badge)	(100)
LGPS	-	LGPS adjustment	(3,948)
		Total movements	*(4,107)*
Budget as at quarter 1 (end of June)			**309,957**

Budget movement in quarter 1 by Directorate

Directorate	Original Budget	Change (quarter 1)			Budget quarter 1 (end of June)
		Expenditure	Income	Net	
	£000	£000	£000	£000	£000
Director	1,188	100	0	100	**1,288**
Commissioning and Partnerships	35,063	4,040	(1,488)	2,552	**37,615**
Older People/Physical Disabilities	123,276	(1,349)	43	(1,306)	**121,970**
Learning Disabilities/Mental Health and In House Services	152,932	(5,144)	(101)	(5,245)	**147,687**
Department contingency	1,605	(205)	(3)	(208)	**1,397**
Total	**314,064**	**(2,558)**	**(1,549)**	**(4,107)**	**309,957**

Appendix 2 Client groups movements across care types as at quarter 1

Directorate	Current budget £000	Quarter 1 forecast variance £000	%
Director			
Management and support	1,288	86	6.7
Total Director	**1,288**	**86**	**6.7**
Commissioning and Partnerships			
Assessment and care management	1,278	161	12.6
Purchased residential	210	(60)	(28.6)
Direct Payments	0	(0)	(100.0)
Purchased day care	726	11	1.5
Purchased home care	45	(45)	(100.0)
Management and support	3,872	51	1.3
Other	31,484	(143)	(0.5)
Total Commissioning and Partnerships	**37,615**	**(26)**	**0.1**
Older People and Physical Disabilities			
Assessment and care management	19,286	(998)	(5.2)
Purchased nursing	24,214	590	2.4
Purchased residential	27,013	(2,778)	(10.3)
Direct Payments	8,082	2,004	24.8
Purchased day care	4,066	3	0.1
In-house home care	3,052	(41)	(1.3)
Purchased home care	32,485	1,838	5.7
Management and support	2,272	386	17.0
Other	1,500	(218)	(14.5)
Total Older People and Physical Disabilities	**121,970**	**785**	**0.6**
Learning Disabilities, Mental Health and In-house services			
Assistant Director, Learning Disabilities and Mental Health			
Management and support	191	70	36.7
	191	**70**	**36.7**
Learning Disabilities			
Assessment and care management	2,743	441	16.1
Purchased nursing	798	97	12.1
Purchased residential	40,474	3,734	0.9
Direct Payments	4,372	1,256	28.7
Purchased day care	4,059	104	2.6

Directorate	Current budget £000	Quarter 1 forecast variance £000	%
Purchased home care	28,491	(121)	(0.4)
Management and support	367	89	24.3
Other	9,725	298	3.1
	91,028	**5,898**	**6.5**
Mental Health			
Assessment and care management	4,730	29	0.6
Purchased nursing	357	95	26.6
Purchased residential	2,309	732	31.7
Direct Payments	148	0	0.1
In-house day Care	50	(16)	(32)
Purchased day care	261	(29)	(11.2)
Purchased home care	750	257	34.3
Management and support	1,020	(477)	(46.8)
Other	481	54	11.2
	10,105	**644**	**6.4**
OPPD and LD in-house services:-			
Operations Director residential and nursing			
In-house nursing	8,246	(682)	(8.3)
In-house residential	11,222	657	5.9
In-house day Care	2,318	(87)	(3.7)
Management and support	849	59	7.0
Other	2,817	188	6.7
Sub total residential and nursing	**25,452**	**135**	**0.5**
Learning Disability residential and nursing			
In-house residential	3,430	107	3.1
In-house day care	6,866	(480)	(7.0)
Other	(0)	0	0.0
Sub total residential and nursing	**10,297**	**(373)**	**(3.6)**
	35,749	**(238)**	**(0.7)**
Non-Operational Services			
Assessment and Care Management	259	(89)	(34.4)
Purchased nursing	127	0	0.0
In-house residential	517	25	4.8
Direct Payments	316	0	0.0
In-house day care	165	0	0.0
Purchased home care	37	0	0.0
Management and support	9,060	179	2.0
Other	132	1	0.7
	10,613	**116**	**1.1**
Total Learning Disabilities/Mental Health and In-house services	**147,687**	**6,490**	**4.4**

Directorate	Current budget £000	Quarter 1 forecast variance £000	%
Winter pressures and other department contingency			
Assessment and care management	4,325	0	0.0
Purchased nursing	1,750	0	0.0
In-house residential	1,650	0	0.0
Purchased residential	2,837	0	0.0
Direct Payments	230	0	0.0
In-house day care	941	0	0.0
Purchased day care	222	0	0.0
Purchased home care	2,482	0	0.0
Management and support	(3,012)	0	0.0
Other	(10,026)	0	0.0
Total Winter pressures and other department contingency	**1,397**	**0**	**0.0**
Total Adult Services	**309,957**	**7,335**	**2.4**

Appendix 3 Progress against savings

Total savings target for Adult Services in 2011/12 - £25.410m
(8% savings target of £24.410m plus £1m other budget redeployment savings)

Status Summary of Departmental 2011/12 and Phase 3 Corporate Efficiency Savings (as at quarter 1)

	Blue		Green		Amber		Red		Total	
	£000	%	£000	%	£000	%	£000	%	£000	%
Adult Services	**7,023**	**28**	**5,321**	**21**	**11,366**	**44**	**1,700**	**7**	**25,410**	**100**

Key		
	Red	Low Confidence - Serious actual or forecast problems with containment plans still being developed
	Amber	Medium Confidence - Some problems but containment plans in place that lower risk
	Green	High Confidence - No problems or problems significantly mitigated by containment plans
	Blue	Secured (Guaranteed) saving. Once selected do not change

Of the £1.7m shown above as Red Status:

- £1.2m relates to previously planned home closures which have slipped or will no longer occur. These closures had a corresponding budgeted re-provisioning pressure which will now not be required, resulting in an underspend of £1.1m against purchased residential budgets. The real net effect of this is, therefore, a shortfall of £100,000

- the remaining £500,000 relates to slippage against various other targets, and this (together with the £100,000 noted above), is expected to be recovered by additional in-year and ongoing efficiency savings.

Appendix 4 Workforce

Employees in Post	Q1	Q2	Q3	Q4
Employees	3,921			
FTE - Actual	3,063			
Full Time Employees	1,678			
Part Time Employees	2,243			
Part Time FTE - Actual	1,385			
Temp Employees	145			
Temp Staff FTE	109			
Temp/Perm Staff Ratio	26.0			
PT/FT Staff Ratio	0.7			
Overtime Hours	12,649			

TURNOVER	Q1	Q2	Q3	Q4	Projection
No. external leavers	136				544
Turnover (External) %	3.5%				13.9%

SICKNESS ABSENCE	Q1	Q2	Q3	Q4	Projection for current year
Absence Hours	74,152				326,270
Absence - fte days per fte	3.1				13.7
Absence% of planned hrs	5.3%				5.3%
Planned hours	1,390,057				6,116,251
Actual absence cost	£818,601				£3,601,846