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**SCRUTINY FOR POLICIES, ADULTS AND
HEALTH COMMITTEE**



Wednesday 7 December 2022

**10.00 am Luttrell and Wyndham Rooms,
County Hall, Taunton, TA1 4DY**

To: The members of the Scrutiny for Policies, Adults and Health Committee

Cllr R Woods (Chair), Cllr G Oakes (Vice-Chair), Cllr H Bruce, Cllr N Cottle, Cllr D Denton, Cllr B Ferguson, Cllr A Govier, Cllr A Hendry, Cllr C Lawrence, Cllr E Pearlstone, Cllr T Robbins, Cllr F Smith and Cllr C Sully

All Somerset County Council Members are invited to attend.

Issued By Scott Wooldridge, Monitoring Officer and Head of Governance and Democratic Services - 29 November 2022

For further information about the meeting, please contact Jennie Murphy -
Jennie.Murphy@somerset.gov.uk or 01823 357686 or Jamie Jackson -
Jamie.Jackson@somerset.gov.uk

Guidance about procedures at the meeting follows the printed agenda

This meeting will be open to the public and press, subject to the passing of any resolution under Regulation 4 of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012.

This agenda and the attached reports and background papers are available on request prior to the meeting in large print, Braille, audio tape & disc and can be translated into different languages. They can also be accessed via the council's website on
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AGENDA

Item Scrutiny for Policies, Adults and Health Committee - 10.00 am Wednesday 7 December 2022

**** Public Guidance notes contained in agenda annexe ****

1 **Apologies for Absence**

- to receive Member's apologies.

2 **Declarations of Interest**

Details of all Members' interests in District, Town and Parish Councils can be viewed on the Council Website at [County Councillors membership of Town, City, Parish or District Councils](#) and this will be displayed in the meeting room (Where relevant).

The Statutory Register of Member's Interests can be inspected via request to the Democratic Service Team.

3 **Minutes from the previous meeting held on 12 October 2022** (Pages 7 - 14)

The Committee is asked to confirm the minutes are accurate.

4 **Public Question Time**

The Chair will allow members of the public to ask a question or make a statement about any matter on the agenda for this meeting. **These questions may be taken during the meeting, when the relevant agenda item is considered, at the Chair's discretion.**

5 **Scrutiny for Policies, Adults and Health Committee Work Programme** (Pages 15 - 16)

To receive an update from the Governance Manager, Scrutiny and discuss any items for the work programme. To assist the discussion, the Committee's work programme is attached.

6 **2022/23 Budget Monitoring Report - Month 6** (Pages 17 - 28)

To consider and comment on the report.

7 **Any other urgent items of business**

The Chairman may raise any items of urgent business.

Guidance notes for the meeting

1. **Council Public Meetings**

The former regulations that enabled virtual committee meetings ended on 7 May 2021. Since then, all committee meetings need to return to face-to-face meetings. The requirement is for members of the committee and key supporting officers to attend in person, along with some provision for any public speakers. Provision will be made wherever possible for those who do not need to attend in person including the public and press who wish to view the meeting to be able to do so virtually.

2. **Inspection of Papers**

Any person wishing to inspect minutes, reports, or the background papers for any item on the agenda should contact Democratic Services at democraticserviceteam@somerset.gov.uk or telephone 01823 357628.

They can also be accessed via the council's website on www.somerset.gov.uk/agendasandpapers.

Printed agendas can also be viewed in reception at the Council offices at County Hall, Taunton TA1 4DY.

3. **Members' Code of Conduct requirements**

When considering the declaration of interests and their actions as a councillor, Members are reminded of the requirements of the Members' Code of Conduct and the underpinning Principles of Public Life: Honesty; Integrity; Selflessness; Objectivity; Accountability; Openness; Leadership. The Code of Conduct can be viewed at: [Code of Conduct](#)

4. **Minutes of the Meeting**

Details of the issues discussed, and recommendations made at the meeting will be set out in the minutes, which the Committee will be asked to approve as a correct record at its next meeting.

5. **Public Question Time**

If you wish to speak, please contact Democratic Services by 5pm 3 clear working days before the meeting. Email democraticserviceteam@somerset.gov.uk or telephone 01823 357628.

Members of public wishing to speak or ask a question will need to attend in person or if unable can submit their question or statement in writing for an officer to read out.

After entering the Council building you may be taken to a waiting room before being taken to the meeting for the relevant agenda item to ask your question. After the agenda item has finished you will be asked to leave the meeting for other members of the public to attend to speak on other items.

A slot for Public Question Time is set aside near the beginning of the meeting, after the minutes of the previous meeting have been agreed. However, questions or statements about any matter on the agenda for this meeting may be taken at the time when each matter is considered.

At the Chair's invitation you may ask questions and/or make statements or comments about any matter on the Committee's agenda – providing you have given the required notice. You may also present a petition on any matter within the Committee's remit. The length of public question time will be no more than 30 minutes in total (20 minutes for meetings other than County Council meetings).

You must direct your questions and comments through the Chair. You may not take a direct part in the debate. The Chair will decide when public participation is to finish.

If an item on the agenda is contentious, with many people wishing to attend the meeting, a representative should be nominated to present the views of a group.

An issue will not be deferred just because you cannot be present for the meeting. Remember that the amount of time you speak will be restricted, to three minutes only.

In line with the council's procedural rules, if any member of the public interrupts a meeting the Chair will warn them accordingly.

If that person continues to interrupt or disrupt proceedings the Chair can ask the Democratic Services Officer to remove them as a participant from the meeting.

Provision will be made for anybody who wishes to listen in on the meeting only to follow the meeting online.

6. **Meeting Etiquette for participants**

- Only speak when invited to do so by the Chair.
- Mute your microphone when you are not talking.
- Switch off video if you are not speaking.
- Speak clearly (if you are not using video then please state your name)

- If you're referring to a specific page, mention the page number.
- Switch off your video and microphone after you have spoken.
- There is a facility in Microsoft Teams under the ellipsis button called turn on live captions which provides subtitles on the screen.

7. **Exclusion of Press & Public**

If when considering an item on the agenda, the Committee may consider it appropriate to pass a resolution under Section 100A (4) Schedule 12A of the Local Government Act 1972 that the press and public be excluded from the meeting on the basis that if they were present during the business to be transacted there would be a likelihood of disclosure of exempt information, as defined under the terms of the Act.

If there are members of the public and press listening to the open part of the meeting, then the Democratic Services Officer will, at the appropriate time, ask Participants to leave the meeting when any exempt or confidential information is about to be discussed.

8. **Recording of meetings**

The Council supports the principles of openness and transparency. It allows filming, recording, and taking photographs at its meetings that are open to the public - providing this is done in a non-disruptive manner. Members of the public may use Facebook and Twitter or other forms of social media to report on proceedings. No filming or recording may take place when the press and public are excluded for that part of the meeting.

Please contact the Committee Administrator or Democratic Services on 01823 357628 or email democraticservicesteam@somerset.gov.uk if you have any questions or concerns.

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SCRUTINY FOR POLICIES, ADULTS AND HEALTH COMMITTEE

Minutes of a Meeting of the Scrutiny for Policies, Adults and Health Committee held in the Luttrell and Wyndham Rooms, County Hall, Taunton, TA1 4DY, on Wednesday 12 October 2022 at 10.00 am

Present: Cllr R Woods (Chair), Cllr G Oakes (Vice-Chair), Cllr H Bruce, Cllr B Ferguson, Cllr A Govier, Cllr C Lawrence, Cllr E Pearlstone, Cllr T Robbins, Cllr S Coles (substitute) and Cllr L Trimnell (substitute)

Other Members present: Cllr A Hendry, Cllr F Smith, Cllr A Dingwall, Cllr A Kendall, Cllr M Lovell, Cllr L Redman, Cllr H Shearer and Cllr M Stanton

Apologies for absence: Cllr N Cottle, Cllr D Denton and Cllr C Sully

1 **Declarations of Interest** - Agenda Item 2

There were no new declarations of interest.

2 **Minutes from the previous meeting held on 27 July 2022** - Agenda Item 3

The minutes from the meeting held on 27 July 2022 were approved subject to the following addition:-

Add to the recommendation in Agenda item 6 that the Committee asked for the decision to close Victoria Park Medical centre be reviewed in the future and that ensure the Committee is given an update on the proposed Health Hub.

3 **Public Question Time** - Agenda Item 4

There were no questions asked, statements made or petitions presented.

4 **Scrutiny for Policies, Adults and Health Committee Work Programme** - Agenda Item 5

The Committee considered and noted the Committee's current work programme and outcome tracker and the Executive's Forward Plan of planned key decisions in coming months.

The following items were suggested as additions to the Work Programme: -

- Adult Social Care Workforce
- Dental Services in Somerset needs to be revisited after assurance of new services being commissioned.

5 **Adult Social Care - Budget Report** - Agenda Item 6

The Director of Adult Social Care gave a high level presentation demonstrating the make up of the Adult Social Care (ASC) budget and how it was allocated between statutory and non-statutory spends, income sources and how the overspend is going to be managed. The Adult Social Care Budget is over half the Council's budget.

The money that is spent in Somerset on Adult Social Care is £262m per year. There is a large contribution from the NHS towards these costs of care and also many individuals receiving care and support pay something towards their costs. This means the budget the Council needs for ASC is actually £160m per year. The council also receives one-off funding from the government during the year to cover additional costs i.e. winter surges in demand.

The Council is legally obliged to meet the assessed needs of its population, the services that meet these needs are called statutory services and they make up the vast majority of the council's budget. There are 7500 people within Somerset who are in receipt of some kind of statutory service and a further 500 Somerset residents who are supported out of county.

This report covers the month 5 budget and this is showing a £13m overspend. In most years, demand and inflation growth factors, plus one-off funding, can cover any pressures. However, this year these pressures have been too unpredictable to forecast, and too large to absorb.

To address this there is a 'cost of care' exercise being undertaken with a submission to the Treasury this week. There may be some further support to cover the inflation costs but there is no guarantee of this. There is an exercise currently underway to reduce the cost of some 'double handler' costs by greater use of technology without reducing the quality and safety of support.

The Committee challenged the 'rounding' of figures for this presentation. This was done to make the presentation clear about the high level numbers and was intended to be illustrative.

The Committee discussed the presentation and asked some specific questions: - They wanted to know why there were 500 'Out of County' placements and what this covered. They were assured that this was usually at the request of the individuals; some wanted to be nearer family in a different County and many were just over the border in neighbouring counties and again that was the closest to where the individual had support or family. Only a very few were far from home and this was usually in response to a specific need. All however are visited face to face to make sure they are getting the support they want and need.

There was some concern around the possible costs should inflation reach 12% as some predict, it was acknowledged this will be a challenge and could make the provider market fragile.

The presentation demonstrated that the average spend in Somerset was low and the Committee wanted to know if that was a good thing. They were advised that when compared to the National Average it was better to be in the middle but being lower than the national level was not in itself a bad thing as each area has a different provision and Somerset's use of micro providers does keep the costs down. There is an exercise now to make sure the cost of care is right for Somerset providers as it is possibly too low at the moment.

The cost of Hospital to Home care was recorded as £40m which seemed high. It was confirmed that this covered Community Hospitals but the focus in Somerset is 'Home First' as this is where the best outcomes are achieved and sustained. There was a £1.2m shown as the cost of closing two Care Homes which seemed high. This covered the fee to move to another home, ongoing staff costs and some will be repaid.

The Somerset Scrutiny for Policies, Adults and Health Committee: -

- **Has an improved understanding of the make-up of the ASC budget, and are better equipped to scrutinise the budget and hold the Executive to account concerning the ASC financial position.**
- **The Committee can now ask informed questions concerning the areas of overspend and the plans in place to improve this position.**

6 Stroke Care in Somerset - Agenda Item 7

The Committee had a report from the Programme Director of Fit for My Future and the Programme Manager for Stroke, Neurorehab and Community Hospitals. The Clinical Services Director for Neurological Services and Consultant Stoke Physician also attended the Committee. Fit for my Future is a strategy for how we will support the health and wellbeing of the people of Somerset by changing the way we commission and deliver health and care services. It is jointly led by NHS Somerset Integrated Care Board and Somerset County Council and includes the main NHS provider organisations in the county. The stroke strategy for Somerset was drafted in 2019 and provides a direction of travel for the next five years, setting out how stroke services should operate across the pathway from prevention to living with the impacts of stroke. Many of the recommendations within this strategy have been implemented.

This report provided an update on the development of hospital based hyper acute stroke services and Transient Ischaemic Attack (TIA) services in Somerset. Rates of death following stroke have reduced by half over the past 20 years ,

but the number of people having a stroke continues to rise . The National Stroke Programme aims to deliver better prevention, treatment, and care for people in England who have a stroke each year.

The lack of stroke specialist staff nationally is impacting care for many people who have had a stroke. In the 2021 SSNAP audit of the stroke workforce in England, a number of areas of concern were identified:

- Over half the stroke units have a consultant vacancy
- Less than half of stroke units meet the minimum recommended staffing levels for senior nurses
- There are not enough people trained to undertake thrombectomy procedures
- Only 6% of hospitals have access to the right number of clinical psychologists

Addressing the workforce challenges is essential if improvements in stroke care and outcomes are to be achieved. Provision of acute stroke care is not considered optimal in Somerset.

- Demand for stroke care will increase and the specialist stroke workforce available to provide care is limited,
- The provision of acute stroke services currently does not meet National Guidance resulting in variable outcomes for patients,
- There are variations in provision of care and access to specialist services in Somerset and
- Poorer outcomes from stroke result in higher financial costs for health and care.

A significant amount of work has been undertaken by the Somerset stroke steering group (a partnership of clinicians, people with lived experience of stroke and other health and social care staff, as well as colleagues from Dorset) to design a new model for acute stroke services that meets both clinical best practice and one that is grounded in what matters most to people and delivers the best outcomes for patients. This work has been led by Dr Rob Whiting, Clinical Services Director for Neurological Services and Consultant Stroke Physician at Somerset NHS Foundation Trust.

After reviewing all options it was agreed to go to consultation on only four that met the agreed criteria. The Committee were taken through the four options set out in the report.: -

- A. Do nothing, keep a Hyper Acute Stroke Unit (HASU) and Acute Stroke Unit (ASU) in both Taunton and Yeovil
- B. Minimal change (single workforce between two main sites (Taunton and Yeovil) each having an HASU and an ASU,
- C. Single site for HASU patients and ASU in both Taunton and Yeovil,
- D. Single HASU and ASU in Taunton and nothing in Yeovil

The Committee discussed the options and asked about the impact this would have on neighbouring HASU and ASU in North Somerset, Dorset and Devon. It was confirmed that patients would always be taken to the nearest HASU and many Somerset residents are taken to Weston General, the RUH in Bath and some to Dorset. The Committee wanted to know the risks should neighbouring hospitals undertake similar reforms and close HASU's? . They were assure this was factored into the planning and most of the neighbouring areas had already undertaken this review.

The Committee wanted to know why Somerset appeared to have a higher rate of strokes (2.38) compared to national figures (1.8). this reflects the fact that Somerset has a higher than average aged population and it is more likely for older people to have a stroke.

Looking at the options the Committee wanted to know why there was not an option to have all the services in Yeovil. This was part of the longer list of options but was dismissed as it have proven historically very challenging to recruit Consultants to Yeovil Hospital.

The committed wanted to know the timescale for the consultation and were informed that it will be open to the public from thee end of November and will in in February/March 2023. The outcome will be shared with the Committee and all County Councillors are encouraged to get involved.

The Somerset Scrutiny for Policies, Adults and Health Committee made comments and observations on the proposed consultation.

7 **Treatment and Recovery Grant Substance Misuse Strategy** - Agenda Item 8

The Committee had a report from one the Public Health Consultants. The report aimed to introduce scrutiny members how the relaunched Somerset Drug And Alcohol Partnership is tackling this issue, utilising additional funding awarded to Somerset under the Supplementary Substance Misuse Treatment & Recovery Grant (SSTRG). A requirement of this grant is to develop a Somerset Substance Misuse Strategy and this paper begins to articulate the approach to be taken locally, in accordance with the national 10 year plan called 'Harm To Hope.'

Somerset County Council Public Health currently commissions an all-age drug and alcohol treatment service in Somerset, called Somerset Drug and Alcohol Service (SDAS) provided by Turning Point a national voluntary sector provider of specialist drug and alcohol services. In December 2021, Government published From harm to Hope: a 10 year drugs plan to cut crime and save lives and to support its implementation the government has allocated additional funding over a 3 year period 2022/23 to 2024/25. This supplemental funding is to support improvements in the quality and capacity of drug and alcohol

treatment and is subject to plans being submitted annually and approved nationally.

The additional funding asks local areas to deliver the following outcomes over the three years:

- To have stretch targets to increase the numbers of adults in structured treatment by 20% and young people by 50%,
- To reduce drug and alcohol related deaths and
- To improve access to treatment for individuals referred from the criminal justice system.

The Committee considered the report and discussed the possibility of having a workshop to address the challenge. Whilst that was welcomed as an option due to the tight timescales for submitting the Strategy to secure the funding it would not be possible for the first iteration. As this was an evolving strategy it was agreed that here could be one in the future. The Committee were keen to discuss this in a greater depth at it was an area where there was an underlying dependency that was not always visible as people continued to function in society.

The Somerset Scrutiny for policies Adults and health Committee: -

- **Scrutinised progress on achieving the pre-requisites against national deadlines of the national grant award,-**
- **Provided input into the draft Somerset Substance Misuse Strategy Priorities and**
- **Informed officers how the committee, would like to remain engaged with this work.**

8 Somerset Safeguarding Adults Board (SSAB) Annual Report - Agenda Item 9

The Independent Chairs of Somerset Safeguarding Adults Board introduced his Annual report. The Annual Report is presented each year to the Scrutiny Committee in the interests of promotion, transparency and accountability, as well as being shared with the Chief Executive and Lead Member of the Local Authority, the Police and Crime Commissioner and Chief Constable, Healthwatch Somerset, and the Chair of the Health and Wellbeing Board (as is legislatively required). It is also shared with NHS Somerset leads.

The Somerset Safeguarding Adults Board (SSAB) is a statutory body established by the Care Act 2014. It is made up of senior people from organisations who have a role in preventing the neglect and abuse of adults. The main objective of the Board is to seek assurance that local safeguarding arrangements and partner organisations act to help and protect people aged 18 and over who: -

- Have needs for care and support;
- Are experiencing, or at risk of, abuse, neglect or exploitation;

- Are unable to protect themselves from the risk of, or experience of, abuse or neglect as a result of their care and support needs.

SABs have 3 statutory functions: -

- To develop and publish a strategic plan setting out how it will meet its objectives and how members will contribute to these;
- To publish an annual report detailing how effective its work has been;
- To commission Safeguarding Adults Reviews (SARs) for any cases meeting the criteria for these.

The work of the Board during 2021/22 continued to be impacted by the need for member organisations to prioritise their capacity and response to the pandemic and the associated health and care system pressures arising from it. Despite the demands and capacity challenges faced by the sector, the partner organisations have shown enormous commitment to continuing to help adults in need of safeguarding support and have supported progress activity across a range of priority areas. The Board is keen to highlight the following information for Scrutiny awareness:

- Somerset has seen a declining rate of safeguarding concerns contrary to national trends, and fewer Safeguarding enquiries being undertaken as a result.
- In common with national trends, the majority of individuals involved in a safeguarding enquiry are over 65 and female.
- Somerset is proud of its commitment to 'Making Safeguarding Personal' and continues to secure valuable feedback direct from service users, carers and advocates via its safeguarding questionnaires developed in partnership with Healthwatch Somerset.

The Committee agreed that the partnership working was very good and were pleased to see number of referrals were going down but were keen to make sure that this was not due to under reporting but because of the work done over the years to address concerns early on to prevent cases needing to be reviewed. It was confirmed this was the case.

The Somerset Scrutiny for Policies, Adults and Health Committee agreed to: -

- **Continue to encourage all elected Councillors to actively support adult safeguarding across the Local Authority and Somerset's local communities and**
- **Promote awareness of the resources and support available via the SSAB website.**

9 **Any other urgent items of business** - Agenda Item 10

There were no other items of business.

(The meeting ended at 1.13 pm)

CHAIR

Scrutiny for Adults and Health Work Programme – 2022

Agenda item	Meeting Date	Details and Lead Officer
	07 December 2022 - Formal	
Stroke Consultation Adult Social Care Budget Report		Maria Heard Mel Lock
	26 th January 2023 - Formal	
Fit for My Future Adult Social Care Budget Report Suicide Prevention Strategy		Maria Heard Mel Lock Matthew Hibbert
Healthy Weston		Colin Bradbury/Helen Edelstyn
	08 March 2023 – Formal	
Fit for My Future Adult Social Care Budget Report		Maria Heard Mel Lock

ITEMS TO BE ADDED TO AGENDA:

Quality Performance reports Alison Henly /Alison Rowswell

Ambulance Service Performance

Haematology Services -Yeovil/ Phil Brice

Workforce Planning

NHS Dentistry Services

Scrutiny for Adults and Health Work Programme – 2022

Healthy Weston -Update

Musgrove Park Hospital -redevelopment – Phil Brice

update Mental Health Response times

Impact of Covid on health and care staff, oral health, Deprivation of Liberty Safeguarding (awaiting legislation)

Note: Members of the Scrutiny Committee and all other Members of Somerset County Council are invited to contribute items for inclusion in the work programme. Please contact Julia Jones, Democratic Services Team Leader, who will assist you in submitting your item. Jamie.Jackson@somerset.gov.uk 01823 355059 or the Clerk Jennie Murphy on jennie.murphy@somerset.gov.uk

Scrutiny for Policies, Adults and Health Committee _Remit

Functional areas that are the responsibility of the Committee cover personal services to individuals as follows:

- Health & Wellbeing (including Public Health Services)
- Education, Training & Skills
- Learning and Physical Disabilities
- Adult Care & Support Services
- Community Safety
- Somerset Armed Forces Community Covenant
- In addition the Committee considers any referrals made by Healthwatch.



Decision Report – Executive Decision

Forward Plan Reference: FP/22/06/17

Decision Date – 16/11/22

2022/23 Budget Monitoring Report – Month 6 – End of September

Executive Member(s): Cllr Liz Leyshon – Deputy Leader of the Council and Lead Member on Finance and Human Resources

Local Member(s) and Division: All

Lead Officer: Jason Vaughan, Director of Finance and Governance

Author: Christian Evans, Strategic Manager - Finance

Contact Details: christian.evans@somerset.gov.uk

1. Executive Summary

This is the first Adult Services budget monitoring report being submitted to the Adults & Health Services Scrutiny Committee. It is proposed to bring these reports bi monthly to the committee to note and discuss.

The Adult Services information in this report is taken from the Executive Committee month 6 budget monitoring report submitted on the 16th of November 2022.

After taking into account all service expenditure and contingencies the projected outturn position is £405.5m against a net budget of £383.3m. This gives an £21.2m adverse variance which represents a variance of 5.5%. Overall, there has been a favourable movement of £0.8m since the Month 5 position. This continues the down trend from Month 4 which was a forecast overspend of £23.9m for year. The action plan approved by the Executive in Quarter 1 is clearing having a positive impact albeit against a very challenging financial environment.

Table 1 provides a summary of budget, projections, and variances on a service-by-service basis with further detail and mitigations being taken by the responsible director outlined in the body of the report.

The significant variances are:

- Adult Services has a £12.7m adverse variance against their budget (7.9% of service budget); an improvement in position of £0.3m from month five. The improvement mainly relates to home care/supported living, as several placements within Supported Living have come to an end.
- Children's Services has a £16.8m adverse variance against their budget (15.9% of

service budget); a deterioration of £0.3m from month five. Most of this pressure is seen in the children's social care budget (external placements) which is forecasting a £12.1m overspend due to increased complexity and several very high-cost placements, as well as an increase in unregulated care placements.

- Economic & Community Infrastructure (ECI) has a £0.2m favourable variance against their budget (0.3% of service budget); a strengthening in position of £0.3m from month five. This improved position is due to some additional rental income and cost savings.
- Corporate Costs has a £3.9m favourable variance mainly due to an increase in investment income following interest rate increases.
- Corporate Contingency is a favourable variance of £3.3m after taking account of the potential additional costs of the national pay award at an average of 5.5%.

The 2022/23 Budget included over £5m of savings, income generation, and transformation savings with £1.1m achieved, £2.3m on track, £1.1m at risk, and £0.6m unachievable.

Current estimates are that the year-end position of the Capital Programme will be £148.7m against an overall budget of £174.1m, giving a £25.4m total variance. £16.1m of this variance will be reprofiled into future years with a £9.3m underspend projected.

2. Recommendations

- a) Note the Adults Services forecast overspend of £12.7m and the key risks, future issues and opportunities detailed in the report which will be closely monitored and updated throughout the year.

3. Reasons for recommendations

To ensure that the Council continues to maintain tight financial control over its budget.

4. Other options considered

No other options were considered as continuing to monitor the budget on a monthly basis is considered best practice.

5. Links to County Vision, Business Plan and Medium-Term Financial Strategy

The Medium-Term Financial Plan (MTFP) 2021-24 set the funding for the County Vision and the use of those funds is then monitored, via this report and others throughout the year to ensure delivery of Council objectives and actions within the resources available.

6. Consultations and co-production

The main report has been prepared by the Finance Team based upon the information and explanations provided by Directors. The detailed services variances, explanations and comments have been provided by the Directors and are set out below.

7. Financial and Risk Implications

Any variance at the end of the financial year will have an impact upon the level of reserves. In addition to General Reserves of £27.1m, there are Earmarked Resilience Reserves of £34.6m and further details are provided in Section 28 of the report. There is a relevant Strategic Risk ORG0057 Sustainable MTFP and its current score is:

Likelihood	5	Impact	5	Risk Score	25
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8. Legal and HR Implications

There are no specific legal implications arising from this report.

9. Other Implications:

Equalities Implications

There are no specific equalities implications arising from the contents of this report.

Community Safety Implications

There are no community safety implications arising from the contents of this report.

Sustainability Implications

There are no sustainability implications arising from this report.

Health and Safety Implications

There are no health and safety implications arising from this report.

Health and Wellbeing Implications

There are no health and wellbeing implications arising from this report.

Social Value

There are no Social Value implications arising from this report.

10. Scrutiny comments / recommendations:

This report will be presented to Scrutiny for Policies and Place Committee, on 8 November 2022; comments arising will be made available to the Executive at the subsequent meeting.

11. Background

Full Council approved the 2022/23 Budget in February 2022. Budget monitoring is

delegated to Executive and Scrutiny and revenue service reports will be presented monthly with a full overview of revenue, capital, and reserves quarterly. This report outlines the forecast year-end position of services against the current 2022/23 budget of £383.3m (the current budget includes carry forwards and reserve movements) as at the end of September 2022.

Revenue

12. Forecast Outturn Position

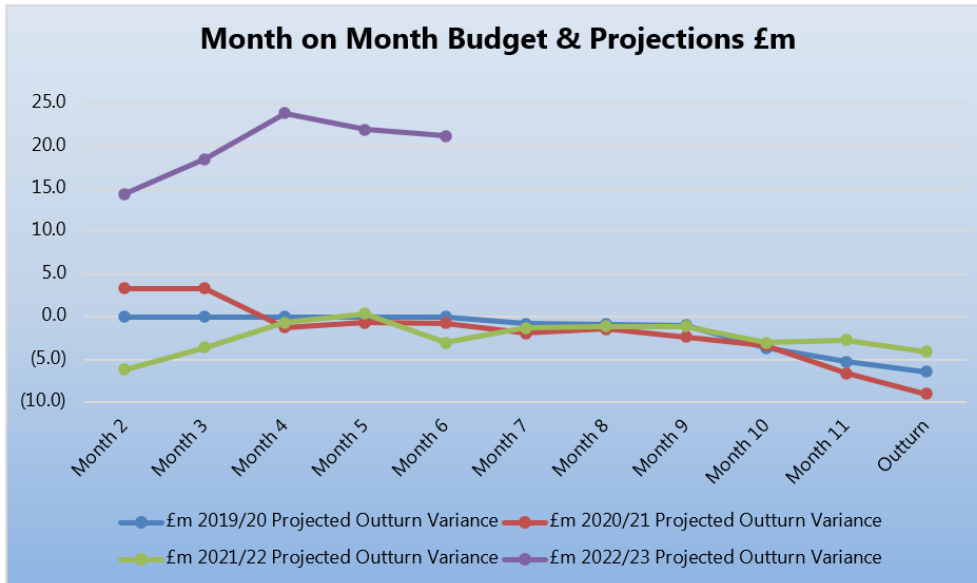
Table 1 shows the forecast outturn position against the current budget. Further information for each service is shown below, along with details on movements, actions to be taken, future risks and opportunities.

Table 1: 2022/23 Budget Monitoring Report as at the end of September 2022 (Month 6)

2021/22	Service Area	Original Budget £m	Current Budget £m	Full Year Projection £m	Month 6 Variance £m	A/(F)	Movement From Month 5	Direction From Month 5
(0.2)	Adult Services	159.7	160.0	172.7	12.7	A	(0.3)	↑
4.2	Children's Services	105.0	105.4	122.2	16.8	A	0.3	↓
0.0	Public Health	1.3	1.3	1.3	0.0	-	0.0	→
(1.7)	Economic & Community Infrastructure	71.9	74.6	74.4	(0.2)	(F)	(0.3)	↑
2.3	Direct Services Position	337.9	341.3	370.6	29.3	A	(0.3)	↑
(0.2)	Customers, Digital & Workforce	16.9	17.0	16.9	(0.1)	(F)	0.0	→
0.0	Finance and Governance	12.1	13.5	13.5	0.0	-	0.0	→
0.0	Accountable Bodies	4.3	4.4	4.4	0.0	-	0.0	→
(2.6)	Corporate Costs	1.5	1.1	(2.8)	(3.9)	(F)	(0.5)	↑
0.0	Trading Units	0.0	0.0	0.2	0.2	A	0.0	→
(0.5)	Total Service Position	372.7	377.3	402.8	25.5	A	(0.8)	↑
(3.6)	Corporate Contingency	6.0	6.0	2.7	(3.3)	(F)	0.0	→
(4.1)	Total after Contingencies	378.7	383.3	405.5	22.2	A	(0.8)	↑
0.0	Reserves	(8.3)	(12.9)	(12.9)	0.0	-	0.0	→
0.0	Council Tax	(279.9)	(279.9)	(279.9)	0.0	-	0.0	→
0.0	Business Rates	(84.1)	(84.1)	(85.1)	(1.0)	(F)	0.0	→
0.0	Revenue Support Grant	(6.4)	(6.4)	(6.4)	0.0	-	0.0	→
(4.1)	Total Month 6 Position	(0.0)	0.0	21.2	21.2	A	(0.8)	↑

Arrows show movement from the previous month:

↑ Favourable movement → No movement ↓ Adverse movement



13. Adult Services Director Mel Lock, Executive Lead Member Cllr Heather Shearer

- 2022/23 net budget £160.1m, projected adverse variance £12.7m, favourable movement £0.3m.
- 2021/22 net budget £146.2m, outturn favourable variance £0.2m.

Table 4: 2022/23 Adult Services as at the end of September 2022 (Month 6)

Service Area	Current Budget £m	Full Year Projection £m	Month 6 Variance £m	A/(F)	Movement From Month 5	Direction From Month 5
Adult Social Care - Physical Disability/Sensory Loss/65 Plus						
Residential & Nursing	40.2	46.5	6.3	A	0.2	↓
Home Care	24.8	24.3	(0.5)	(F)	0.3	↓
Direct Payments	10.7	12.0	1.3	A	(0.2)	↑
Staffing Costs	10.2	9.2	(1.0)	(F)	(0.1)	↑
Other	3.0	3.4	0.4	A	0.2	↓
sub total	88.9	95.4	6.5	A	0.4	↓
Mental Health						
Residential & Nursing	11.0	13.4	2.4	A	(0.5)	↑
Home Care/Supported Living	4.5	5.1	0.6	A	0.1	↓
Staffing/Deprivation of Liberty Safeguards	4.5	4.5	0.0	-	0.0	→
Other	1.0	1.5	0.5	A	0.1	↓
sub total	21.0	24.5	3.5	A	(0.3)	↑
Learning Disabilities						
Residential & Nursing	20.6	21.8	1.2	A	0.4	↓
Supported Living/Home Care	25.1	26.7	1.6	A	(1.1)	↑
Direct Payments/In Control	9.1	9.6	0.5	A	0.3	↓
Day Care	3.5	5.0	1.5	A	(0.1)	↑
Discovery	29.8	28.2	(1.6)	(F)	0.0	→
Other	8.2	8.6	0.4	A	(0.1)	↑
sub total	96.3	99.9	3.6	A	(0.6)	↑
Commissioning						
Commissioning	13.0	13.0	0.0	-	0.0	→
Better Care Fund	(34.7)	(34.7)	0.0	-	0.0	→
LD Pooled Budget Income	(24.4)	(25.3)	(0.9)	(F)	0.2	↓
sub total	(46.1)	(47.0)	(0.9)	(F)	0.2	↓
Adult Services Total	160.1	172.8	12.7	A	(0.3)	↑

Adult Services - key explanations, actions, & mitigating controls

Adult Social Care - Physical Disability/Sensory Loss/65 Plus

This area of Adult Social Care spend is currently projected to be £6.5m overspent. There remains a cost pressure against both Residential and Nursing placements as the need to use more beds than budgeted for continues, resulting in a projected overspend of £5.1m. We are projecting £1.2m for potential home closures across Somerset due to difficult financial stability within the current market.

There continue to be a number of interim placements as the service works with the NHS trusts to ensure a timely discharge for people from hospital. These placements are currently funded from the Intermediate Care budget but could have a longer-term impact on the social care budget as evidence shows that 48% of people going into interim beds end up going into permanent care, compared with 27% who go from our pathway bed base.

Home Care delivery has increased this month, due to an increase in capacity being created within the market. We are projecting home care to be £0.5m underspent. As we continue to offer choice and have a varied market that includes micro-providers, we are projecting overspend of £1.3m. This is mainly due to an increase in one off payments and ongoing packages due to additional demand.

Mental Health

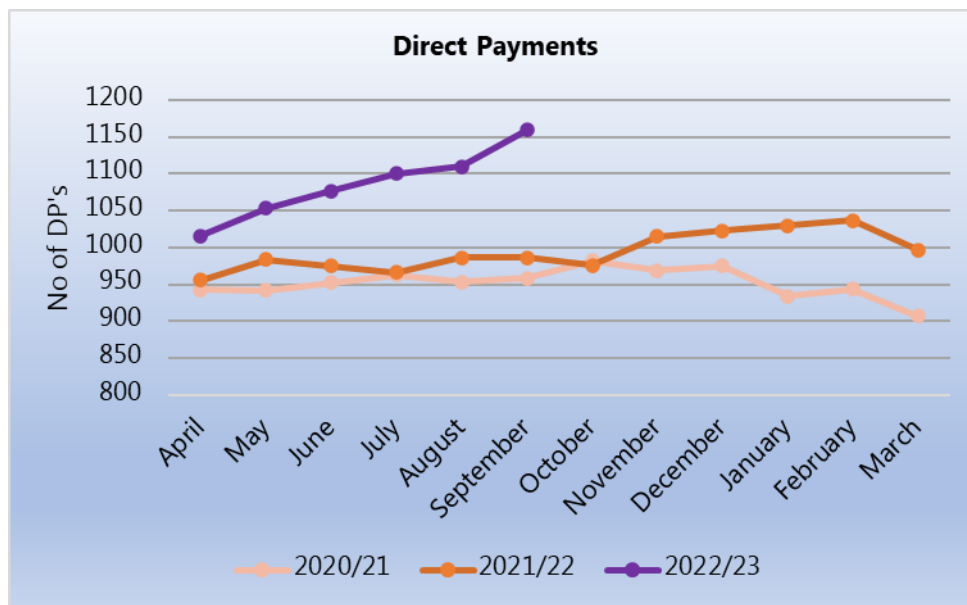
The Mental Health budget is projected to be overspent by £3.5m. Residential and nursing continues to be a pressure for the service due to a combination of increasing numbers and high unit costs. This budget includes individuals who have a diagnosis of dementia.

Learning Disabilities

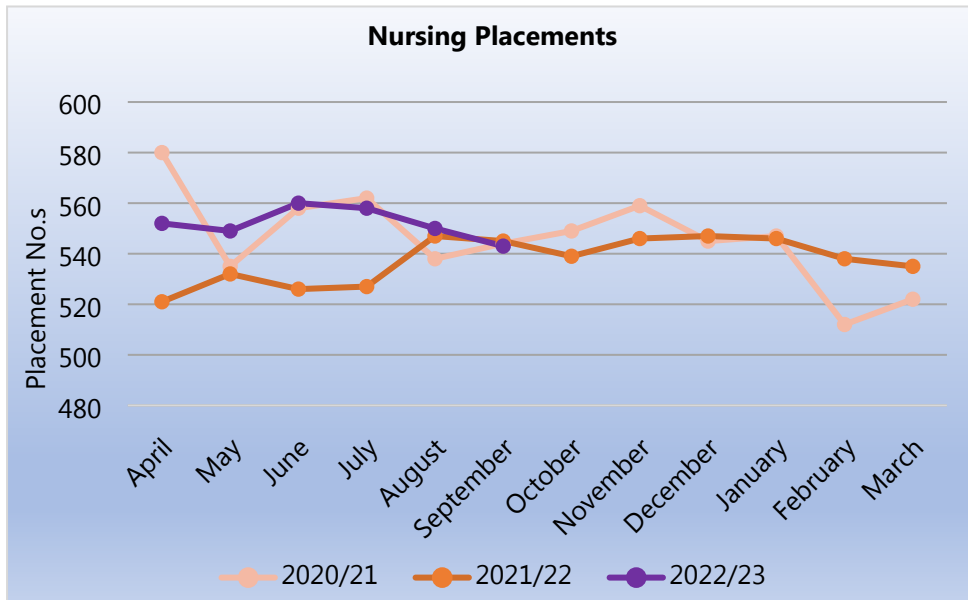
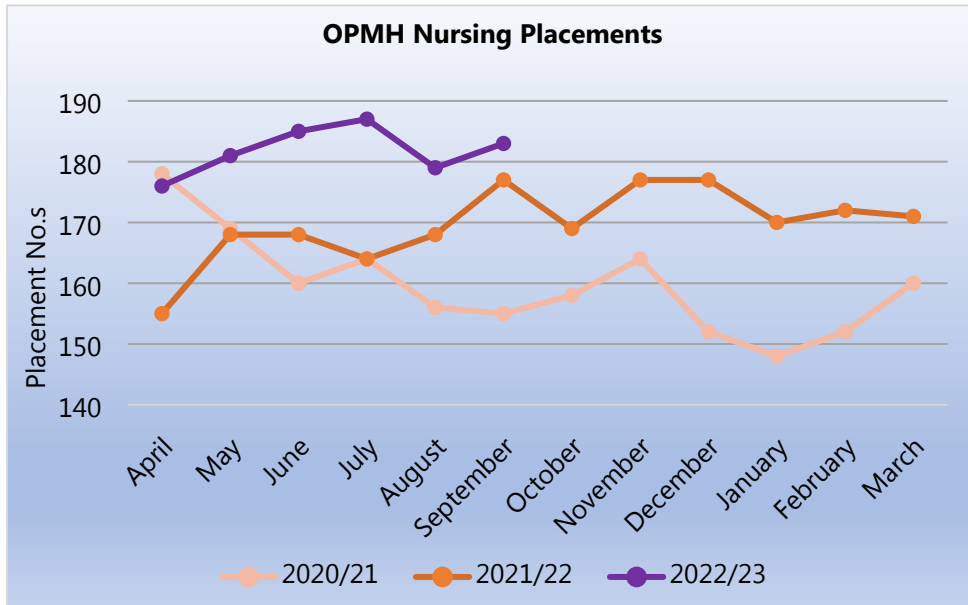
Overall, the cost of Learning Disabilities is projected to overspend by £3.6m. We are currently projecting an overspend of £1.6m within Supported Living and homecare, due to market sustainability. Supported Living is in the best interest of people but is an area where unit costs can be high, this month we have seen a number of placements within Supported Living come to an end due to a number of reasons.

As families feel more self-assured of living with Covid they feel more confident of using day services as an option for a carer’s break/respice. Consequently, we are seeing increased need and subsequent spend. Therefore, resulting in a current projected overspend of £1.5m.

Adult Services - key performance cost drivers



Since month 5, we have seen an increase in the number of people receiving a Direct Payment, with total packages increasing from 1,110 to 1,160. The currently weekly average cost of a Direct Payment is £287.73 per package, compared to £289.06 within month 5.



The number of Older People Mental Health (OPMH) Nursing placements has increased by four since month 5 from 179 to 183. The current weekly average cost for OPMH Nursing is £832 per placement, compared to £810 within month 5.

Nursing placements decreased by seven since month 5 from 550 to 543. The current weekly average cost for Nursing is £759 per placement, compared to £723 within month 5.

Adult Services - key risks, future issues & opportunities

Adult Social Care had £7.2m of one-off money last year the budget therefore came in underspend. ASC has seen significant additional funding this year, however the inflation uplift, increase in demand post covid and the increased cost of living has resulted in this projection.

90% of the ASC budget is spent on individual placements purchased through the market via block and spot placements. Therefore, there is a significant risk that this budget will continue to overspend. This is due to increase demand, the cost-of-living rise, particularly the increase in petrol, gas, electric, and food. Alongside this our neighbouring authorities, due to lack of supply in their areas, are wanting to purchase additional beds in Somerset at significantly higher cost than we currently purchase these beds. We have therefore built into this budget £5.4m amount to stabilise and have sufficiency in the market.

When we consider the market spend on supporting people to remain independent at home, we need to take into consideration the spend on Home Care and Direct Payments you will see increase in both these areas.

We have several system changes that should begin to impact on the overspend position in month 6 alongside the additional funding agreed to stabilise the market which will begin to have an impact in September.

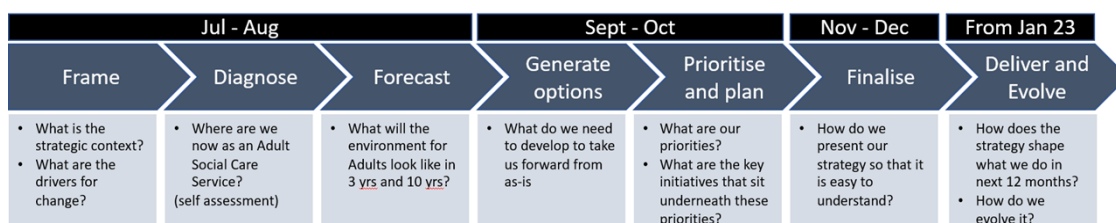
Adult Social Care Transformation Q2 Update

ASC Strategy Development:

We need to develop a refreshed Adult Social Care Strategy that is informed by

- the views and experiences of staff, service users and other key stakeholders,
- reflects the context within which we are working
- clearly sets out our key ambitions and vision for the future

We have agreed the plan and approach with SMT which will focus on the following areas:



We have identified existing strategies being delivered within the system to ensure connection, avoid duplication, and understand how all these components contribute to the wider strategy that needs to be developed.

We have worked with leaders in the service to map the strategy content. Capturing the views of all key partners in this process remains important, and a comms and engagement action plan has been drafted for October so that all our key stakeholders have a chance to influence what our revised Strategy looks like.

Co-production

In Somerset, we know that we need to make significant improvements with how we co-produce changes with people, so they have a voice in shaping our services. We are currently forming our ambition with this project.

Operational Restructure

Further options for the ASC Operational restructure are currently being developed and costed as a result of budget restrictions. A phased approach has been agreed and detailed within the Business Case and job profiles being drafted and going through job evaluation.

Assurance and Inspection Readiness

New Policy, Performance and Assurance Service Manager now in post and successfully appointed a Policy & Assurance Lead Officer

First draft of the Self-Assessment shared with SMT and is being used to inform strategy development. Liaison with North Somerset and other LA areas to share ideas and progress in relation to assurance and inspection readiness. TriX ASC Procedures contract starting 29 August 2022 – initial implementation meeting scheduled early September 2022.

A final draft of the Local Authority Assurance inspection framework was shared by CQC to support preparation activity. This is pending sign off by Secretary of State in 2023.

Liberty Protection of Safeguards

Somerset County Council has formed and submitted its response to the national consultation to the codes and practice. We are expected to hear the outcome of the consultation in by the end of 2022.

Charging Reform

The Government issued their response to the consultation on the operational guidance for implementing reforms. There is greater clarification on many points of detail, and a delay for the ability of self-funders already in residential care to request placements at Local Authority rates.

We have also received the detailed technical specification for the care cost

calculator. This will enable us to begin to plan the implementation of the software and business processes that will support the cap on care costs.

The cost of care exercise concluded in August with over 30% of home care providers contributing which is a great result and in line with national expectations. This information will contribute to a Market Sustainability Plan that will be submitted to DHSE in October.

The team has also been busy looking at different self-assessment tools available that will form part of our solution to managing the additional demand that reforms will bring. Consultation is now open concerning the options for government distribution of funding to support implementation of the charging reforms. Business case and non-key decision paper draft to support the award for the financial self-assessment tool.

Homecare Recommissioning

We have identified a number of challenges and opportunities with our Homecare market, and with the contract due for renewal from April 2024, we are taking the opportunity to revisit our model and what we commission. This project will look to understand and deal with the current challenge this section of the market faces, whilst looking to transform the model in the future.

PAMMS

This project is working on embedding a regional market management toolkit to support the coordinate measurement of quality, spend and activity within commissioned services at the request of SW ADASS. We are piloting the QA module with volunteer care providers from September 2022, with weekly regional project meetings to monitor implementation.

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