

Sheet	Description
Appendix 1 - ASC Commentary	ASC Level 2 Commentary outlining the October 2012 budget monitoring position in detail
Appendix 2 - ASC Efficiency Tracker	Full details on progress against savings with comments & risk ratings as at the end of October 2012
Appendix 3 - Summary Position Graph	Graphical representation of progress against MTFP savings, including split of savings between one-off & recurring
Appendix 4 - Capital Monitoring Statement	ASC capital monitoring position as at the end of October 2012

Adult Social Care Level 2 Finance Commentary

Month End **Oct-12**
 Directorate **Adult Social Care**
 Date **21-Nov-12**

Strategic Director **Sarah Mitchell**
 Senior Finance Manager **Paul Carey-Kent**

Section 2: Summary Financial Position

Budget & Summary Position

Previous Month Variance £000s	Policy Line	Month Budget £000s	Month Actual £000s	Month Variance £000s	YTD Budget £000s	YTD Actual £000s	YTD Variance £000s	Full Year Budget £000s	Projected Outturn £000s	Projected Outturn Variance £000s	Change from Prev month £000s
	Older People										
(130)	Nursing General	1,685	1,812	127	11,795	12,197	402	20,219	20,164	(55)	75
1,574	Nursing Dementia	788	999	211	5,518	6,478	961	9,459	11,206	1,748	173
(135)	Residential General - External	3,380	3,341	(39)	23,659	23,338	(321)	40,558	40,541	(17)	118
1,087	Residential Dementia - External	1,014	1,125	111	7,099	7,622	523	12,170	13,360	1,191	104
370	Residential In-House Provision	580	708	128	4,061	4,729	668	6,962	7,411	448	78
1,059	Homecare - External	2,985	3,232	248	20,892	21,673	781	35,815	36,867	1,052	(7)
(970)	Reablement In-House Provision	683	613	(70)	4,781	3,984	(797)	8,196	7,019	(1,177)	(207)
6	Extra Care In-House Provision	103	111	8	719	739	19	1,233	1,217	(16)	(22)
(885)	Direct Payments	945	732	(213)	6,613	5,621	(992)	11,337	10,567	(770)	115
199	Day Care - External	212	135	(76)	1,481	1,446	(34)	2,538	2,728	190	(9)
48	Day Care In-House Provision	14	12	(2)	97	92	(5)	167	211	44	(4)
393	Respite Care	119	215	97	832	1,288	456	1,426	1,898	472	79
122	Transport Services	39	20	(19)	274	399	126	469	595	126	5
320	Other Care	249	2,427	2,178	2,713	5,187	2,474	3,959	4,175	216	(103)
3,057	Total Older People	12,795	15,483	2,688	90,534	94,794	4,260	154,508	157,959	3,451	394
	Physical and Sensory Disabilities										
152	Nursing General	294	331	37	2,058	2,296	238	3,529	3,795	266	114
26	Nursing Dementia	9	32	24	60	79	19	103	128	26	0
(492)	Residential General - External	522	504	(18)	3,652	3,360	(292)	6,261	5,747	(514)	(22)
2	Residential Dementia - External	9	14	4	66	70	4	112	125	12	11
0	Residential In-House Provision	0	1	1	0	12	12	0	0	0	0
590	Supported Living / Homecare	481	474	(7)	3,367	3,529	162	5,773	6,221	448	(142)
1,057	Direct Payments	1,201	1,187	(14)	8,408	9,140	732	14,413	15,724	1,311	254
36	Day Care - External	79	103	24	551	556	5	945	966	22	(15)
(31)	Day Care In-House Provision	45	48	3	312	283	(29)	535	507	(28)	3
22	Respite Care	37	6	(31)	258	315	57	443	513	70	48
(23)	Transport Services	30	26	(4)	209	179	(30)	358	325	(32)	(9)
(114)	Other Care - External	1,164	1,411	248	8,142	8,135	(7)	13,960	13,918	(42)	72
0	Other Care In-House Provision	0	0	(0)	0	0	0	0	0	0	0
1,224	Total Physical and Sensory Disabilities	3,869	4,138	269	27,084	27,954	871	46,431	47,970	1,539	315
	People with Learning Disabilities										
160	Nursing General	40	68	28	279	358	79	479	658	179	18
32	Nursing Dementia	16	27	11	113	133	20	194	227	32	0
2,790	Residential General - External	5,520	5,904	383	38,641	40,648	2,007	66,242	69,468	3,226	436
5	Residential Dementia - External	6	7	1	44	48	4	75	81	6	0
(10)	Residential In-House Provision	417	462	45	2,922	3,053	131	5,009	5,011	2	12
3,145	Supported Living / Homecare - External	1,441	1,941	500	10,090	11,635	1,545	17,298	20,978	3,680	536
(102)	Supported Living / Homecare In-House Provision	61	70	9	427	414	(14)	732	606	(126)	(24)
1,045	Direct Payments	814	937	123	5,701	6,004	303	9,773	10,830	1,057	12
(284)	Day Care - External	389	343	(46)	2,726	2,146	(580)	4,674	4,384	(290)	(5)
39	Day Care In-House Provision	521	549	28	3,645	3,777	133	6,248	6,225	(24)	(63)
(361)	Respite Care	77	21	(55)	538	211	(327)	923	425	(497)	(137)
248	Transport Services	87	142	54	611	773	162	1,047	1,380	333	86
(540)	Other Care - External	394	354	(39)	2,756	2,148	(608)	4,724	4,260	(464)	76
20	Other Care In-House Provision	116	122	6	810	782	(28)	1,389	1,407	18	(2)
6,188	Total People with Learning Disabilities	9,901	10,946	1,045	69,304	72,129	2,825	118,807	125,940	7,133	945
	Mental Health and Substance Misuse										
(9)	Nursing General	38	39	1	265	251	(14)	455	431	(23)	(15)
39	Nursing Dementia	4	7	3	27	49	21	47	85	39	0
(271)	Residential General	214	189	(26)	1,499	1,225	(274)	2,570	2,261	(309)	(39)
(17)	Residential Dementia	5	3	(2)	34	25	(9)	59	27	(32)	(15)
110	Supported Living / Homecare	191	227	36	1,338	1,335	(3)	2,293	2,460	167	56
634	Direct Payments	23	27	5	159	188	29	273	298	25	(609)
4	Day Care	5	4	(1)	35	27	(8)	59	57	(2)	(7)
6	Respite Care	0	0	0	0	13	12	1	7	6	0
8	Transport Services	1	2	1	6	8	1	11	18	7	(1)
(444)	Other Care	140	187	47	978	973	(5)	1,676	1,671	(6)	439
61	Total Mental Health and Substance Misuse	620	685	64	4,343	4,094	(249)	7,445	7,315	(129)	(190)
	Other Expenditure										
(2,249)	Management and Support	1,603	1,356	(247)	11,221	9,479	(1,742)	19,236	17,028	(2,208)	41
(1,288)	Assessment, Care Management	2,236	2,195	(41)	15,651	14,397	(1,254)	26,830	25,472	(1,358)	(70)
(455)	Supporting People	1,313	1,165	(148)	9,199	8,943	(256)	15,762	15,242	(521)	(65)
(3,992)	Total Other Expenditure	5,152	4,716	(436)	36,071	32,819	(3,252)	61,829	57,742	(4,087)	(95)
	Income										
1	Fees & Charges	(2,810)	(2,824)	(14)	(19,668)	(20,043)	(375)	(33,716)	(34,015)	(299)	(300)
322	Section 256/7 Fees & Charges	(328)	(403)	(76)	(2,295)	(2,851)	(556)	(3,934)	(3,600)	334	12
1,088	Joint Funded Care Package Income	(283)	(106)	177	(1,981)	(1,382)	600	(3,396)	(2,189)	1,208	120
0	Government Grants	(22)	73	95	(152)	(0)	152	(260)	(260)	0	0
86	Section 256/7 Income	(148)	(141)	7	(1,039)	(989)	50	(1,782)	(1,677)	105	19
(4,850)	Other Income	(760)	(1,785)	(1,024)	(6,298)	(9,472)	(3,174)	(10,099)	(15,404)	(5,306)	(455)
(3,353)	Total Income	(4,351)	(5,186)	(835)	(31,433)	(34,737)	(3,304)	(53,188)	(57,145)	(3,958)	(604)
3,184	Net Expenditure	27,986	30,781	2,795	195,902	197,053	1,151	335,832	339,781	3,949	766

Subjective		Month	Month	Month	YTD Budget	YTD Actual	YTD	Full Year	Projected	Projected	Change
Previous	Subjective Type	Budget	Actual	Variance	Budget	Actual	Variance	Budget	Outturn	Outturn	from Prev
Month											month
Variance											Variance
£000s		£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s
(3,103)	Staffing	5,822	5,736	(86)	40,754	38,477	(2,276)	69,863	66,526	(3,338)	(234)
9,641	Non Staffing	26,596	30,232	3,635	186,174	193,313	7,139	319,156	330,401	11,245	1,604
(3,353)	Income	(4,432)	(5,186)	(753)	(31,026)	(34,737)	(3,711)	(53,188)	(57,145)	(3,958)	(604)
3,184	Net Expenditure	27,986	30,781	2,795	195,902	197,053	1,151	335,832	339,781	3,949	766
Services Summary											
Previous	ASC Division	Month	Month	Month	YTD Budget	YTD Actual	YTD	Full Year	Projected	Projected	Change
Month		Budget	Actual	Variance	Budget	Actual	Variance	Budget	Outturn	Outturn	from Prev
Variance											month
£000s		£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	Variance
											£000s
4,293	Personal Care & Support	20,806	21,935	1,130	145,630	146,747	1,118	249,657	254,841	5,183	890
(1)	Service Delivery	1,628	1,706	78	11,397	12,067	670	19,537	19,525	(13)	(12)
(206)	ASC Transformation	216	333	116	1,515	1,607	92	2,597	2,347	(251)	(45)
(1,055)	Commissioning	5,169	6,839	1,670	36,191	35,529	(662)	62,035	60,930	(1,105)	(50)
152	Strategic Support	167	(32)	(199)	1,170	1,104	(66)	2,005	2,139	134	(18)
3,184	Net Expenditure	27,986	30,781	2,795	195,902	197,053	1,151	335,832	339,781	3,949	766

Explanation of significant variances

The October projected outturn for Adult Social Care is an overspend of £3.9m. This represents an increase of £0.8m from the September position.

The ASC budget is coming under considerable pressures, leading to the forecast that an overspend of around £3.9m (1.2% of the budget) is likely at year end. These pressures can be summarised as follows:

- all of the £3.8m underspend carried forward from 2011/12 has now been used to fund new pressures
- there are growing demand pressures within the main client groups, including transition from children's services
- staff recruitment difficulties and the need for complex partnership working have slowed delivery of some savings

A comprehensive review of savings plans conducted in September led to the removal of some high risk savings and their replacement largely with temporary one-off measures which will help to contain this year's overspend, but will not solve the problem caused by needing to replace such one off savings in following years. The need to replace these one-off measures is being flagged as part of the forward budget setting process.

As part of the 2011/12 year end process £3.8m of unspent funds were carried forward into 2012/13 to help offset pressures forecast to occur in the current and future financial years. It is assumed these funds will be fully spent by year end.

The Whole Systems funding programme is continuing, with an additional £10.2m allocation received in 2012/13. Joint plans have been agreed with NHS Surrey to spend this money on new projects which should help to reduce pressures on care budgets through preventative mechanisms such as telecare and telehealth. The funding will be retained on the balance sheet and drawn down to match expenditure as it is incurred. Due to growing demand pressures it is now proposed that £0.8m of Whole Systems funds will be drawn down as a contribution to help offset these pressures. This would represent a reallocation of funding previously set aside for internal ASC projects and as such would not directly affect plans agreed with health and other partners.

In addition to the Whole Systems funding, £2.4m of Dept of Health funding allocated to the County Council via the PCT was received late in 2011/12 and so remained unspent at year-end. As a result of the reduction in this year's forecast savings it is proposed that £2m of this funding is drawn down as a contribution towards ASC's wider budget pressures. Every effort will be made to maximise savings in the remainder of the year, which may reduce the amount of DoH funding needed for this purpose.

The policy line summary shown above for Adult Social Care does not include the following:

1. £1m contribution from the corporate centre to support the work with District and Boroughs as announced by the Leader of the County Council. This timing of the contribution is due to be considered in at the Cabinet on 27th November and is to be matched by a £1m contribution from ASC which is included in the above ASC position.
2. £1m contribution from the corporate centre to fund additional temporary staff to support more rapid progress with personalisation. This is to be matched by a £1m contribution from ASC. The timing of the corporate contribution is yet to be established, but spending patterns suggest next year.

Summary of Management Actions included in the September projections

Forecast Efficiency Savings in the remainder of 2012/13:

- > £(1.7)m Maximising Income through partnership arrangements. CHC savings of £(1.3)m have been validated as at the end of September 2012. Based on 2011/12 performance and the backlog of cases still awaiting assessment additional savings are expected, but full year savings have been reduced to £3m because of risks brought about by changes in health economy and growing numbers of individuals losing CHC with associated backdated payments to health that reduce the net CHC savings the department secures.
- > £(0.2)m S256 Attrition - £(1.8)m of savings were achieved in full as at the end of October. A further £(0.2)m of savings are projected for the remainder of the financial year.
- > £(0.7)m Delays in recruitment of the specialist PLD review team mean that achievement of some LD PVR savings will be delayed. Total savings in 2012/13 are now forecast to be £1m, of which £0.2m of savings had been achieved by the end of September 2012
- > £(0.1)m Home Based Care Tender - a retender exercise has been completed by Procurement for 2012/13. This is anticipated to deliver savings as existing packages cease and are replaced by lower cost new services.
- > £(0.5)m Consistent application of the RAS - it is anticipated that a proportion of service users currently receiving a direct payment, will be identified as needing lower cost packages which will lead to reclaims of surplus balances.
- > £(0.5)m Further reductions in staffing costs - the current projections include ambitious recruitment plans. An adjustment has been made to account for some potential slippage of these plans.
- > £(0.3)m The year to date position for Fees & Charges suggests that a surplus may be achieved by year end. £0.3m has been included as a management action this month to allow time for further analysis to confirm this position.
- > £(2.0)m As a result of the reduction in this year's forecast savings it is now proposed that £2m of Additional DoH funding is drawn down as a contribution towards ASC's wider budget pressures.
- > £(0.6)m An adjustment has been applied to Older People Home Care projections to account to breaks in service and ceases not yet actioned in the AIS. This is in line with prior years' trends.
- > £(0.8)m £0.8m of Whole Systems funding previously set aside for internal ASC projects is now planned to be drawn down as a contribution to the wider ASC budget pressures.

Total Management Actions = £(7.4)m, an increase of £(0.4)m from the Management Actions plans included in the September projections

Older People: £3.4m overspend, an increase of £0.4m from September

The key variances within Older People services are:

- > £2.8m Overspend on Nursing and Residential placements mainly due to demand pressures that it has not been possible to absorb within the budget and underachievement against preventative, CHC and RAS savings against these policy lines.
- > £1.1m Spot Home Based Care pressures primarily due to MTFP efficiencies in relation to preventative savings not expected to be fully achieved within the current financial year.
- > £1.0m Overspend in relation to Other Community Services, including respite, day care and transport due to strategic shift as part of the personalisation agenda.
- > £0.5m Overspend within In-House residential homes including Day Care, due to MTFP efficiencies ascribed to this budget area being achieved within other areas in Service Delivery.
- > £(1.2)m Underspend within the Reablement service due to a high level of vacancies and delays in the appointment process.
- > £(0.8)m Underspend on Direct Payments primarily due to a reduction in the actual start position and an overachievement against the demography and inflation efficiencies.

£(1.1)m of Management Actions are included in the September monitoring position for Older People.

The main changes from last month are:

- > £0.4m Increase across Older People spot care packages mainly in Nursing and Residential dementia due to a net increase of 21 placements in month reflecting increasing demographic pressures around dementia. Together with increase within home based care services due a reduction in turnover.
- > £0.3m Reduction in Management Actions
- > £0.1m Increase in in-house Residential Homes
- > £(0.3)m Reduction in projected spot Home Based Care costs due to accruals made at the end of the previous financial year that it has been identified are no longer required.
- > £(0.1)m Reduction in Contract and Grants within Commissioning

Physical Disabilities: £1.5m overspend, an increase of £0.3m from September

The key variances within Physical Disability services are:

- > £1.3m Overspend on Direct Payments due to the start position in spot care being higher than budgeted and a net increase of 91 DP services between April and October 2012.
- > £0.4m Overspend on Supported Living due to the start position in spot care being higher than budgeted, together with the under-achievement against preventative and strategic shift efficiencies.
- > £0.3m Overspend on Nursing spot care, mainly due to a net increase of 5 spot nursing care packages so far this year plus some MTFP savings being achieved against other policy lines.
- > £(0.5)m Underspend on Residential care, primarily due to lower than anticipated volumes of PSD transition clients.

£(0.3)m of Management Actions are included in the September monitoring position for PSD.

The main changes from last month were:

- > £0.2m Increase in PSD spot care costs, mainly within Nursing General and Direct Payments due to a net increase of 12 services in the last month.
- > £0.1m Reduction in Management Action planned savings.

Learning Disabilities: £7.1m overspend, an increase of £0.9m from September

The key variances within People with Learning Disabilities services are:

- > £2.9m Overspend for PLD Transition clients due to growing demand pressures and increased volumes above those previously anticipated, forecast non-achievement of the £1m Optimisation of Transition Pathways efficiency and a number of high cost packages that the department has had to pick up this year.
- > £2.0m Overspend on Residential spot care mainly due to forecast under-achievement against strategic supplier review, preventative efficiencies, LD PVR and strategic shift efficiencies.
- > £1.9m Overspend on Supported Living spot care excluding S256 and Transition clients primarily because the start position was £1m higher than budgeted due to increased volumes in late 2011/12 (in line with the focus on community based provisions as part of personalisation), a net increase of 54 Supported Living services between April and October 2012 and under-achievement against preventative savings.
- > £1.1m Overspend on former S256 PLD clients due to anticipated under-achievement against MTFP efficiencies.
- > £(0.8)m Underspend across other community services, particularly on Other Community Care and Respite Care, due to a lower start of year position than originally forecast and a higher proportion of savings expected to be achieved against these service areas than was budgeted.

£(1.1)m of Management Actions are included in the September monitoring position for PLD.

The main changes from last month were:

- > £0.4m Increase in Transition spot care, primarily within Residential and Support Living
- > £0.3m Reduction in Management Action planned savings
- > £0.2m Increase in PLD spot care, mainly within Support Living due to a net increase of 14 services in the last month.

Mental Health: £(0.1)m underspend, a decrease of £(0.2)m from September

The £0.1m underspend on Mental Health is due to an underspend on Substance Misuse within Residential Care offset by an overspend within Supported Living/Home Based care services

The decrease is due to a budget virement resulting in a reduction of £(0.2)m in Mental Health Commissioning offset by a contra entry in Other Income.

Other expenditure: £(4.1)m underspend, an increased underspend of £(0.1)m from September

The key reasons for the underspend on Other Expenditure are:

- > £(2.1)m Underspend on core establishment including on-costs due to ongoing workforce reconfiguration and delays in recruitment.
- > £(1.6)m Funds brought forward from 2011/12 being used to offset pressures within the main client group budgets.
- > £(0.5)m Underspend on Supporting People - this is due to achievement of the Supporting People efficiency through the renegotiation of contracts in respect of volume and unit costs ahead of the 4 year plan.

£(0.5)m of Management Actions are included in the September monitoring position for Other Expenditure.

The main changes from last month were:

- > £(0.1)m Reduction in the Supporting People spend due to the renegotiation of contracts

Income: £(4.0)m surplus, an increased surplus of £(0.6)m from September

The key variances that make up the overall surplus forecast on income are:

- > £(5.3)m Surplus on Other Income due to £(3.5)m of draw downs of Additional DoH funding, Whole Systems and other historic balance sheet funding to help offset wider pressures and unbudgeted refunds for clients who are determined as CHC with a backdated effective date.
- > £(0.3)m Potential surplus on Fees & Charges based on the year to date position. Further work is underway to validate this potential surplus.
- > £1.2m Shortfall on Joint Funded care package income, mainly caused by a reduction in the number of joint funded clients due to ongoing reviews of historical joint funding arrangements which usually result in clients being determined as either 100% CHC or 100% social care.
- > £0.4m Shortfall on Section 256 fees & charges and Section 256 Mental Health income caused by reductions in S256 user numbers and offset by reductions in expenditure as a result.

£(4.4)m of Management Actions are included in the September monitoring position for Income.

The key changes from last month were:

Adult Social Care 2012-13 Efficiency Tracker - October 2012

Description of Efficiency	Division Budget	ASC Efficiency Owner	ASC Project Stream	2012/13 Original Target	2012/13 Revised Target	Saving Type	Budget Status	Planned Start Date	Frequency of Savings	Achieved Apr 12 - Oct 12	Forecast Nov 12 - Mar 13	Total Forecast Savings	(Over) / Under Target	Performance	Likelihood	RAS Score	RAS Rating	Planning Status	Service Planned Actions to Achieve Efficiency / Other Comments	Procurement Contribution		Nature of Savings		October Management Actions	
				£000	£000					£000	£000	£000	£000							£000	£000	£000	%		One-off
Optimisation of Spot Care Rates	PCS	Anne Butler	Commissioning & Procurement	(5,252)	(5,252)	Non Cashable	Budget Cut	Apr-12	Monthly	(3,379)	(2,414)	(5,793)	(541)	6	3	18	A	Plan in Progress	Budget set with 0.5% increase - for all Residential & Nursing packages no uplift for Community services. SCA negotiations awaiting outcome of National Pricing exercise.	(5,793)	100%	(5,793)		0	
Maximising Income through Partnership Arrangements	PCS	Simon Laker	Health & Social Care Systems	(4,000)	(4,000)	Cashable	Budget Cut	Apr-12	Monthly	(1,262)	(1,738)	(3,000)	1,000	5	4	20	G	Plan in Progress	Implementation of new procedures and audit / implementation of new Joint CHC Health & Social Care Team. The dedicated CHC team has worked hard in conjunction with finance and the service to both put in place internal processes and negotiate with relevant PCTs to maximise savings. Detailed analysis ongoing with NHC Surrey to work through backlog of outstanding assessments. However, risks brought about by changes in the structure of health and a number of cases arising where individuals have lost CHC leading to additional costs for SCC mean that full achievement of the ambitious savings target is now unlikely.	0	0%	(950)	(2,010)	(1,739)	
Preventative Savings through Whole Life Systems interventions including Telecare	PCS	Anne Butler / Melanie Buscico	Prevention through Partnerships	(3,600)	(1,800)	Cashable	Budget Cut	Jul-12	Monthly	0	0	0	1,800	1	5	5	R	Part Plan in Progress	A combination of the delay in rollout of the telecare strategy across Surrey and a change in the focus of this strategy towards a broader offering to all Surrey residents to better fit with the aims of Social Care White Paper mean that no savings are now forecast for 2012/13.	0	N/A	0	0	0	
Absorption of Demographic Pressures	PCS	Dave Sargeant	Health & Social Care Systems	(2,938)	(2,938)	Non Cashable	Budget Cut	Apr-12	Monthly	0	0	0	2,938	1	5	5	R	Plan in Progress	Start position and demographic changes Apr 12 - Oct 12 are showing a combined demographic pressure of £5.0m. As such none of the planned £2.9m absorption of demographics is forecast to be achieved.	0	N/A	0	0	0	
Learning Disabilities Public Value Review	PCS	Anne Butler	Valuing People New	(2,000)	(2,000)	Cashable	Budget Cut	Jul-12	Monthly	(296)	(704)	(1,000)	1,000	4	3	12	A	Plan in Progress	Savings to be delivered in line with LD PVR project plan. Delays in recruitment of the specialist LD PVR review team mean that achievement of the MTFP target will be delayed, hence the shortfall against the MTFP target now forecast for 2012/13.	(245)	25%		(1,000)	(705)	
Strategic Shift from Residential care to Community based provision	PCS	Dave Sargeant	Health & Social Care Systems	(1,752)	(1,752)	Cashable	Budget Cut	Apr-12	Monthly	(202)	(144)	(346)	1,406	2	5	10	R	Plan in Progress	Continued work to deliver strategic shift and continuing sign off of RAS exceptions by SMM/SM. The service is successfully tilting the balance of care away from residential & nursing services. This will achieve savings in the long term, but only a limited amount of front year savings are expected.	(200)	58%		(346)	0	
Section 256 Client Group Savings	PCS	Dave Sargeant	Valuing People New	(1,500)	(1,500)	Cashable	Budget Cut	Apr-12	Monthly	(1,834)	(183)	(2,017)	(517)	6	5	30	G	Plan in Progress	Overshootment of the savings target is forecast due to higher levels of attrition than originally forecast.	0	0%		(2,017)	(183)	
Extract Better Value from Block Contracts	Comm	Anne Butler	Commissioning & Procurement	(1,400)	(1,400)	Cashable	Budget Cut	Apr-12	Monthly	(1,110)	(793)	(1,503)	(503)	6	5	30	G	Plan in Progress	Get back of 32 beds achieved in the last quarter of 2011/12 has resulted in savings in 2012/13. Further savings were secured as a result of favourable inflation negotiations.	(361)	19%		(1,503)	0	
Optimisation of Transition Pathways	PCS	Dave Sargeant	Health & Social Care Systems	(1,000)	(1,000)	Non Cashable	Budget Cut	Sep-12	Monthly	0	0	0	1,000	1	5	5	R	Plan in Progress	A budget including efficiencies of £3.3m was set for new transition clients entering Adults from Children's in 2012/13. Costs for new clients are currently forecast to be in excess of £3m due to higher numbers than previously forecast and some high cost cases that ASC has had to pick up this year. As such none of the £1.0m Transition Pathways efficiency is forecast to be achieved.	0	N/A	0	0	0	
Strategic Supplier Review	PCS	Anne Butler	Commissioning & Procurement	(1,000)	(1,000)	Cashable	Budget Cut	Apr-12	Monthly	(327)	(242)	(569)	431	4	5	20	G	Plan in Progress	SSR savings will be a combination of flow through of actions taken in the previous financial year and new commissioning initiatives still in the process of being determined.	(569)	100%	(548)	(21)	0	
Manage costs below budget on a one-off basis	PCS	Sarah Mitchell	Workforce Development	(929)	(3,029)	Cashable	Credit Budget	Apr-12	Monthly	(2,080)	(1,486)	(3,566)	(537)	6	5	30	G	Plan in Progress	A high level of vacancies due to ongoing workforce reconfiguration and delays in recruitment processes combined with underspending against the of budget from 2011/12 as a contribution to wider ASC pressures has led to projected one-off savings of £3.0m. The overall target for one-off savings has been increased to £3.0m as a result of the reduction of the WLS preventative savings target by £1.8m and the removal of the Social Enterprise Pilot target of £0.3m.	0	0%	(3,566)		(500)	
Other Commissioning Strategies	Comm	Anne Butler	Commissioning & Procurement	(800)	(800)	Cashable	Credit Budget	Apr-12	Monthly	(692)	(108)	(800)	0	6	5	30	G	Plan in Progress	Actions already taken to achieve the majority of the savings. The underachievement is being offset by an overachievement of Commissioning savings on block contracts and Supporting People.	0	0%		(800)	0	
Apply Resource Allocation System more consistently	PCS	John Woods	Technology	(500)	(500)	Cashable	Budget Cut	Apr-12	Monthly	(1,667)	(553)	(2,220)	(1,720)	6	5	30	G	Plan in Progress	As part of the continued application of the RAS it is expected that a proportion of service users who currently receive Direct Payments will be identified as requiring lower cost packages which will lead to realisations of surplus balances.	0	0%	(2,220)		(533)	
Recommission Supporting People Contracts	Comm	Anne Butler	Commissioning & Procurement	(400)	(400)	Cashable	Budget Cut	Apr-12	Monthly	(537)	(384)	(921)	(521)	6	5	30	G	Plan in Progress	Renegotiation of Supporting People contracts in respect of volume and unit costs is anticipated to achieve £0.8m of savings. This is a 4 year programme which is currently ahead of schedule.	(815)	88%		(921)	0	
General In-House Service Efficiencies, including Shadow Trading Accounts	SD	Debbie Medlock	In-House	(400)	(400)	Cashable	Credit Budget	Apr-12	Monthly	(241)	(172)	(413)	(13)	6	5	30	G	Plan in Progress	Underspend in some in-house services are anticipated as a result of vacancies and other one off savings.	0	0%	(413)		0	
Optimisation of Block Contract Rates	Comm	Anne Butler	Commissioning & Procurement	(389)	(389)	Cashable	Budget Cut	Apr-12	Monthly	(284)	(203)	(486)	(97)	6	4	24	G	Plan in Progress	No inflation has been offered on any contracts outside of the main blocks.	0	0%		(486)	0	
Social Enterprise Pilot	Strat Sup	Graham Wilkin	In-House	(300)	0	Cashable	Credit Budget	Jan-13	Monthly	0	0	0	0	0	0	0	0	0	Plan in Progress	As the First Point pilot is still in its initial pilot phase, no savings are expected to be achieved in the current financial year.	0	N/A			0
Home Based Care Retender	PCS	Anne Butler	Commissioning & Procurement	(200)	(200)	Cashable	Budget Cut	Apr-12	Monthly	(72)	(52)	(124)	76	4	4	16	A	Plan in Progress	These savings relate to new cases and so are likely to be achieved in the remaining part of the financial year.	(124)	100%		(124)	(64)	
				(28,360)	(28,360)					(13,863)	(9,175)	(23,158)	5,201								(8,167)	35%	(7,737)	(15,421)	(3,724)

Other Adult Social Care Savings / Pressures

Other contract & grant savings / pressures in Commissioning	Comm	Anne Butler	N/A	0	0	Cashable	N/A	Apr-12	Monthly	74	53	127	127	6	6	36	G	Plan in Progress	Savings / pressures on contracts and grant budgets outside of the block contracts.	(20)	-16%		127	0	
Transformation savings	Trans	John Woods	N/A	0	0	Cashable	N/A	Apr-12	Monthly	(48)	(35)	(83)	(83)	6	6	36	G	Plan in Progress	Reassignment of Right to Control grant expenditure has led to reduction in projected costs.	0	0%	(83)		0	
Overspend of Older People spot Home Care costs	PCS	Dave Sargeant	N/A	0	0	Cashable	N/A	Apr-12	Monthly	(350)	(250)	(600)	(600)	6	4	24	G	Part Plan in Progress	Past trends of overprojecting homecare combined with a low level of cases for the YTD position mean that OP homecare costs are likely to currently be overprojected. Based on past trends and the YTD spend, there is evidence that costs are over-projected and so projected costs have been reduced by £0.6m instead of including this as a management action.	0	0%		(600)	(600)	
Additional Demographic Pressures - Spot Care	PCS	Dave Sargeant	N/A	0	0	Cashable	N/A	Apr-12	Monthly	1,222	873	2,095	2,095	6	4	24	G	Plan in Progress	The start position and demographic changes Apr 12 - Oct 12 are showing a combined demographic pressure of £5.0m. Not only does this mean that none of the planned £2.9m absorption of demographic pressures efficiency is being achieved, but an additional pressure of £2.1m is being forecast. Demographic changes in the remainder of the year could alter this position.	0	0%		2,095	0	
Additional Demographic Pressures - Transition	PCS	Dave Sargeant	N/A	0	0	Cashable	N/A	Apr-12	Monthly	729	521	1,250	1,250	6	4	24	G	Plan in Progress	An increase in the number of high cost transition cases that Adults have had to pick up this year means that additional pressures are forecast for transition over and above the non-achievement of the £1m Optimisation of Transition pathways efficiency in 2012/13.	0	0%		1,250	0	
One-off funding to offset wider ASC pressures	All	Various	N/A	0	0	Cashable	N/A	Oct-12	Monthly	(571)	(2,853)	(3,424)	(3,424)	6	5	30	G	Plan in Progress	As a result of the growing budget pressures ASC is facing this year, a decision has been taken to draw down £2.0m of Additional Department of Health funds received in 2011/12, £0.8m of Whole Systems funding and £0.6m of historic funding on the balance sheet as one-off contributions to the bottom line in 2012/13.	0	0%	(3,424)		(2,800)	
Fees & Charges	PCS	Dave Sargeant	N/A	0	0	Cashable	N/A	Apr-12	Monthly	(175)	(125)	(300)	(300)	6	3	18	A	Plan in Progress	The year to date position for Fees & Charges suggests that a surplus may be achieved by year end. £0.3m has been included as a management action this month to allow for further analysis to confirm this position.				(300)	(300)	
SWFT 2011/12 Year End Accruals	PCS	Dave Sargeant	N/A	0	0	Cashable	N/A	Apr-12	Monthly	(175)	(125)	(300)	(300)	6	5	30	G	Plan in Progress	It has been identified that £0.3m of accruals made at the end of the previous financial year are no longer required.				(300)	0	
Balancing savings / pressures to August Monitoring	All	Various	N/A	0	0	Cashable	N/A	Apr-12	Monthly	(10)	(7)	(16)	(16)	6	6	36	G	Plan in Progress	Other savings, pressures and adjustments	0	0%		(16)	0	
				0	0					686	(1,948)	(1,262)	(1,262)								(20)	2%	(3,807)	2,555	(3,709)
Total Forecast (Over) / Under Achievement vs MTFP				(28,360)	(28,360)					(13,287)	(11,123)	(24,411)	3,949								(8,127)	33%	(11,544)	(12,867)	(7,424)

Remaining 2011/12 Carry Forward available after funding of current budget pressures

6	6	36	G
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Potential (Surplus) / Deficit at year-end

3,949

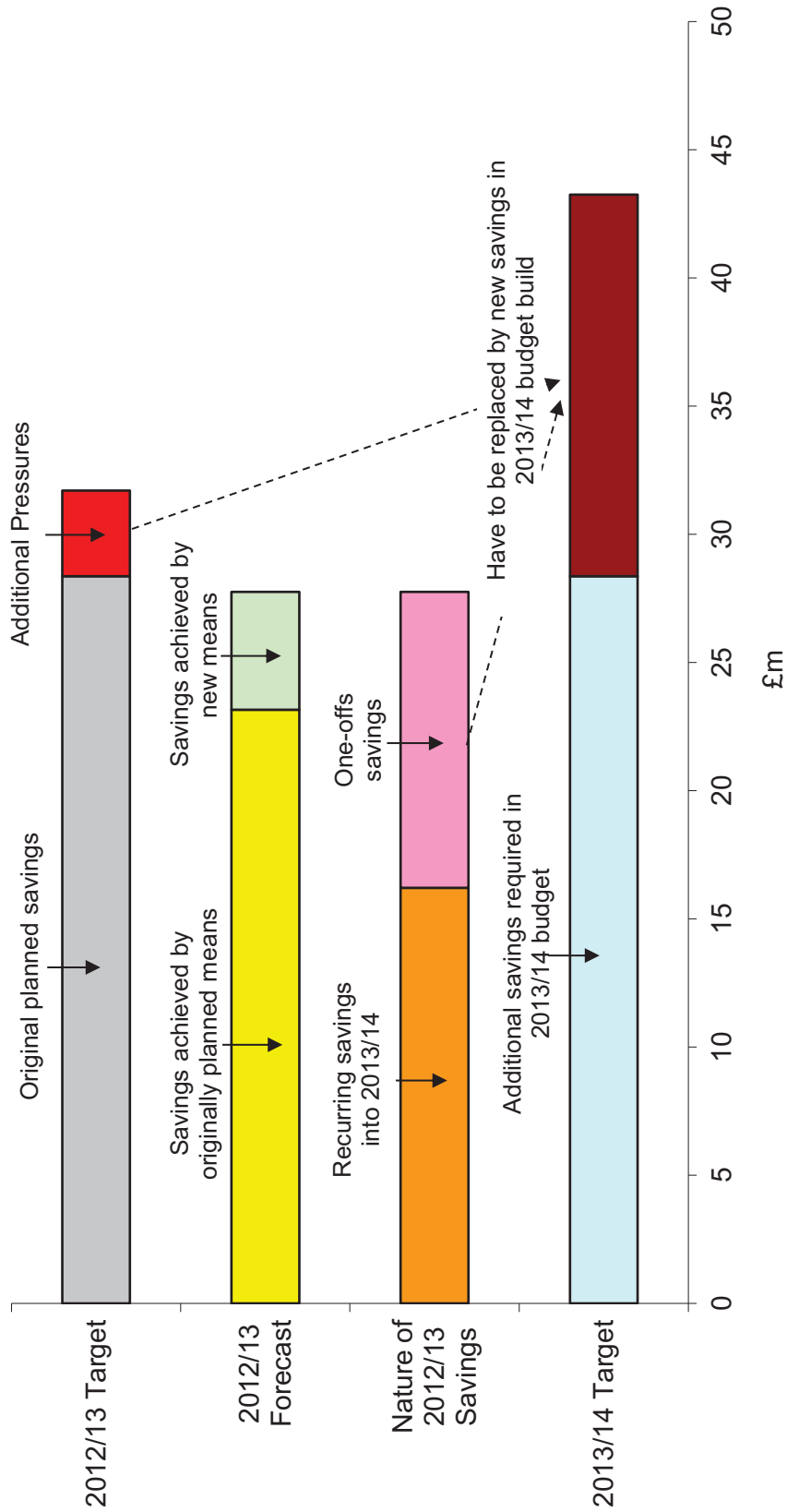
Planned Carry Forward into 2013/14

6

Revised Projected (Surplus) / Deficit at year-end

3,949	6	6	36	G
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2012/13 Adult Social Care Efficiency Summary



Capital Variance Summary - Adult Social Care

2012 13 Full Year Forecast	MTFP Budget	C.Fwd Budget	Budget Virement	Revised Full Year Budget	Full Year Forecast	Full Year Variance
	£000s	£000s	£000s	£000s	£000s	£000s
Major Adaptations	1,000	57	-357	700	700	0
D&B developments - wellbeing centres	200	0	0	200	200	0
In-house capital improvement schemes	280	0	357	637	637	0
User led organisational hubs	150	0	0	150	150	0
NHS Campus Re-provision Project	0	0	0	0	0	0
Total Adult Social Care	1,630	57	0	1,687	1,687	0

Capital Variance Summary - Adult Social Care

2012 13 Year to Date	YTD Budget	YTD Actual	YTD Variance	Committed	Year to Go
	£000s	£000s	£000s	£000s	£000s
Major Adaptations	408	96	-313	92	512
D&B developments - wellbeing centres	117	0	-117	0	200
In-house capital improvement schemes	372	99	-272	712	-174
User led organisational hubs	88	0	-88	0	150
NHS Campus Re-provision Project	0	-7	-7	0	7
Total Adult Social Care	984	187	-797	804	695

Major Adaptations:

Approved £819k to date with a further £50k awaiting approval but actuals to date only £96k have chased Senior Managers and Service to review capital spend for remainder of the year and chase invoices.

Wellbeing

Although there has been a delay in receiving relevant invoices, it is anticipated that this budget will be fully committed by year end.

In-House Improvement

Latest estimate of a £9k overspend but projecting to be absorbed by year end. Committed in SAP overstated due to EPM Purchase Orders needing to be transferred to EPM project codes.

User Led Hubs

Reviewing expenditure to classify between revenue and capital. If Hubs expenditure is revenue aiming aiming to transfer capital and revenue between ASC and Fire & Rescue - therefore projecting fully committed

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