

FINANCE AND PERFORMANCE MID YEAR UPDATE

Report of the Director of Integrated Adult Social Care, Devon County Council

Please note that the following recommendations are subject to consideration and determination by the Committee before taking effect.

1) Recommendation

That the Health and Adult Care Scrutiny Committee

- a) note this report to support its scrutiny of adult social care performance in Devon County Council and to understand progress towards delivering performance targets within the budget allocated to it.
- b) considers reviewing its work programme for the remainder of 2023-24 and prioritises those areas that are reflected within the risks highlighted in this report.

2) Background / Introduction

- 2.1 To provide a mid-year update on the finance and performance of Integrated Adult Social Care and highlight the key risks facing the Directorate.

3) Main body

3.1 Key risks in Adult Social Care

- 3.1.1 The Health and Adult Care Scrutiny Committee has regular sight of the [Integrated Adults Social Care Risk Register](#), and has considered it when developing its work programme.
- 3.1.2 Highlighted below are six of our key risks that require a sufficient adult social care workforce, both within the local authority and within the independent provider care market to minimise the likelihood of becoming manifest:
 - Failure of the Authority to meet its statutory obligations under The Deprivation of Liberty Safeguards

- Challenge in recruiting appropriately qualified adult social care professionals to the in-house workforce
- The council fails to meet its Care Act market sufficiency duty for personal care
- The council fails to meet its Care Act market sufficiency duty for care home places for people with dementia and complex care needs
- The council fails to meet its Care Act market sufficiency duty for care homes
- Safeguarding Adults at Risk with Care and support needs

3.2 National Workforce Context

- 3.2.1 Care England in its latest report [Care for Our Future](#) published in September states that 'despite countless attempts at investment and reform over recent years, the adult social care sector is in an extremely precarious state'.
- 3.2.2 The report points to longstanding underfunding of local authorities making delivery of their statutory duties increasingly difficult. The report also makes reference to the Health and Social Care Committee's description of the severe and sustained crisis in the adult social care workforce as 'the worst in [its] history.'
- 3.2.3 There has been a dramatically reduced national focus and spotlight on adult social care since the pausing and the eventual abandoning of charging reform.
- 3.2.4 Skills for Care in its' [State of the adult social care sector and workforce](#), published in October highlight today's adult social care workforce challenges as '*not enough people working in adult social care overall, too many people leaving the sector and too many people churning in the sector which disrupts continuity of care and support and uses precious resources*'
- 3.2.5 The report identifies five factors that are key to retaining staff: Being paid more than the minimum wage, not being on a zero-hours contract, being able to work full-time, being able to access training, and having a relevant qualification. Staff turnover where none of these apply is more than twice what it is where all five do.
- 3.2.6 This is the context to the pending introduction of the CQC Inspection Framework of local authorities Care Act duties. The Local Government Association has indicated (based on the Ofsted intervention framework that is the same as the CQC Inspection intervention framework) that the impact of an unfavourable CQC rating for an average sized local authority, could be £30M and take 4 years to recover from.

3.4 Devon Workforce Context

- 3.4.1 The Skills for Care [State of Care report](#) states:

- The number of posts in Devon has decreased marginally against the national trend but the number of filled posts has increased to 27,000 driven by international recruitment.
- The proportions of the workforce that are full-time and that are on zero-hours contracts are stable, with the latter less than is typical regionally and nationally.
- Turnover in the care workforce in Devon has reduced from 39% to 33.2% but remains above the national and regional averages.
- The vacancy rate has also improved from 9.7% to 9.1%; if in line with regional and national trends this year this will have fallen further still.
- Sickness has reduced significantly from 7.4 days per year to 4.8 days, now well below the national and regional averages and at pre-pandemic levels.
- The gender balance and average age of the workforce in Devon is stable and similar to national and regional levels but the proportion that is non-white has grown significantly.
- Real terms hourly pay in Devon has reduced in the last two years due to the cost of living increasing faster than wage rises; care worker pay is now less than the regional average and only just above the national average despite fee levels increasing more rapidly than is typical.

3.4.2 Further analysis of the Devon context and overall comparative performance within the ASCOF, will be provided within our Annual Report in the form of our Self Assessment for CQC Inspection that will be presented to the Health and Adult Care Scrutiny Committee in the New Year.

3.5 Integrated Adult Social Care Month 4 Position

Service	Revised Budget for year £000	Underlying outturn £000	In-year Management Action o/s £000	Budgeted Savings Plans o/s £000	Net Outturn £000	Outturn variance £000	Analysis of outturn variance	
							Total Forecast Savings Plans £000	Underlying outturn variance £000
Older People	119,934	124,659	0	(1,658)	123,001	3,067	(3,074)	6,141
Physical Disability	23,128	24,769	0	(1,386)	23,383	255	(1,765)	2,020
Learning Disability (incl Autistic Spectrum Conditions)	110,944	121,498	0	(7,824)	113,674	2,730	(9,418)	12,148
Central & Care Management and Support (Localities)	29,216	29,764	(718)	(263)	28,783	(433)	(745)	312
Other (incl Rapid Response / SCR / Safeguarding and WD)	28,695	22,477	0	0	22,477	(6,218)	(9,500)	3,282
In House (Older People & Learning Disability)	8,886	9,101	0	(86)	9,015	129	(86)	215
Total Integrated Adult Care Operations excl net nils	320,803	332,268	(718)	(11,217)	320,333	(470)	(24,588)	24,118
Adult Commissioning & Health	8,093	10,852	0	(690)	10,162	2,069	(1,088)	3,157
Mental Health	20,733	21,699	0	(410)	21,289	556	(642)	1,198
Total Integrated Adult Care excl net nils	349,629	364,819	(718)	(12,317)	351,784	2,155	(26,318)	28,473
							Total	2,155

3.5.1 Integrated Adult Social Care services are forecast to overspend by £2.2 million. There are many uncertainties in projecting costs at this stage in the year. The forecast overspend is the result of risk around delivery of planned savings.

- 3.5.2 The reported position assumes that £26.3 million of savings are achieved against the budgeted target of £30.6 million. Of this £14 million are deemed delivered in that actions have already been taken to secure them. Actions are underway to develop alternative savings strategies in order to bring spending in line with budget.
- 3.5.3 Integrated Adult Social Care Operations is forecasting an underspend of just under £500,000. Older People services continue to experience pressures with increasing personal care costs as a result of improved personal care market sufficiency and backlog reductions. There continues to be a mix of price and volume variances against budget levels.
- 3.5.4 At month 4 we have also seen an increase in care home placements. Ongoing work to understand the wider impact of this change, including potential reductions to spend in other areas, will be reported in future months.
- 3.5.5 Integrated Adult Social Care Commissioning is forecast to overspend by £2.6 million, predominantly the result of non-delivery of savings plans.
- 3.5.6 The Better Care Fund (BCF) programme supports local systems to deliver the integration of health and social care in a way that supports person-centred care, sustainability and better outcomes for people and carers. It is a pooled budget between Devon County Council and Devon Integrated Care Board.
- 3.5.7 There is currently an identified risk of overspending by £5.1 million associated with the BCF. Work is underway to mitigate and reduce this risk, but should it materialise the agreement that underpins the pooled budget arrangements mean that the Authority would be responsible for funding 50% of any end of year deficit. This risk is not reflected within the current forecast.
- 3.5.8 A verbal update on the month 6 position for Integrated Adult Social Care can be provided at the Health and Adult Care Scrutiny Committee on 9 November following the Cabinet meeting on the 8 November.

3.6 Update on activity

- 3.6.1 As of 31 July 2023:
- We were supporting 11,076 people, a net increase of 116 or 1.1% compared to the same period in 2022.
 - We have seen a reduction of 80 or (1.3%) in the working aged adult cohort, which may be reflecting increased review activity.
 - However, we are now supporting 196 or 3.2% more older people than at 31 July 2022.
 - Net growth (from June) of 39 placements, 43 for people 65 and over in residential and nursing care
- 3.6.2 Operational teams are under pressure. Significant increases in safeguarding activity, particularly safeguarding concerns, has impacted care management capacity resulting in longer wait times for assessments. We continue to see an upward trend in the

number of concerns raised, all of which need investigating to see if they meet the s42(2) enquiry threshold.

- 3.6.3 Our waiting list for those to receive a Deprivation of Liberty assessment is currently at 3200, and there are around 2400 people waiting at various stages with their care journey, with additional 3500 people waiting for their annual care review.
- 3.6.4 We are supporting more people with commissioned adult social care services. The vast majority of people are being supported in their homes, but we are seeing a rise in the number of older people receiving residential and nursing care.
- 3.6.5 Despite the challenges, we are seeing incredible work taking place every day. Locally we are starting to move away from a pandemic led approach where services have been provided to individuals as if in an emergency response. Led by a refresh of our [Promoting Independence vision and strategies](#) we are making progress, but this will take time to embed.
- 3.6.6 There has been significant partnership working with the independent care market that has dramatically improved the sufficiency and availability of personal care, resulting in fewer people waiting for care.
- 3.6.7 Since this time last year we have seen a 93% reduction in the number of care hours that are waiting to be arranged. This means more people are receiving their preferred care, and less people receiving less optimal care such as a short-term care home placement, or additional and unnecessary time in hospital.
- 3.6.8 We have a number of workforce related programmes including supporting the independent provider market with international recruitment, and also a 'grow your own' programme to develop and train social workers and occupational therapists.
- 3.6.9 The challenge of managing waiting lists has been recognised and action is being taken. Our targeted review programme is starting to impact, with more people with existing care need being supported into increased independence and to access the most effective types and amounts of care and support. There is more to do.
- 3.6.10 Our PATH (Planning Alternative Tomorrow with Hope) model for some working age adults promotes the person's goals and aspirations. During the Peer Challenge, Peers highlighted the opportunity to roll out the PATH approach, piloted for people aged 18-64, to people aged over-65, so that older adults can be supported to live their best lives in their communities, especially as the model has been so successful.
- 3.6.11 A Practice Quality Assurance Group started in June 2023 reporting to the Assurance Board. It will develop a new Practice Quality Assurance framework, standards and auditing tool, including for our Safeguarding activity.
- 3.6.12 As of 1 September 2023, in Devon 86.9% of residential care homes in Devon are rated Good or Outstanding, compared to the national average of 79.3% and the regional average of 84.6%.

3.6.13 As of 1 September 2023, in Devon 80.0% of community-based services are rated Good or Outstanding by the Care Quality Commission, compared to the national average of 64.1% and the regional average of 75.4%.

4) Options / Alternatives

N/A

5) Consultations / Representations / Technical Data

N/A

6) Strategic Plan

- Improve health and wellbeing, including any public health impacts
- Help communities be safe, connected and resilient

7) Financial Considerations

N/A

8) Legal Considerations

N/A

9) Environmental Impact Considerations (Including Climate Change, Sustainability and Socio-economic)

N/A

10) Equality Considerations

N/A

11) Risk Management Considerations

Related risks appear within the IASC Risk Register

12) Summary

That the Health and Adult Care Scrutiny Committee receives this report to support its scrutiny of adult social care performance in Devon County Council and to understand progress towards delivering performance targets within the budget allocated to it

That the Health and Adult Care Scrutiny Committee considers reviewing its work programme for the remainder of 2023-24 and prioritises those areas that are reflected within the risks highlighted in this report.

Name Tandra Forster Director of Integrated Adult Social Care

Electoral Divisions: All

Cabinet Member for Integrated Adult Social Care and Health: Councillor James McInnes

Local Government Act 1972: List of background papers

Background Paper

Date

File Reference

Contact for enquiries:

Name: James Martin

Telephone: 01392 383000

Address: Room G38 County Hall, Topsham Rd, Exeter EX2 4QD