

REPORT TO SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

17TH NOVEMBER, 2016

DEMAND AND BUDGET - OLDER PEOPLE'S SERVICES

Introduction

The biggest pressure on the departmental budget to manage is the growth in the number of older people in the county combined with increasing complexity of need for the very frail and elderly. If unmanaged this leads to both growing numbers of service users and an increase in the size of packages each individual has. When allied with the growing costs for providers because of increased costs (minimum wage) and ever growing expectations on standards through regulation this produces a potentially disastrous budget profile for all councils. We have been successful in the last two years in ending the constant increase in numbers receiving formal care and beginning to reduce spend. This paper sets out our progress so far and details actions to maintain the current trajectory:

Note - The overall calculation of the impact on the budget of demand is informed by 'daffodil' the budget project system for social care and the actions for further savings by the latest research of what works - in particular 'John Bolton's predicting and managing demand in social care (April 2016) and Opportunities and threats for further savings in adult social care (Feb 2016).

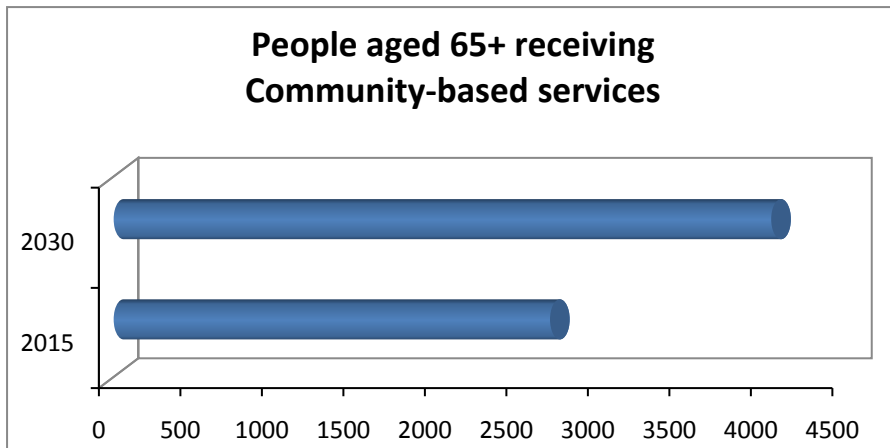
Growing Numbers of Older people:

The population in Carmarthenshire is increasing and people are living longer. Today, 28% of the adult population is over the age of 65, and by 2030 the proportion of older adults will increase to 34%. Carmarthenshire has more older people than the average for Wales.

We anticipate there will be ten-thousand more people over age 75, an increase of 58%, which will bring the proportion of people aged 75+ to 1 in every 6 adults by 2030.

Nearly four-thousand of these people will be in the 85+ age group.

This increasingly older population will present challenges in meeting the future demand for social services. Between now and 2030, in Carmarthenshire there will be:



1350 more older people who will require community-based services, an increase of at least one-half. This equates to 3% growth annually.

1500 more people living with dementia, an increase of approximately one-half.

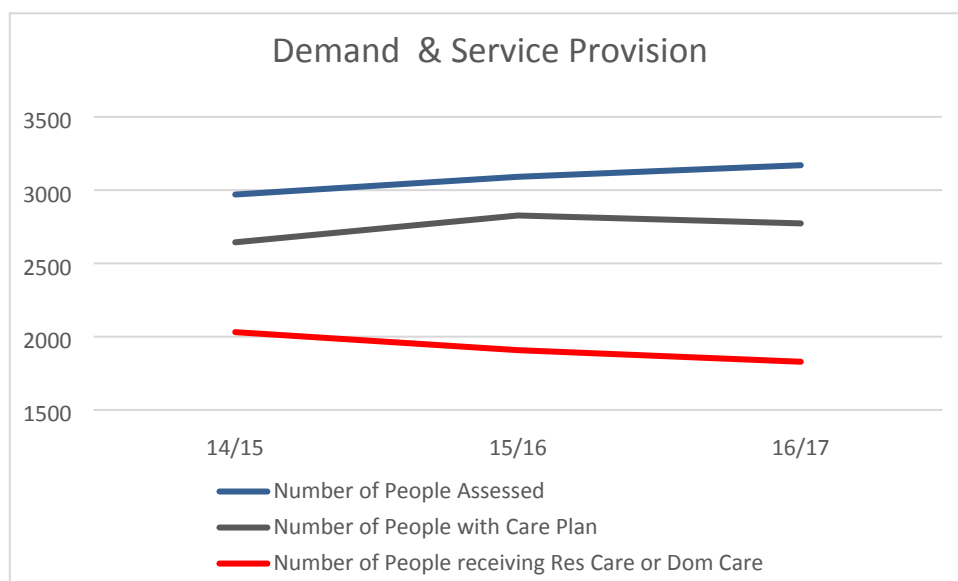
5000 more people living with a limiting long-term illness, an increase of one-third.

Demand on Community Resource Teams:

Over the last 3 years since 2014/15:

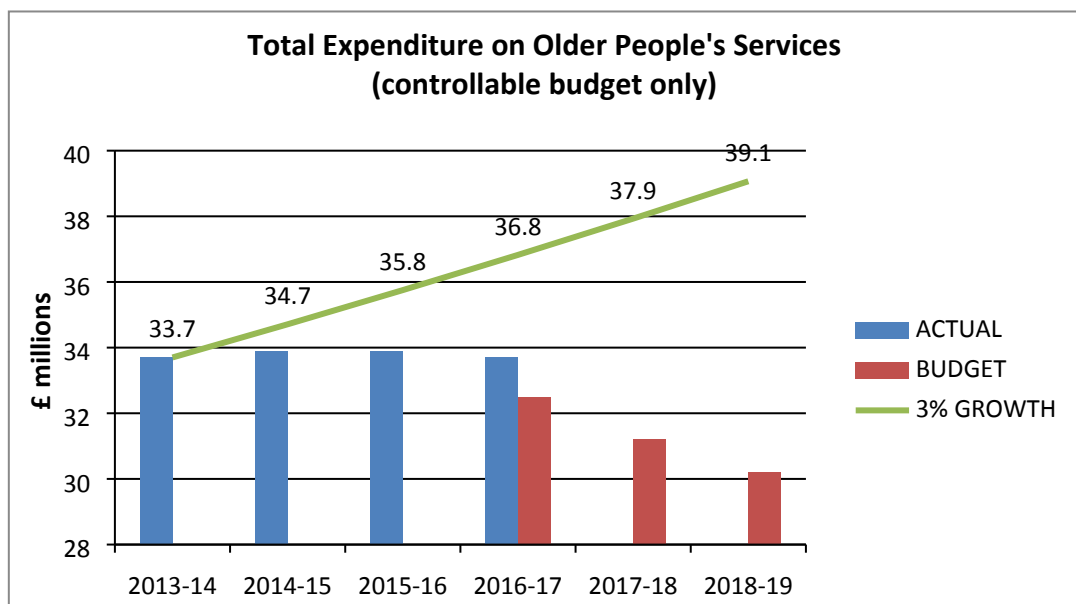
- The number of individual clients assessed by CRTs has increased by 7%
- The number of individuals with a care plan has increased by 5%
- However because of key actions the number of people receiving formal care has reduced.

These points are illustrated in the graph below:



- The number of enquiries resulting in an individual care and support plan is 52%
- 40% of referrals were diverted away from formal care
- 7% of referrals received an assessment but were not eligible or had their needs met without formal care services

The green line on the graph below shows what the expenditure would have been, factoring in 3% growth per annum, if there had been no changes delivered to manage the costs of meeting the growing demand:



Residential Care:

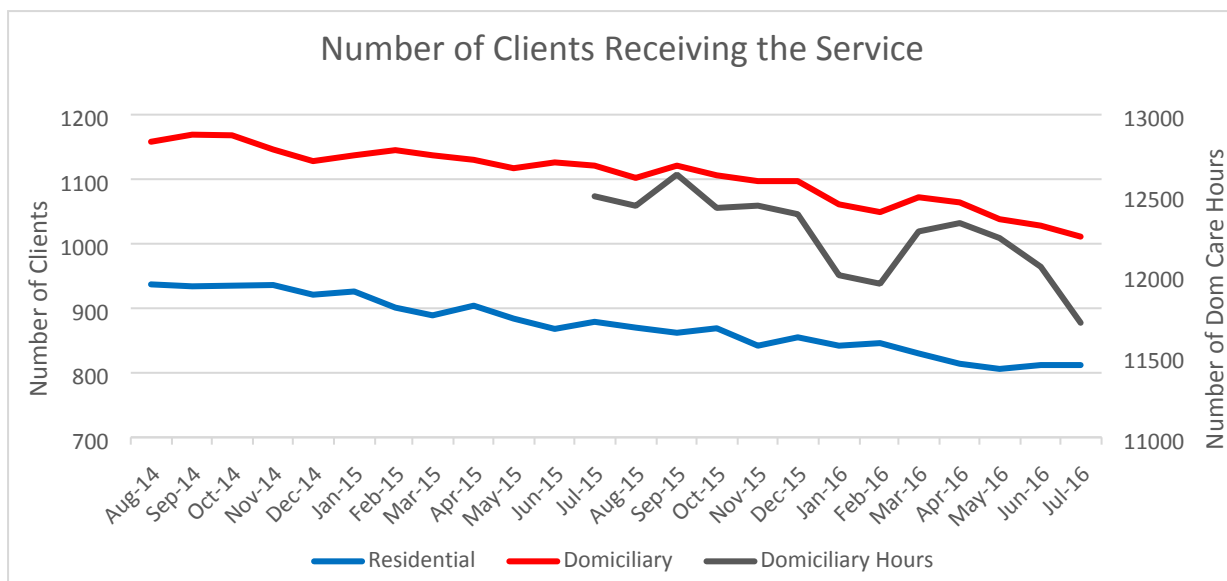
The number of people in care homes has reduced by 14% (135 fewer people) over the last 2 years. Carmarthenshire care home rates are low in comparison to the rest of Wales and to avoid the potential for legal challenge it is likely that rates will have to increase ahead of inflation to support the implementation of the 'living' wage.

Domiciliary Care:

The number of people receiving domiciliary care has also reduced by almost 14% (158 fewer people) over the last 2 years.

In terms of hours of care delivered, there has been a reduction of 784 hours per week since the new Domiciliary Framework was implemented in July 2015. This equates to nearly 41,000 hours less, projected for 12 months.

Note: Hours prior to July 2015 were calculated in a different way, under the previous Framework.



The level of cashable savings have been reduced because the costs of purchasing care has risen above inflation to account for the impact of the 'living wage' and the requirement to improve general conditions for domiciliary care workers by paying travel time.

How are we planning to manage the growing demand against a reducing budget?

Two actions underpin all the specific activity to reduce spend:

- **Performance management** – gatekeeping, holding managers to account, monitoring and challenging decisions will be central to controlling resource allocation
- **Cultural** - Embedding an understanding that packages that exceed the need do not assist an older person's independence. They increase the rate of an individual's deterioration and reduce the prospect of older people returning to independent living. What is often given through kindness can do harm.

Specific budget actions:

1. Residential Care

The rate of admissions into care homes in Carmarthenshire compares well to external benchmarks. It should be borne in mind that large packages of home care can be considerably more expensive than residential care. Therefore, we plan to continue to hold steady the rate of admission into long term residential care.

- a) Additional income of £50K over 2 years is expected from additional beds in local authority care homes.
- b) We plan to make more effective use of Intermediate Care Funding to support the joint commissioning of intermediate care beds in local authority care homes, saving £200K by 2017.

2. Domiciliary Care

As domiciliary care accounts for nearly £12.7 million of the total budget, there are several areas that we intend to deliver further savings:

- a) Reducing the number of people receiving double handed care, as part of the Releasing Time 2 Care project roll out. Currently 317 people receive double handed care, a reduction of 21 people since the end of last year. It is planned to reduce by 105 more people over 3 years, to match the best performing authorities' performance, saving £1.1m.
- b) Reducing the number of people receiving small packages of care, by providing alternative support such as assistive technology and informal community support. Currently 199 people receive small packages of care and it is planned to halve this number to 100 by 2020, saving £155K.
- c) Reducing the number of people receiving "4 calls per day" and re-providing "3 calls per day" packages. Currently there are 125 people receiving 4 calls per day and it is planned to reduce this number by 30 people by 2019, saving £115K.
- d) Re-aligning service resources to demand for night care in the community and extra care, saving £200K over the next 2 years.

3. Reablement

The Reablement service is undergoing review to ensure that it delivers the best possible outcomes for individuals, enabling them to regain or maximise their independence. This will be a 3-year programme to progressively increase the proportion of service users discharged without a long-term service, to match the best performing Reablement services. This will deliver savings of £308K by 2020.

4. Information, Advice & Assistance

It is anticipated that the IAA service currently being set up will reduce the proportion of enquiries that result in commissioned care, by diverting people to alternative ways of meeting their care and support needs, such as community 3rd sector services, assistive technology and information and advice on dealing with their own difficulties. Currently 50% of enquiries result in commissioned care, and it is planned to reduce this by 5% per annum, saving £372K by 2020.

5. Extra Care

By reviewing and promoting reablement interventions to reduce levels of dependency, it is proposed to reduce the budget for Cartref Cynnes and Ty Dyffryn. This will deliver savings of £50K in 2017.

These actions will deliver savings and will also require huge effort over and above to prevent new entries into the system as the number of very elderly people grow.