

Beyond Caring? : The South And The Collapse Of Adult Care?



BBC South

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Southern Policy Centre

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1. Introduction: A Critical Next Five Years

Adult care has never been higher in the concerns of the South's decision-makers: The number of adults over 75 and in need of care in the South is growing. Hampshire, for example, has predicted the total number of people in its geography over 75 will double by 2025.¹ Those with learning disabilities and mental ill health show no sign of declining either. The coming five years will be critical in determining how the South's older and vulnerable adults will fare. On current trajectories the face of adult social care will have profoundly changed shape in that time. And will be as different over a ten year period to 2020 as could be conceived.

Indeed, as the General Election campaign began in earnest the new Care Act ²came into effect requiring local authorities and others to work in fresh ways to meet needs.

At the heart of that Act is a commitment to cap the fees that adults pay for their care to £72,000. Additional funds are promised from central government to underpin that commitment but with headline spending already under radical pressure across the South the region's council leaders all have concerns as to the ongoing feasibility of meeting the wide range of demands in adult social care now upon them. Even where their plans are well advanced, or as creative as resource constraints allow, the risks are recognised.³

The Southern Policy Centre⁴ – an independent policy institute, educational charity and research forum - has an emerging programme of work focused on adult social and health care. Commissioned by BBC South we set out to gain a snapshot as to how the South's councils are coping with the changing trends in their local communities. And to assess how the local choices they are making about budget priorities with regard to adult social care are shaping the experience and hopes, current reality and future prospects for older adults with care needs.

2. Our Three Main Findings Summarised:

¹ www3.hants.gov.uk/housing_provision_for_older_people_nov_2009.pdf

² <http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>

³ From a reading of all council budget books and media comment by council leaders.

⁴ www.southernpolicycentre.co.uk

Our three main findings are:

- (i) *That while some councils have been able to maintain headline – or close to headline - spend in adult social care the total number of clients being supported has collapsed when benchmarked across a five year period.*
- (ii) *That all councils face huge pressures but that some face particular challenges because reductions as a percentage of their central government grants are greater than those experienced by surrounding authorities. Southampton, for example, has experienced reductions of 130% , and the Isle of Wight 140% , as a percentage of its central government grant compared to, for example, 21% in Hart and 2 to 3% in Wokingham and Guildford. This means that adult social care as a proportion of budgets is both set to rise and come under further pressure.*

Some councils, such as Bournemouth, are predicting distinctive local challenges as the combination of high numbers of older adults beginning to need care combines with those currently funding their own care running out of funds and having to turn to the council. By 2025 the number of adults needing social care in Bournemouth will have doubled.

- (iii) *That there is a rapidly increasing trend to focus on restricting access to services by :*
 - (a) *focusing afresh on charging for services*
 - (b) *by the tight use of means testing and*
 - (c) *by the reduction of provision for under 65's or where there is no statutory requirement to help.*

3. Main Finding (i): Expenditure Under Pressure But Client Numbers Collapse

Working with data from the National Adult Social Care Intelligence Service⁵ the SPC set out to determine how spending in the South's councils had – if at all – changed in total. Data from this source is usually of a high quality because it draws on council operating systems as well as other sources.

We then looked at how this spend had impacted the total number of clients who had been supported at a time of increasing needs.

3.1 Gross expenditure on adult social services in selected local authorities 2009/10 to 2013/14: Real terms 2013/14 prices (£millions)

	2009/10	2010/11	2011/12	2012/13	2013/14
Bournemouth	65.8	72.6	69.3	69.6	66.4

⁵ Quality of data from this government central intelligence point is of a very high quality drawing not only on figures submitted in statutory returns but also on the operating systems of councils themselves.

Bracknell Forest	30.7	28.7	35.4	33.8	36.5
Dorset	146.6	150.8	147.1	145.0	137.5
Hampshire	360.4	363.0	383.7	381.3	381.9
Isle of Wight	57.1	60.2	52.4	55.2	54.7
Oxfordshire	195.1	193.9	196.3	200.8	212.3
Poole	46.3	48.8	47.6	47.5	47.3
Portsmouth	60.7	60.6	61.7	61.9	59.3
Reading	60.0	55.6	58.2	55.5	51.4
Slough	41.9	41.5	38.5	38.0	44.3
Southampton	76.8	76.3	77.1	77.0	77.1
Swindon	58.4	57.7	61.5	65.1	62.5
West Berkshire	51.7	50.2	52.9	50.3	48.3
West Sussex	252.5	256.4	226.3	230.1	252.2
Wiltshire	146.6	n/a	148.0	150.1	151.7
Windsor & Maidenhead	42.4	42.1	39.6	38.9	39.2
Wokingham	47.8	48.0	46.4	47.0	44.7

Sources: NHS HSCIC National Adult Social Care Information Service and HMT GDP Deflator consistent with December 2014 Autumn Statement

3.2 Number of clients receiving adult social services in selected local authorities 2009/10 to 2013/14

	2009/10	2010/11	2011/12	2012/13	2013/14
Bournemouth	6,265	4,810	5,290	5,100	3,685
Bracknell Forest	3,655	3,295	2,565	2,465	2,230
Dorset	13,255	12,930	13,780	10,780	6,525
Hampshire	45,510	44,445	39,325	26,355	25,830
Isle of Wight	4,580	4,270	4,040	4,220	3,995
Oxfordshire	17,545	12,690	7,950	7,410	9,070
Poole	7,020	4,995	3,940	4,065	3,705
Portsmouth	6,815	6,190	6,355	5,775	5,755
Reading	4,615	4,200	3,955	3,340	4,180

Slough	3,490	3,050	2,570	2,240	1,840
Southampton	9,850	10,160	10,200	9,300	8,725
Swindon	6,170	5,990	5,830	5,380	5,375
West Berkshire	4,890	4,895	4,615	3,575	3,430
West Sussex	22,025	24,460	19,295	15,830	13,150
Wiltshire	16,670	15,560	12,880	12,335	12,595
Windsor & Maidenhead	4,540	3,965	3,170	2,845	2,770
Wokingham	3,150	3,030	2,550	2,420	2,425

Source: NHS HSCIC National Adult Social Care Information Service

4. Main Finding (ii) Enormous Overall Pressures And Where You Live Really Matters: Adult Care In The South

Councils have statutory duties with regard to adult care. Recognising the intensity of needs in some localities many have traditionally provided services to vulnerable adults which go beyond statutory requirements such as those under 65, at risk of domestic violence or facing drug and alcohol misuse challenges. The number of people aged over 75 is high and increasing in the South. ⁶

The combined pressure of reducing central government support and increasing needs is putting sustained pressure on councils as their overall funding is significantly reduced.

⁶ Estimated mid-term population statistics for each local authority in 2013

In South East of England in 2013:

Total Number of over 75= 749, 692.

Total Population= 8,792,626

	Over 75s	Total Population
Bournemouth	17,420	188,730
Bracknell Forest	7,018	116,567
Dorset	54,020	416,720
Hampshire	122,955	1,337,730
Isle of Wight	16,117	138,993
Oxfordshire	42,380	666,082
Poole	15,940	149,010
Portsmouth	13,728	207,460
Reading	8,998	159,247
Slough	6,257	143,024
Southampton	15,427	242,141

With regard to adult social care a new national *Better Care Fund*, announced in June 2013, is in place this year representing a top slicing of £3.8 billion nationally from the NHS budget to help support local improvements in adult social care.⁷ Using such funds, and pooling existing funds with new public health monies transferred to local authorities, has allowed some councils to defer some reductions in services.⁸

But, for example in Oxfordshire, *Better Care* unlocks **£19 million** in new money causing the county council still to have to plan to reduce its spend on adult social care by a further **£13,940,000** across two years. And this is despite the fact that according to the council a ‘*significant proportion of Oxfordshire residents fund their own care costs*’.⁹

West Sussex is budgeting to reduce its spend on adult care by **£13, 575,000** over the coming two years.

Highly varying approaches to the use of reserves, internal charging, external charging, pooling of budgets across local authorities and health mean that there is no ‘single’ trajectory of ‘cuts’ in our region though. Which makes the emerging trend to focus on ending non statutory support and enhance charging in many areas significant.

Swindon	14,261	214,037
West Berkshire	10,677	154,486
West Sussex	87,608	821,356
Wiltshire	42,739	479,634
Windsor and Maidenhead	12,202	146,335
Wokingham	11,710	157,866

Sources:

<https://www.dorsetforyou.com/article/344766/Population-data-for-Poole>

<http://www3.hants.gov.uk/factsandfigures/population-statistics/pop-estimates/ons-mid-year-est.htm>

<http://www.ons.gov.uk/ons/publications/re-reference-tables.html?edition=tcn%3A77-322718>

<http://jsna.westsussex.gov.uk/jsna-Core-dataset>

5: Main Finding (iii) Charging For Services And Ending Non-Statutory Support: An Emerging Trend Set To Increase

In Bournemouth a higher than average weight of need with regard to older people has been managed by a successful pooling of adult social care budgets with Poole and Dorset. This pooling arrangement has thus far worked in Bournemouth’s favour but over the coming years will even out and in due course Bournemouth will become a net contributor to the shared fund. The council predicts that this moment, combined with an increase in the number of those no longer able to pay

⁷ <http://www.england.nhs.uk/ourwork/part-rel/transformation-fund/bcf-plan/>

⁸ Poole, Dorset and Bournemouth being a case in point.

⁹ Oxfordshire CC Budget Book 2015.

for their own care, will lead to fresh pressures. Indeed by 2025 the number of adults needing social care in Bournemouth will have doubled.

This will create fresh and intense revenue pressures.

It is already notable however how in many council areas there is a powerful trend to respond to such demands **by tightening up on charging policy, seeking fees, and reducing at speed those services that councils are not required to provide by statute.**

Oxfordshire is most explicit in its approach but is not alone in this regard.

5.1 Table of Those Focusing on Charges or Reduction in Non-Statutory Services

<u>Councils Emphasising the Role of Charges</u>	<u>Councils Reducing Under 65's and Non Statutory Provision</u>
Poole 5% increase	Hampshire – adult learning disabilities and mental health
Oxfordshire – tightening up means testing and charging ‘wherever possible’	Oxfordshire has ended non –statutory provision for over 65s in a large number of service areas
Hampshire reports that it is seeking to raise income ‘other than from government grants’ by £14, 823,000.	West Sussex is finding most savings from day care
Oxfordshire has strongly leant on care suppliers holding care costs at £17 per hour so passing costs in to supply chain.	Portsmouth – removing foot care services as not statutory
	Oxfordshire will remove ‘short’ personal care visits providing longer visits less often.
	Across the South emerging trends that domestic violence, drug and alcohol services will be reduced first

6: Conclusion:

The only constant in adult social care across the South is a huge downward pressure on spending and investment as central government grants to local authorities reduce. All councils are predicting further significant reductions across the next three year period.

While demand for more high end care is set to increase all council leaders are concerned as to the feasibility of sustaining such support in the mid - term. Though some authorities attempted to protect adult social care from the savings required in their total council budgets previously, that is no longer possible.

But where the South’s residents live really matters: On the one hand the impact of central government funding to local authorities has been applied in varying ways. This means that, for example in Southampton, Portsmouth and the IOW adult social care forms an increasingly large proportion of total council budgets compared to surrounding authorities.

On the other hand the strategies adopted at the local level by councils have a real diversity of likely impacts on residents in the future: From Oxfordshire’s fees,

means testing and re-shaping approach, to Bournemouth's pooling of funds and creation of new business units what local authorities choose to do – even in the face of austerity and government funding reductions – seems to really matter. And will matter more!

Appendix 1: Case Studies

A Case Study In Pressure: Oxfordshire County Council¹⁰

- Between 2009/10 to 2013/14 the total number of adults receiving adult social services has declined from 17545 to 9070; a reduction of 8475.
- According to its own stats by 2031 the number of people in its area over 75 will increase by 50,000 – from 40,000 today to 90,000 in 2031 out of a total population rising from 600,000 to 800,000
- By the end of the coming parliament Oxfordshire will be spending 75% of its budget on children and adult care with half of the total budget going on care for 2% of the population.
- Oxfordshire reports government funding per head in Hackney is over a £1000, the national average is £571.00 while the Oxfordshire County Council figure is £286. Represents a real terms cut from central government of £90 million 2009-2017
- *Notable that Oxfordshire has abolished many non-statutory provision for the over 65's and, wherever possible, is using maximum charging for services with means testing being strongly implemented on other services.*
- *Oxfordshire has a high focus on preventive measures in the long term, has some positive steps to pooled budgeting with Clinical Commissioning Groups in particular, but seems to have made less progress to unlocking the potential of public health work to bridge gaps than many other councils (especially the combined efforts of Poole, Bournemouth, and Dorset in the South) ¹¹*

A Case Study In Collaboration: Bournemouth, Poole, Dorset

- Bournemouth Health and Adult Social Care budget has been somewhat protected by a successful growth and investment strategy by the Borough Council and also partnership work by combining their Public Health budget with Poole and Dorset County.
- The latter pooling has enabled them to draw on more money for public health work than their status on their own would allow due to the significantly greater need in Bournemouth compared to their allocation; and Dorset and Poole receiving considerably more than needed.
- Bournemouth has also combined with those two other authorities on a 'Better Together' initiative that runs adult social care across the three authorities seeking to pool resources and consolidate costs

¹⁰ https://www.google.co.uk/?gfe_rd=cr&ei=1YcjVbLWIMi-wAP23oCQCg&gws_rd=ssl#q=oxfordshire+county+council%2C+budgets

¹¹

- *This is of significant advantage to Bournemouth as its adult social care needs are more acute than in the other authorities, especially in their case due to the very large retired population in their council area.*
- *The knock-on effect of this is that the government grants received for adult social care has actually risen from £11.249 million in 2013-14 to £12.979 million and the fees and charges income has been able to fall from £9.046 million to £8.628 million in the same period.*
- Like other areas total service users have dropped though.

A Case Study Of Re-shaping Management And Back Office: Southampton

- According to cabinet papers there has been a saving of £750k by moving all residential places for learning disability from out of city into the city
- Overall the budget needs for Adult Social Care in Southampton appear to be based on management and delivery changes as opposed to a large increase in charges or cutting of services this year.
- . Renegotiation of contracts with existing suppliers are also seen as being a way to save money without affecting services.
- On the converse side the expenditure for supplies and services jumped from £571k in 2013-14 to £711k.

A Case Study In Political Priorities: Hampshire

- There is a substantial increase in the direct government grant of £7.84 million up from £444k which is to do with the implementation of personal budgets etc and the Care Act.
- Services for Adults under 65 with sensory or physical disabilities have been maintained while
- Considerable reduction in funding for under 65s with learning disabilities taking the brunt (£5.5 million) and those with mental health challenges next (£444k.).
- £10 million reduction in department supporting refuges, sheltered housing etc 2009-14
- Day care has been a target for reductions (£3.9 million)
- Care homes and residential care spending maintained
- Charges secured from clients increased by £15.8 million
- Spending on people 65+ is where the major funding cut has occurred with a cut from £150.214 million in 2014-15 to £133.267 million in 2015-16 which includes the closure of 2 day centres.

A Case Study of Poole – This is for 2015-16:

- Charges have been increased by 5%, well above RPI. Local Welfare Assistance Scheme retained post government grant being withdrawn. Care cost cap of £450 being withdrawn so it will be fully means tested. More contributions regarding day centres, transport etc.
- Family based care is being preferred over residential care for people with learning difficulties.
- Much in the way of contracting reviews and use of public health to plug gaps.

- Local Authority Trading Company is being developed in conjunction with Bournemouth and Dorset and would envisage day centres and Community Outreach and Support Team being part of that. Day service and supported living spending increase. Public health taking over full costs of drug and alcohol addiction service. Working with CCG for some elderly people funding to protect social care.

**A Case Study In Day Care Reductions: West Sussex – This is for 2015-16:
£13.5 million cut in funding to Adult Social Care.**

- Day Service Review is the bulk of the savings. There is one view of keeping a Day Centre open by converting it into a community hub.

A Case Study of Windsor and Maidenhead – This is for 2015-16:

- Half a million pound cuts for learning disability services with a £73k cut for mental health spending.
- Older People and Physical disability spending has been essentially maintained but there are staff cuts in that service, including in in house home care.
- They are also cutting down on the commissioning costs by £340k. Public health is again plugging many of their gaps.

A Case Study of Portsmouth – This is for 2015-16:

- A Voluntary Sector Capacity and Transition Fund of £500k has been set up to enable voluntary Sector to take over or support H&SC delivery in the future on an ‘invest to save’ basis.
- Also £500k Business Intervention Fund for change internally and cost reduction especially for Adult Social Care.
- Charges have been put up up at RPI. Reviews being looked at all across the service.
- Move to work more with voluntary and Health Sectors.
- Public Health taking over Substance Abuse, community health stuff etc. Look at making real use of Direct Payments for people with mental health issues in particular and review all residential placements/supported living.
- Look at all out of city placements and whether they can be brought back in.

Appendix two: Reduction in funds 2010/11 - 2015/16 (as percentage of total central government grant)

Local Authority	Reduction
Christchurch	-22.02
West Dorset	-32.33
New Forest	-37.61
Oxford	-80.04
The City of Brighton and Hove	-161.95
Chiltern	-28.88
Tunbridge Wells	-58.08

Norwich	109.71
Vale of White Horse	-51.9
Woking	-8.18
Winchester	-16.47
Test Valley	-18.1
Arun	-20.51
Worthing	-36.23
Crawley	-42.03
Windsor and Maidenhead	-14.02
Wokingham	-2.29
Breckland	-91.25
Isle of Wight	-141.9
Eastleigh	-25.86
East Hampshire	-15.21
South Oxfordshire	-51.04
Cherwell	-59.79
West Berkshire	-43.01
Surrey Heath	3
Runnymede	0.7
Guildford	-0.58
Mole Valley	9.14
Poole	-29.22
Reading	-123.77
Slough	-141.83
Wiltshire	36.12
Basingstoke and Deane	-8.36
Hart	-20.69
Gosport	-39.76
Fareham	-26.65
Havant	-47.06
Sedgemoor	-55.97
Mid Sussex	-13.85
Horsham	-16.52
East Dorset	-21.1
North Dorset	-13.12
Eastbourne	-83.37
Hastings	-124.37
Rushmoor	-35.19
Adur	-39.4
Chichester	-16.67
Maidstone	-40.67
Bournemouth	108.67
Bracknell Forest	-49.25
City Of Southampton	-138.14
City of Portsmouth	-149.01
West Oxfordshire	-49.82