

Suffolk County Council – Adult Social Care Efficiency Programme

Suffolk has established a transformation programme ‘Supporting Lives Connecting Communities’ to support community based solutions to need and deliver a more cost-effective model of social care. The council has had to find £38 million of savings over the last four years.

Suffolk took a whole-system approach to delivering their savings for Adult and Community Care. Their gross spend over the three years of the programme was:

2011/12 2012/13 2013/14

£271.8 million £265.7 million £268.6 million

Suffolk County Council has put circa £5 million additional monies into the Adult Social Care Budget for each year over the last few years to assist with meeting demographic pressures. In order to fund both these demographic and inflationary pressures while balancing the books, the Adult and Community Services Directorate has had to find £38 million of savings over the last four years. In addition there was a reported budget pressure for the first time of about £2 million for 2013/14.

The main contributor to the savings has been to ensure that all monies from the health community (DH and NHS monies) are allocated against mainstream funding. This has reduced the pressure on the local authority by £11.7 million.

Other savings over the last few years have come from a long list of single reviews. These included a redesign of the social care process leading to a staffing saving of £1 million; introducing a managed vacancy rate for staffing in the budget; reducing payments to providers of care; reviewing all contracts and ending some low-level services or re-designing some existing services (£1.3 million was saved through re-designing the care pathway for housing and support for people recovering from mental ill-health); re-designing the support available in sheltered housing and introducing a new model of floating support (saved a further £1 million); divestment of services (£3.3 million although a proportion of this was saved in corporate overheads) and moving to a more personalised model of care (£4 million once fully rolled out). Suffolk has established a transformation programme across adult social care under the banner title ‘Supporting Lives Connecting Communities’. This has been a full programme across the county aimed at helping both staff and local communities understand the changes that are being introduced, and the reasons behind them, in order to deliver a more cost-effective model of social care. The programme will look to help find local solutions within communities to meet people’s needs alongside appropriate help offered by the council, which will focus on helping people regain or attain their independence. This is written up as a case study within this report.

Two major initiatives that Suffolk has undertaken but have not produced a high level of savings are:

1. The creation of two staff-run ‘mutual’ organisations to run some former council services. These two mutuals – ‘Leading Lives’ and ‘Realise Futures’

run between them short-breaks, day care, advice and support, employment services and adult learning, with many of the previous services having had a focus on service users with a learning disability. The aim was for staff to run these organisations and to sustain their services for the future. The council has made savings on the contract with these organisations compared to when the services were still in house, but any savings over and above that are ploughed back into the services they run.

2. The second initiative was to secure the provision of specialist dementia residential care across the county. The council decided to offer its in-house run residential care homes to a provider who was prepared to run the services, rebuild new care homes and enhance the services for older people with dementia. Cares UK won the contract and they are building the new homes with the first to open in June 2014. There is a 25-year contract and savings arise for the council at a later stage when all the new homes are built. The council is confident that, although this large operation has not saved money over the life of the contract, the guaranteed services and the costs will make it worthwhile. It will also ensure a good quality supply of residential dementia care for the county.

The council anticipates a number of challenges for the future. These include:

The council anticipates that it will have to find circa £150 million of savings over the next three years to balance its books (if Adult and Community Services were asked to make a proportionate saving this would equate to £60 million).

The council anticipates that the cost of the Care Bill will be a minimum of £6.3 million based on indicative funding allocations for 2015/16.

The Adult and Community Services Directorate have entered into discussions about the Better Care Fund with a full realisation of both the opportunities and the challenges. Suffolk has three CCGs and although the two in the southern part of the county work closely together at this stage, more progress in joint working and realising opportunities have been made with the northern CCG (Great Yarmouth and Waveney). Suffolk is in the same position as many other parts of England as to whether the health and care system can together find the solution for reducing demand for acute beds (so that monies can be saved) in order to free up resources to help meet demands in adult social care. An example being in the north where work is being undertaken to re-configure the way in which support is offered to people on discharge from hospital using more locally focused solutions. The approach adopted by Suffolk to meet these challenges is laid out in a case study Supporting Lives Connecting Communities.

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Extract taken from:

Adult Social Care Efficiency Programme Final Report: Annex:
<http://www.local.gov.uk/documents/10180/11779/Adult+Social+Care+Efficiency+Programme+Final+Report+-+Annex+2014/7952391e-a043-4f16-bebd-644780d1eb77>

ASCE programme website: http://www.local.gov.uk/productivity/-/journal_content/56/10180/3371097?_56_INSTANCE_0000_templateId=ARTICLE