

# Community Services Overview and Scrutiny Panel

Date: Tuesday 7 January 2014

Time: 10 am

Venue: Edwards Room, County Hall, Norwich

Persons attending the meeting are requested to turn off mobile phones.

#### Membership

Ms J Brociek-Coulton
Ms E Corlett
Mr W Northam
Mr D Crawford
Mr A Grey
Mr M Smith
Mrs S Gurney
Mrs M Somerville

Mrs S Gurney Mrs M Somerville
Mr B Hannah Mrs A Thomas
Mr H Humphrey Mr J Timewell
Mr J Law Mrs C Walker

Mr J Mooney

#### **Non Voting Cabinet Member for Adult Social Services**

Ms S Whitaker

Non Voting Cabinet Member for Communities (Adult Education, Libraries, Museums, Customer Services)

Mrs M Wilkinson

#### **Non Voting Cabinet Member for Public Protection**

Mr D Roper

# For further details and general enquiries about this Agenda please contact the Committee Officer:

Tim Shaw on 01603 222948 or email committees@norfolk.gov.uk

For Public Questions and Local Member Questions please contact:

Committees Team on committees@norfolk.gov.uk or telephone 01603 222948.

#### Agenda

#### 1 To Receive Apologies and Details of any Substitute Members Attending

#### 2 Minutes

To confirm the minutes of the Community Services Overview and Scrutiny Panel held on 5 November 2013

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#### 3 Members to Declare Any Interests

If you have a **Disclosable Pecuniary Interest** in a matter to be considered at the meeting and that interest is on your Register of Interests you must not speak or vote on the matter.

If you have a **Disclosable Pecuniary Interest** in a matter to be considered at the meeting and that interest is not on your Register of Interests you must declare that interest at the meeting and not speak or vote on the matter.

In either case you may remain in the room where the meeting is taking place. If you consider that it would be inappropriate in the circumstances to remain in the room, you may leave the room while the matter is dealt with.

If you do not have a Disclosable Pecuniary Interest you may nevertheless have an **Other Interest** in a matter to be discussed if it affects:

- your well being or financial position
- that of your family or close friends
- that of a club or society in which you have a management role
- that of another public body of which you are a member to a greater extent than others in your ward.

If that is the case then you must declare such an interest but can speak and vote on the matter.

# 4 To Receive any Items of Business which the Chairman Decides should be Considered as a Matter of Urgency

#### 5 Public Question Time

Fifteen minutes for questions from members of the public of which due notice has been given.

Please note that all questions must be received by the Committee Team (committees@norfolk.gov.uk or 01603

222948) by **5pm on Thursday, 2 January 2014**. For guidance on submitting public questions, please view the Council Constitution, Appendix 10.

#### 6 Local Member Issues/Member Questions

Fifteen minutes for local members to raise issues of concern of which due notice has been given.

Please note that all questions must be received by the Committee Team (<a href="mailto:committees@norfolk.gov.uk">committees@norfolk.gov.uk</a> or 01603 222948) by 5pm on Thursday 2 January 2014.

7	Cabinet Member Feedback		PAGE 12
8	Community Services Finance Monitoring Report for 2013/14	Janice Dane/ Mike Forrester	PAGE 13
9	Putting People First – Service and Budget Planning 2014/17  Note: Cabinet members will present the findings from the Norfolk: Putting People First budget consultation and the outcome of the Equality Impact Assessments .Papers will be sent to panel members, and be published on Putting People First webpage ( <a href="www.norfolk.gov.uk/budgetconsultationfindings">www.norfolk.gov.uk/budgetconsultationfindings</a> ), on the 30th December	Panel Cabinet Members/Janice Dane/Mike Forrester	PAGE 41 Budget Consultation responses to follow
10	Fuel Poverty in Norfolk	Maureen Orr	PAGE 65
11	The New Compact For Social Care In Norfolk	Catherine Underwood	PAGE 109
12	Implementation of An Integrated Community Equipment Service (ICES) For Norfolk	Catherine Underwood/ Mick Sanders	PAGE 114
13	Blue Badge Disabled Parking- An Update Report	Lorna Bright/Karen O'Hara	PAGE 121
14	Delayed Discharge from Hospital In Norfolk-Joint Scrutiny Task and Finish Group	Maureen Orr	PAGE 125
15	Forward Work Programme: Scrutiny	Jill Perkins	PAGE 131

#### **Group Meetings**

Conservative	9:00 am	Colman Room
UKIP	9:00 am	Room 504
Labour	9:00 am	<b>Room 513</b>
Liberal Democrats	9:00 am	Room 530

Chris Walton
Head of Democratic Services
County Hall
Martineau Lane
Norwich NR1 2DH

Date Agenda Published: 20 December 2013



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# Community Services Overview and Scrutiny Panel Minutes of the Meeting

**Date: Tuesday 5 November 2013** 

Time: 10am

Venue: Edwards Room, County Hall, Norwich

#### Present:

Ms J Brociek-Coulton
Ms E Corlett
Mr D Crawford
Mr A Grey
Mr S Gurney
Mr B Hannah
Mr H Humphrey
Mr J Mooney
Mr J Mr J Mooney
Mr J Mr J Mooney
Mr J Mr J Mooney
Mr W Northam
Mr W Northam
Mr W Richmond
Mr M Smith
Mr M Swith

#### **Substitute Members Present:**

Mr C Foulger for Mrs A Thomas Mr T Garrod for Mrs M Somerville Mr J Timewell for Mr E Seward

#### **Also Present:**

Mr D Roper, Non-Voting Cabinet Member for Public Protection Ms S Whitaker, Non-Voting Cabinet Member for Adult Social Services Mrs M Wilkinson, Non-Voting Cabinet Member for Communities

#### **Officers/Others Present:**

Harold Bodmer, Director of Community Services

Janice Dane, Finance Business Partner and Transformation Manager, Community Services (Adult Social Care)

Jennifer Holland, Assistant Director of Community Services, Head of Libraries and Information

John Perrott, Business Development Manager, Community Services (Adult Social Care)
Debbie Olley, Assistant Director of Community Services, Safeguarding (Adult Social Care)
Catherine Underwood, Director of Integrated Commissioning, Community Services
Jeremy Bone, Senior Planning, Performance and Partnerships Officer, Resources
Colin Sewell, Planning, Performance and Partnerships Manager (Communities)
Dr Augustine Pereira, Consultant in Public Health Medicine

Roger Morgan, Quality Assurance Manager, Community Services (Adult Social Care)
Jill Perkins, Business Support Manager, Community Services (Adult Social Care)
Clive Rennie, Assistant Director of Commissioning Community Services (Adult Social Care)

Maureen Orr, Scrutiny Support Manager (Health)

#### 1 Apologies

Apologies for absence were received from Mr E Seward, Mrs A Thomas and Mrs M Somerville.

#### 2 Minutes

The minutes of the previous meeting held on 08 October 2013 were confirmed by the Panel and signed by the Chairman subject to the deletion of resolution (b) at minute 10.

#### 3 Declarations of Interest

Mrs M Wilkinson declared an "Other Interest" in that her husband was in receipt of support from Community Services.

Ms E Corlett declared an "Other Interest" in that she was employed by the Norfolk & Suffolk NHS Foundation Trust. She said that in the circumstances, she would be withdrawing from the meeting for the item on Mental Health Services: Report on Section 75 Agreement with Norfolk & Suffolk Foundation Trust and the Proposal for 2014 Onwards.

Mrs C Walker declared an "Other Interest" in that she was a Director of NORSE Commercial Services and a Director of NORSE Group.

#### 4 Urgent Business

There were no items of urgent business.

#### 5 Public Question Time

There were no public questions.

#### 6 Local Member Issues/Member Questions

There were no local Member issues or local Member questions.

#### 7 Cabinet Member Feedback

The Cabinet Member for Communities said that the NMAS was in the process of establishing a small Development Foundation. This body would be able to support the delivery of NMAS service plans through allowing the NMAS to apply to grant-giving organisations which the NMAS was currently precluded from approaching due to its Local Authority status. The Cabinet Member said that the Development Foundation was estimated to generate £100,000 pa towards the work of the NMAS. She said that the current governance and existing management arrangements for the NMAS would remain unchanged.

In reply to questions, the Cabinet Member for Communities said that Cultural Services was putting together a programme of events to mark the outbreak of the First World War which would be shared with Members when it had been finalised.

The Cabinet Member for Public Protection said that the Queen Elizabeth Hospital had been placed in "special measures". He said that the Director of Community Services had reported to the Health and Wellbeing Board on the setting up of a Task and Finish Group with the remit of enabling an assessment to be made of progress to date with the integration of Health and Social Care Services, and that this Group had so far met on one occasion. The Health and Wellbeing Board would be kept informed of developments. The Cabinet Member added that a bid to the Department of Health to achieve Integrated Pioneer status for West Norfolk, to assist in putting in place a system-wide review of health and social care in the West Norfolk area, had failed at the final stage.

The Cabinet Member for Adult Social Services said that she was disappointed that West Norfolk had been unsuccessful in its bid to become a Department of Health Integrated Pioneer but that the commitment within the Department to the integration programme outlined in the bid would continue. She also said that she was continuing to attend public consultation meetings about the Adult Social Services budget proposals for 2014.-17; that the situation with Care UK for Care Services in the Broadland area continued to show signs of improvement, and that 700 members of staff had transferred from the Department to the new Social Enterprise, Independence Matters.

(Having declared an "Other Interest" in that she was employed by the Norfolk & Suffolk NHS Foundation Trust, Ms E Corlett left the room for the next item on the agenda.)

# 8 Mental Health Services: Report on the Section 75 Agreement with Norfolk & Suffolk NHS Foundation Trust and the Proposal for 2014 Onwards

The annexed report by the Director of Community Services was received.

The Panel received a report on the current arrangements for the provision of adult social care services for mental health between Norfolk County Council and Norfolk & Suffolk NHS Foundation Trust and the proposed next steps for securing social care mental health services.

In the course of discussion, the following key points were noted:

- It was pointed out that issues which arose out of the current contract had been addressed in the Bradshaw Report which outlined a number of areas where improvements could be made in a new Section 75 Agreement.
- The weaknesses in the current integrated model led some Members to question whether it could be made to work effectively.
- Officers said that the Department and the NHS remained of the opinion that the
  integration of mental health services was essential in order to achieve
  seamless, efficient services which could be co-ordinated to meet the needs of
  individuals. Both the NHS and Adult Social Services were committed to an
  integrated service, but the structure of the Norfolk mental health service would
  have to change to improve performance which remained poor.
- The Department was examining various alternative options for the delivery of social mental health services and had not completely ruled out the option of running these services itself if significant improvement could not be achieved by other means.
- Members stressed the importance of training/familiarisation sessions that gave

all social workers a sound understanding of mental health issues. In reply, Officers said that the level at which this training needed to be delivered, and therefore how many staff would benefit, and the costs, had yet to be determined.

- Any changes would need to be discussed with the staff (who were not employed by the County Council) before they were implemented.
- It was noted that the Department had strong links with the Police for key mental health functions, such as adult safeguarding, where the Trust had taken on overall responsibility and was leading on many statutory discussions.
- Members asked for a report to be brought to a future meeting on Mental Health Section 17 Implications and for this to be included in the forward work programme.

The Panel noted the progress that had been made in securing social care mental health services, in terms of improvement actions and performance that were set out in the report, and endorsed the proposed approach to:

- (a) Revise the model of social care in mental health;
- (b) Undertaken an options appraisal on the provision of adult social care services for mental health from 2014 onwards.

(Mrs E Corlett returned to the Committee room at this point in the proceedings.)

# 9 Community Services Integrated Performance and Finance Monitoring Report for 2013-14

The annexed report by the Director of Community Services was received. It provided the second performance, risk management and finance update for 2013-14.

In the course of discussion, the following key points were noted:

- At the end of August 2013 (period 5) the forecast revenue position for 2013-14 was for a balanced budget.
- Members asked to be provided with a detailed breakdown of the Department's sickness absence figures and an explanation of the likely causes of any changes. It was noted that sickness absence levels in Adult Social Services continued to show signs of year on year improvement but were being offset to some extent by increased sickness absence levels in Cultural Services, which were being carefully monitored.
- It was noted that physical visits to Libraries were down on the same period last year. People were increasingly using Libraries' online facilities, and in particular online book renewals. As a consequence, one of the budget proposals for 2013-17 was to stop using paper overdue notifications.
- Members asked for more detailed information on domestic violence cases managed by the Multi-Agency Risk Assessment Conference (MARAC).
   Members wanted information about the likely causes of variations in repeat levels of domestic violence cases on an area by area basis and to see the detailed figures.

The Panel noted the information contained in the report.

#### 10 Service and Budget Planning 2014-17

The annexed report by the Director of Community Services was received.

The Panel received a report that set out the financial and planning context for the Authority and gave an early indication of what this meant for Community Services. The Panel also received on the table the cross-cutting savings proposals that were listed as an addendum to the report.

In the course of discussion the following key points were made:

- One of the cross-cutting savings was about the County Council strengthening its attempts to secure European funding for key core services from 2015/16 onwards. Member asked for details to be included in future budget monitoring reports about what this involved for Community Services.
- Members emphasised the important role that mobile libraries had in providing services in isolated rural areas of the County and the dangers that were associated with lone working in isolated static library locations.
- Officers said they were examining the idea of the Norfolk Record Office opening for longer hours on one day a week, to compensate for the proposal to end Saturday morning openings, which was expected to save on energy costs.
- The Chairman said that the Department needed to be careful not to place too
  much emphasis on the contribution which volunteers could make to its work.
  She said that while volunteers had an important role in the running of some
  services, they were no substitute for professional members of staff working in
  key areas of service delivery.
- It was noted that the budget proposals included a reduction from four posts to two posts in the Community Safety Team.
- In order to achieve the proposed reduction in transport for Adult Social Services there would need to be more careful checks made on if a person had a mobility vehicle or mobility allowance.
- It was pointed out that Adult Social Services was working with Health to target services at high risk groups so as to prevent hospital admissions. It was estimated that Adult Social Care could receive and additional £15m of government funding to accelerate its work in this area but that receipt of this money was expected to be based on payment by results and it was unknown at this stage what the Department would have to do to obtain the money. In any event, this was not new money within the health and social care system as a whole. Details would be shared with Members when they became known.
- It was noted that pressures on domiciliary care services, partly as a result of the
  increasing levels of dementia and frailty amongst older people, could lead to an
  increase in permanent admissions to residential and nursing care homes. Work
  was being undertaken in the Department to investigate whether domiciliary care
  provision across Norfolk was adequate and whether the service should be
  organised in a different way. The results of the review would be shared with
  Members of the Panel in due course.
- The Director of Community Services said that he had written to all service users alerting them to the specific budgetary proposals for Community Services.
- The needs of carers as well as service users would need to continue to be addressed.
- It was noted that the Department was looking at developing a chargeable

assessment and care management service for people who funded their own care and because there were other organisations that provided such a service the Department would have to be careful at what level it placed its charges.

The Panel noted:

- (a) The revised service and financial planning context.
- (b) The revised spending pressures and savings for the updated bids and announcements relevant to Community Services.

#### 11 Warm and Well Evaluation Report

The annexed report by the Director of Community Services was received.

The Panel received a report about the Norfolk Warm and Well programme which was provided between January and April 2013 as a County-wide initiative to help keep vulnerable people warm during the winter.

The Panel noted the success of the Warm and Well Programme in supporting vulnerable to keep warm and healthy during cold winter weather and providing information and signposts to other services which could be useful to vulnerable people.

The Panel noted the conclusions and recommendations contained in the report.

#### 12 All Party Member Working Group on Quality in Home Care

The annexed report by the Director of Community Services was received.

The Panel received a report that asked Members to consider the terms of reference for the All Party Working Group on Quality in Home Care.

The Panel approved the terms of reference that were attached as Appendix A to the report and appointed the following Members to serve of the Working Group:

Ms J Brociek-Coulton

Mr D Crawford

Mr T Garrod

Mrs S Gurney

Mrs E Morgan

Mr M. Smith

(+1 vacancy which remained to be filled, following discussions at the next Party Spokespersons' meeting)

#### 13 Forward Work Programme

The annexed report by the Director of Community Services was received.

The Panel received a report which contained the draft Scrutiny Forward Work Programme for the period until April 2013 which was noted subject to the following:

- The Party Spokespersons would be able to discuss at their next meeting the options for an additional meeting of the Panel early in 2014 to consider any items which could not be timetabled into the existing programme.
- Members asked for a report to be brought to a future meeting on Mental Health Section 17 Implications.
- Members also asked for details about domestic violence cases arranged by the Multi-Agency Risk Assessment Conference (MARAC). Members wanted information about the likely causes of variations in repeat levels of domestic violence cases on an area by area basis and to see the detailed figures.
- The Panel asked that when they receive an update on the Living Well in the Community fund that they also receive at the same time an update on the potential transfer of NHS monies to the Department.

The meeting concluded at 11.55am

#### Chairman



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# Report to the Community Services Overview and Scrutiny Panel 7 January 2014 Item No 7

#### **Cabinet Member Feedback**

Report by the Cabinet Members for Community Services

Cabinet Members will provide a verbal update to members of Overview and Scrutiny Panel regarding any Cabinet meetings which have taken place since the last meeting of this Panel.

# Report of Cabinet Decisions taken since the last Overview & Scrutiny Panel meeting- None taken

Report

**Date** 

Considered by

**Panel** 

**Date** 

Considered by

Cabinet

Cabinet

Cabinet resolved that:

**Feedback** 

Reason for decision:

#### **Action Required**



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#### **Community Services Finance Monitoring Report for 2013-14**

Report by the Director of Community Services

#### Summary

This report provides the third finance update for 2013-14 to Community Services Overview and Scrutiny Panel. An integrated Performance, Finance and Risk report is presented quarterly to this Panel with the last one being in November.

The information included within this report is the most up to date available at the time of writing. Any significant changes to the information between publishing this paper and presenting to Panel will be updated verbally.

#### **Finance Summary**

As at the end of October (period seven) the overall Departmental forecast revenue outturn position for 2013-14 is a balanced budget. Adult Social Care and Cultural Services are forecasting balanced budgets. There is a small underspend forecast for Community Safety.

There are financial pressures in Adult Social Care but these are offset by some underspends and the use of reserves. The forecast use of reserves has reduced in this period due to an estimated additional £1.400m Continuing Health Care (CHC) income. Continuing Health Care income offsets the additional CHC expenditure which is included in the Purchase of Care overspend - more detail is in **Appendix A.** The department is keeping under review how much of the CHC income is recurrent and will revise the budget for future years as appropriate.

#### **Action required**

Members are invited to discuss the contents of this report, to note progress and consider whether any aspects should be identified for further scrutiny.

#### 1 Background

- 1.1 The purpose of this report is to provide an update on the latest financial position against the budget.
- 1.2 The most significant financial changes, or areas of concern, are discussed in more detail within the main report.
- 1.3 Please see Appendix A for the latest financial monitoring

## 2 Revenue budget 2013-14

- 2.1 As at the end of October (period seven) the overall Departmental forecast revenue outturn position for 2013-14 is a balanced budget. Adult Social Care and Cultural Services are forecasting balanced budgets. There is a small underspend forecast for Community Safety.
- 2.2 There are financial pressures in Adult Social Care but these are offset by some underspends and the use of reserves. The forecast use of reserves has reduced in

this period due to an estimated additional £1.400m Continuing Health Care (CHC) income. Continuing Health Care income offsets the additional CHC expenditure which is included in the Purchase of Care overspend - more detail is in Appendix A. The department is keeping under review how much of the CHC income is recurrent and will revise the budget for future years as appropriate.

- 2.3 The table at 2.6 shows the forecast out-turn position by division of service at the end of period seven (October) 2013-14. Explanations for any significant variances from budget can be found in the tables in Appendix A.
- 2.4 Commissioning includes the Supporting People budget.
- 2.5 Safeguarding includes all of the Purchase of Care expenditure budgets, the budgets used to buy packages of care from the independent sector for: Older People; People with Learning Difficulties; People with Physical Disabilities; People with Mental Health problems; and Drug and Alcohol. It also includes the Hired Transport budgets, Care and Assessment budgets and Continuing Health Care income budgets.
- 2.6 The responsibility and grant funding for Community Safety has been transferred to the Police and Crime Commissioner, in accordance with national policy. The Community Safety budget remaining under Prevention is for the policy function.

Division of Service	Budget	Forecast Outturn	Forecast +Over/- Underspend	Forecast +Over/- Underspend as % of budget	Change in forecast +Over/-Underspend from previous report (period five)
	£m	£m	£m	%	£m
Director, Finance and Transformation	+0.376	-4.962	-5.338	-1,420	+1.941
Commissioning, including Supporting People	+63.715	+65.238	+1.523	+2.4	-0.210
Business Development	+5.635	+5.581	-0.054	+1.0	-0.123
HR, Training and Organisational Development	+1.791	+1.653	-0.138	-7.7	0
Safeguarding	+233.162	+233.270	+0.108	0	-1.390
Prevention, including Community Safety	+24.487	+25.596	+1.109	+4.5	+0.035
Income (see Note 1)	-71.717	-68.927	+2.790	+3.9	-0.253
Adult Social Care total	+257.449	+257.449	0	0	0
Library and Information Service	+11.474	+11.474	0	0	0
Museums and Archaeology Service	+3.526	+3.526	0	0	0

Total for Community Services	+274.526	+274.526	0	0	0
Cultural Services total	+17.077	+17.077	0	0	0
Active Norfolk	0	0	0	0	0
Norfolk Guidance Service	0	0	0	0	0
Adult Education Service	+0.081	+0.081	0	0	0
Arts Service	+0.546	+0.546	0	0	0
Record Office	+1.395	+1.395	0	0	0

- 2.7 Note 1: In 2012-13 income included the Learning Difficulties Reform grant which was a specific grant received by the department. In 2013-14 the Learning Difficulties grant is now part of NCC's formula funding and therefore is not received directly by the department. The money is still received by the department but as part of corporate funding.
- 2.8 Appendix A contains tables providing more detailed analysis of the reasons for any significant variances from budget.
- 2.9 Details of the Cultural Services Reserves and Provisions are in Appendix D. Details of the Adult Social Care Reserves and Provisions are in Appendix E. The Skills Funding Agency which part funds Adult Education announced in December 2012 that it was rebasing its funding which caused a reduction for the 2013-14 financial year of £0.275m. There is an expectation that the 2013-14 year funding will be further reduced.

#### 3 Capital Programme

3.1 The capital programme for Adult Social Care is summarised in Appendix B. At this stage of the financial year no slippage is forecast on the capital programme. Where there is slippage on a capital scheme at the year-end, i.e. the work has not been completed within the financial year or there are outstanding invoices to be paid, the money will be carried forward to 2014-15.

3.2

Adult Social Care Capital programme	2013-14 capital budget	2013-14 Forecast capital outturn	Forecast Slippage	Reasons
	£m	£m	£m	
Total	+11.009	+11.009	0	No slippage is forecast at this stage of the financial year.

3.3 The Cultural Services 2013-14 capital programme is shown in Appendix C including any programme revisions. The capital programme for Cultural Services is monitored over the life of the scheme rather than a single year. This reflects the life of the projects and the associated funding.

## 4 Equality Impact Assessment (EqIA)

- 4.1 Community Services places diversity, equality and community cohesion at the heart of service development and service delivery. The department aims to ensure that activities and services are accessible to diverse groups in Norfolk and that all policies, practices and procedures undergo equality impact assessment. These assessments help services to focus on meeting the needs of customers in relation to age, disability, gender, race, religion and belief and sexual orientation.
- 4.2 This report provides financial performance information on a wide range of services monitored by the Community Services Overview and Scrutiny Panel. Many of these services have a potential impact on residents or staff from one or more protected groups. The Council pays due regard to the need to eliminate unlawful discrimination,

promote equality of opportunity and foster good relations.

#### Section 17 – Crime and Disorder Act 5

5.1 Community Services takes account of the need to address the issues of social exclusion, one of the key triggers for crime and disorder, in its activities. The department works hard to ensure that people are confident in their community and that its services are relevant and accessible to local people. This helps to encourage participation by people who are at risk of offending, engage offenders through a range of projects, assist schools in improving pupil attainment and deliver opportunities to increase the number of people who are in education, employment or training.

#### 6 **Environmental Impact**

6.1 There are no environmental implications from issues arising in this report.

#### 7 Conclusion

- 7.1 As at the end of October (period seven) the forecast revenue outturn position for 2013-14 is a balanced budget. Adult Social Care and Cultural Services are forecasting balanced budgets. There is a small underspend forecast for Community Safety.
- 7.2 There are financial pressures in Adult Social Care but these are offset by some underspends and the use of reserves. The forecast use of reserves has reduced in this period due to an estimated additional £1.400m Continuing Health Care (CHC) income. Continuing Health Care income offsets the additional CHC expenditure which is included in the Purchase of Care overspend - more detail is in Appendix A. The department is keeping under review how much of the CHC income is recurrent and will revise the budget for future years as appropriate.

#### 8 **Action Required**

8.1 Members are invited to discuss the contents of this report, to note progress and consider whether any aspects should be identified for further scrutiny.

### **Background Papers**

None

#### **Officer Contact**

If you have any questions about matters contained in this paper please get in touch with:

Mike Forrester 01603 228843 mike.forrester@norfolk.gov.uk



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# Appendix A

## **Division of Service – Detailed Analysis of Variances**

# Adult Social Care: Director, Finance and Transformation £-5.338m underspend (budget £-0.376m)

Area	Forecast Variance Total £m	Forecast Variance as % of Budget %	Change from previous report (period five) £m	Reasons for movement from previous report
Director, Finance and Transformation	5.338	-1420	+1.942	This forecast includes the drawdown of: £-1.000m from the Prevention 2012-13 reserve to mitigate the risks in delivering the prevention savings, particularly in service level agreements; and £-0.340m from the Adult Social Care Legal Liabilities reserve, to offset the purchase of care costs from funding aftercare under s117 of the Mental Health act. It also includes £-4.852m that will be allocated to the appropriate budgets when the s256 with NHS England has been agreed regarding 2013-14 additional health money for social care and SMT have agreed the use of reserved budgets. These are partly offset by the underachievement of savings A16 and A20 being charged against this. The change from period five is due to a reduction in the forecast use of the Adult Social Care Legal Liabilities reserve.
Total	-5.338	-1,420	+1.942	

# Adult Social Care: Commissioning, including Supporting People £+1.522m overspend (budget £+63.715m)

Area	Forecast Variance Total £m	Forecast Variance as % of Budget %	Change from previous report (period five)	Reasons for movement from previous report
Commissioning	-0.117	-9.1	0	Underspend forecast on staff costs due to vacancies.
Service Level Agreements	+1.197	+26.1	0	Forecast remaining savings on Service Level Agreements in 2011-14 still to be achieved. Work is ongoing to identify where these savings can be made.
Aids and Adaptations/Integrated Community Equipment Service	+1.578	+63.5	0	Forecast equipment spend is higher than budgeted. Work is ongoing to understand the reasons for this and whether there is scope for further negotiation around the health/social care split in funding agreed for 2013-14 as part of the Integrated Community Equipment Service, given health initiatives such as pressure sores.
Supporting People	-0.720	-5.0	+0.028	The Supporting People underspend represents a faster delivery of the budgeted 12% expenditure reduction over the three financial years 2011-14. It also includes some savings on Mental Health contracts.
Other	-0.415	-1.0	-0237	Successful outcome of disputed invoice(£0.200m), no inflation uplift to partner contracts(£0.138m) and delayed transfer to Kingswood LD provision from Mill Close (£0.050m)
Total	+1.523	+2.4	-0.210	

## Adult Social Care: Business Development £+0.054m overspend (budget £+5.635m)

Area	Forecast Variance Total £m	Forecast Variance as % of Budget %	Change from previous report (period five) £m	Reasons for movement from previous report
Business Support	-0.418	-13.0	-0.053	Underspend on staff salaries: some vacancies have been frozen whilst the restructure was carried out but have now started to recruit into these posts.
Other	+0.364	+16.2	-0.070	Overspend due to savings on premises not yet achieved. Improvement this period due to reduced accommodation for staff.
Total	-0.054	+1.0	-0.123	

# Adult Social Care: Human Resources, Training and Organisational Development £-0.138m underspend (budget £+1.791m)

Area	Forecast Variance Total £m	Forecast Variance as % of Budget %	Change from previous report (period five) £m	Reasons for movement from previous report
Personnel	-0.027	-11.8	0	Forecast underspend on recruitment and advertising.
Learning and Development	-0.111	-7.1	0	Forecast underspend on training.
Total	-0.138	-7.7	0	

# Adult Social Care: Safeguarding £+0.108m overspend (budget £+233.162m)

Area	Forecast Variance Total £m	Forecast Variance as % of Budget %	Change from previous report (period five) £m	Reasons for movement from previous report
Purchase of Care expenditure - Older People	+3.278	+3.4	+0.065	Purchase of Care is the budget for the purchase of care from the independent sector, including residential and nursing care, supported living, home care and day care.  There are financial pressures in Purchase of Care and this is being closely monitored, as usual.  The forecast overspend is mainly on residential care.  If forecast Continuing Health Care income for older people is netted off against the Purchase of Care expenditure, the over spend is reduced to £+1.313m.
Purchase of Care expenditure - People with Physical Disabilities	+4.189	+21.6	0	The forecast overspend is on residential and domiciliary care. If forecast Continuing Health Care income for people with physical disabilities is netted off against the Purchase of Care expenditure, the over spend is reduced to £+3.697m.
Purchase of Care expenditure – Mental Health, Drugs and Alcohol	+2.081	+19.6	0	The forecast on Mental Health Purchase of Care anticipates only a partial achievement in 2013-14 of budgeted savings. The forecast overspend is on residential and nursing care. The department is forecasting using £-0.340m from the Adult Social Care Legal Liabilities reserve, to offset the purchase of care costs from funding aftercare under s117 of the Mental Health act. The Legal Liabilities Reserve was set up in part to cover the potential costs arising from the dismissal on Tuesday 15 February 2011 at the Court of Appeal of the appeal lodged by Hertfordshire County Council regarding the funding of aftercare under section 117 of the Mental Health Act. It is one off funding. At the moment this funding is being held under Director, Finance and Transformation above.

Area	Forecast Variance Total £m	Forecast Variance as % of Budget %	Change from previous report (period five) £m	Reasons for movement from previous report
				If forecast Continuing Health Care income for people with mental health problems is netted off against the Purchase of Care expenditure, the over spend is reduced to £+1.850m.
Purchase of Care expenditure – People with Learning Difficulties	-1.151	-1.4	0	If forecast Continuing Health Care income for people with Learning Difficulties is netted off against the Purchase of Care expenditure, the underspend increases to £-6.746m.
Continuing Health Care Income	-8.283	-	-1.429	Continuing Health Care (CHC) is where people have been assessed by Health as being eligible for Continuing Health Care funding. If someone is eligible for CHC, Health pay for the cost of a person's care. If a person's care is funded by Health, the person does not have to contribute towards the cost of this care, unlike social care.  This is income from recharging Health for people that Health have assessed as being eligible for CHC but where Health have not taken over paying the contracts with providers yet. NCC continues to pay the providers in the interim period and recharges Health for the cost.  There is no budget set for this as the department does not know in advance when Health will pick up paying providers direct and who will be assessed as eligible for CHC. The increase this period is based on the increased costs for this period.
Other	-0.006	0	-0.026	Mainly due to forecast overspend on transport (£+0.350m) where budgeted savings are not expected to be achieved, largely offset underspends on staff costs in Care and Assessment.
Total	+0.108	0	-1.390	

# Adult Social Care: Prevention £+1.109m overspend (budget £+24.487m)

Area	Forecast Variance Total £m	Forecast Variance as % of Budget %	Change from previous report (period five) £m	Reasons for movement from previous report
Housing With Care, Homes for Older People and People with Physical Disabilities	+0.391	+372.4	+0.072	Forecast overspend mainly due to slippage on achieving savings through removal of subsidy of community meals provided in housing with care (HWC) schemes Additional costs this period due to redundancy costs from reduced meals staff for Housing with Care.
Personal and Community Support Service (Day services, Learning Difficulties Homes and Learning Difficulties Personal Assistants)	+0.204	+1.5	-0.002	Forecast overspend as there is a reduction in Supporting People funding of £0.336m, partly offset by underspend on staff salaries.
Norfolk First Support, Swifts and Night Owls	-0.162	-3.0	+0.073	Underspend on salaries, due to managing vacancies. Underspend reduced this period due to increased costs of staff.
Service Development	+0.733	+55.0	-0.045	Savings target for Assistive Technology of £-0.748m is unlikely to be made; organisational change saving not being fully achieved. Change due partly to senior officer vacancy now filled and additional funding from Children's services for sensory support work.
Community Safety	-0.148	-43.4	0	was previously shown under Safeguarding.  The responsibility and grant funding for Community Safety has been transferred to the Police and Crime Commissioner, in accordance with national policy. The Community Safety budget remaining under Prevention is for the policy function.
Other	+0.091	+2.3	-0.062	Overspend on: salaries in Emergency Duty Team (overtime);

Area	Forecast Variance Total £m	Forecast Variance as % of Budget %	Change from previous report (period five) £m	Reasons for movement from previous report
				and printing plus posting of Blue Badges. Reduced staff costs have reduced the forecast overspend this period.
Total	+1.109	+3.2	+0.036	

# Adult Social Care: Income £+2.790m overspend (budget £-71.717m)

Area	Forecast Variance Total £m	Forecast Variance as % of Budget %	Change from previous report (period five) £m	Reasons for movement from previous report
Service user contributions to the cost of their care	+2.790	+3.9	-0.252	Forecast less income from Older Peoples' contributions towards the cost of their care than budgeted.  The budgeted income from day care charging also shows a significant under recovery of budgeted income in line with 2012-13.  NCC is now no longer charging for up to the first six weeks of reablement to facilitate integration with Health, plus there is less income from people funding their own care who are in Norse Care homes as Norse Care charge people who go direct to them.  Budgeting income from service user contributions towards the cost of their care is difficult as peoples' contributions are based on their financial circumstances. The increase in income from service user contributions due to the growth in the number of older people budgeted for in 2011-12 and 2012-13 has not happened: £1.900m and £0.998m. Prior to 2011-12 there had been a trend of the department receiving more income than budgeted from service user contributions, largely because although the cost pressure from demographic growth was included in the budget plan there was no corresponding budgeted increase in income from service user contributions. In 2011-14 an increase in income from service users due to growth in the number of people was included in the budget plan. The risk around the budgeted income in 2013-14 (i.e. £1.108m) was highlighted as a risk in the Service and Budget Planning report presented to the Community Services Overview and Scrutiny Panel on 6 November 2012.

Area	Forecast Variance Total £m	Forecast Variance as % of Budget %	Change from previous report (period five) £m	Reasons for movement from previous report
				Continuing Health Care Assessments also impact on income from service user contributions as where somebody is entitled to Continuing Health Care and the cost of their care is paid by Health, the person no longer has to contribute towards the cost of their care.  Variance this period compared with the previous period is caused by a revised forecast for Supported Living income.
Other	0	0	0	
Total	+2.790	+3.9	-0.253	

# Appendix B

# **Adult Social Care: Capital Programme**

Scheme	2013-14 Budget	2013-14 Forecast Outturn	2013-14 Forecast Slippage (see Note One) £ m	Reasons for Variance or Comments
	£ m	£ m		
Projects	+4.630	+4.630	0	Including: contribution of £1.500m to the Peterhouse/Lydia Eve Court scheme in Great Yarmouth; Modern Social Care Phase Two; contributions to housing development schemes for people with learning difficulties and people with physical disabilities; dementia day care; office accommodation; and contribution to Norse Care for essential improvements/capital works in the previous in-house residential homes. The increase in projects(£0.499m) since period five is for the 3 Dementia projects at Wells, Norse Care and Manor Court
Reprovision of Bishop Herbert House	+0.006	+0.006	0	
Strong and Well Partnership	+0.500	+0.500	0	Plans not finalised. Potential to invest in Housing With care projects.
Capital Monies that are ea	armarked but not comm	itted for specific project	ts at the moment	
Social Services Computer Projects (2003-4)	+0.067	+0.067	0	Work continues as part of the Transformation Programme to identify further IT and project
(Improving) Information Management Grant (2007-8)	+0.007	+0.007	0	investment needs.

Scheme	2013-14 Budget	2013-14 Forecast Outturn	2013-14 Forecast Slippage (see Note One) £ m	Reasons for Variance or Comments
	£ m	£ m		
Adult Social Care IT Infrastructure (2008/09)	+0.094	+0.094	0	
Housing With Care – Other (2007-8)	+0.084	+0.084	0	To be used for future schemes as part of the Building Better Futures – Care Homes.
Homes for Elderly People - Essential Improvements	+0.017	+0.017	?0	Contingency funds set aside for schemes that will offer greatest benefit to residents in line with the strategic plan for all care Homes.
Failure of kitchen appliances	+0.093	+0.093	0	£0.040m potentially required for gas regulation work. Will be realigned to meet priorities.
Improvement East Grant	+0.060	+0.060	0	Likely to be spent on accommodation for Independence Matters, the new social enterprise.
LPSA Reward Grant	+0.028	+0.028	0	
Social Care Capital Grant 2012-13	+2.146	+2.146	0	Ring-fenced – awaiting decision around Bowthorpe Development.
Unallocated Capital Grant	+0.854	+0.854	0	Ring-fenced – awaiting decision around Bowthorpe Development.
Social Care Capital Grant	+1.947	+1.947	0	To be used for: investment in further housing development schemes to make revenue savings, including those for people with learning difficulties and physical disabilities; and for Housing With Care schemes for older people.
Supported living for people with Learning Difficulties	+0.017	+0.017	0	
Extra Care Housing Fund  - Learning Difficulties	+0.003	+0.003	0	

Scheme	2013-14 Budget £ m	2013-14 Forecast Outturn £ m	2013-14 Forecast Slippage (see Note One) £ m	Reasons for Variance or Comments
Sub-Total – Capital Monies that are earmarked but not committed for specific projects at the moment	+5.417	+5.417	0	
LPSA Domestic Violence	+0.456	+0.456	0	The Reward Grant continues to be spent on schemes such as changes to refuges, improved court security and evidence kits.
Total	+11.009	+11.009	0	

# **Appendix C: Cultural Services: Capital Programme**

# **Capital Programme 2013-14 - Library and Information Service**

Scheme	2013-14 Budget	2013-14 Forecast Outturn	2013-14 Forecast Slippage £m	Reason for variance or comments	
	Dauget	£m	Shippage zin		
	£m				
Schemes in Progress					
Wymondham Library	0.100	0.100	0.000	Awaiting final land lease agreement	
Mobile Vehicle Wash System	0.016	0.016	0.000	Final works currently underway	
CERF* Dersingham Windows	0.001	0.001	0.000	NPS managed scheme – waiting for final invoices.	
CERF* Caister	0.001	0.001	0.000	NPS managed scheme – waiting for final invoices.	
Library Improvements 2012-13	0.258	0.258	0.000	2012-13 Library refurbishments due to be completed in full	
Total Schemes in Progress	0.376	0.376	0.000		
2013-14 New Starts					
Hethersett Adaptations	0.060	0.060	0.000	Toilets and associated building works.	
New Starts - Total	0.060	0.060	0.000		
Section106 Schemes <sup>1</sup>	0.223	0.223	0.000	Schemes are spent over several years	
Total Capital Schemes	0.659	0.659	0.000		

## Capital Programme 201-14 3 – Museums and Archaeology Service

Scheme	2013-14 Budget £m	2013-14 Forecast Outturn £m	2013-14 Forecast Slippage £m	Reason for variance or comments
Schemes in Progress				
Bridewell Museum Development	0.065	0.065	0.000	Project is complete with some final works currently being carried out.
Gressenhall Eco Building	0.139	0.139	0.000	Project is now in progress.
Seahenge	0.007	0.007	0.000	Project complete and the remaining funds are used for final timbers conservation work.
Gressenhall Biomass Boiler CERF	0.014	0.014	0.000	Works complete but waiting for hopper redesign.
Gressenhall FWH Wind & Solar CERF*	0.017	0.017	0.000	Delayed scheme due to planning permission.  A third application has been submitted.
Museum Stock System	0.120	0.120	0.000	System review underway and due to be completed by March 2014.
CERF* Shirehall Replacement Lighting	0.008	0.008	0.000	NPS managed scheme.
CERF* Strangers Hall Replacement Lighting	0.007	0.007	0.000	NPS managed scheme.
CERF* Gressenhall Back Hall Lighting	0.004	0.004	0.000	Complete - waiting for final invoices.
Prior Years Corporate Minor Works	0.065	0.058	0.000	Works mainly complete but waiting for final invoices.
Schemes in Progress – Total	0.446	0.439	0.000	
Total Capital Programme	0.446	0.439	0.000	

<sup>•</sup> CERF is the Carbon Energy Reduction Fund

•	Corporate Minor Works relate to health and safety and DDA essential works that are funded from the NCC capital programme and approved by submission to the Corporate Capital and Asset Management Group.

# Capital Programme 2013-14 – Norfolk Record Office

Scheme	2013-14 Budget £m	2013-14 Forecast Outturn £m	2013-14 Forecast Slippage £m	Reason for variance or comments
Schemes in Progress				
CCTV System Upgrade	0.001	0.001	0.000	Replacing original system including cameras and monitors. Waiting for final invoices.
Total Capital Programme	0.001	0.001	0.000	

\*CERF is the Carbon Energy Reduction Fund

# Capital Programme 2013-14 – Adult Education

Scheme	2013-14 Budget £m	2013-14 Forecast Outturn £m	2013-14 Forecast Slippage £m	Reason for variance or comments
New Starts				
CERF* Adult Education Centre Attleborough – lighting, insulation and draught proofing	0.036	0.036	0.000	NPS managed scheme started April 2013.
CERF* Adult Education Centre Thorpe – lighting, insulation and draught proofing	0.006	0.006	0.000	NPS managed scheme to complete in April 2013.
Total Capital Programme	0.042	0.042	0.000	

#### **Appendix D**

#### **Cultural Services: Reserves and Provisions**

There have been some changes to reserves and provisions. The table summarising forecasts at end of October 2013 appears below.

- a. The Libraries Repairs & Replacement reserve is expected to reduce by £0.078m for internally funded projects. The School Library Service reserve has reduced by £0.079m to reflect the restructure caused by the ending of schools grant funding. Unspent Grants and Contributions Reserve reflects the expected usage of funds brought forward for multi-year projects in the year. The ICT Reserve provides for the ongoing replacement programme of ICT equipment used by the public in Libraries
- b. The Museums Service Repairs & Replacement reserve is expected to reduce by £0.061m for Gressenhall security and Elizabethan House refurbishment. £0.384m from the Unspent Grants & Contributions Reserve is expected to be transferred to revenue for continuing project expenditure in 2013-14(including the Catalyst project and Arts Council England funding).
- c. The Record Office Repairs & Replacement reserve is expected to reduce by £0.053m for Manorial and Horner Cataloguing projects and the Unspent Grants and Contributions reserve is expected to reduce by £0.041m for continuing externally funded projects in 2013-14
- d. Adult Education reserves were reduced in 2012-13 for the return of the 2011-12 academic year unused grant to the Skills Funding Agency. The income reserve is currently lower than the target level of 5% of income agreed for the service. The Unspent Grants and Contributions Reserve are for projects continuing in 2013-14
- e. The Arts Service expects to spend all reserves set aside for continuing projects in 2013-14 and to offset the 2013-14 arts grants saving of £0.049m
- f. Active Norfolk has carried forward £0.321m of external funding in the Unspent Grants and Contributions reserve for projects continuing in 2013-14 and expects that this will reduce by £0.201m during the year

Reserves and Provisions 2013-14	Balances at 1 April 2013	Forecast at 31 March 2014	Change	
	£M	£M	£M	
Norfolk Library and Information Service	e			
Libraries Renewals and Replacement Reserve	0.681	0.603	-0.078	
ICT Reserve	0.588	0.588	0.000	
School Library Service Replacements and Renewals	0.324	0.245	-0.079	
Unspent Grants and Contributions	0.118	0.117	-0.001	
Service Total	1.711	1.553	-0.158	
Norfolk Museums and Archaeology Service				
Museums Income Reserve	0.079	0.079	0.000	
Museums Repairs and Renewals Reserve	0.340	0.279	-0.061	
Unspent Grants and Contributions	0.634	0.250	-0.384	
Service Total	1.053	0.608	-0.445	
Norfolk Record Office				
Residual Insurance and Lottery Bids	0.368	0.315	-0.053	
Unspent Grants and Contributions	0.049	0.008	-0.041	
Service Total	0.417	0.323	-0.094	

Reserves and Provisions 2013-14	Balances at 1 April 2013	Forecast at 31 March 2014	Change
	£M	£M	£M
Adult Education Service			
ICT Reserve	0.000	0.000	0.000
Income Reserve	0.017	0.017	0.000
Unspent Grants and Contributions	0.089	0.089	0.000
Service Total	0.106	0.106	0.000
Norfolk Arts Service			
Unspent Grants and Contributions	0.039	0.001	-0.038
Repairs and Replacements Reserve	0.028	0.000	-0.028
Service Total	0.067	0.001	-0.066
Active Norfolk			
Unspent Grants and Contributions	0.321	0.120	-0.201
Service Total	0.321	0.120	-0.201
Cultural Services Totals	3.675	2.711	-0.964

Appendix E Adult Social Care: Reserves and Provisions

	1	1	Adult Social Care: Reserves and Provisions		
Reserves and Provisions 2013-14	Balances at 1 April 2013	Position at 31 March 2014	Comments		
	£m	£m			
Doubtful Debts Provision	1.055	0.951	This will decrease as bad debts are written off. A significant amount of this reserve is for specific debts.		
Adult Social Care Residential Review Reserve	3.594	2.023	Purpose of this reserve is to develop residential homes and Housing with Care. The NorseCare annual rebate is paid into this reserve. Required in future years for the Building Better Futures programme, including the transformation of the homes transferred to Norse Care on 1 April 2011. £1.5m is earmarked for the future Peterhouse scheme.		
IT Reserve	1.491	1.491	For the implementation of various IT projects and IT transformation costs, including MSC (Modern Social Care) Phase Two, Carefirst Upgrade and Portal.		
Repairs and Renewals – in Homes and Housing With Care schemes	0.071	0.031	Dilapidation costs incurred due to the cessation of a number of lease agreements for offices.		
Adult Social Care Legal Liabilities Reserve	3.594	3.253	Cabinet approved on 9 May 2011 the creation of the Adult Social Care Legal Liabilities reserve to cover the potential costs arising from the dismissal on Tuesday 15 February 2011 at the Court of Appeal of the appeal lodged by Hertfordshire County Council regarding the funding of aftercare under section 117 of the Mental Health Act. The department was able to absorb most of these pressures in 2012-13 but at this stage of the financial year is forecasting using £0.341m of this reserve in 2013-14.		
Living Well in the Community Fund	0.830		On 4 April 2011 Cabinet agreed that the unspent Supporting People grant should be used to create a Prevention Fund and carried forward to support prevention work. This is called the Living Well in the		

Reserves and Provisions 2013-14	Balances at 1 April 2013	Forecast Position at 31 March 2014	
(original Prevention Fund set up at the end of 2011-12)			Community Fund and the funding was awarded in 2012-13. Payments are allocated when key milestones are met and therefore are being paid across financial years.
Prevention Fund 2012-13	3.237		As part of the 2012-13 budget planning Members set up a Prevention Fund of £2.5m.  Cabinet agreed at the 2011-12 year end that the department could contribute £1m to this fund to mitigate the risks in delivering the prevention savings in 2012-13 and 2013-14, particularly around reablement and Service Level Agreements, and the need to build capacity in the independent sector. At this stage of the financial year the department is anticipating using £1m from this reserve.
Unspent grants and contributions	3.891		Mainly the Social Care Reform Grant which is being used to fund the Transformation in Adult Social Care. The grants are being used as needed.
Redundancy Provision	0.130	0.083	Will be used against costs of pay protection for supernumery staff.
Adult Social Services Total	17.892	12.923	

# Report to the Community Services Overview and Scrutiny Panel 7 January 2014 Item No 9

## Putting People First – Service and Budget Planning 2014/17

Report by the Director of Community Services

#### Summary

At its November meeting, the Panel considered a report on proposals for service and financial planning for 2014-17. This report sets out the latest information on the Government's Local Government Finance Settlement and specific information on the financial and planning context for Community Services for the next three years. It also sets out any changes to the budget planning proposals for Community Services and the proposed cash limit revenue budget for the service based on all current proposals and identified pressures and the proposed capital programme.

#### **Action Required**

Members are asked to consider and comment on the following:

- a. The provisional finance settlement for 2014-15 and the latest planning position for Norfolk County Council
- b. The updated information on spending pressures and savings for Community Services and the cash limited budget for 2014-15 in context with the feedback from the consultation reported elsewhere on this agenda
- c. The proposed list of new and amended capital schemes and the proposed capital programme for Community Services

# 1 Background

- 1.1 A report to Cabinet on 2 September confirmed that the projected funding gap for planning purposes should be increased from £182m to £189m over the three year period 2014/17 based upon information from the Department of Communities and Local Government (CLG).
- 1.2 On 19 September the County Council launched Putting People First, a consultation about the future role of the County Council, and about specific budget proposals for 2014/17. The context for this consultation is the Council's need to bridge a predicted budget gap over the next three years, due to increasing costs, increased demand for services, inflation and a reduction in Government funding.
- 1.3 This paper brings together for Panel Members the following:
  - a. Financial and planning assumptions agreed by Cabinet in September to inform the Council's budget proposals
  - b. An updated budget position for Community Services based on the local

- government settlement published in December
- c. A detailed list of costs and pressures facing Community Services
- d. A detailed list of proposals for savings

#### 2 Latest Planning Position

2.1 A separate statement will be circulated prior to the meeting if there has been a material change to the latest planning position.

# 3 Provisional Local Government Settlement 2014-15 and the Autumn Statement 2013

- 3.1 The Chancellor of the Exchequer announced his Autumn Statement on 5 December. Our planning assumptions remain broadly the same. It is important to note that the additional £3bn cuts do not affect local government funding directly. However there may be some reductions due to cuts in the Department of Education funding (£167m 2014-15 and £156m 2015-16) and we await further details
- 3.2 New Homes Bonus funding will not be transferred to the local growth fund except £70m for the London Local Enterprise Partnership. This equates to a reduction in pressures of £1.3m in 2015/16 for NCC as the assumed reduction based on the earlier proposed transfer will not now take place.
- 3.3 The 2013/14 business rate multiplier was due to increase by 3.2% reflecting the September 2013 RPI figure, which has been confirmed by ONS. However, the RPI increase in business rates will be capped at 2% for one year from 1 April 2014. Fully funded business rate policy changes such as:
  - a. Small Business Rates Relief will be extended to April 2015; it was due to end April 2013
  - b. A 50% business rates relief for 18 months up to the state aid limits will be available for businesses that move into retail premises that have been empty for a year or more
- 3.4 A letter received from Eric Pickles states that local authorities will be fully refunded for these changes. We await details as part of the provisional settlement.
- 3.5 Local authorities will have some flexibility to use capital receipts for service reform. Total spending of £200m will be permitted across 2015-16 and 2016-17 and local authorities will have to bid for a share of this flexibility.
- 3.6 A separate statement will be provided to the panel when the finance settlement has been received and analysed.

# 4 Implications of the settlement for Community Services

4.1 Authorities have received more information about the additional £2bn monies due to be transferred to local government from Health in 2015-16. A Joint Statement issued by the LGA and NHS England on 7 August sets out plans for a total funding pot of £3.8bn nationally to be pooled for Health and Social Care services to promote

closer joint working in local areas on a plan agreed between the NHS and local authorities. It is proposed that the pooled fund be called the 'Health and Social Care Integration Transformation Fund.' Work is ongoing to develop in more detail how the pooling arrangement will work and some of the funding will be performance related.

4.2 At this stage it is not clear whether there will be additional recurring Government funding for the extra costs associated with the Social Care Bill reforms, including the additional packages of care and the extra care and financial assessments for people who currently fund their own care, other than the funding announced in the recent Spending Review. The Council has asked for clarification of this in its response to the consultation on the implementation of the Bill. At this stage Adult Social Care and the Council has not factored any extra costs into its budget planning for 2016-17 and onwards.

## 5 Overview and Scrutiny Panel comments

- On the basis of the planning context and budget planning assumptions, Panels in November considered planning proposals and issues of particular significance. At the Community Services Overview and Scrutiny Panel meeting on 5 November, the following issues were identified by Members as having particular impact on service delivery and achievement of the Council's priorities:
  - a. The important role that mobile libraries had in providing services in isolated rural areas of the County and the dangers that were associated with lone working in isolated static library locations
  - b. The Department needed to be careful not to place too much emphasis on the contribution which volunteers could make to its work: while volunteers had an important role in the running of care services, they were no substitute for professional members of staff working in key areas of service delivery

#### 6. Timetable

- 6.1 Earlier comments and any arising from this meeting will be reflected in the budget Report, along with other Overview and Scrutiny Panel comments, to Cabinet on 27 January 2014.
- 6.2 Cabinet will then make their recommendations to County Council meeting 17 February 2014.

# 7 Budget Proposals for Community Services

#### 7.1 **Revenue Budget**

7.1.1 The attached proposals at Appendix A, set out the proposed cash limited budget. This is based on the cost pressures and budget savings reported to this Panel in November adjusted for a downward revision of the estimated demographic pressures facing Adult Social Care over the next three years as follows:

2014-15 reduction of £2.524m; 2015-16 reduction of £3.423m;

- 2016-17 reduction of £3.324m.
- 7.1.2 Although the Norfolk population is forecast to continue to grow including older people, the percentage increase year on year for older people appears to be reducing slightly. There also continues to be a reduction in the demographic growth pressure in Learning Difficulties. This appears to be in the area of transition which is partly due to the work on smoothly transitioning people from Children's to Adults, and past work on bringing down the cost of packages (volume discounts, review of high cost packages etc).
- 7.1.3 Community Services has developed these proposals within the context of some well understood factors that affect the way it plans services. These include:
  - a. Norfolk's ageing population, and high numbers of people with physical disabilities and learning disabilities, which drives growing demand for care services
  - b. Significantly changing social care legislation that is likely to affect how we assess people, charge people and commission services
  - c. Changes in the nature of the demand for universal cultural services, including an increase in demand for online information and services
- 7.1.4 Significant savings have already been made by the department, which is currently on target to achieve savings of £49.312 million for the three years 2011-14.
- 7.2 Together the proposals form part of a strategy to deliver services that are focused on our core statutory responsibilities and the things that Norfolk people rely on most. This means delivering a smaller set of priorities within the department, including:
  - a. Making sure vulnerable people are safe
  - b. Keeping people independent and preventing admissions to hospital or residential care
  - c. Integrating health and social care services so that services are efficient, effective and easy to understand
  - d. Supporting carers
  - e. Working with providers of care services to ensure the quality and availability of services
  - f. Delivering high quality and accessible cultural services
- 7.3 There are 26 proposals specific to Adult Social Care and 20 proposals specific to Cultural Services shown in Appendix A.
- 7.4 When developing potential options consideration was given to what services could be conducted by the third tier and voluntary services and the community as well as identifying services that we are not statutorily obliged to provide. Proposals have been assessed according to the impact and risk to the public. The figures in brackets below refer to the proposed savings to be made over the three years 2014-17.
- 7.5 Within the consultation there are two areas of service that the authority is proposing to cease in Community Services:
  - a. Stop ongoing revenue spend on the Strong and Well programme (£0.500m). In 2013-2014 through its Strong and Well initiative NCC is

investing £0.500m from its revenue budget and £0.500m from its capital budget in prevention support for older people. It was planned that this extra money would pay for community groups to visit vulnerable people aged over 75 to talk to them about what help they need to stay well and independent, and to put them in touch with services that might help. Although NCC has had some talks with community groups about how to use the Strong and Well fund, no final decisions have been made yet and nobody is yet receiving a service through this fund this financial year. If this proposal is agreed this planned increase in support for people with less severe social care needs will not be funded for the remaining four years 2014 - 2018

- b. Stop or scale back the availability of music and play sets from the library (£0.010m)
- 7.6 The following proposals involve a reduction in service:
  - a. Reduce training budget (£0.500m). The training budget is used to provide training to people employed by external care providers as well as staff employed by Adult Social Care
  - b. Reduce funding for non-core social care needs for people receiving support from Adult Social Care through a personal budget (£12m). The proposal is to redefine what it is reasonable for people and communities to do and pay for themselves as part of ordinary life and what social care funding should be spent on. The proposal is that social care funding should be used to pay for personal care, respite day care and residential care but not for wellbeing activities, which should be funded by individuals themselves or provided by the community. This will mean that some peoples' personal budget will be reduced. NCC would provide a list of the kinds of activities that they would fund and this would exclude support for accessing leisure and non-care activities. The Purchase of Care budget in 2013-14 is approximately £208m
  - c. Scale back housing-related services and focus on the most vulnerable people (£2.4m). The department is proposing to reduce the funding for housing support organisations to provide supported housing and other forms of housing support to around 17,000 people in Norfolk including: sheltered housing; hostels; refuges; supported housing; floating support for people who need housing related help and advice in their own homes; and home improvement agencies and handypersons services. The department will work with its partners, including Children's Services, Public Health and District Councils, to look at what is done across all the partner organisations for vulnerable people, including home care and prevention, and remodel this whilst ensuring that the Adult Social Care funding is focussed on its statutory function. It will also work with providers of services to deliver efficiencies. The budget is currently £14.5m
  - d. Reduce the number of Adult Care service users we provide transport for (£2.1m) The department proposes to revisit the eligibility of a person to have transport provided by the department or to use their personal budget allocation to buy transport, particularly if they have a motability vehicle or mobility allowance. As part of this the department would also review the provision of lease cars to service users. To implement this proposal the department will review the weightings of the questions in the Personal Budget

Questionnaire. Adult Social Care currently spends over £7m each year on providing transport for people. The department is aware that some other local authorities do not provide transport if a person has a motability vehicle or mobility allowance. Other local authorities also signpost people who want to access transport to the community transport options, where a person for example directly pays a volunteer driver to transport them

- e. Reduce how often mobile libraries call at some places (£0.109m).

  Review the mobile library service routes to identify opportunities for further rationalisation and the potential for any further income generation
- f. Reduce funding for the arts service, including arts grants (£0.110m). The proposal is to review individual grants and a reduction in staffing
- g. Close Norfolk Records Office on Saturday mornings (£0.012m). Closing the Norfolk Records Office on Saturday mornings will mean that a saving can be made from shutting the plant down all weekend
- 7.7 The following proposals involve different ways of delivering some of our services:
  - Review block home care contracts (£0.400m). Reviewing block home care contracts to ensure they are used to maximum effect and rationalising them if necessary
  - b. Review of agreement with Mental Health Trust (£0.500m). Review the agreement to deliver savings e.g. the skill mix of staff within the mental health teams
  - c. Cut the costs of the contract with the provider delivering community health support to people with a learning disability (£0.960m). Review the contract for Community Nursing Services and look to deliver changes and savings, eg reviewing the skill mix of teams, people using mainstream health services where possible
  - d. **Community Safety (£0.110m).** New team structure and reduction in the number of posts
  - e. NHS Invest to save (£3m)
  - f. Further Savings from PCSS (Personal Community Support Service) (£0.500m). PCSS have delivered annual savings of £1.75m. Once they are set up as a social enterprise company (Independence Matters) they will deliver further savings
  - g. Review Care Arranging Service (£0.140m). Looking at savings and other delivery models for the Care Arranging Services, including outsourcing the service
  - h. Reducing hospital admissions by increasing investment in care for people most at risk (£18m). This relates to the funding referred to in paragraph 3.2 and consists of: £3m in 2014-15 which is an estimate of the government funding Norfolk will receive to accelerate social care transformation, as included in the Spending review; and £15m in 2015-16 which is an estimate of the government Integration Funding the Council will receive. Adult Social Care will work with Health to target services at high risk groups to prevent hospital admissions and reduce social care and NHS expenditure.

There is a very high level of risk around this saving as the Integration Funding has to be part of a Pooled Fund with Health. The Clinical Commissioning Groups (CCGs) and NHS England have to agree on what the money can be

- spent on. At this point in time it is not clear what the funding will be used for. There may also be a further estimated £15m of funding that Adult Social Care could receive but this will be based on payment by results and therefore has not been included
- i. Change the type of social care support that people receive to help them live at home (£0.400m). The authority would: look at how it supports people in local communities and ways of doing this more efficiently, reducing the pressure on residential care services; commission support at home with more of an outcome and reablement focus and set goals, eg greater mobility, rather than buy care based on the number of hours; review people who have a low number of hours of home care each week and look at meeting their needs in different ways; ensure people are accessing services that are available to everybody where appropriate; amalgamate existing services, eg floating support and home care, to help maintain peoples' independence
- j. Changing how we provide care for people with learning disabilities or physical disabilities (£6m). This proposal is to develop more cost effective solutions for people receiving care who have Learning Difficulties or Physical Disabilities. Actions would include: renegotiating existing supported living contracts; investing more in and speeding up the existing housing development work using capital to make revenue savings by providing different housing support; working with people to reduce 24 hour a day, seven day a week care where it is not needed; ensuring all people who are potentially eligible for Continuing Health Care have been referred to Health for an assessment
- k. Work better with the NHS to deliver the Reablement and Swifts Services and look to share costs equitably (£3m). Adult Social Care in Community Services spends approximately £6.3m each year on this service, and Health provide £1.3m of funding. Around half the people using this service have a health-related need. The reablement service (Norfolk First Response) provides intensive support in a person's own home for up to six weeks. Swifts or Norfolk Swift Response is a 24-hour service that provides help, support and reassurance if someone has an urgent, unplanned need at home but doesn't need the emergency services. The Council will look at: different integrated models for delivery of this service with the NHS; further avoiding/reducing the overlap/duplication of rehabilitation services provided by Health and reablement provided by Adult Social Care; whether partners will consider increasing the funding they contribute towards the cost of this service; and if needs be, reducing the service to only provide social care and not taking hospital referrals
- Develop community and commercial links records office (£0.030m). To generate sponsorship, contributions and other forms of income, eg enable digital access to other organisations
- m. Share library buildings with other organisations (£0.180m). Work with communities, services and organisations to ensure libraries are hubs in local communities
- 7.8 We are also considering the following areas of efficiency in relation to the service:
  - a. Electronic Monitoring of Home Care providers (£0.500m). Receive information electronically from home care providers about the services delivered into CareFirst (the social care record system through which

- payments to providers are made). This would link to the systems providers already have in place where possible
- b. Review of Norse Care agreement for the provision of residential care (£4.5m). Reduce the costs of the Norse Care contract (approximately £33.5m pa) by reviewing the current arrangements including the redevelopment strategy
- c. Review of respite care (£0.300m)
- d. **Decommission offices, consolidate business support (£0.150m).** Further roll out remote and agile working across the service and look to expand the flexible use of other public sector offices
- e. **Reduction in Business Support (£0.100m).** More self service and rationalisation of business support posts
- f. Reducing controllable spend in Community Services (£0.810m) Eg travel
- g. Joint/integrated posts with Health manager, occupational therapists, assistant grades (£0.350m). Sharing of posts with the NHS to reduce costs
- h. Trading Assessment and Care Management support for people who fund their own care (£0.050m). Look at developing a chargeable assessment and care management service for people who fund their own care
- i. Restructuring Museums (£0.140m)
- j. Restructuring Records Office (£0.070m)
- k. Energy savings in Records Office (£0.020m)
- l. Administrative efficiencies in Adult Education (£0.010m)
- m. Administrative efficiencies (£0.104m). Efficiency savings across Libraries, Museums and Records from equipment procurement and use, stationery and training
- n. **Renegotiating Joint Museums funding (£0.050m).** Renegotiating funding with local authority partners
- o. **Museums Gift Aid and Cultural Exemptions (£0.554m).** Establish a fund raising foundation for admissions income to enable the service to secure Gift Aid donations and to bid for additional funding streams
- p. **Museums Income generation and external funding (£0.101m).** Develop new or enhanced income streams and external funding. Look to reduce the cost base where possible to increase the margin on existing sales
- q. Norfolk Record Office Increased income generation (£0.060m)
- r. Reduce spend on library books and other materials (£0.350m). Using the efficiencies from the new contract to spend less on books
- s. Reduce the number of library managers (£0.050m). Library managers would cover more libraries where geographical proximity makes this appropriate and feasible
- t. **Reduce the number of library staff (£0.350m).** Develop and implement a policy to allow some libraries to be staffed by only one person
- u. Charge for some activities provided in libraries (£0.030m). Eg hiring out rooms/space within libraries, seeking sponsorship for some free services, selling advertising space
- v. Send overdue item reminders electronically (£0.020m). Stop sending paper overdue notifications

## 8 Capital Budget

- 8.1 The context for the NCC capital programme, proposed capital funding and projects within the overall programme is shown in Appendix B.
- As in previous years it is proposed that Government allocation of capital grant will be earmarked to the services for which the grant has been made. The Government announced last year that the Community Capacity Capital Grant for Adult Social Care will be £2.292m in 2014-15. The department expects that this money will be needed for: the Building Better Futures initiative which includes the transformation of the 26 residential homes transferred to Norse Care and the increase in the number of Housing With Care schemes across Norfolk; as well as the remodelling of the in house day services and housing development work for people with learning difficulties, people with physical disabilities and people with mental health problems.
- 8.3 In accordance with the Capital Strategy, departments have submitted bids for corporate capital funding or prudential borrowing to the Corporate Capital and Asset Management Group (CCAMG). These bids relate in the main to schemes or services for which the Government support is available but which are nevertheless considered to be a priority. CCAMG has reviewed new bids and considered whether any are appropriate for consideration by this Panel. There are no schemes relevant to this Panel.

## 9 Putting People First - consultation

9.1 On 19 September 2013 we launched the Putting People First budget consultation about the future role of the County Council and specific budget proposals for 2014/17. The consultation closed on 12 December. A paper setting out the equality impact assessment of the budget proposals and a summary of the responses relevant to this Overview and Scrutiny Panel is reported to the Panel elsewhere on this Agenda.

# 10 Resource Implications

- 10.1 **Finance :** Financial implications are covered throughout this report
- 10.2 **Staff:** Some of the proposals in section seven will mean a reduction in the number of staff in the department. Staff implications will be reviewed as part of the overall assessment for individual proposals.
- 10.3 **Property:** Property implications have been reviewed as part of the overall assessment for individual proposals.
- 10.4 **IT:** IT implications have been reviewed as part of the overall assessment for individual proposals.

# 11 Other Implications

11.1 **Legal Implications:** Legal implications have been reviewed as part of the overall assessment for individual proposals.

- Human Rights: Human Rights implications are being assessed on an individual budget proposal basis as part of the Equality Impact Assessment process.
- 11.3 **Equality Impact Assessment (EqIA):** The assessment of equality impact of the budget proposals is included in a separate report to this Panel.
- 11.4 **Communications:** See section nine above.
- 11.5 **Health and Safety Implications:** Health and Safety implications will be reviewed as part of the overall assessment for individual proposals.
- 11.6 **Environmental Implications:** Environmental implications will be reviewed as part of the overall assessment for individual proposals.
- 11.7 **Any other implications:** Officers have considered all the implications which members should be aware of. Apart from those listed in the report (above), there are no other implications to take into account.

#### 12 Section 17 – Crime and Disorder Act

12.1 Issues in relation to the Crime and Disorder Act will be reviewed as part of the overall assessment for individual proposals.

#### 13 Risk Implications/Assessment

- 13.1 Some of the main risks and issues associated with these proposals have been highlighted in Section 7. However, given the scale of potential change associated with the budget proposals, there are a series of risks which are generic to all services. These are:
  - a. **Service performance:** the risk that the scale of change will impact on performance and on user satisfaction with services
  - b. **Staffing:** the risk that skills and knowledge may be lost as people leave or are made redundant, and that staff morale is adversely affected
  - c. **Capacity for change:** the proposals require significant transformation and change to services, and there is a risk that there will be insufficient capacity to re-design services and implement new ways of working
  - d. Increasing demand: there is a risk that where preventative services are being scaled back, that there may – in future – be an increased risk in demand, as people's needs become more pressing
- 13.2 Specific risks for Community Services are:
  - a. Previously, as part of its budget planning the department tried to protect the Purchase of Care budget and not make any savings directly from this budget. The Purchase of Care budget is the largest Adult Social Care budget (£208m) and is used to purchase care packages for individuals from the independent sector. However given the level of savings already made and required to be made in the future this is not possible for 2014-17 and the proposals include cuts to the Purchase of Care budget. The main ones are reducing funding for non-core social care needs for people receiving support

- from Adult Social Care through a personal budget and changing how we provide care for people with learning disabilities or physical disabilities (total of  $\mathfrak{L}18m$ ). This will mean reducing the money that people receive from the department
- b. The Health and Social Care Bill (see paragraph 4.2) if enacted will increase the expenditure on packages of care and reduce/restrict service user contributions from April 2016. .No provision has been made for this increase in expenditure nor for the potential income reduction. The Social Care bill proposes that people with capital of less than £118,000 will be eligible for social care funding currently the limit is £23,250. The bill also proposes to put a cap of £72,000 on peoples' contributions towards the cost of their care, excluding living costs. The 2013/14 budget for income from service users is £72m. Given the number of older people in Norfolk this is a significant risk to the authority and it is not clear what Government funding will be available to mitigate this. A risk has been added to the departmental risk register around this
- c. The level of demographic growth may be greater than anticipated. The Purchase of Care budget is £208m for 2013/14 and a 1% variation amounts to £2.08m
- d. As mentioned in the Service and Budget Planning reports for previous years, in 2013/14 the Council was allocated £14.956 million to be transferred from the Health service in Norfolk to support joint working on social care between the County Council and Health. The funding transfer from the NHS to Social Care for 2014/15 for Norfolk has not been announced yet but the amount allocated for Norfolk is estimated to be a similar amount, £15m. This is in addition to Reablement funding. As in the previous years the Government requires that the local authority agrees with its local health partners how the funding is best used within social care, and the outcomes expected from this investment. The Government states that Health and Well Being boards will be the natural place for discussions between the Board, clinical commissioning groups and local authorities on how the funding should be spent, as part of their wider discussions on the use of their total health and care resources. A report on health funding is being presented to the Health and Well Being Board on 9 January. At this stage of budget planning it has been assumed that the money received by Norfolk County Council will be used for similar purposes in 2014/15 as in 2013/14, for example £5m will still be used in 2014-15 to offset the savings from Prevention that would otherwise have had to be made in 2011-12. The money will also be used to mitigate significant risks in the 2014-15 budget for Adult Social Care which would otherwise require a reduction in the amount of care purchased from care providers
- e. As mentioned at 7.7h there is a high level of risk for Reducing hospital admissions by increasing investment in care for people most at risk (£18m). There is a very high level of risk around this saving as the Integration Funding has to be part of a Pooled Fund with Health. The Clinical Commissioning Groups (CCGs) and NHS England have to agree on what the money can be spent on. Although there are ongoing discussions on this at this point in time it is not clear what the funding will be used for

- f. In 2013-14 the department will receive £1.3m of reablement funding from the CCGs (Clinical Commissioning Groups) in Norfolk. This has been used to help fund the integrated Community Services Norfolk First Response service (Norfolk First Support reablement service and Swifts). Although discussions are ongoing there has been no agreement from the CCGs that they will provide any reablement funding in 2014-15. The department is currently assuming that there will be health reablement funding of £1.3m in 2014-15 and of £4.3m in 2015-16 and future years. If this reablement funding is not received in 2014-15 and future years, the department will not be able to make the budgeted savings. See also paragraph 7.7k.
- g. The department carried out a review of the cost of care with the independent sector in 2012-13 and the results informed the inflationary uplift agreed for 2013-14 with representatives of the independent sector. The results from 2012-13 are being updated to inform discussions with the independent sector about the inflationary uplift for 2014-15. Included in the 2014-15 budget plan is 2% to fund the uplift.
- h. There are some savings the department had planned to make in 2011-14 but has not. These are going to be offset in 2014-15 and future years by recurring savings and underspends in other departmental areas. They are:
  - i. saving of £-0.535m in 2012-13 to be achieved from reducing and redesigning the management and support arrangements as a consequence of service re-design. Given the restructurings carried out in 2011-12 and the need for leadership and management to deliver savings it has not been possible to identify how to deliver this planned saving
  - ii. the savings of £0.597m in relation to A16 in 2012-13
- i. Risks that are being carried into 2014-15 are:
  - i. the forecast for Mental Health expenditure in 2013-14, as in previous years, anticipates only a partial achievement of budgeted savings.
  - ii. the corporate risk RM14079 remains ie the failure to meet the long term needs of older people. This is to reflect that if the Council is unable to invest sufficiently to meet the increased demand for services arising from the increase in the population of older people in Norfolk it could result in worsening outcomes for service users, promote legal challenges and negatively impact on the Council's reputation. The Barnet "Graph of Doom" showed the Barnet forecast that by 2030, based on current demographic pressures and budgetary restraints, Barnet will only have enough funding to provide Adults and Children's social care, ie there will be no funding for other services currently provided by the local authority. The Local Government Association modelling shows a similar projection for local authorities.

# 14 Action Required

- 14.1 Members are asked to consider and comment on the following:
  - a. The provisional finance settlement for 2014-15 and the latest planning position for Norfolk County Council

- b. The updated information on spending pressures and savings for Community Services and the cash limited budget for 2014-15 in context with the feedback from the consultation reported elsewhere on this agenda
- c. The proposed list of new and amended capital scheme and the proposed capital programme for Community Services

# **Background Papers**

None

#### **Officer Contact**

If you have any questions about matters contained in this paper please get in touch with:

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If you need this report in large print, audio, Braille, alternative format or in a different language please contact Jill Perkins on 0344 800 8020 or textphone 0344 800 8011 and we will do our best to help.

# Proposed Budget Changes for 2014-17 – Community Services Adult Social Care

		2014-15 £m	2015-16 £m	2016-17 £m
	Base Budget	257.454		
	ADDITIONAL COSTS			
	Economy			
	Basic Inflation - Pay ( 1% for 14-17 )	0.470	0.475	0.479
	Basic Inflation - Prices	4.561	4.658	4.756
	Demographics			
	Demographic growth	6.934	6.035	6.134
	NCC Policy Independence Matters increased pension			
	contributions	0.509		
	Additional costs for Insurance relating to the creation of Independence Matters	0.044		
	Irrecoverable VAT additional charge relating to the creation of Independence Matters	0.145		
	Norsecare pension liability	0.883		
	Local reform & community voices (DH revenue) additional spend	0.023		
	Total Additional Costs	13.569	11.168	11.369
Ref*	BUDGET SAVINGS			
4	Re-negotiate contract for buying and leasing mini-buses	-0.090		
4	Reducing the costs of business travel	-0.108	-0.099	-0.090
6	Electronic Monitoring of Home Care providers			-0.500
6	Review block home care contracts	-0.300	-0.100	
6	Review of agreement with Mental Health Trust	-0.500		
6	Review of Norse Care agreement for the provision of residential care	-2.000	-1.000	-1.500
6	Review of respite care	-0.300		
8	Reduction in Business Support	-0.100		
8	Community Safety	-0.110		
8	Decommission offices, consolidate business support		-0.150	
9	Reducing controllable spend in Community Services	-0.640		
9	Reduce training budget	-0.500		
13	NHS: Invest to save	-3.000		
14	Further Savings from PCSS (Personal Community Support Service)	-0.250	-0.250	
14	Review Care Arranging Service		-0.140	
18	Reducing hospital admissions by increasing investment in care for people most at risk	-3.000	-15.000	
18	Joint senior manager posts with Health	-0.200		

<sup>\*</sup> Ref - the Public Budget Consultation reference

		2014-15 £m	2015-16 £m	2016-17 £m
18	Integrated occupational therapist posts with Health		-0.100	
18	Assistant grade posts working across both health and social care		-0.050	
20	Trading Assessment and Care Management support for people who fund their own care			-0.050
20	Economic Development securing more funding for key care services		-0.750	-0.750
30	Change the type of social care support that people receive to help them live at home	-0.200	-0.200	
31	Reduce funding for non-core social care activities for people receiving support from Adult Social Care through a personal budget	-6.000	-3.000	-3.000
32	Cut the costs of the contract with the provider delivering community health support to people with a learning disability	-0.960		
33	Changing how we provide care for people with learning disabilities or physical disabilities	-1.000	-2.000	-3.000
34	Work better with the NHS to deliver the Reablement and Swifts Services and look to share costs equitably.		-3.000	
35	Scale back housing-related services and focus on the most vulnerable people	-1.200	-1.200	
36	Reduce the number of Adult Care service users we provide transport for	-1.800	-0.150	-0.150
37	Stop ongoing (revenue) spend on the Strong and Well programme	-0.500		
	Putting People First proposals sub total	-22.758	-27.189	-9.040
	Other savings sub total	0.000	0.000	0.000
	Total Savings	-22.758	-27.189	-9.040
	COST NEUTRAL ADJUSTMENTS i.e. which do not have an impact on overall Council Tax			
	*Depreciation	-0.481		
	*REFCUS	0.000		
	Debt Management Expenses	-0.001		
	To Resources: Payments and Billing Team Local Reform and Community Voices Grant: Independent Complaints Advocacy Service Expenditure	-0.248 0.247		
	Local Reform and Community Voices Grant: Independent Complaints Advocacy Service Grant Income	-0.247		
	To Communications (Resources) – Transfer relating to Carrow House Reception	-0.005		
	From Communications (Resources) – Transfer relating to Citizen Advice Bureau	0.364		
	Shared Service budgets relating to the creation of Independence Matters	0.212		
	To Resources - Social Care Centre of expertise	-2.265		
	From Information Management (Resources) to Adult Social Care – to reflect one-off amount in	0.018		

	2014-15 £m	2015-16 £m	2016-17 £m
2013-14			
Sub total Cost Neutral Adjustments	-2.406		
BASE ADJUSTMENTS			
Local reform & community voices (DH revenue) grant	-0.023		
Sub total Base Adjustments	-0.023		
TOTAL	245.836		

# **Proposed Budget Changes for 2014-17 – Community Services Cultural Services**

		2014-15 £m	2015-16 £m	2016-17 £m
	Base Budget	16.980		
	ADDITIONAL COSTS			
	Inflation			
	Basic Inflation – Pay ( 1% for 14-17 )	0.176	0.178	0.180
	Basic Inflation – Prices	0.136	0.141	0.145
	NCC Policy			
	Reduce the scale and capacity of improvement			
	and intervention services for schools – school	0.179		
	library service income reduction			
	Norfolk Sports and Cultural Foundation	0.030		-0.030
	Total additional costs	0.521	0.319	0.295
Ref	BUDGET SAVINGS			
8	Restructuring – Museums	0.140		
8	Restructuring Records Office	0.070		
8	Energy savings in Records Office	0.020		
8	Administrative efficiencies in Adult Education	0.010		
9	Administrative efficiencies	0.104		
9	Reducing controllable spend in Community	0.170		
	Services			
16	Renegotiating Joint Museums funding	0.050	0.054	
20	Museums - Gift Aid and Cultural Exemptions	0.200	0.354	
20	Museums - Income generation and external funding	0.101		
20	Norfolk Record Office - Increased income generation	0.030	0.020	0.010
20	Develop community and commercial links - records office	0.030		
38	Reduce spend on library books and other materials	0.350		
39	Reduce the number of library staff - managers	0.050		
39	Reduce the number of library staff	0.350		
40	Charge for some activities provided in libraries	0.030		
41	Share library buildings with other organisations	0.180		
42	Reduce how often mobile libraries call at some places	0.109		
43	Reduce funding for the arts service, including arts grants	0.110		
44	Close Norfolk Records Office on Saturday mornings	0.012		
45	Stop or scale back the availability of music and play sets from the library	0.010		
46	Send overdue item reminders electronically	0.020		
	Putting People First proposals sub total	2.146	0.374	0.010
8	Restructuring – Museums	0.020		2.2.0
-	Other savings sub total	0.020	0.000	0.000
	Total Savings	2.166	0.374	0.010

	2014-15 £m	2015-16 £m	2016-17 £m
COST NEUTRAL ADJUSTMENTS i.e. which do not have an impact on overall Council Tax			
*Depreciation	0.003		
*REFCUS	0.000		
Debt Management Expenses	0.000		
From Information Management (Resources) to Cultural Services – to reflect one off amount in 2013-14	0.001		
Sub total Cost Neutral Adjustments	0.004		
BASE ADJUSTMENTS			
Sub total Base Adjustments	0.000		
TOTAL	15.339		

# Capital bids and previously approved schemes to be funded from borrowing and unallocated capital receipts 2014-2017 (as at 1 October 2013)

Service	Scheme	2014-15	2015-16	2016-17
		£m	£m	£m
New bids consid	ered by CCAMG September 2013 – sul	oject to develop	ment and appr	oval
Resources	County Hall security and fire safety measures	1.490	1.000	
Resources	Equality Act (DDA) Works – additional bid to cover potential requirements for County Hall car park access ramps and associated works		0.120	0.130
Resources	Corporate Minor Works (CMW) items not previously approved	0.050	0.050	0.650
Sub-total new items		1.760	1.170	0.780
Items funded f	rom borrowing approved as part of 20		ogramme and of	
Resources	Equality Act (DDA) Works	0.130	0.130	
Resources	Corporate Minor Works (CMW)	0.600	0.600	
Resources	Carbon and energy reduction fund	1.100		
Resources	Better Broadband (excluding externally funded element)	3.011	11.197	
Resources	Investment fund for Norfolk Energy Futures Ltd	3.600		
Resources	County Hall strategic maintenance	3.500	8.200	
ETD	Provisional funding for Major Transport Schemes (eg Postwick Interchange / NDR)	9.100		
ETD	Drainage improvements	1.656		
Resources	Asbestos Survey & Removal	0.620		
Community Services	Libraries Refurbishment	0.200		
Fire and Rescue	Fire Training Building	0.100		
Children's services	Schools construction	0.034		

Service	Scheme	2014-15	2015-16	2016-17
		£m	£m	£m
Sub-total existing		23.651	20.127	
Total		25.411	21.297	0.780

#### **Notes**

- 1) County Hall security and fire safety measures: costs subject to confirmation.
- 2) DDA: Historically £0.13m per annum has proved sufficient in this fund, but there may be significant expenditure related to access at the County Hall site (c£0.3m) hence the increased bid for 2014-2016. Allocations are proposed on a rolling three year cycle but subject to annual approval.
- 3) CMW: Small increase over year's allocation of £0.6m to address items associated with the County Hall maintenance programme. Allocations are proposed on a rolling three year cycle but subject to annual approval.
- 4) CERF(Carbon and Energy Reduction Fund): 2014/15 is the final year of the existing CERF bid.
- 5) Better Broadband bid: endorsed by Cabinet in July 2011. The amounts included above represent the element of the bid to be funded by prudential borrowing. The borrowing costs will be funded by the Norfolk Infrastructure Fund and savings in the ICT Services budget when the council's data contract is re-let in 2014.
- 6) NEFL: an "investment fund" to be allocated to projects as opportunities arise.
- 7) County Hall strategic maintenance: as per Cabinet report 9 July 2012, but with the £8m due to be spent over the 22 years from April 2015 condensed into the third year of the project (2015/16).
- 8) NCC corporate funding for Norwich Northern Distributor Road and Postwick Hub as set out in Cabinet minutes 4 March 2013.
- 9) Expenditure re-profiled from earlier capital programmes.
- 10) Project funded by a revenue contribution from the service. This contribution was used to reduce the Authority's previous year's borrowing requirement and therefore the project will be funded through future borrowing.
- 11) Strong and Well partnership: Cabinet report 28 January 2013, allocated £0.5m capital per annum for 5 years for prevention services for vulnerable older people. Funding was identified for the first year, but not for subsequent years. In line with the revenue budget proposals, the programme from 2014-15 has been withdrawn.
- 12) Capital implications of the Airport Radar System as discussed by Cabinet on 3 September 2013 to be added when capital requirements are developed.

## **Capital Budget**

#### A. Capital overview and context: Community Services

The Council receives Community Capacity Specific Grant for Adult Social Care. This grant is intended to provide capital funding for personalisation, reform and efficiency in Adult Social Care. The department plans to use this funding for: the Building Better Futures initiative which includes the transformation of the 26 residential homes transferred to Norse Care and the increase in the number of Housing With Care schemes for older people across Norfolk; the remodelling of the in house day services and Housing with Care schemes for people with learning difficulties, physical disabilities and mental health problems. Housing with Care schemes enable service users to achieve a greater degree of independence and in most cases are more efficient than residential care.

#### B. Summary of existing capital programme

The following table shows the latest position in relation to the existing capital programme.

Adult Social Care capital programme summary as at 30 November 2013

Summary of current scheme/block/programme	Revised budget 2013-14 £m	Spend to date 2013-14 £m	Revised budget 2014-15 £m	Revised budget 2015-16 £m
Projects	4.630	1.468		
Community Capacity grant 2012/13	2.146	0		
Community Capacity grant 2013/14	1.947	0		
Unallocated capital grant	0.854	0		
LPSA Domestic Violence	0.456	0.052		
Other	0.976	0.003		
Total	11.009	1.523		

Funding is being held for future schemes including: contribution of £1.500m to the Lydia Eve Court scheme in Great Yarmouth; contributions to housing development schemes for people with learning difficulties, people with physical disabilities and people with mental health problems, which will also make revenue savings; contribution for essential improvements/capital works in the previous in-house residential homes; and Housing With Care schemes for older people.

More detail on the capital projects is in the Finance Monitoring report also on this agenda.

#### C. Capital strategies, prioritisation and evaluation

The department plans and prioritises capital and revenue funding for: the Building Better Futures initiative which includes the transformation of the 26 residential homes transferred to Norse Care and the increase in the number of Housing With Care schemes for older people across Norfolk; the remodelling of the in house day services and Housing with Care schemes for people with learning difficulties, physical disabilities and mental health problems. Housing with Care schemes enable service users to achieve a greater degree of independence and in most cases are more efficient than residential care.

#### D. Funding available for future capital programme – new items

New funding associated with the service assumed for 2014-17 is shown in the table below, with associated notes covering certainty and assumptions:

Community Services capital funding announced as at 17 December 2013

Funding source	Ring- fenced / Not ring- fenced	Funding 2014-15 £m	Funding 2015-16 £m	Funding 2015-16 £m	Note
Community Capacity Capital Grant – Adult Social Care	R	2.292	0	0	
Tatal		0.000			
Total		2.292			

#### E. Schemes proposed to be added to the capital programme

At this stage there are no new schemes proposed for 2014-17. Work is ongoing by the department to identify how to best use this money to achieve transformation, better outcomes and deliver revenue savings.

#### F. Schemes to be funded from borrowing – all services

In accordance with the Capital Strategy, departments have submitted bids for corporate capital funding or prudential borrowing to the Corporate Capital and Asset Management Group (CCAMG). These bids relate in the main to schemes or services for which direct Government support is not available but which are nevertheless considered to be a priority.

The following table sets out existing and proposed schemes to be funded from borrowing.

Service	Scheme	2014-15	2015-16	2016-17
		£m	£m	£m
New bids conside	ered by CCAMG September 2013	1		
Resources	County Hall security and fire safety measures 1		1.000	
Resources	Equality Act (DDA) Works			0.130
Resources	Corporate Minor Works (CMW)			0.600
ETD	D Dual Carriageway NDR including Postwick Hub, future year's funding		9.500	20.000
Sub-total new items		1.490	10.500	20.730
	Items funded from borrowing include	d in on-going 20	13-16 capital	programme
Resources	Equality Act (DDA) Works	0.130	0.130	
Resources	· · · · · · · · · · · · · · · · · · ·		0.600	
Resources	Carbon and energy reduction fund	1.100		
Resources	Asbestos Survey & Removal	0.620		
Resources	Better Broadband (excluding externally funded element)	3.011	11.197	
Resources	Investment fund for Norfolk Energy Futures Ltd	3.600		
Resources	County Hall strategic maintenance	7.125	4.575	
ETD	Dual Carriageway NDR including Postwick Hub	7.654		
	Items re-	profiled from ea	arlier capital p	rogrammes
ETD	Drainage improvements	1.656		
Community Services	Libraries Refurbishment	0.200		
Fire and Rescue	Fire Training Building	0.100		
Children's services	Schools construction	0.034		
Sub-total existing		25.830	16.502	
Total		27.320	27.002	20.730

The incremental future revenue cost associated with the borrowing required for the items above is approximately 10% of the total borrowed each year as illustrated by the following table:

Scheme/programme	New schemes 2015-16 £m	New schemes 2016-17	New schemes 2017-18
Annual additional revenue costs of borrowing	2.732	2.700	2.073
Cumulative		5.432	7.505

#### Notes:

- 1) County Hall security and fire safety measures: costs subject to confirmation.
- 2) DDA: Historically £0.13m per annum has proved sufficient in this fund, with the need likely to continue hence the estimate for 2016-17. Allocations are proposed on a rolling three year cycle but subject to annual approval.
- 3) CMW: After adjusting for asset disposals, £0.6m per annum has proved sufficient in this fund, with the need likely to continue hence the estimate for 2016-17. Allocations are proposed on a rolling three year cycle but subject to annual approval.
- 4) CERF: 2014/15 is the final year of the existing CERF bid.
- 5) Better Broadband bid: endorsed by Cabinet in July 2011. The amounts included above represent the element of the bid to be funded by prudential borrowing. The borrowing costs will be funded by the Norfolk Infrastructure Fund and savings in the ICT Services budget when the council's data contract is re-let in 2014.
- 6) NEFL: an "investment fund" to be allocated to projects as opportunities arise.
- 7) County Hall strategic maintenance: originally introduced in Cabinet report 9 July 2012 with the project amended such that expenditure originally forecast to be spent over the 22 years from April 2015 has been accelerated to the second and third years of the project, and further elements have been added to the overall project. The figures in the table above represent only amounts in addition to funds previously approved or allocated. Total costs and borrowing requirements will be finalised based on detailed proposals being reported separately to this committee.
- 8) NCC corporate funding for Dual Carriageway NDR includes Postwick Hub, and capital implications of the Airport Radar System as discussed by Cabinet on 3 September 2013. In addition to the above, further capital expenditure to be funded by borrowing is forecast to be £17.28m in 2017-18 and £0.650 in later years. The NCC contribution is supported by GNDP funding of £40m over the period 2014-15 to 2017-18. The figures in the table above do not include elements of the project funded from CIF and from reserves.
- 9) Expenditure re-profiled to 2014-15 from earlier capital programmes.
- 10) Project funded by a revenue contribution from the service. This contribution was used to reduce the Authority's previous year's borrowing requirement and therefore the project will be funded through future borrowing.
- 11) Strong and Well partnership: Cabinet report 28 January 2013, allocated £0.5m capital per annum for 5 years for prevention services for vulnerable older people. Funding was identified for the first year, but not for subsequent years. In line with the revenue budget proposals, the programme from 2014-15 has been withdrawn.

# Report to the Community Services Overview and Scrutiny Panel 7 January 2014 Item No 10

#### **Fuel Poverty in Norfolk**

Report by the Chairman of the Fuel Poverty Panel

#### Summary

The Chairman will present the report of the Fuel Poverty Panel and ask the Overview and Scrutiny Panel to support its recommendations for action.

#### **Action Required**

The Overview and Scrutiny Panel is asked to:

- 1) Consider the report of the Fuel Poverty Panel.
- 2) Support the recommendations of the report.
- 3) Forward the report to all those to whom the recommendations are directed, asking them to respond in time for 4 March 2013 meeting on:
  - a. whether or not they accept the recommendations made to them
  - b. how they plan to implement, or have implemented, each of the recommendations that they accept
  - c. their explanation for any rejected recommendations.

# 1. The Report

1.1 Community Services Overview and Scrutiny Panel (OSP) set terms of reference for scrutiny of fuel poverty in Norfolk on 9 July 2013 and appointed a Member and Healthwatch Norfolk group to carry out the scrutiny. The group's report is annexed to this paper.

# 2. Resource Implications

2.1 The Members of the Fuel Poverty Panel have suggested 12 recommendations, some of which are for the County Council and some of which are for other organisations.

Throughout our scrutiny we have been mindful of the fact that Norfolk County Council needs to save £189 million over the next three year and that other public sector organisations are also under severe financial restraint. We have made recommendations for action that we expect could be delivered within planned budgets.

If the County Council departments or other organisations to which the recommendations are directed cannot implement them because of budgetary constraints, we would expect them to explain this when they respond to the recommendations.

#### 3. Section 17 – Crime and Disorder Act

3.1 The Fuel Poverty Panel does not consider that any crime and disorder implications arise

from its recommendations.

## 4. Equality Impact Assessment

4.1 The Fuel Poverty Panel considers that the recommendations of its report will have equal impact for all of those who are in fuel poverty.

## 5. Other Implications

5.1 The Fuel Poverty Panel considers that there are no other implications to take into account.

#### 6. Action Required

- 6.1 The Overview and Scrutiny Panel is asked to:
  - 1) Consider the report of the Fuel Poverty Panel.
  - 2) Support the recommendations of the report.
  - 3) Forward the report to all those to whom the recommendations are directed, asking them to respond in time for 4 March 2013 meeting on:
    - a. whether or not they accept the recommendations made to them
    - b. how they plan to implement, or have implemented, each of the recommendations that they accept
    - c. their explanation for any rejected recommendations.

# **Background Papers**

Community Services Overview and Scrutiny Panel 11 June 2013

Community Services Overview and Scrutiny Panel 9 July 2013

#### Officer Contact

If you have any questions about matters contained in this paper please get in touch with:

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If you need this report in large print, audio, Braille, alternative format or in a different language please contact Maureen Orr on 0344 800 8020 or 0344 800 8011 (textphone) and we will do our best to help.

Community	/ Services	<b>Overview</b>	and Scruting	y Panel
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# **Report of the Fuel Poverty Panel**

**13 December 2013** 

#### **Report of the Fuel Poverty Panel**

#### 1. Introduction

- 1.1 Community Services Overview and Scrutiny Panel (OSP) set up the Fuel Poverty Panel in July 2013 to examine:-
  - The reasons why Norfolk has the highest level of fuel poverty in East Anglia
  - Services currently working to alleviate fuel poverty
  - What more could be done by the County Council and other organisations and agencies to alleviate fuel poverty.

The Fuel Poverty Panel's full terms of reference are attached at Appendix A.

The OSP was conscious that the combination of rising energy costs, welfare reform and shrinking local authority budgets could make for a very uncomfortable winter for some of the most vulnerable people in Norfolk. The main focus was, therefore, to find out what more could be done to alleviate fuel poverty in these unpromising circumstances.

1.2 The Fuel Poverty Panel consisted of six county councillors, including five members of Community Services OSP, and a co-opted member from Healthwatch Norfolk. The members were:

Cllr Shelagh Gurney (Chairman)

Cllr Denis Crawford (Vice Chairman)

Cllr Julie Brociek-Coulton

Cllr Emma Corlett

Cllr Ian Mackie

Cllr Elizabeth Morgan

Dr Sam Revill (Healthwatch Norfolk)

Cllr Matthew Smith

1.3 We met on six occasions to receive evidence and discuss the issues with representatives of various organisations and agencies that have a role to play in tackling fuel poverty. We met with:-

Norfolk County Council

- Welfare Rights Manager
- Joint Strategic Needs Assessment / Norfolk Insight Team Manager
- Public Health Registrar
- Advanced Public Health Officer
- Finance, Business Partner and

Transformation Programme Manager

(Community Services)

Norfolk Housing Alliance (registered social landlords) Eastern Landlords Association (private landlords)

Federation of Master Builders

Chairman

Chief Executive Officer

Policy and Public Affairs Manager

Head of Communications

**Breckland District Council** 

Broadland District Council & South

Norfolk Council

Great Yarmouth Borough Council

King's Lynn & West Norfolk

**Borough Council** 

North Norfolk District Council

Norwich City Council South Norfolk Council

Age UK Norfolk

Norfolk Community Foundation Norfolk Rural Community Council Senior Housing Standards Officer (also representing King's Lynn & West Norfolk)

Climate Change Advisor

Director of Housing and Neighbourhoods

Senior Housing Standards Officer (also

representing Breckland)

- Housing (Health and Wellbeing) Lead

- Environmental Strategy Manager

Housing Standards Manager

- Development Manager, Advice and

Advocacy

- Chief Executive

Chief Executive

- 1.4 One of our members attended the National Energy Action Annual Conference and another attended a Winter Wellbeing Conference arranged by Norwich City Council to bring together all of the local agencies involved in tackling fuel poverty (this was a free event).
- 1.5 We wrote to the 'big six' energy companies:-
  - British Gas
  - EDF Energy
  - E.On UK
  - Npower (RWE)
  - Scottish Power
  - SSE

We asked for information on how many dwellings in Norfolk have benefitted from work under the Energy Company Obligation and what they, as major energy suppliers, were doing to help customers find the best possible tariff.

We also wrote to National Grid requesting information on the extent of mains gas connection to residential properties in Norfolk and asking for comments on why the county seems to be poorly served in this respect.

We are disappointed to report that there has been no response to our letters from National Grid, E.ON and Scottish Power. British Gas, Npower and EDF have telephoned and promised a reply, but at the time of writing this report only SSE had provided a written response. For further details please see paragraph 4.4.

1.6 All of the information we received is referenced in Appendix B. Copies of the minutes of our meetings and the information on which we have based this report are available from the Scrutiny Support Manager (Health).

# 2. What is fuel poverty?

- 2.1 Whether a household is in fuel poverty or not is determined by the interaction of a number of factors, but three specifically stand out:-
  - Fuel consumption dependent on the lifestyle of the household and characteristics

of the dwelling

- The cost of energy
- Household income

Low income, high energy prices and an energy inefficient home is the worst combination but any one of the variables can push a household into fuel poverty.

It is important to understand the distinction between fuel poverty income poverty. Not everyone who is income poor is also fuel poor and there are factors other than income poverty that need to be tackled to reduce fuel poverty.

2.2 One of the first things we realised as we began our review was that the definition of fuel poverty had changed just before we started. This means that all the statistical information around this subject, of which there is masses, is about to change.

#### The 10 per cent definition

The original definition of fuel poverty, introduced under the Warm Homes and Energy Conservation Act 2000 and the Fuel Poverty Strategy 2001, was:-

• a household is said to be fuel poor if it needs to spend more than 10 per cent of its income on fuel to maintain an adequate level of warmth.

This was known as the 10% definition. An adequate standard of warmth was generally defined as 21°C in the living room and 18°C in the other occupied rooms (the temperatures recommended by the World Health Organisation).

In 2000 the government's aim was to eradicate fuel poverty in vulnerable households by 2010. The statistics produced under the 10% definition showed fuel poverty falling until 2003 but rising again in 2004 and continuing to rise year-on-year until 2009.

2.3 In 2011 the Department of Energy and Climate Change (DECC) commissioned the Hills review, which concluded that the 10% definition did not provide for adequate measurement of the problem. The indicator was highly sensitive to the cost of energy but not so good at reflecting the impact of energy inefficient dwellings. It captured many households that were not actually 'fuel poor' in terms of the 2000 Act, including higher-income families living in energy inefficient homes. The Hills review also found that the 10% indicator produced a misleading picture of trends by understating the scale of the problem when fuel prices were low and overstating it when fuel prices were high.<sup>1</sup>

#### 2.4 The Low Income High Cost (LIHC) definition

'Fuel Poverty: a Framework for Future Action' published by DECC in July 2013 introduced the Low Income High Cost (LIHC) definition of fuel poverty. It is a more complex definition, designed to distinguish between the extent of the problem (i.e. how many households are fuel poor) and the depth (i.e. what is the severity of the fuel poverty they face) so that resources can be aimed towards the households most in need.

The LIHC definition finds a household to be fuel poor if:-

• They have required fuel costs that are above average (the national median level)

<sup>&</sup>lt;sup>1</sup> Fuel Poverty: a Framework for Future Action, July 2013, Department of Energy and Climate Change; page 9

 Were they to spend that amount, they would be left with a residual income below the official poverty line

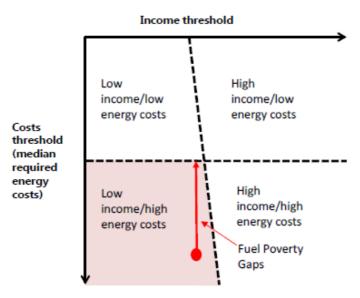
The LIHC measure consists of two parts:

- The **number** of households that have both low incomes and high fuel costs (the bottom left quadrant in the diagram below).
- The depth of fuel poverty amongst these households. This is measured in terms of a fuel poverty gap, which represents the difference between the modelled fuel bill for each household, and the reasonable cost threshold for the household. This is summed for all households that have both low income and high costs to give an aggregate fuel poverty gap.

The Hills report noted that the depth of fuel poverty tends to be greater in rural households than in urban households. Rural households in fuel poverty have an average fuel poverty gap of £622 compared to £362 for urban households.

The LIHC measure is illustrated in the diagram below<sup>2</sup>

#### Fuel Poverty under the Low Income High Costs (LIHC) measure



2.5 In May 2013 two sets of national fuel poverty statistics were published, one calculated using the LIHC indicator and the other using the traditional 10% indicator. These related to 2011 and are the latest statistics available. In future years only the LIHC indicator will be used.

Table 1 below shows the difference in results across England under the two definition of fuel poverty and Table 2 shows a comparison of results for districts in Norfolk in 2011 using each of the two definitions:-

Table 1 - Number of households in fuel poverty in England 2010-11

	2010	2011	Variance
10% indicator	3.5 million	3.2 million	-0.3 million
Low income high cost indicator (LIHC)	2.7 million	2.6 million	-0.1 million

<sup>&</sup>lt;sup>2</sup> Diagram from Annual Report on Fuel Poverty Statistics 2013, Department of Energy and Climate Change; page 6

Table 2 - Numbers of households in fuel poverty in Norfolk 2011

	Total number of	10% indicator		Low income high cost indicator (LIHC)	
	households	Number in fuel poverty	% in fuel poverty	Number in fuel poverty	% in fuel poverty
Breckland	56,501	9,833	17.4%	5,624	10.0%
Broadland	53,161	7,951	15.0%	4,911	9.2%
G Yarmouth	42,342	7,441	17.6%	5,209	12.3%
KL&WN	64,459	11,903	18.5%	7,117	11.0%
North Norfolk	46,100	10,280	22.3%	5,636	12.2%
Norwich	60,762	8,534	14.0%	7,490	12.3%
South Norfolk	52,489	9,301	17.7%	5,206	9.9%
Total	375,814	65,243	17.4%	41,193	11.0%

- 2.4 The LIHC definition produces in a significant reduction in the official levels of fuel poverty in Norfolk and changes the emphasis between rural and urban areas in the high level figures. Whereas the North Norfolk and King's Lynn and West Norfolk had the highest level of fuel poverty under the old measure, Norwich and Great Yarmouth have the highest levels under the new one. From next year the LIHC figures will become the sole currency in discussions about fuel poverty because figures under the 10% definition will no longer be produced.
- 2.5 We understand DECC's reasons for changing to the LIHC definition and can see that it should help in targeting scarce resources to the people who need them most. However, it also appears to us that the change may not be helpful to Norfolk in future discussions about targeting of national resources. One of the reasons that Community Services OSP asked us to examine the subject of fuel poverty was because the statistics showed North Norfolk had the highest level in the eastern region. Under the new definition that is no longer the case. Cambridge has the highest percentage, with 15.8% of households in fuel poverty, followed by Luton and Southend-on-Sea both at 12.8%.

The situation in Norfolk is discussed in more detail in section 6.

# 3. The effects of fuel poverty

- 3.1 The County Council's Public Health Registrar gave us information about the link between cold weather and excess deaths in Norfolk. There are around 530 such deaths in the county every winter. Although studies have shown a strong correlation between outdoor temperatures and mortality rates the causal link between a low household temperature and mortality is not so clear. There is, however, evidence that indoor temperature is important to maintaining health.
- 3.2 At below 16°C people have reduced resistance to respiratory and other infections and a consequent increase in occurrences of colds, flu and bronchitis. Below 12°C the blood thickens, which increases blood pressure and the risk of heart attack or stroke. After more than 2 hours below 9°C there is a risk of hypothermia as core body temperature falls.
- 3.3 Keeping people healthy during winter is in everyone's interests. Ill health is costly, not only for the individual concerned but for social care, the NHS and employers. In 2009 the Department of Health estimated that for every cold-related death there are eight non-fatal

hospital admissions and that in the coldest months of the year NHS expenditure rose by 2%. It was estimated that the annual cost to the NHS of cold-related ill-health was almost certainly in excess of £1 billion<sup>3</sup>

'The Health Impacts of Cold Homes and Fuel Poverty', published by the Marmot Review 3.4 Team in 2011, contains a wealth of research evidence on the links between fuel poverty and physical health, mental health, well-being and life opportunities.

We were particularly struck by the evidence on the impact of fuel poverty on children and young people. Some of the research findings are set out below (these are fully referenced in the Marmot report):-

- Children in bad housing conditions, including cold homes, are more likely to have mental health problems, such as anxiety and depression, to contract meningitis, have respiratory problems, experience long term ill health and disability, experience slow physical growth and have delayed cognitive development (p 29)
- A significant proportion of children living in cold homes felt unhappy in their family 10% as opposed to 2% of the group living in warm homes. Complementary studies point to the fact that young people living in cold homes try to find respite and privacy in other venues outside the home, where they are more exposed to mental health risks (p.29)
- More than 1 in 4 adolescents living in cold housing are at risk of multiple mental health problems (p.30)
- An increased duration of living in inadequately heated accommodation is significantly associated with having no quiet placed to do homework. This can affect a child's educational attainment and therefore work opportunities in later life...cold housing, its impact on family life and early years can heavily weigh on other spheres of life, which affect long-term health outcomes (p.32)
- 3.5 The Marmot report also includes evidence that older people are particularly at risk in the cold because their control of body temperature is weaker making them vulnerable to hypothermia<sup>4</sup>.

#### 4. The national debate on energy costs

4.1 Shortly after we started to meet the issue of energy prices shot to the top of the political agenda when four of the 'big six' energy suppliers in the UK raised their charges for heating homes by more than three times the rate of inflation.

The big six, who between them have 99% of the retail energy market, stand accused of abusing their market position and acting in concert at the customers' expense. According to Ofgem, the energy regulator, the average annual dual fuel bill, covering gas and electricity, is £1,315 per household. The latest statistics from mid September 2013 show that the average profit margin made on the £1,315 bill was £65. This was £30 higher than in September 2011 and September 2012 but it is a snapshot figure and volatile because of seasonal factors. In some months the profit margin has risen above £100, whereas in others the margin has been negative.

<sup>&</sup>lt;sup>3</sup> Boardman B (2010) Fixing fuel poverty: challenges and solutions. London: Earthscan

<sup>&</sup>lt;sup>4</sup> El-Ansari Q and El-Silimy S (2008) Are fuel poverty reductions schemes associated with decreased excess winter mortality rates in elders? A case study from London, UK. Chronic Illness 4(4), pp.289-294

The largest part of the bill goes on buying gas and electricity on the wholesale market. This, in addition to the cost of running a retail business with billing and sales, accounts for 67% of a gas bill and 58% of an electricity bill according to Ofgem.

Ofgem says that the average dual fuel energy bill has risen by 24% between August 2009 and August 2013 and that the wholesale energy cost has risen by just 3.2% in the same period. However, the trade in wholesale gas and electricity is a very complex area and Ofgem's methodology for calculating the cost is contested by the industry.

The companies argue that the price rises are necessary because of rising wholesale prices, the cost of using the national grid and the cost of complying with government environmental and social initiatives, such as the Energy Company Obligation, which helps improve the energy efficiency of homes. The energy companies claim that these levies add £110 to a typical annual household bill. The Department of Energy and Climate Change says that the various components of the average household fuel bill attributed to energy, fuel poverty and climate change policies are as follows:-

•	Energy Company Obligation (ECO)	4%
•	Renewables Obligation	2%
•	EU Emissions Trading System	1%
•	Warm Home Discount	1%
•	Feed-in Tariffs	1%

Labour has promised to freeze gas and electricity bills for 20 months if it wins the 2015 election. The coalition government has slowed the implementation of the Energy Company Obligation, which will allow energy companies to spread the cost over 4 years rather than 27 months. The government's expectation is that the energy companies will pass this benefit on to customers, which would mean that price rises next year will be approximately £50 less for the average household than they otherwise would have been.

- 4.2 As a cross party group of councillors it is not for us to comment on the national political debate except to say that we welcome the spotlight on rising energy costs, which are a very significant contributor to fuel poverty.
- 4.3 We note that in June 2013 Ofgem said that there were too many confusing gas and electricity tariffs making it harder for customers to shop around for the best deal. In fact there were more than 300 tariffs available to UK customers. In future confusing multi-tier tariffs will not be allowed and energy companies will be expected to work with just 4 core tariffs which will be easier for customers to compare. The energy companies will also be expected to tell customers if there is a cheaper deal available for them. These are welcome developments.

The regulator has also mentioned a possible scheme whereby the suppliers would be obliged to offer their vulnerable customers, and others who have not switched for some time, a personalised estimate on the cheapest tariff from across the energy market.

Suppliers who break Ofgem's rules can be fined and, given the high level of public interest in energy costs, they would be likely to find themselves in the media and in the political spotlight.

4.4 We approached all of the 'big six' energy companies to ask what they are doing to help customers in Norfolk find the best possible tariff and to find out how many dwellings in the county have benefitted under the Energy Company Obligation (ECO). We would like to

thank SSE, as it was the only energy company to provide information.

SSE highlighted its Customer Service Guarantee, launched earlier in 2013. They have given a commitment that when customers call them they will offer to find ways to save them money, which could be through advice on more suitable tariffs, information about available discounts, energy efficiency advice or other help to reduce usage. In 2012/13 SSE paid 2,630 customers in Norfolk a Warm Home Discount and 24 customers received debt relief totalling approximately £27,000 from the Priority Assistance Trust Fund. In terms of ECO delivery, 76 properties in Norfolk have received or are in the process of receiving assistance via the Home Heating Cost Reduction Obligation (HHCRO), which is targeted at low income and vulnerable households.

SSE said that it would be happy to work with Norfolk County Council to increase the uptake of the ECO scheme.

# 5. National initiatives to reduce fuel poverty

- 5.1 Fuel poverty has been on the national government agenda since 2000 and there is a vast amount of data online about the prevalence of fuel poverty and the initiatives to tackle it over the past decade. Initiatives have come and gone (e.g. Carbon Emissions Reduction Target (CERT), Community Energy Savings Programme (CESP), Energy Efficiency Commitment (EEC), Energy Efficiency Standards of Performance (EESoP), and Warm Front). The current national policy package consists of the following main initiatives:
  - a) Winter Fuel Payment an automatic payment of between £100 and £300 to all those in receipt of the state pension.
  - b) **Cold Weather Payment** a means tested benefit from the Regulated Social Fund administered by the Department of Work and Pensions.
  - c) **Feed-in Tariff Scheme** the scheme requires electricity suppliers to pay a tariff to small-scale low-carbon energy generators for any electricity generated and exported. It is applicable to energy generation by photovoltaic (solar panels), wind, hydro and anaerobic digestion and is intended to promote the widespread uptake of small scale renewable and low-carbon electricity generation technologies.
  - d) Warm Home Discount a £135 discount on electricity costs for those who qualify in 2013-14 (this is a means tested discount which is separate from and does not affect a person's Cold Weather Payment or Winter Fuel Payment). All of the big six energy suppliers are part of the scheme as well as 12 smaller electricity suppliers. Some of the suppliers also offer the discount to a broader group of vulnerable people who do not qualify for Warm Home Discount, but each supplier has its own rules about who else can get this help. (These are known as the Broader Group Schemes).
  - e) **Green Deal** households can make energy-saving improvements to their homes without having to pay all the costs up front. Energy-saving improvements include:
    - Insulation e.g. loft or cavity wall insulation
    - Heating
    - Draught-proofing
    - Double glazing
    - Renewable energy technologies e.g. solar panels or wind turbines

Landlords must get a tenant's permission before sign up to the Green Deal and tenants must get a landlord's permission before signing up. This also applies to social housing. The steps

are:-

- assessment of the property to see what improvements can be made and how much could be saved on energy bills
- application for Cashback scheme (if you qualify)
- choose a Green Deal provider to carry out the work
- sign a Green Deal Plan a contract with the provider stating what work will be done and how much it will cost.
- a Green Deal installer does the work
- the cost is paid off in instalments through the electricity bill.
- f) **Energy Company Obligation (ECO)** major energy companies fund energy efficiency improvements in people's homes and recover the costs through energy bills. 15% of the targeted recipients of the scheme should be vulnerable households in rural areas. The ECO consists of:-
  - The Carbon Savings Obligation(CSO) works alongside the Green Deal to provide support for delivery of measures in hard to treat properties (such as those with solid walls, i.e. cavity wall insulation is not possible)
  - The Carbon Savings Community Obligation (CSCO) an obligation to deliver insulation measures in deprived and rural areas (which is expected to deliver a combination of lower cost loft and cavity wall insulation as well as some solid wall insulation).
  - The Affordable Warmth Obligation (AW) expected to support basic heating and insulation measures in low income private tenure houses.
- It is fair to say that many of the representatives we met from local councils, social landlords, private landlords, house builders and third sector organisations were less than enthusiastic about the latest national initiatives (ECO and Green Deal launched in early 2013). We heard a lot about the drawbacks, which we will briefly summarise:-
  - To meet their obligations under ECO, companies may seek to target 'low hanging fruit',
    e.g. large housing association stocks in urban areas or market towns for whom energy
    saving measures can be delivered without great cost. They may not deliver so much to
    isolated rural households who are in the deepest fuel poverty but would be more
    expensive to help.
  - Private landlords have not been taking up the Green Deal because they find the process excessively bureaucratic and time consuming.
  - The process for engaging in the Green Deal scheme is quite complex. Finance needs to be arranged through a Green Deal provider and a contract drawn up. The loan interest rate is considered high at 7%. Also, as the loans are paid back over up to 25 years and relate to the property not the individual, it means that anyone selling their home passes the liability onto the buyer.
  - Although more Green Deal providers are signing up the selection is still quite limited.
  - Although some Green Deal providers will offer a free assessment, there is an average charge of around £95.
  - Marketing and communication about the Green Deal does not seem to have been effective (although £2.9 million has been spent on it nationally).

- Under the Affordable Warmth Obligation, only one company has offered funding for oil fired central heating improvements. It is the households off the gas grid who need help most but are getting it least.
- Planning restrictions in conservation areas and building regulations will make it very
  difficult for Green Deal providers to deliver external wall insulation. (However, in non
  conservation areas the government has recommended that external wall insulation should
  come under permitted development, making it much easier to install).

In October we were told that nationally only 12 Green Deal loans had been taken out since the scheme's launch in January 2013. The Green Deal finance had only been available from September 2013.

- 5.3 We think that one of the reasons the Green Deal does not appeal to householders is because it encourages borrowing and people are already very wary of debt, even though the time scale for repayment may be long. When someone is struggling financially and perhaps in debt already, taking out a loan to improve the energy efficiency of their home will not be a priority.
- 5.4 South Norfolk and Broadland District Councils shared with us a piece of social marketing research which they commissioned to better inform their Green Deal strategy. Some of the comments from householders were quite revealing:-
  - 'Cost more than you save, take years to get the money back, some of the measures I have already are not that old, having to put in planning, and solar panels on your roof may hinder insurance/be turned down by your mortgage company? or is that the grapevine....'
  - 'Having to sort anything like this out feels like a rigmarole. And they will probably refuse me anyway, they usually do' (Housing Association tenant, qualitative interview)
  - 'I don't want to be a guinea pig. Governments change, policies change and the goal posts move' they continued to express a real concern about the deal not working well in the long term, in addition to feeling it was 'a big commitment for a buyer to take on'.

# 6. Prevalence of fuel poverty in Norfolk

- 6.1 The people we met in the course of our review were extremely helpful and gave us a huge amount of information about fuel poverty in Norfolk, both directly and by referring us to the extensive data already published online. All of this is referenced in Appendix B. Most of the information we received was based on the 10% definition of fuel poverty, which is still valid this year, with the new LIHC definition coming in as the sole indicator from next year.
- The number of households in fuel poverty in Norfolk actually fell in the last two years for which statistics are available (i.e. 2010 and 2011) after having risen in the years from 2004. This is true no matter which of the two definitions are used to measure fuel poverty and it is in line with the overall pattern in the rest of England. It is difficult to be sure exactly why this is the case. The reasons why it is so hard to interpret the fuel poverty data are explained in detail in DECC's 'Annual Report on Fuel Poverty Statistics 2013'.

The percentage of households in fuel poverty for Norfolk, the east of England and the whole of England in recent years (according to the 10% definition) are shown in Table 3 below.

Table 3 – Percentage of households in fuel poverty (10% definition)

	2008	2009	2010	2011
England	15.6%	18.4%	16.4%	14.6%
East of England	12.5%	16.2%	16.0%	13.9%
Norfolk	17.0%	20.8%	19.7%	17.4%

Fuel poverty statistics are available down to Lower Layer Super Output Areas (LSOAs). LSOAs are a series of geographic areas which have been automatically generated to improve the reporting of small area statistics in England and Wales. They have a consistent population size, as far as possible. They typically contain from four to six Output Areas and the minimum populations is 1000 (the mean is 1500). There is a LSOA for each postcode in England.

In 2011 it was estimated that 252 of the 530 Lower Layer Super Output Areas (LSOAs) in Norfolk had a higher proportion of households in fuel poverty than the Norfolk average of 17.4% - this was an improvement on 2010 figures where 265 LSOAs had a higher rate than the Norfolk average. (All of these figures relate to the 10% definition of fuel poverty).

6.3 We saw detailed mapping of fuel poverty in Norfolk by LSOA (according to the 10% indicator) but have not reproduced it in this report because the LIHC indicator of fuel poverty will change the picture significantly next year. Detailed local mapping under the new indicator was not available to us at the time of our review but it will be available in Norfolk Insight by the end of December 2013. Once the data is in the system it will be possible to automatically map fuel poverty to LSOA and other levels.

Tables 2 and 3 above show the level of fuel poverty in Norfolk under the new LIHC definition. Table 4 below shows fuel poverty by Norfolk district compared to the county average, the regional average and the national average in 2011 using the new LIHC definition and Table 5 shows the figures using the 10% definition:-

Table 4 – Norfolk districts' variance from county, regional and national average fuel poverty levels in 2011 (using LIHC definition)

	% of	Variance from	Variance from	Variance from
	households in	County	east of	England average
	fuel poverty	average	England	(10.9%)
		(11%)	average	
			(10.2%)	
Breckland	10.0%	-1.0%	-0.2%	-0.9%
Broadland	9.2%	-0.8%	-1.0%	-1.7%
G Yarmouth	12.3%	+1.3%	+2.1%	+1.4%
KL&WN	11.0%	-	+1.2%	-0.1%
North Norfolk	12.2%	+1.2%	+2.0%	+1.3%
Norwich	12.3%	+1.3%	+2.1%	+1.4%
South Norfolk	9.9%	-1.1%	-0.3%	-1.0%
Total	11.0%	-	+0.8%	+0.1%

Table 5 – Norfolk districts' variance from county, regional and national average fuel poverty levels (2011, using 10% definition)

	% of	Variance from	Variance from	Variance from
	households in	County	east of	England average
	fuel poverty	average	England	(14.6%)
		(17.4%)	average	
			(13.9%)	
Breckland	17.4%	-	+3.5%	+2.8%
Broadland	15.0%	-2.0%	+1.1%	+0.4%
G Yarmouth	17.6%	+0.2%	+3.7%	+3.0%
KL&WN	18.5%	+1.1%	+4.6%	+3.9%
North Norfolk	22.3%	+4.9%	+8.4%	+7.7%
Norwich	14.0%	-3.4%	+0.1%	-0.6%
South Norfolk	17.7%	+0.3%	+3.8%	+3.1%
Total	17.4%	-	+3.5%	+2.8%

- 6.4 Under the new LIHC indicator the rate of fuel poverty in Norfolk is still above the regional and national averages, but not by so much.
- 6.5 We asked the Norfolk Insight Team to give us information about how rates of fuel poverty in Norfolk compare with other similar counties in England. Table 6 below compares the Norfolk figures with our five nearest statistical neighbours as defined by the Chartered Institute of Public Finance and Accounting (CIPFA). This family of neighbours is based on similar characteristics on a number of demographic and economic measures.

Table 6 - Norfolk nearest neighbours - households in fuel poverty, 2011

County	Estimated number of households	Estimated number of households in fuel poverty	% of households Fuel Poor
Norfolk			
	375,814	65,243	17.4%
Cumbria			
	220,935	47,395	21.5%
Lincolnshire			
	452,088	88,378	19.5%
Somerset			
	389,737	56,967	14.6%
Devon			
	488,703	80,538	16.5%
Suffolk			
	310,832	51,574	16.6%

Source: Department of Energy & Climate Change (DECC) (10% definition)

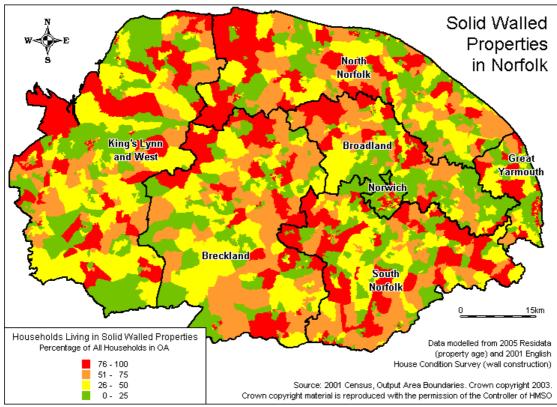
# 7.0 Why do parts of Norfolk have high levels of fuel poverty?

- 7.1 As discussed in paragraph 2.1, there are three main factors that can contribute to a household being in fuel poverty:-
  - Fuel consumption
  - The cost of energy
  - Household income

During our meetings we discussed Norfolk's situation in relation to each of these with the representatives we met.

# 7.2 Fuel consumption

- 7.2.1 The rate of fuel consumption is linked to the thermal efficiency of buildings, i.e. it takes more to heat a poorly insulated building. The Federation of Master Builders told us that 27% of the UK's carbon emissions come from domestic housing and that the UK is one of the least energy efficient countries in Europe. Norfolk's situation is made worse by the fact that it has a large number of older, solid walled dwellings, which are not energy efficient.
- 7.2.2 The Rural Fuel Poverty website developed by the Centre for Sustainable Energy, has maps showing the proportion of solid walled housing in each county in England and there appears to be correlation between counties with high numbers of solid walled houses and high levels of fuel poverty. The map for Norfolk is shown below:-

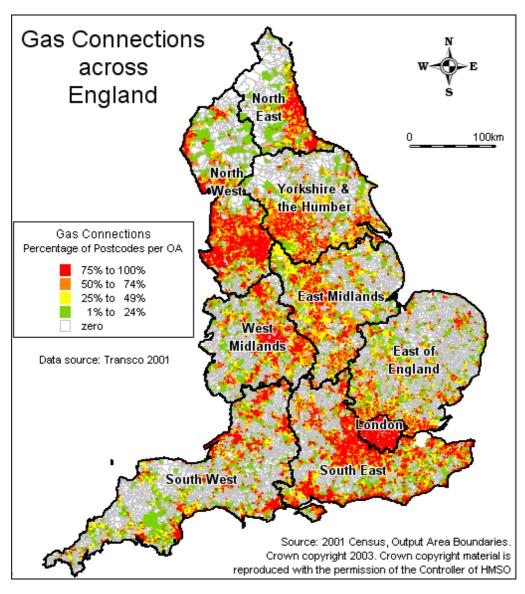


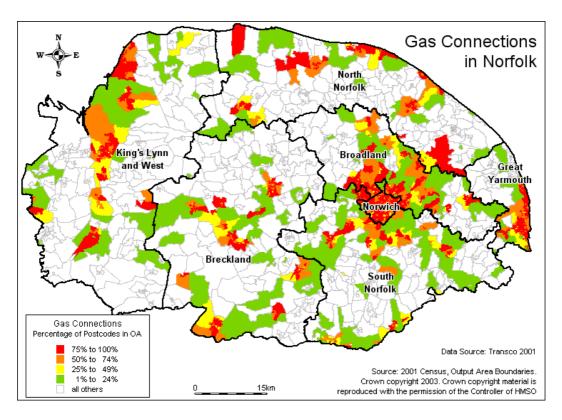
#### 7.3 The cost of energy

7.3.1 As discussed in section 4 above, everyone has been subject to sharp increases in energy costs in the past few years. Norfolk is particularly hard hit because mains gas connection is not available to many households, particularly in rural areas.

Households that are not on mains gas and are therefore reliant on coal, oil, LPG (liquid petroleum gas) or electricity tend to pay significantly more for their heating fuel. A recent comparison found that mains gas was charged at 5 pence per kilowatt hour compared to 7 pence per kilowatt hour for oil. We understand that approximately 80% of properties in Norfolk are not connected to mains gas.

The Rural Fuel Poverty website has data on mains gas connections across England. The pictures for England and for Norfolk based on 2001 data are shown below.





- 7.3.2 It strikes us as ironic that Norfolk should be so poorly served for mains gas connections when North Sea gas comes on-shore through Bacton. On 14 October 2013 we wrote to National Grid, who manage gas connections, requesting more up to date information and asking for their comments on Norfolk's situation. At the time of writing this report no response had been received.
- 7.3.3 Reliance on oil for heating can be a problem for low income households not only because of the higher overall cost but because of delivery policies. The minimum delivery is 500 litres which, depending on current prices, costs approximately £300. It is difficult for low income families to pay large sums in advance, which means that they cannot fill up oil tanks to take advantage of lower prices in summer.
- 7.3.4 People who use oil for heating are also at risk of fuel theft. Members of our group were aware of oil thefts in the county and that even the use of lockable metal cages around oil tanks had not protected people from thieves.
- 7.3.5 The use of pre-pay meters was drawn to our attention as another cause of higher energy bills. People on lower incomes tend to be more likely to pay for energy through pre-pay meters but this method is subject to higher tariffs and is sometimes used by the energy companies for the recovery of debt, which can cause more hardship for customers.
- 7.3.6 We noted from the House of Commons Environment, Food and Rural Affairs Committee's report on Rural Communities (Sixth Report of Session 2013-14) that lack of broadband in rural areas is considered a factor in the low take up of electricity switching by rural customers.

#### 7.4 Household income

- 7.4.1 It is important to realise that even if someone is living in a thermally efficient house they may still be in fuel poverty because of low income.
- 7.4.2 The Welfare Rights Officer's report to Community Services OSP in June 2013 set out facts about incomes and deprivation in Norfolk:-
  - Incomes in Norfolk are 14% lower than the national average of £30,300.
  - Approximately 110,900 people in the county are regarded as income deprived with approximately 47,360 people in rural areas (42.7% of the total) and 36,540 people in urban areas (57.3% of the total.
  - Measured by the Indices of Multiple Deprivation (2010), Norfolk as a whole has above average deprivation and Great Yarmouth and Norwich are the most deprived areas.
  - Out of a population of approximately 862,000, about 5.5% (47,400) people in Norfolk live in Lower Super Output Areas (LSOAs) that lie within the most deprived in England. The balance has changed since 2007 with numbers increasing significantly in Norwich and Great Yarmouth but more slowly in King's Lynn and West Norfolk.
  - In Great Yarmouth 22% of the population are living in LSOAs among the most deprived 10% in the country (an increase from 20.2% in 2007.
  - North Norfolk has a relatively large proportion of LSOAs with intermediate levels of multiple deprivation.

It is interesting to note that using the new LIHC fuel poverty indicator Norwich and Great Yarmouth are the top two areas in Norfolk for both high rates of households in fuel poverty and high levels of deprivation.

Other parts of the county also have significant areas or pockets of high deprivation and high rates of fuel poverty.

- 7.4.3 In terms of the potential effects of the welfare reform process, most of which is aimed at people under pensionable age, the main points are as follows:-
  - The total income received by Norfolk residents from state benefits and tax credits in the year 2010-11 was £2,696 million. It is estimated that by 2014-15 this will have reduced by £181.1 million to £2,514.9 million – a drop in actual income of 6.7%.
  - Over the four year period from 2011-12 to 2014-15 the loss of benefit income for Norfolk residents is estimated to be about £421 million, or more than £1,100 per household. Based on average household income of £26,000, this cut in benefits represents a cut in income of about 4.4%.
- 7.4.4 The table below compares the financial effect of the reduction in spending on the welfare state from 2010-11 to 2014-15 for each of the seven Local Authorities in Norfolk

Changes to benefits in the seven Local Authorities in Norfolk to 2014-15

District	Total benefits in 2010-11 (£m)	Reductions in benefits by 2014-15 (£m)	Number of households	Reductions in benefits by 2014- 15 (per household per week)
Breckland	397	26	55,000	£9.09
Broadland	349	21	53,000	£7.62
Great Yarmouth	354	27	42,000	£12.36
KLWN	484	32	63,000	£9.77
North Norfolk	358	19	46,000	£7.94
Norwich	411	35	60,000	£11.22
South Norfolk	344	22	53,000	£7.98
Norfolk	2,696	182	372,000	£9.41

- 7.4.5 It is clear that the loss per household per week from the reductions in benefits by 2014-15 is greater in poorer districts.
- 7.5 The Welfare Rights Officer also told us that the Local Assistance Scheme has highlighted that single people of working age claiming benefits are spending between 25% and 35% of their income on fuel.
- 7.6 The national roll out of Universal Credits was also seen as a cause for concern.
  Universal Credits will be paid in arrears on a monthly basis, which could cause budgeting problems for some and increase the need for emergency payments to pay for heating and other necessities. The original plan was for Universal Credits to be fully introduced in November but the government has now slowed the pace.
- 7.7 Pensioners can be particularly susceptible to rising energy costs because they tend to be on fixed incomes. The Welfare Rights Officer's report to Community Services OSP on 11 June 2013 highlighted that around 21.8% of Norfolk's population in 2010 was aged over 65 compared to 20.4% in 2006. By 2026 this is projected to rise to over 28% of the population. In actual terms it will mean an additional 118,000 older people living in Norfolk within the next thirteen years.
- 7.8 Despite the reduction in numbers of households in fuel poverty in Norfolk seen in the 2010 and 2011 annual statistics, all of the facts above suggest that the local authorities and other agencies the county should keep working hard to combat it.

# 8. What is currently being done to tackle fuel poverty in Norfolk?

8.1 We found that there is already a huge amount of local activity underway to tackle the different factors that combine to produce fuel poverty. We would like to commend the local authorities, third sector organisations and others with whom we spoke for the work that they are doing. It is not possible for us to report in detail on everything that we learned in this review but we have referenced it all in Appendix B and details are available from the Scrutiny Support Manager (Health). Much of the information is also available on the different organisations' websites.

In this section we have picked out and commented on some of the local activity and plans for further improvement.

### 8.2 Lowering fuel consumption by improving the energy efficiency of dwellings

- 8.2.1 We took on board DECC's opinion that improving the thermal efficiency of dwellings is a more cost effective way to tackle fuel poverty than through the benefits route and spent the largest part of our time considering improvements to the housing stock. We met with the seven district councils, the Norfolk Housing Alliance (representing social landlords), Eastern Landlords Association (representing private landlords) and the Federation of Master Builders to discuss the projects already underway and what further improvements might be possible.
- 8.2.2 The Home Energy Conservation Act (HECA) requires Local Authorities to report every two years setting out the energy conservation measures that the authority considers practicable, cost effective and likely to result in significant in the energy efficiency of residential accommodation in its area. The first reports were due in March 2013. We asked each of the district councils for a copy of their HECA reports and received them from all except for Breckland Council, which has yet to produce one.
- 8.2.3 The local HECA reports are in varying formats and go into different levels of details but all of them set out facts and figures about the condition of housing stock, fuel poverty levels, what the councils have already done and what they are planning to do to improve the situation in the next few years. The district councils have substantial information about the condition of housing stocks in their area on which to base their plans. Some had commissioned / undertaken additional surveys but all appeared to have a good base level of information on which to act.

#### 8.2.4 Action by district councils

The HECA reports are very detailed and we have selected a few examples from each of the six that we saw to give just a flavour of the work that is going on:-

### King's Lynn and West Norfolk

- Development of a business case for Green Deal and Energy Company Obligation activity supported by an action plan. The business case will consider collaborative working with other LAs and social housing Registered Providers.
- Identify areas where relevant measures may not require planning consent such as External Wall Insulation (EWI) and Photovoltaic (PV) to feed into any Green Deal / ECO activity plan.
- Complete the Warmer West Norfolk heating project as part of the DECC fuel poverty funding and develop the partnership model created through this scheme to market the Green Deal/ECO to vulnerable and hard to reach households.
- Complete the pilot solid wall insulation scheme undertaken in partnership with Fenland District Council (started in 2009).

#### **North Norfolk**

- We will promote low carbon construction through our planning policies and through our annual Greenbuild event.
- We have established and Enforcement Board to tackle poor housing in the district council both in the owner occupied and rented sectors. The Council is currently reviewing its Housing Renewal Policy and is developing a Housing Assistance Policy which will provide financial assistance to owner-occupiers living in poor

- housing conditions to avoid the need to take enforcement action.
- We will provide residents with advice relevant to their own personal circumstances linked to an energy assessment of their property. The advice will include how the property, heating systems and other appliances can be used effectively to manage energy usage. This can be supported by monitoring of energy usage through the use of devices such as OWL energy monitors.

#### **Broadland**

- We have partnered a Green Deal provider which was secured via a procurement process.
- Use discretionary budget to incentivise Green Deals for properties rated E, F and G on their energy performance certificates.
- Work with Environmental Health Officers to inform landlords about the future EPC (Energy Performance Certificate) rental rules so that they can improve the efficiency of their properties (via the Green Deal or other finance) and enable their properties to meet the appropriate standards.
- Organise and attend 50 community visits across the district and our partner authority South Norfolk per year to promote the Green Deal and ECO as well as other council services to residents.
- Promote exemplar community and business properties which have been retrofitted using Green Deal measures, financed through the DECC (Department of Energy and Climate Change) Pioneer Places funding.

#### **South Norfolk**

- We have commissioned a housing condition stock modelling report by the Building Research Establishment to identify areas of poor housing. This combined with data on areas of high fuel poverty will help us effectively target activities and marketing.
- We use discretionary budget to promote Green Deals offering Decent Home Loans to assist owner occupiers to improve their homes.
- We have an in-house Home Improvement Agency that identifies and supports vulnerable people, arranging energy efficiency advice and improvements and signposting them to other relevant services.
- We will work with the Eastern Landlords Association to promote Green Deal and forthcoming legal requirements.
- We will also work with CNC building control and planning to encourage energy efficiency in new properties.
- We plan to select the 5 areas with highest incidences of Fuel Poverty and work with our Green Deal partner to ensure that ECO HHCRO is publicised and made available, and maximise take up of ECO HHCRO assistance.

#### Norwich

- The council has carried out a range of work to improve the energy efficiency of its housing stock, installing the following measures 31 photovoltaics, 1 solar thermal, 26 voltage optimisation, 1 air source heat pump, 1,396 loft insulations, 92 external wall insulations, 2245 condensing boilers.
- The council is considering an extension of the existing house in multiple occupation licensing scheme to an estimated 2000 properties (a 10-fold increase over the

- statutory scheme). The landlords of these properties would be required by a licence condition to remove an excess cold hazard.
- The council believes that there is considerable scope for the green deal to be taken up by private landlords and we are already beginning to promote it in individual cases.
- The council has embarked on a programme of building up to 250 new council houses over the next five to 10 years. It is intended to explore cost-effective technologies, including passivhaus techniques, to maximise the efficiency of these new homes.

As well as the HECA report, Norwich City Council also gave us its very comprehensive Affordable Warmth Strategy, which was published in January 2013. It includes key performance measures against the City Council's three priorities of helping people reduce their fuel bills, improving the energy efficiency of housing and assisting people to maximise their income.

#### **Great Yarmouth**

- The Council's Environmental Health Team take both informal in formal action under the Housing Act 2004 against private sector landlords to remedy hazards ... excess cold is one of the principal hazards encountered ... in 2012/13 Officers took such actions in respect of over 50 properties.
- Work in progress in 2013/14 to improve the council housing stock:
  - o 440 homes single glazed window replacement
  - o 785 homes external door replacement
  - o 400 homes loft insulation top ups
- Three year programme of improvements to properties, e.g. to upgrade the poorest performing boilers and controls; to provide solid wall insulation, funded where applicable by the ECO programmes (procuring an ECO provider late in 2013 and starting the programme of work in early 2014).
- To identify ECO eligible areas and households, starting in Autumn 2013.
- Working with the local NHS Clinical Commissioning Group and the County Councils on integrated health & social care – one issue will be improving housing conditions, including energy efficiency and fuel poverty.
- Through Council services such as Tenancy Support, Safe at Home (the Home Improvement Agency), the Older People's Outreach Service and Neighbourhood Management, we will provide a range of non-financial services and assistance to promote and enable the take-up of energy efficiency measures.
- With partners we will develop information and advice on how to manage energy consumption following the installation of Smart Meters. (The utility companies are expected to install Smart Meters in all homes by 2019. There will be smart meters for both gas and electricity and they will send electronic readings to the energy supplier automatically. The come with in-home displays which give real-time feedback on energy usage and what it is costing.)

#### 8.2.5 Action by registered social landlords

Only Norwich City Council and Great Yarmouth Borough Council are major council house stock holders. In the rest of the county social housing is provided by housing associations. The Norfolk Housing Alliance (NHA) is a forum for local social housing landlords and we invited its Chairman to meet with us. We were interested to hear about the action that Norfolk Housing Alliance members have taken to tackle fuel

poverty through improving the thermal efficiency of dwellings and other through other projects. The NHA covers approximately 41,000 properties across the county.

We received a very positive response from the NHA setting out the activities of its members. The following is just a selection of some of the social housing landlords' projects:-

# **Wherry Housing Association**

- Last year we insulated 50 lofts and 19 cavity walls costing £22,388.95 (received £4,499.60 in grant funding). We externally insulated 18 solid walled properties costing £161,891 (received £18,000 in grant funding). The volumes of loft and cavity insulation works we complete are relatively low as we have had a programme for the last 5 years that has completed the majority of our stock.
- The Energywise Project one to one energy saving advice to 276 household who
  were identified as at high risk of fuel poverty (specifically targeted older residents,
  families with young children, residents with a disability and single tenant
  households on a low income).
- 12 trained resident energy champions who are able to give energy saving advice to residents in their neighbourhood and also attend local events to promote energy saving.
- My Home Energy Switch Wherry has joined up with My Home Energy Switch, which is managed by the National Housing Federation, and offers free, impartial service to its customers to make sure they are on the lowest tariff or to help customers switch if they need to.

# **Freebridge Community Housing**

- £400k made available this year for upgrading loft insulation in our properties where levels are currently below 50mm.
- As part of our Non-Traditional Property upgrades, all are being fitted with PV panels and additional insulation.
- As heating systems in 'off gas' properties become due for renewal, they are being replaced where possible with air source heating – this will be an on-going programme.
- Our front line staff promote the availability of Norfolk Credit Union's facility for oil loans.
- We will be recruiting an Energy Advisor within the next few months whose role will involve offering advice to customers on tariffs and energy saving measures, as well as investigating schemes such as bulk oil purchasing that we are not currently involved in.

#### **Cotman Housing Association**

- Cotman has been commissioned by Norfolk County Council to deliver a tenure neutral community Outreach Service for Older People. This supports older people to remain independent in their homes, and the needs and risk assessment process includes financial issues and ability to keep warm. The support planning phase encompasses "keep warm" strategies, winter weather payments etc.
- We have been doing the usual installing double glazing, upgrading cavity and loft insulation and replacing boilers with more efficient models.
- Through our membership of Places for People, we have piloted the installation of

- PV panels at our estate in North Walsham, at no cost to ourselves, therefore helping customers to save money.
- Our supported housing development at Great Yarmouth was completed last year and features impressive environmentally friendly features such as high insulation, solar thermal heat exchangers and passive vent ducting to reduce energy by recycling warm air and reducing water consumption.

### **Broadland Housing Group**

- Broadland Housing Group have provided either cavity wall or loft insulation to 710 properties over the past five years with a works value of £186,636; of which £114,341 was received back in CERT payments.
- Broadland Housing Group were also successful in obtaining funding from the European Regional Development Fund for £518,605.00 to allow a model to be developed for low carbon retrofit of social housing. The properties included were refurbished to a selection of low carbon standards, using a whole house approach. The 'whole house' approach considers all of the low carbon energy saving elements working in conjunction with each other, to deliver the best solution for an individual property to include both physical and behavioural impacts. The total project value was £1,296.563.
- In relation to communal heating systems, £37,894.25 has been spent on Boiler Management systems over the past five years.
- Broadland have also benefitted from the Renewable Heat Premium payment and have provided solar thermal panels and air source heat pumps to 21 properties, at a cost of £172,496. £60,000 was received back in grant payments.
- Commissioning the University of Salford to help develop a behavioural change advice and guidance programme for Broadland Housing and other tenants. The intention is to provide frontline staff with simple advice to allow them to make what are called behavioural change interventions. These range from providing general advice on energy efficiency to adjusting boiler programmers in tenants' homes.

#### **Orbit East**

- In 2012/13 we completed a wide range of thermal improvements to target our resources at a fabric first approach to investment as set out within our Warm Homes Strategy and include:-
  - Loft Insulation
  - Cavity Wall Insulation
  - Window Replacement
  - Heating System Replacement
  - Solid wall insulation works

This has seen an investment in 2012/13 of £1,256,000 and we have committed to make improvements within 2013/14 totalling £1,187,000

 We have agreed a strategy to improve our worst performing homes within our communities through focused investment and have sought to maximise our ability to deliver these improvements through securing funding from the Energy Company Obligation set out within the Green Deal.

#### **Saffron Housing Trust**

• Since 2004 Saffron have upgraded 2800 properties to standard - 250mm (loft) and

- cavity filled. Future programmes are expected to comprise between 100-250 properties per annum
- Since 2011 Saffron have upgraded 118 solid wall properties with external insulation. Future programmes are expected to comprise between 60-70 properties per annum
- Saffron's central heating programme undertakes installation to 125 properties per year (this comprises a mix of oil, gas and electric heating types).
- Installed 804 PV (solar panel) arrays on properties in all areas of South Norfolk.
  This project was completed in Dec 2011. Over 3.5million units (kwh) of electricity
  produced to date. On average we are expecting tenants to save in the region of
  £125 per year.
- Tenants who report issues of high energy bills or fuel poverty are referred to Saffron's Energy Officer who can give the tenant advice and explore options for switching energy suppliers with them (via USwitch)
- Saffron have in-house provision of a full time Citizen's Advice Bureau worker who
  tenants are able to contact for 'fast-track' advice on a range of debt and income
  related issues including addressing issues arising from fuel poverty including
  advice and help in accessing British Gas Energy Trust Fund for those at risk of fuel
  poverty.
- Saffron work closely with Norfolk Credit Union and enable some financially vulnerable tenants to access loans for heating oil through a guarantee scheme with NCU.

#### 8.2.5 Private landlords' action

We were aware that the energy efficiency of housing stock in the private rented sector tends to be worse than in the social housing sector. For instance the average SAP (Standard Assessment Procedure) rating for houses owned by Great Yarmouth Borough Council is a very good 70.8 compared to an average SAP of just 51 for all housing in the borough. In Norwich the private housing stock has an average SAP of 47 compared to 70.45 for houses owned by the City Council. A SAP of below 30 is considered a significant health hazard. The national average for social housing stock is 62.4 and for all housing it is 54.5.

North Norfolk District Council gave us figures that showed a higher rate of fuel poverty in privately rented housing stock in its area:-

Owner occupied stock – 10.4% in fuel poverty Privately rented stock – 19.1% in fuel poverty Housing association – 12.8% in fuel poverty

We decided to speak with the Chief Executive Officer of the Eastern Landlords Association (ELA) to hear the view of private landlords on improving thermal efficiency of dwellings. We were grateful to the ELA for its cooperation with our review and we acknowledge the good work that it does with its 1,200 members. We are also conscious that there are many other private landlords operating in county who are not members of the ELA.

The Chief Executive Officer (CEO) of the ELA informed us that from 2016 any tenant or their representative asking for their landlord's consent to make reasonable energy efficiency improvements cannot be refused. Energy Performance Certificates (EPCs) are required to be in place for all housing stock by 2018 and it is expected that all

rented properties will be required to have an EPC of E or above. More and more tenants are becoming aware of this requirement and will want to see the EPC rating of a property to make an informed decision on whether to rent.

The CEO of the ELA made the point that housing stock in the private rented sector is generally older and less fuel efficient than the social housing stock. He also explained that private landlords have not been taking up the Green Deal because they find the process excessively bureaucratic and time consuming.

#### 8.2.6 House builders

The Federation of Master Builders (FMB) told us that it is offering certification to those builders who wish to become Green Deal providers and have introduced the Low Carbon Building Refurbishment Strategy to encourage its members to use low carbon design and construction techniques.

The FMB is also working to raise awareness of the Green Deal scheme with its members so that they can advise customers on what is available. This is a slow process as it takes time to get members assessed, certified and trained. The FMB has a membership of approximately 9,500 small firms.

8.2.7 There has certainly been a lot of practical activity in this area in recent years and more is planned by the district councils and the housing associations. We commend them for what they have done and their recognition that there is much more to do. They are clearly monitoring the effects of their policies and are working with each other and other agencies, including the County Council, to maximise the benefits of their actions.

We noted different levels of detail in the district councils' HECA reports but acknowledge that this is not necessarily the best guide to activity 'on the ground'. We would urge Breckland District Council to produce a HECA report.

We think it is fair to conclude that the reduction in fuel poverty levels in Norfolk in 2010 and 2011 must, in part, be attributable to the work that has been done to improve the energy efficiency of housing stock. However, it is very difficult to disentangle all of the factors that influence the fuel poverty statistics and to be sure of cause and effect. The new fuel poverty definition and indicator should help with that.

#### 8.3 Reducing the price that people pay for energy

As discussed in section 4, the 24% rise in average energy costs since 2009 is clearly a major contributor to fuel poverty. As with action to improve the energy efficiency of dwellings, we found there is a great deal of effort going into helping people reduce the amount they pay for heating fuel.

#### 8.3.1 Oil buying schemes

Norfolk Rural Community Council (NRCC) told us about the Thinking Fuel oil-buying scheme which buys more than 1,000,000 litres of oil per year on behalf of over 2,000 members. People can save around 9% on their oil bills, (i.e. about £120 per year, or 6p per litre based on 2,000 litres). The scheme is run by NRCC in partnership with AF-Affinity, Anglia Farmers bulk buying arm.

The scheme is run on a community basis, which means that a local community group needs to be set up before people can register. If there is no local community group

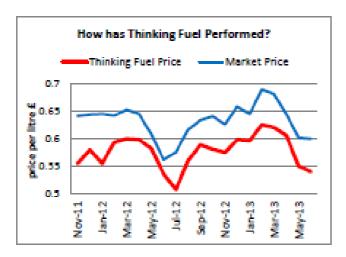
people can join through NRCC as an individual member for a fee of £20. If there is a community group then it pays just one £20 fee, which entitles all households in the community to join at no additional charge.

The scheme works as follows:-

- The bulk order syndicate operates once a month (by 5.00pm on the first working day of the month) to balance convenience with savings.
- The syndicate shops around to find the best deal with each order, but only uses providers that it believes are reliable and provide a suitable quality product.
- The minimum order is 500 litres. This is because of trading standards regulations. The majority of fuel vehicles carry pumps that are certified to deliver a 500 litre minimum.
- Everyone pays the same price per litre regardless of the volume they order.
- There is no obligation to buy.
- Payment can be made by direct debit, debit card or credit card.
- There is an option for people to pre-purchase vouchers to spend on oil (but the scheme encourages people to save and budget accordingly and signposts them to Citizens Advice Bureaux or Norfolk Credit Union if they are having problems affording their bill).

Oil bulk buying schemes cannot guarantee to get people the cheapest price every time, but they aim provide consistently good value.

The graph below shows how well the Thinking Fuel scheme compared to market prices over the past two years.



NRCC also told us about the Buy Oil Early Campaign which was launched in September 2013 by ACRE (Action with Communities in Rural England), Citizens Advice and FPS (Federation of Petroleum Suppliers). The campaign encouraged people to stock up with oil in September when prices and demand tend to be lower.

#### 8.3.2 The Big Switch and Save

The district councils told us about the Norfolk Big Switch and Save collective switching initiative, which six of them are promoting using funding from DECC. Great Yarmouth Borough Council is part of a different switch and save scheme, with Peterborough Council.

Households are able to register an interest in collective switching through the Big

Switch and Save website. At the end of the registration period the company that won the tender to deliver this initiative, ichoosr, goes to the energy market to request the best price for providing energy to those that have registered through a reverse auction. Those registering are then advised of the outcome of the auction and provided with details of how much they could save if they were to switch and are given 4-6 weeks to decide if they want to switch. The switch will be managed by the customers' current and new energy companies.

In addition to the four simplified core tariffs which Ofgem has instructed the energy companies to introduce (see paragraph 4.3), they will be able to offer a fifth tariff for collective switching. It is hoped that this could result in cheaper energy for those switching in this way and that the new tariff will be available in time for the current switch opportunity. The registration period ends on 18 November 2013 and the auction takes place the next day. Those who registered will be notified and will need to make a decision on whether to switch by 13 January 2014.

At the time of writing this report, 5,652 Norfolk householders had registered for the auction on 19 November.

We saw the oil buying section on the Big Switch and Save website, where people can put in place names or postcodes and see all of the local oil buying groups on the map. There are numerous groups in Norfolk working through several bulk buying schemes.

The Welfare Rights Officer drew our attention to the fact that some fuel companies are recognising the problem of fuel poverty and offering direct debit facilities on fuel such as Calor Gas, which is a commonly used fuel in Norfolk.

## 8.4 Increasing people's incomes

- 8.4.1 The factors which affect the level of people's incomes go well beyond the remit of this panel. The economic background and standards of education play a part as well as the higher than average number of part-time workers in Norfolk. We looked at some of the sources of financial and other material help available for people on low incomes who may be in danger of fuel poverty.
- 8.4.2 Making sure that people receive all the benefits they are entitled to is clearly an important element in tackling fuel poverty. All of the councils in Norfolk provide advice and signposting on benefits and entitlements as do many third sector organisations. Norfolk County Council also commissions specialist information advice and advocacy services to support vulnerable people to access their entitlements.

The work of the credit unions is also vital in helping people on low incomes to access funds.

We focused on a few of the third sector organisations that are giving people financial and other help directly in relation to fuel poverty.

8.4.3 Age UK Norfolk gave us details about its Benefit Service, which undertook 1058 home visits to assist with the completion of forms for 770 Attendance Allowance, 89 Disability Living Allowance and did a benefit check for 796 households in the period from April 2012 to March 2013. This resulted in raising income of older people in Norfolk by £2,141,072. In the same period Age UK Norfolk's Telephone Advice Line took 568 calls relating to queries regarding domestic fuel issues, 'switching' advice,

energy conservation queries.

8.4.4 Norfolk Community Foundation Trust and Age UK told us about the Surviving Winter Appeal. The appeal, organised by Norfolk Community Foundation Trust, encourages older people who are in receipt of the Winter Fuel Allowance but not financially dependent on it to donate all or part of it for distribution to the people most in need during winter. Other people are also encouraged to donate. In the first year the appeal raised over £30,000 and in the following two years has raised over £60,000. There was also a one-off donation of £100,000 from Norfolk County Council last year. The County Council has given £5,000 this year.

Age UK gives out the grants according to individual circumstances, but usually between £100 and £250 per household. The table below shows the value of the grants paid out from Surviving Winter fund in recent years.

Date	Number of Grants	Total grants
March 2011 – August 2011	14	£3,266
Sept 2011 – March 2012	243	£40,420
April 2012 – March 2013	459	£73,289

All recipients of a Surviving Winter grant are offered a benefit check to ensure they are claiming all they are entitled to.

- 8.4.5 Age UK runs a Money School which supports older people who have the capability to manage their finances effectively but who lack the knowledge and skills to do so. They have held sessions on benefits, price comparison and 'switching'.
- 8.4.6 Early in our review we received a report from the Local Assistance Scheme Development Manager at Norfolk County Council. Since April 2013 the County Council has managed the Local Assistance Scheme, which takes the place of Community Care Grants and Crisis Loans which were previously administered by the Department of Work and Pensions. In April 2013 funding was transferred to top tier local authorities based on 2004/05 spending.

The scheme awards a small amount of money (£10) for emergency fuel payments. In the period between 2 April and 30 June 2013 there were 68 applications of which 54 were awarded an emergency payment. It was, of course, anticipated that the demand for emergency fuel payments would increase during the winter.

The payments are meant as a very short term solution and should be used to top up gas and electricity pre payment meters. People who use propane gas or oil cannot be helped by this scheme. Generally the scheme will only pay out between October 31<sup>st</sup> and March 31<sup>st</sup> but it was extended to April 2013 because of the unseasonably cold weather. Payment is also flexible when there are small children or disabled people living in the household.

The Local Assistance Scheme is also looking into the possibility of engaging with other existing district council schemes for the provision of emergency heating oil (in four out of seven councils). It is also looking into ways to ensure that information concerning entitlement to the Warm Home Discount Scheme is made available to those applicants to the Local Assistance Scheme who qualify for this benefit payment

and also to raise awareness of the Broader Group Schemes administered by energy suppliers (see paragraph 5.1 above). The scheme is also looking at the possibility of collating all information about ways to combat fuel poverty and having one point of access to this for applicants to the scheme.

#### 8.5 Norfolk Warm and Well

Community Services OSP has already received a report from the Director of Public Health, on 5 November 2013, about the success of this major initiative in 2012-13 and the plans for winter 2013-14. Representatives from Public Health met with us to discuss Warm and Well in detail.

Last year (2012-13) funding of £283,570 was provided by the Department of Health following a successful application to the Warm Homes Healthy People fund. This application involved a partnership of organisations in Norfolk including local government, health and the voluntary sector which together would identify and provide intervention to those requiring help. The Norfolk scheme had the following principal aims:

- Giving people cold weather information and advice.
- Providing practical and financial support.
- Encouraging community spirit where neighbours help those in need.

The individual components contributing to these aims are highlighted below:

#### Resources for keeping warm

- 6,000 warm packs including advice leaflet, blanket, gloves, thermos mug, room thermometer, bed socks, woolly hat and hot water bottle
- Blankets for the homeless
- Low cost loans for heating oil through Norfolk Credit Union, to combat fuel poverty in rural areas
- Portable heater loan
- Loft clearance services, ready for increased insulation laying (loft lagging)
- Low level insulation, providing radiator foil, loft lagging, and draft excluders
- Boiler repair, or replacement where quick action is critical
- Emergency heating oil for people in a crisis
- Community alarms, including extreme temperature sensors

#### Intensive support for the most vulnerable

- Grants for individuals in a crisis through the Norfolk Community Foundation to provide intensive help to up to 500 individuals
- Telephone and home-visit support for up to 300 individuals with long-term conditions

#### Building community capacity and resilience

- Up to 20 training sessions will be provided for parish councils and community groups to help them identify, support and signpost vulnerable people
- Streamline getting the right help to the right people through referral process
- Continuation of the Warm and Well fund, providing resource to groups supporting the vulnerable into the future.
- Use of the Home Shield cross-referral agency for professionals was expanded to include telephone and web referrals from the public.

#### Promoting of awareness

- Raise awareness of the risk of winter to vulnerable groups and solutions to overcome them
- Promote flu vaccination to all vulnerable groups

Public Health did a detailed analysis of the 2012-13 programme and found that it had been successfully delivered. There were some instances of Warm and Well packs being delivered to people who did not need them but generally the help went to people who were in need. It was also noted that the 2012-13 campaign got off to a slow start and that planning should begin earlier for his winter.

There is no grant funding from the Department of Health for Warm and Well this year. Norfolk Community Foundation had £40,000 left over from last year's funding and Public Health has contributed £10,000, which Norfolk Community Foundation matched, giving an overall fund of £60,000. The plan for Warm and Well 2013-14 is as follows:-

#### (a) Communications

The overarching theme is 'looking after each other this winter'. There will be an awareness raising campaign with three main elements:-

- Community development key events
- Targeted and general public health messages
- Signposting to relevant services

Targeted communications will be aimed at the ten Medium Super Output Areas with the highest excess winter deaths, food banks and homelessness.

The there will be a focus on working with community advocates to get information to target groups as well as using all the usual community communication chanels.

A leaflet with stickers will be produced. These will be placed inside prescription bags in pharmacies and the stickers used to seal the bag. This will target those individuals with chronic health conditions.

People will be signposted to the internet or County Council Customer Service desk. The Warm and Well internet page will list the services that are available this winter.

#### (b) Grant application

Community groups can apply for up to £5,000 from Norfolk Community Foundation (from the £45,000 remaining from last year's funding). This will not only provide funds for communities but raise awareness of community development.

#### (c) E-learning

Last year there were a number of training events but attendance was relatively poor. This year there will be an e-learning module. This will be targeted at staff who work in health and social care and partners in the Warm and Well campaign. It will allow staff who enter people's homes to recognise the signs of a cold house and give advice. It will be a freely available tool, hosted by Norfolk's Living Well. The training will centre of Making Every Contact Count (MECC). It is based on the following steps, which can be delivered in about 1 minute:-

- ASK: Have you thought about how to keep warm this winter?
- LISTEN

- ADVISE: A good way to keep warm and healthy would be....
- ACT: Signpost to Warm and Well services

# 9. What more could be done to alleviate fuel poverty in Norfolk? Conclusions

- 9.1 First of all, we think it is worth noting that although members of our group came from four different political parties there was complete consensus on the conclusions of this report and the recommendations that we have made.
- 9.2 It is clear to us that the dramatic increase in the price of energy to the consumer in recent years is greatly exacerbating the problem of fuel poverty. We welcome the fact that this issue is receiving attention at national political level.
- 9.3 Throughout our review we were looking for ideas on what more Norfolk County Council or other organisations or agencies could do to alleviate fuel poverty in the county. We are very conscious that Norfolk County Council has to save £189m over the next three years and that the restriction on our spending is likely to have a knock-on effect on third sector capacity. We are equally aware that the NHS also faces a difficult future with flat cash budgets not keeping up with rising demand. At the same time common sense tells us that if we, as a community, do not manage to alleviate fuel poverty the pressures on the NHS and social care will increase even more.
- 9.4 We are pleased that the Norfolk Warm and Well initiative is to continue this winter despite the absence of central funding. In the circumstances we support the emphasis on 'looking after each other this winter' and the plan for a targeted communication campaign. We would also **recommend** that all County Council departments, district councils, housing associations, NHS and third sector organisations and agencies who send staff into people's homes make use of the Warm and Well e-learning module and ensure that staff are signposting people at risk of fuel poverty toward the available help.
- 9.5 We noted that last year's Warm and Well initiative opened up the Home Shield professional cross-referral agency to telephone and web referrals from the public, which we support. We heard from one of the district councils during our review that there are not many referrals from Home Shield in relation to fuel poverty. We **recommend** that the Home Shield service is promoted to staff who take the Warm and Well e-learning module and to community contacts, such as village agents or community oil buying champions, who may be able to refer people in fuel poverty to the service.
- 9.6 Enabling Communities is one of the Enterprising Norfolk work strands. We **recommend** that the Enabling Communities group considers ways in which local communities can participate in the Warm and Well campaign and in other activities to tackle fuel poverty in their areas.
- 9.7 The County Council's is looking to develop customer insight work based on the intelligence behind all the interactions that the County Council has with local people. This means that when looking to commission or deliver a service to specific customer groups it will be possible to look in detail at how the County Council's services already interact with them and make useful links. We **recommend** that the County Council's

- customer insight work and assistance is made available to all County Council departments and the other organisations and agencies who could use it to target help (e.g. Green Deal) towards people who could use it.
- 9.8 We further **recommend** that the Insight Team investigates the development of a network for the sharing of information, data and knowledge in respect of fuel poverty and associated issues so that organisations can see the opportunities for working together
- 9.9 We saw evidence from North Norfolk District Council and Norfolk Rural Community Council that switch and save schemes can work well for the people who sign up for them. The problem has been that not enough people do. We commend the district councils and Norfolk Rural Community Council for the effort they have put in to switch and save and would urge them to continue.
  - We think that Ofgem's intervention to simplify energy tariffs together with the latest price hikes will encourage more people to switch and the collective scheme is a good way for people who do not have internet access to take part. We **recommend** that the district councils and Norfolk Rural Community Council continue to promote collective switch and save and that Norfolk County Council also helps to promote future rounds of the Big Switch and Save.
- 9.10 We were disappointed that five of the 'big six' energy companies and National Grid did not reply to our letters in time to include their comments in this report. Our letters were originally sent on 14 October and we wrote to them again on 22 November 2013. We were particularly keen hear from National Grid on the issue of mains gas supply in rural Norfolk. More connections to the gas grid would make a big difference to fuel poverty in Norfolk. We **recommend** that the County Council takes up the issue of roll-out of mains gas connections with National Grid.
- 9.11 We heard from several sources how householders can waste energy simply by not understanding how to use their boiler or central heating system properly. We **recommend** that the housing associations, district councils with housing stocks and private landlords ensure that new tenants are given clear written instructions for their boiler and central heating system and that one to one instruction is given where necessary.
- 9.12 We heard evidence about how residents prefer to take advice from their local council more than from any other source. We **recommend** that District Councils consider allowing their logo to be used in promotion of the Green Deal in their area.
- 9.13 We **recommend** that Norfolk County Council expresses support for the Energy Bill Revolution which is calling for the Government to spend its carbon tax revenue, approximately £4 billion per year, on making homes more energy efficient.
- 9.14 Six out of seven district councils showed us their Home Energy Conservation Act (HECA) reports. We **recommend** that Breckland District Council produces a HECA as soon as possible.
- 9.15 The HECAs contained a wide variety of good ideas for reducing fuel poverty. We **recommend** that the district councils consider each others' HECAs and whether some of their neighbours' ideas would work in their area (e.g.the loft clearance service

in Norwich seems like a very good idea for encouraging people to take up the offer of loft insulation; several of the districts are taking very positive action to promote the Green Deal).

- 9.16 The Norfolk Health and Wellbeing Board is the strategic body on which most of the organisations and agencies who can influence fuel poverty are represented; county council, district councils, NHS clinical commissioning groups, NHS England, the voluntary sector, and the police. We **recommend** that members of the Norfolk Health and Wellbeing Board receive this report and that they consider ways in which fuel poverty can be alleviated as they work together on the health and wellbeing strategic priorities.
- 9.17 We **recommend** that the five CCGs come together to consider how they can commission services to avoid excess winter deaths, building on the Warm and Well initiative, and work with the seven district councils to consider how the councils can help in delivering aspects which relate to the home environment.

#### 10. List of recommendations

(see below)

Reco	mmendation	То
1.	That all County Council departments, district councils, housing associations, NHS and third sector organisations and agencies who send staff into people's homes make use of the Warm and Well e-learning module and ensure that staff are signposting people at risk of fuel poverty toward the available help.	Norfolk County Council Directors 7 District Councils Norfolk Housing Alliance Norfolk Community Health and Care NHS Trust Norfolk and Suffolk NHS Foundation Trust
2.	That the Home Shield service is promoted to staff who take the Warm and Well e-learning module and to community contacts, such as village agents or community oil buying champions, who may be able to refer people in fuel poverty to the service.	Director of Community Services
3.	That the Enabling Communities group considers ways in which local communities can participate in the Warm and Well campaign and in other activities to tackle fuel poverty in their areas.	Director of Community Services
4.	That the County Council's customer insight work and assistance is made available to all County Council departments and the other organisations and agencies who could use it to target help (e.g. Green Deal) towards people who could use it.	Head of Planning, Performance and Partnerships
5.	That the Insight Team investigates the development of a network for the sharing of information, data and knowledge in respect of fuel poverty and associated issues so that organisations can see the opportunities for working together	Head of Planning, Performance and Partnerships
6.	That the district councils and Norfolk Rural Community Council continue to promote collective switch and save and that Norfolk County Council also	7 District Councils Norfolk Rural Community Council

	helps to promote future rounds of the Big Switch and Save.	
7.	That the County Council takes up the issue of roll-out of mains gas connections with National Grid.	Norfolk County Council
8.	The housing associations, district councils with housing stocks and private landlords ensure that new tenants are given clear written instructions for their boiler and central heating system and that one to one instruction is given where necessary.	Norfolk Housing Alliance 7 District Councils Eastern Landlords Association
9.	That District Councils consider allowing their logo to be used in promotion of the Green Deal in their area.	7 District Councils
10.	That Norfolk County Council expresses support for the Energy Bill Revolution which is calling for the Government to spend its carbon tax revenue, approximately £4 billion per year, on making homes more energy efficient.	Norfolk County Council
11.	That Breckland District Council produces a HECA as soon as possible.	Breckland District Council
12.	That the district councils consider each others' HECAs and whether some of their neighbours' ideas would work in their area (e.g.the loft clearance service in Norwich seems like a very good idea for encouraging people to take up the offer of loft insulation).	7 District Councils
13.	That members of the Norfolk Health and Wellbeing Board receive this report and that they consider ways in which fuel poverty can be alleviated as they work together on the health and wellbeing strategic priorities	Norfolk Health and Wellbeing Board
14.	That the five CCGs come together to consider how they can commission	5 Clinical Commissioning Groups

	services to avoid excess winter deaths, building on the Warm and Well, initiative, and work with the seven district councils to consider how the councils can help in delivering aspects which relate to the home environment.	
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# **Terms of Reference**

#### **Norfolk County Council**

#### **Community Services Overview and Scrutiny Panel**

Terms of reference for scrutiny of

#### **Fuel Poverty in Norfolk**

Scrutiny by

#### Task and finish group

Membership of task and finish group

Seven County Councillors (no requirement for the membership to be in line with the political balance of Norfolk County Council)

Healthwatch Norfolk to be invited to nominate a co-opted member

The Chairman of the Fuel Poverty in Norfolk Scrutiny Task and Finish Group to be a Member of Community Services Overview and Scrutiny Panel

### Reasons for scrutiny

It was reported to Community Services Overview and Scrutiny Panel on 11 June 2013 that:-

- New figures released by the Department for Energy and Climate Change show a rise in fuel poverty in Norfolk of just under 10,000 households, making a total of 61,143 households in total.
- Norfolk suffers from the greatest level of fuel poverty in East Anglia with the greatest effect being felt in rural Norfolk, particularly in coastal areas
- In Norfolk, the highest levels of fuel poverty are found in North Norfolk, where 22% of all households are in fuel poverty.
- Fuel poverty is often higher in rural areas due to older housing stock that is often detached, poor standards of insulation and no connection to mains gas supplies, thereby creating a reliance on more expensive forms of fuel.

The Panel considered it important to examine fuel poverty within the context of income deprivation, rural isolation and the impact of welfare reform

#### Purpose and objectives of study

The Task and Finish Group will examine fuel poverty in Norfolk in the context of heating people's homes. Its objectives will be:-

To examine the reasons why Norfolk has the highest level of fuel poverty in East

Anglia.

- To examine services currently working to alleviate fuel poverty
- To examine what more could be done by the County Council and other organisations or agencies to alleviate fuel poverty

#### Issues and questions to be addressed

- How can the costs of commodities, such as oil and other heating fuel, be limited?
- How can the County Council or other agencies assist communities to bulk buy commodities and provide them with the right information to make more economic choices?
- How well does the County Council support fuel poverty groups around the county, e.g. Norfolk's Warm and Well Fund.
- How well does the County Council ensure that operational staff are trained to identify fuel poverty and raise awareness of local initiatives with regard to available help?
- How successful is Norfolk County Council at identifying and referring service users or Norfolk residents in or at risk of fuel poverty to appropriate agencies?

The Task & Finish Group will consider the equality impact and the crime and disorder implications of any recommendations that it makes.

# People to speak to

- Heating fuel suppliers (oil and gas)
- · Norfolk Community Council and Age UK fund
- Fuel poverty groups from around the county
- Norfolk Rural Community Council
- Housing associations
- District councils
- Community Services and other County Council managers / commissioners (e.g Visiting Financial Officers, Welfare Rights Unit, Specialist Contract Group).

#### Other sources of information

The National Energy Action Conference, Harrogate, 16 – 18 September 2013. The Chairman of the Scrutiny Task & Finish Group, or 1 other member, to attend.

#### Style and approach

Panel-style meetings with witnesses

# **Planned outcomes**

A report to Community Services Overview and Scrutiny Panel with the Task and Finish Group's findings on the reasons for high levels of fuel poverty in Norfolk and recommendations on anything more that the County Council or other agencies can do to address the problem.

# **Deadlines and timetable**

The scrutiny task and finish group will report back to Community Services Overview and Scrutiny Panel by 7 January 2014.

The detailed timetable of work to be agreed at the first meeting of the task and finish group, based on interviewing two sets of witnesses at each of its meetings.

Terms of reference agreed by	Date
Community Services Overview and Scrutiny Panel	9 July 2013

#### **Fuel Poverty Panel**

#### List of information received

# Fuel poverty in Norfolk – assessment of the data – July 2013

Report by Judy Lomas, Joint Strategic Needs Assessment / Norfolk Insight Team Manager, Norfolk County Council

#### **Local assistance scheme for Norfolk**

Report by Izzy Bennett, Local Assistance Scheme Development Manager

#### National policy context

Briefing by Maureen Orr, Scrutiny Support Manager (Health), Norfolk County Council

#### Fuel Poverty: A Framework For Future Action July 2013

Department of Energy and Climate Change

#### **Benefits and Credits: The Warm Home Discount Scheme**

www.gov.uk

#### **Green Deal: Energy Saving for Your Home or Business**

www.gov.uk

#### **Extract from Rural Communities**

# <u>House of Commons Environment, Food and Rural Affairs Committee, Sixth Report of Session 2013-14, Volume 1</u>

#### **Fuel Poverty Scrutiny**

Report by Norfolk Housing Alliance on action taken by housing associations

# Norwich City Council Home Energy Conservation Act (HECA) Report 2013-15

Norwich City Council affordable warmth strategy, January 2013

Norwich City Council advice/help to residents

Norfolk Big Switch and Save

**Norwich City Council Tenure of Households** 

South Norfolk and Broadland HECA draft further report 2013

#### **Fuel Poverty in Norfolk**

Age UK Norfolk, Linda Gill, 16 September 2013

# **Norwich City Council: Winter Wellbeing Conference**

Feedback report by Cllr Elizabeth Morgan

#### Benchmarking information:-

(i) Nottingham Energy Partnership's analysis of the comparative cost of gas and other heating energy sources

http://www.nottenergy.com/energy\_cost\_comparison

(ii) The Department of Energy and Climate Change's fuel poverty sub regional statistics

https://www.gov.uk/government/organisations/department-of-energy-climate-change/series/fuel-poverty-sub-regional-statistics

(iii) The Rural Fuel Poverty organisation's mapping of the prevalence of mains gas connections, solid wall housing and incidence of fuel poverty across England

http://www.ruralfuelpoverty.org.uk/

# % of households in fuel poverty (2011) – Norfolk compared with nearest neighbours

Briefing by Andrew Brownsell, Strategic Research Analyst, Norfolk Insight Team

#### **Great Yarmouth Borough Council HECA report 2013**

#### **Surviving Winter Appeal**

Information provided by Graham Tuttle, Norfolk Community Foundation What activity was undertaken and who benefited Organisations supported by NCF's Warm & Well Surviving Winter Appeal Final Report March 2013

#### Statistical Digest of Rural England 2013

Department for Environment, Food and Rural Affairs, September 2013

# The Broadland and South Norfolk Green Deal, Social Marketing Analysis and Evaluation, March 2013

# Borough Council of King's Lynn and West Norfolk Draft HECA Report 2013-15

#### North Norfolk District Council HECA Further Report

#### Warm and Well Evaluation, Winter 2012/13

Public Health, Norfolk County Council

#### 2013/14 Warm and Well proposed plan

Dr John Ford, Public Health Registrar

#### The Health Impacts of Cold Homes and Fuel Poverty

Written by the Marmot Review Team for Friends of the Earth, May 2011

# Using Customer Insight to better target the work of all agencies involved in addressing Fuel Poverty (Experian Mosaic Public Sector citizen classification

Report by Judy Lomas, Joint Strategic Needs Assessment / Norfolk Insight Team Management

Letter from SSE, dated 25 November 2013, regarding Fuel Poverty in Norfolk

# Report to Community Services Overview and Scrutiny Panel 7 January 2013 Item No 11

# The New Compact for Social Care in Norfolk

Report by the Director of Community Services

## **Summary**

This paper notes the changing policy and practice environment which is coming to social care. It proposes that the Council, in its leadership role, needs to engage key stakeholders in understanding and responding to these changes. To that end, the paper proposes 'the new compact for social care in Norfolk'.

The aim of this document is to capture the key national policy and practice changes which are emerging for social care. This then provides the Council with a clear position statement which sets out how it sees not only its own role, but that of other key stakeholders including service users, families, providers and communities. Given the changing environment for social care it is essential that the Council is able to give clear commitments about its role and to engage others in collaborating to provide what is needed for good care in Norfolk. The document is not meant to hold the detail of changes. It is a high level framework from which we can hang the detailed proposals as they develop. The new compact will provide a tool to help us manage expectations and to engage with partners on delivering these changes.

## **Action required**

Panel is requested to:

- a) Endorse the proposal for the Council to set out a revised framework for social care
- b) Review and comment on the proposed content of the 'new compact for social care in Norfolk'
- c) Endorse the proposal to communicate and engage with stakeholders about the framework

# 1 Background

- 1.1 The world of social care is changing. In an environment of economic constraints and demographic challenge, national policy and developing best practice are creating significant shifts in the way social care will be delivered. The Dilnot report reviewed the future of social care and the Care Bill is going through legislative processes, the implications of which are being reported to Panel elsewhere.
- 1.2 Over the past decade, changes in social care have focused on personalisation, underpinned by the introduction of personal budgets. However, as personalisation becomes embedded, there is a need to set out and to communicate the next set of changes for social care. These changes are framed in a wider public services landscape and the changing set of responsibilities between the state, the individual and their family, and communities. As the authority responsible for social care in Norfolk, the Council has a key leadership role in ensuring that people and partner organisations in Norfolk understand these changes, in order to play their part in the future of social care. This is why it is proposed that we set out this 'new compact for social care'.

# 2 The purpose of the new compact

2.1 As the local authority with responsibility for social care in Norfolk, the Council has an important leadership role in shaping the future of social care. To make sure we get

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the social care change process right we will involve:

- a. individuals with care needs and their families
- b. communities of Norfolk
- c. voluntary organisations
- d. providers of social care services
- 2.2 So that social care in Norfolk can keep up with changing demands for care, we need to work closely with our key stakeholders. We recognise the importance of setting out and communicating these changes clearly and this will involve us working closely with groups to reframe expectations for what is needed to deliver care in the future.
- 2.3 The new compact has therefore been drafted to provide a high level overview of the key messages which we need to communicate about social care for the future. It is intended for a wide ranging audience, for whom more detailed content can be developed.

# 3 The new compact for social care in Norfolk

'Social care: everybody's business'

### 3.1 What is social care?

- 3.1.1 For most people, managing everyday life is something we take for granted. But many people find they need additional help to look after themselves for some this happens as they become older and less able to manage, for others it is due to a lifelong disability. Where people's needs concern their ability to care for themselves, to live safely, to be socially connected and manage at home, this is 'social care'.
- 3.1.2 What is clear is that many more people are living with social care needs and we need to set out how we can address these to allow people to have confidence in the future.

## 3.2 Why is social care changing?

- 3.2.1 As a population we are living longer many more people live into their 80s and beyond and younger people with substantial disabilities have much better life expectancy. These advances mean that more of us live with care needs at some stage in our lives often in the latter years of life. And many of these needs are more complex, for example more people living into older age with dementia.
- 3.2.2 At the same time, the pressure on the public purse means that there is less public money available to spend on social care so the equation just doesn't add up.
- 3.2.3 All in all, we can't afford the current system as the money shrinks and the demand grows. This is happening across the country and means we need to rethink how we respond to the growing call for care and support and say how we will do this.

## 3.3 What about the Care Bill?

3.3.1 Following national debate about social care, the government has published the Care Bill. The paper sets out some new rules which are likely to influence future delivery of social care. Our new approach anticipates these, including better access to assessment, a greater emphasis on prevention, better support for carers and the changes in entitlements to funded care services.

## 3.4 What's happening elsewhere?

3.4.1 The combination of more demand for services plus reduced public funding is not peculiar to Norfolk: it's happening across the country. So all areas are having to

rethink how they provide care. As Norfolk has one of the highest older populations in the country, the nationally changing picture for social care will have a big impact for us.

## 3.5 How are we proposing to respond in Norfolk?

- 3.5.1 We think that these changes are of such magnitude that we need to really examine how we propose to address social care in Norfolk. This isn't just a natural progression it calls for us to make some considered and sometimes difficult changes. It's no good looking at social care of the past 10 years; we need to think really creatively about getting social care right for the next 10.
- 3.5.2 Social care is everybody's business. The Council thinks it is important to generate debate and shared understanding about Norfolk's priorities, changing needs and how we can collaborate for the benefit of some of the most vulnerable people in our communities.
- 3.3.5 This paper sets out our thinking about social care for the next 10 years. It's also an invitation to talk with us about social care and to work with us to address the challenges we all face.
- 3.4 How do we see social care being addressed?
- 3.4.1 We think there are five key elements to the future of social care:
  - 1. Stick to 'good care' principles
  - 2. Help people to sort things out for themselves
  - 3. Support communities to do their bit
  - 4. Fund the essentials; wrap around the rest
  - 5. Combine with the NHS for co-ordinated care.

## 1. Stick to 'good care' principles

Although there are challenges in meeting social care needs ahead, we believe it is essential to stick to the principles of what 'good care' is and that we should be champions of these principles. Care in Norfolk needs to be:

- a. Personalised: offering people real choice and control over their lives
- b. Good quality: treating people with dignity and respect, doing what we say, when we say we will
- c. Safe: adhering to the national standards to ensure vulnerable people stay safe
- d. Good value: services offer good value for money, whether from the public purse or paid for by individuals, without compromising quality
- e. Both formal and informal measures: the Council can't meet all of people's social care needs. We expect many people will find their support from a number of sources, including family carers who we recognise need support to care.
- f. Building on strengths: enabling people to regain and maintain independence, to build on connections and to make the most of what's available, including good use of technology.

# 2. Help people to sort things out for themselves

Many people are not entitled to state-funded social care as it is means tested. However, we don't think people should be left to find their own way in the world of social care. We believe that the Council should be the place to go for reliable information and advice about social care so we will provide good quality information and advice to do so.

## 3. Support communities to do their bit

All of us can benefit from being part of communities of one sort or another – for example the area where we live, or with people with shared interests. Being part of a community is part of most people's lives and offers good 'insulation' against isolation and losing independence. Neighbours and voluntary organisations provide vital support with this. We believe the Council has a role in working with local communities and voluntary organisations to support them to be part of a thriving network of formal and informal support.

## 4. Fund the essentials

Where people don't have the funds to pay for care themselves, the Council is responsible for funding care. With a limited budget to do this, we think it's important that we fund the essentials as a priority. We will also offer support and advice about ways to meet other needs if they are not funded by the Council.

## 5. Combine with the NHS for co-ordinated care

One of the biggest challenges – and opportunities – in public services is for the health and care services to function as one co-ordinated system. Too often care is poorly aligned. We think we can provide better care, improve people's experience and save money by working more closely with the NHS.

## 3.5 What about the cuts being made at Norfolk County Council?

- 3.5.1 We think that the proposed cuts are challenging. But what is essential is that changes to social care aren't a reaction to having to save money, but are part of a clear plan for better future provision of social care. This is what we are setting out.
- 3.5.2 We think that having less money to spend will make these changes more difficult, but that it won't detract us from building a solid social care framework for the future.

## 3.6 What happens next?

3.6.1 We will be inviting partners to talk to us about how we work together to bring this framework into place. In some instances this will be building on our existing plans; in others it will mean a change of direction and starting some new work. We think this will call for some new approaches to working together founded on flexibility, new thinking, and new partnerships to deliver for people.

## 3.7 How will we know it works?

3.7.1 We want to test the impact of introducing our new social care framework so will use our work with the Making it Real steering group and the network of groups of people who use social care services to monitor the impact of these changes.

# 4 The proposed next steps

- 4.1 It is proposed that the 'new compact' document is used to communicate and engage with our key stakeholders to underpin service developments. For example:
  - a. Work with service users and families to show them what they can expect from us and understand what we can expect from them and others
  - b. Training our staff to deliver care in this new environment

- c. Work with providers of care services to understand the expectations we have of them in the future and how they fit into the wider picture
- d. Work with NHS partners as we negotiate future joint working so they understand the context for social care
- e. Work with communities to see how they can contribute
- f. Work with voluntary organisations to share how we think they can support the social care agenda in Norfolk.
- 4.2 We will work with our stakeholders to develop the detail which needs to sit underneath this high level framework and to shape developments for the future.

# 5 Equality Impact Assessment (EqIA)

5.1 The paper captures the high level framework which applies to social care. Therefore the EqIA identifies the need to ensure it is communicated in accessible formats. However, service changes which flow from this will require impact assessment which will be undertaken separately.

## 6 Communications

6.1 The proposed 'new compact for social care in Norfolk' will be a key tool for communicating and engaging about social care and as such will underpin a communications and engagement strategy.

## 7 Section 17 – Crime and Disorder Act

7.1 This paper relates primarily to the Council's duties in relation to the protection of vulnerable adults which are not changed by the proposals in this paper and which continue to be a key responsibility.

# 8 Action required

- 8.1 Panel is requested to:
  - a) Endorse the proposal to for the Council to set out a revised framework for social care
  - b) Review and comment on the proposed content of the 'new compact for social care in Norfolk'
  - c) Endorse the proposal to communicate and engage with stakeholders about the framework

# **Background Papers**

None.

## **Officer Contact**

If you have any questions about matters contained in this paper please get in touch with:

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If you need this report in large print, audio, Braille, alternative format or in a different language please contact Jill Perkins 0344 800 8020 or 0344 800 8011 (textphone) and we will do our best to help.

# Report to Community Services Overview & Scrutiny Panel January 2013

Item No12

# Implementation of an Integrated Community Equipment Service (ICES) for Norfolk

Report by the Director of Community Services

## Summary

In January 2012 Overview and Scrutiny Panel received a report which outlined the intention to commission an integrated community equipment service on behalf of the local authority and NHS Norfolk. This report provides a progress review on the new Integrated Community Equipment Service: a major service transformation undertaken by the Community Services Integrated Commissioning Team, bringing together the former separate health and social care community equipment services.

It explains that the programme has created a service which can manage both health and social care equipment in the community so as to provide an integrated service and notes the importance of this in enabling people to remain at home or to return home from hospital. The service is also more cost effective than previous arrangements. However, the paper notes that challenges remain in managing the use of equipment within the reduced budget set for the service and in resolving related prescribing accountability issues, largely in the NHS.

## **Action required:**

The Panel is asked to consider and comment on the contents of this report.

# 1. Background

- 1.1 In 2001 the Department of Health introduced a requirement for Local Authorities and Primary Care Trusts to create an Integrated Community Equipment Service (ICES) for health and social care by April 2004. In Norfolk, this requirement has been actively considered several times both pre- and post-dating the requirement but has not previously been implemented for a variety of reasons.
- 1.2 Although the previous services were generally of a good standard, with changes in demographics and priorities around prevention and reablement, there were increasing demands on these services which made it increasingly important to secure improved efficiency of service delivery. It made little sense for two services covering the same geographical patch to be delivering similar types of equipment often to the same people.
- 1.3 Most authorities have created integrated equipment services during the last 15 years. In many cases in-house local authority and NHS services have been combined with one or other assuming the lead, though some have retendered their service since. In Norfolk, agreement to jointly commission an ICES was reached in 2010. By this time, Norfolk County Council (NCC) and NHS Norfolk (NHSN) had already made contractual arrangements for their services. NCC had contracted with Norse, and NHS Norfolk had contracted with Norfolk Community Health & Care, the community health provider.

# **2** Commissioning Process and Governance

- 2.1 NCC was agreed as the commissioning and procurement agency in 2010. A joint board was established to oversee this work and in particular to develop the new preferred delivery model. It became clear from elsewhere that where an ICES had been tendered externally, both savings (averaging approximately 20%) and better quality services are almost always achieved. Nationally, approximately 30% of equipment services have been procured in this way and indications are that this is likely to rise substantially in the coming years.
- 2.2 Significant effort was undertaken in Norfolk in developing the service specification and the operating model (see Section 3 below). Research with other authorities was valuable in determining the best model for Norfolk.
- 2.3 An agreement under s75 of the Health Act 2001 between NCC and the Clinical Commissioning Groups (CCGs) is in place to delegate to the Council the responsibility for commissioning on behalf of the NHS. Nottingham Rehabilitation Services (NRS) won the tender. The new service commenced in April 2013 and is overseen by a Management Board comprised of NCC and CCG representatives, plus clinical and therapy specialists.
- 2.4 A review of governing arrangements is under way with the aim of ensuring that: prescribing organisations are represented and take responsibility for their prescribing behaviour and expenditure; people of the appropriate seniority are included in the structures; people with appropriate clinical expertise provide guidance through the governance processes; and management of performance is extended with the aim of ensuring better consistency of prescribing decisions.
- 2.5 NRS have recently been successful in retaining the retendered Cambridge ICES service for a further seven years. Exploratory discussions have been held with Cambridge on how we can work collaboratively for example on governance and performance management issues.

## 3 The Service

- 3.1 A pooled NCC and NHS budget was considered, but the difficulty of apportioning the budget at the outset of the new arrangement led both partners to agree an initial preference for aligned budgets. Decisions on how funds are allocated are being agreed jointly. For the current year charges are being split according to a pre-agreed percentage which reflected modelling based on previous activity. There is an assumption in the contract that there will be no inflationary increases in unit prices for the first five years of the contract.
- 3.2 Key performance indicators were established to ensure that the provider meets delivery and collection targets and customer satisfaction. There is an incentive to encourage savings which will be shared between the partners and the provider. An essential element of this is an effective service for equipment re-cycling.
- 3.3 During this first year, data will be collected in order to be able to charge by need (health or social care) in subsequent years. There will always be an element of equipment which meets both health and social care needs and it is anticipated this will continue to be charged according to an agreed percentage.
- 3.4 A credit model arrangement has been adopted as this was found elsewhere to be most effective. Equipment is purchased and owned by the provider until its time of issue. At the point an item leaves the store, the purchaser pays an agreed charge and takes

- ownership of the equipment for the period it remains with a service user. There is also a charge for delivery and installation.
- 3.5 Collection is arranged when the item is no longer required for most items. At the point of collection, ownership transfers back to the provider, and dependent on the item being in a reusable state, the price paid for the equipment is refunded (credited). In addition there is a fixed management fee paid monthly to the provider. It should be noted that it is not economical to collect some low value items.
- 3.6 At the end of the contract an element of the complexity surrounding transition of equipment may be avoided with this model.

# 4 Outcomes and Benefits

- 4.1 A series of 'Critical Success Factors were agreed at the outset of the project. These are stated below with a commentary on progress.
- 4.1.1 Service users receive an integrated, responsive and seamless service: The service is now integrated. The hypothetical scenario previously whereby someone in King's Lynn returning home from hospital is met by two vans arriving from Norwich, one with a bed and mattress (health) and one with a hoist (social care), has now been removed. There have been teething problems during transition which impacted on the responsiveness and smooth-running of the service, but we have worked with NRS to manage these and the service is now performing well (see Section 5.1 below).
- 4.1.2 Easier and quicker requisitioning of equipment by health and social health professionals: Requisitioning is generally easier and quicker. The system is easy to use, along the lines of putting goods into an on-line supermarket-style shopping basket, with product guidance alongside. It is easy to track orders through the online system and though there has been some resistance from prescribers to use it, this is being overcome, replacing the previous paper-based systems. In addition to initial training being provided to everyone who required access to the system, 'super users' have now been recruited to provide consistent ongoing training and to improve knowledge of the system.
- 4.1.3 There are cashable efficiency savings from increased purchasing power: There are significant savings on the unit cost of items achieved through the procurement process. However, these have not been realised as cashable savings, as demand for equipment has increased considerably due to a number of factors explained below in Section 5.4. We are also working with NRS and local professionals, to review the catalogue so as to ensure we avoid unnecessary expense. Vans have sophisticated route-planning technology enabling more efficient delivery.
- 4.1.4 There is a smooth transition from the existing service to the new integrated service: This was not as smooth as anticipated for the reasons given in Section 5.1 and 5.2 below which led to early equipment shortages for some items plus some access problems caused largely by late submission of prescriber information. Remedial action has been successful in remedying these difficulties.
- 4.1.5 There are cashable efficiency savings from reduced running costs and reduced duplication: This has not been quantified. However, there is now a single store, fewer staff operating the service, single deliveries and removal of the risk of duplication so it is reasonable to assume that this success factor has been met.
- 4.1.6 The project cost of changing from two separate services to a single integrated

one is delivered within budget and resource: This was achieved.

- 4.2 Other benefits of the new service are as follows:
  - a. Meeting the Department of Health requirement
  - b. Improved management information for tracking and controlling expenditure and service performance with real-time access to data
  - c. Home delivery of equipment (much health equipment was formerly delivered to stores with onward delivery to people's homes by health staff)
  - d. Emphasis on recycling equipment contributing to cost effective and environmentally friendly approaches
  - e. Advanced decontamination processes
  - f. Provision of a bespoke demonstration vehicle stocked with a range of available equipment
  - g. One point of contact for maintenance and repair and for collection of equipment enabling efficiencies and an easier process for service users

# 5 Budgets and Performance

5.1 The transfer of the service from the previous providers to NRS was a huge logistical undertaking and there was an acknowledgement that there would be some disruption to the service in the early weeks. This was because the new service was picking up unfulfilled orders, undertaking staff transfer and training and arranging stock transfer. This is reflected in the performance statistics in Table 1 below. It can be seen that NRS were some way from meeting the Key Performance Indicator (KPI) targets for April deliveries, but have improved steadily over recent months and are now achieving all but pre-planned maintenance targets. There are regular meetings to review performance with NRS.

## 5.1.1 Table 1: Performance statistics of the new ICES service

	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13
	4-week	4-week	5-week	4-week	4-week	5-week	4-week
PERFORMANCE (% item in time)							
Delivery - Next Day (KPI 95%)	78%	91%	90%	97%	94%	99%	99%
Delivery - 2-Day (KPI 95%)	81%	92%	92%	95%	94%	99%	98%
Delivery - 5-Day (KPI 95%)	77%	88%	91%	94%	93%	97%	97%
Collection - Next Day (KPI 95%)	95%	96%	91%	99%	99%	100%	100%
Collection - 10-day (KPI 95%)	99%	98%	96%	99%	99%	99%	100%
RECYCLING							
% of volume items recycled	0%	57%	83%	83%	65%	84%	88%
% of value of items recycled	0%	92%	95%	98%	93%	99%	99%
ORDERS COMPLETED							
Successful deliveries	1798	3464	4367	3616	3919	4426	3887
Successful collections	639	1736	1672	1442	1903	2023	2155
Successful PPM	125	279	453	428	1001	1359	861

Note: June & Sept figures include information for five full weeks whereas other months include four weeks only. PPM is Pre-Planned Maintenance. KPI is Key Performance Indicator.

- 5.2 During the early weeks of operation there were some equipment shortages. This was for four key reasons:
  - a. Increased demand because of a late request from NHS Great Yarmouth and Waveney to be included a year earlier than planned, additional acute

- prescribing, and the impact of a new directive on pressure care which meant that the specification underestimated demand for some key items (see section 5.4 below)
- b. Less useable equipment than expected from existing stores being sold to NRS
- c. The annual pattern of national shortage of equipment at year end as unspent budgets are often used to stockpile equipment, leading to difficulty in replenishing 'out of stock' items
- d. Higher than expected orders unfulfilled prior to implementation
- 5.3 It was explained in Section 4 above that the unit costs of the new service are significantly lower than those being paid previously. Nevertheless, the current projections show expenditure well in excess of budget and even with the robust arrangements being put in place to curb expenditure, it seems highly likely that the combined budget will be exceeded. It should be noted that both NCC and the Clinical Commissioning Groups included budgetary savings on the strength of expected savings through recommissioning the ICES. The major changes to the structure of the NHS created additional complexity and delay in establishing budget figures for equipment. Nevertheless, the increased demand is a cause for concern for the funding organisations.
- 5.4 From benchmarking with other authorities, it is commonplace for equipment prescribing to increase on a changeover of provider as former controls are removed and new ones put in their place in accordance with requirements of the new system. However, there have been a number of other factors at play during implementation. Principally, these can be considered as being either behavioural changes of prescribers prompted by the introduction of the new ICES and increased demand because of responses to wider system-wide changes. The main four cost pressures are mainly health prescriber related and are follows:
- 5.4.1 Impact of the NHS Pressure Care Directive: This national initiative focuses on the prevention of pressure ulcers and came into force during 2012/13. It places new and significant duties on health acute and community providers with penalties for breach. This has had a significant impact on the equipment budget as it has prompted much greater expenditure by prescribers on expensive pressure relieving equipment. It is known that other equipment services elsewhere have been placed under financial pressures because of the impact of this directive. It is planned to ascertain whether risks can be averted by use of alternative equipment or in other ways. Part of the rationale for introducing this directive was the cost saving from a prevention perspective that pressure care relief can bring. Further work will be undertaken to demonstrate this link more overtly, so that CCGs can reassured that the service is providing good value for money.
- 5.4.2 **Acute hospitals usage:** All three acute hospitals in Norfolk have experienced enhanced pressures on demand for beds in this financial year. It has meant that care has needed to be exercised to ensure that discharge arrangements have not been disrupted by imposition of new procedures restricting equipment authorisation. This is now coming under closer scrutiny. The acute pressures have also led to patients being discharged with higher levels of care, requiring more equipment to support them in the community than previously. A well-stocked community equipment service should contribute to effective discharge planning and prevention of hospital admissions, so again CCGs may be prepared to fund additional expenditure if this is evidenced.
- 5.4.3 Widening access to a broader range of equipment: The former health equipment store had a limited range of equipment and allowing access to a wider range of equipment has prompted health staff in particular to expand their range of prescribing. Ease of prescribing may have added to increased ordering. A series of measures are

being introduced to ensure access is restricted more appropriately.

- 5.4.4 Increased emphasis on care closer to home, avoiding hospital admissions and reabling people after hospital discharge: This has been the direction of national and local policy and was one of the reasons why the emphasis in the original business case was on the need to secure better value for money.
- 5.5 Two separate action plans have been agreed to improve financial control. One relates to mechanisms to limit or challenge prescribing, whilst ensuring that this does not impact on quality of care or frustrate policy objectives such as reablement or hospital discharge. A second is aimed at ensuring appropriate contractual controls between CCGs and health providers. Together these will ensure that robust measures are in place so that there is confidence that expenditure is being exercised appropriately.
- 5.6 Latest statistics show that expenditure on new equipment is slowing and there is evidence to suggest that the incentive for NRS to maximise recycling rates for mutual benefit is having an impact. With so many variables determining demand for community equipment it is difficult to establish true causes and effects of expenditure patterns. Notwithstanding demographic pressures, people being discharged earlier than previously, one credible scenario suggests that the inherited equipment levels for the new service were initially too low, and that these have been increasing to a new equilibrium which is close to being reached. Stabilising expenditure at an acceptable equilibrium point will be dependent on ensuring responsible prescribing (for 'needs' not 'wants') and maximising recycling by taking forward proactive measures to ensure that equipment can be collected when no longer needed.

# 6 Legal Implications:

6.1 NCC contracts with NRS, the equipment provider. The legal arrangements between NCC and the Clinical Commissioning Groups are contained in an agreement under s75 of the Health Act 2001. There are no legal implications arising from this report.

# 7 Equality Impact Assessment (EqIA):

7.1 An EqIA was prepared for the service and approved by the Project Board in September 2012.

# 8 Risk Implications

8.1 The main risk is the demand for equipment exceeding budget availability. The report explains that there are robust measures being put in place to deal with this.

# 9 Other implications

9.1 Other than those listed in the report, there are no particular implications to take into account.

## 10 Section 17 – Crime and Disorder Act

10.1 There are no particular crime and disorder implications to take into account.

# 11 Concluding Remarks

- 11.1 The commissioning of an integrated equipment store has been a significant service transformation delivered on behalf of the Norfolk health and care partners. It has succeeded in creating a seamless service which enables people to remain at home or to return home from hospital. We can be confident that the service offers both more cost effective and more integrated access to community equipment.
- 11.2 At this stage however, savings are not being realised as the activity has increased significantly. It is not unusual for an ICES to overspend in the early months as system adjustments take place, but a programme of actions are being put in place to establish additional controls. An effective ICES will contribute to health efficiencies and shared wellbeing objectives of supporting people to remain living independently at home and to expedite hospital discharge, so investing more in equipment may be offset by demand avoidance on more intensive health and care services. This will be reviewed in order to determine the optimum impact of the services.

# 12 Action Required

12.1 The Panel is asked to consider and comment on the contents of this report.

# **Background Papers**

None

# **Officer Contact**

If you have any questions about matters contained in this paper please get in touch with:

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# Report to Community Services Overview and Scrutiny Panel 7 January 2014 Item No 13

# Blue Badge Disabled Parking - An Update Report

Report by the Director of Community Services

## Summary

The Blue Badge Unit has undergone significant improvement work in response to the Government's Blue Badge Improvement Service and Department of Transport recommendations. This report provides a further update following the report to Community Services Overview and Scrutiny Panel in September 2013 on progress towards finalising improvements to the application process and towards eradicating delays in the process for customers.

## **Action required**

The Overview and Scrutiny Panel is asked:-

- a. To note the significant improvements that have been achieved as a result of the improvement works
- b. To note progress towards identifying outsourcing opportunities
- c. To note the new powers provided to councils in terms of enforcement

# 1 Background

1.1 Community Services Overview and Scrutiny Panel on 10 September 2013 requested an update on the improvement works being undertaken in the Blue Badge Unit and on opportunities to consider outsourcing the service.

## 2 Current Position

## 2.1 ICT

- 2.1.1 Work to align the County Council's Blue Badge database with the national system commissioned by the Department for Transport to manufacture and issue badges centrally has been completed successfully.
- 2.1.2 The additional ICT functionality that this has provided reduces the need for duplication and data inputting to two separate systems. Staff time savings have been focussed on addressing processing times to the benefit of applicants.

### 2.2 Streamlined Processes and Procedures

- 2.2.1 Scrutiny and revision of all the Blue Badge Unit's processes and procedures has been completed with assistance from the Council's Corporate Programme Office.
- 2.2.2 The focus of this work has been to improve the customer's experience of, and expedite, the application process.

For example:-

- closer working with the Department for Work and Pensions has reduced the number of contacts required with our customers, allowing the Unit to verify applicants' benefit status directly
- b. Where an applicant has provided an email address automated status update notifications are sent, enabling customers to 'track their application'
- c. Working in partnership with Norfolk County Council's Registrars, Finance and

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- Care Arranging teams, The Tell us Once initiative is now fully integrated with the Blue Badge procedures
- d. All applications that are not deemed automatically eligible are now scrutinised by an experienced member of the Blue Badge Unit using a desk-based assessment tool which has been introduced in line with Department for Transport recommendations
- 2.2.3 End-to-end paperless application process was implemented on 12 August, facilitated by the introduction of online payments by debit or credit card. Paper and telephone applications remain available for customers who prefer to apply in this way.
- 2.2.4 Current statistics show that approximately 52% of applicants are choosing to apply via the 'on line' system, 25% have returned a handwritten application form whilst 23% have taken advantage of our assisted telephone application service.

# 2.3 Processing Times

- 2.3.1 The Blue Badge Unit is now successfully processing all applications within the published six to eight week timespan.
- 2.3.2 Straightforward applications where the customer meets the Department for Transport eligibility criteria without the need for further assessment are being processed within fifteen working days, dependant on the receipt of appropriate documentation from the applicant.
- 2.3.3 Applicants who require further assessment by an Independent Mobility Assessor are offered an appointment at one of the county-wide assessment clinics or a face-to-face home visit where appropriate. Dependent upon the customer's availability to undergo this assessment, this process can take up to six to eight weeks from application to receipt of badge.

## 2.4 Compliments and Complaints

- 2.4.1 Complaints peaked during the summer months when the delays in the ICT project created unmanageable levels of duplicate inputting by the team.
- 2.4.2 However, there has subsequently been a significant drop in complaints since September 2014. Figures also confirm that the Blue Badge Unit received more compliments than any other NCC department for the last three consecutive months.

	Complaints	No. Complaints upheld	Compliments
September	6	1	12
October	9	1	6
November	6	0	8

- 2.4.3 The recent Department of Transport reforms mean that applications for a Blue Badge that do not meet the 'automatic entitlement' criteria or are not easily identified as being eligible, must receive an Independent Mobility Assessment by an assessor registered with the Health Professions Council.
- 2.4.4 This is a significant change to the former procedure and was designed to make the system fairer, more objective and consistent. In earlier years, before the introduction of mobility assessments, the Blue Badge Unit was required to contact the applicant's GP to request a report about the person's problems with walking. However as a result of the change a number of applicants who were previously considered eligible

- for a Blue Badge have found that they are refused a badge when they reapply.
- 2.4.5 Work continues to respond proactively to customers' comments and further reduce the complaints received.

### 2.5 Enforcement

- 2.5.1 The Department for Transport issued new, updated Guidance on 8 October 2013 relating to changes in powers to Local Authorities to intervene where Blue Badges are fraudulently misused.
- 2.5.2 These changes relate to:
  - a. the inspection and seizure of badges by local authorities
  - b. the cancellation of badges by local authorities in certain circumstances
  - c. the offence of using a badge that is no longer valid
  - d. the law relating to one badge per person
- 2.5.3 In brief, the powers allow enforcement officers (currently uniformed traffic wardens and parking attendants) under certain circumstances to retain improperly used badges without police presence.
- 2.5.4 Similarly, Local Authorities now have the power to appoint and directly employ non-uniformed officers to help prevent fraudulent use of Blue Badges.
- 2.5.5 The manager of the Blue Badge Team has had initial discussions with Environment, Transport and Development regarding possible funding to develop the local enforcement role within the Blue Badge Unit. The outcome of these discussions will be considered by the Community Services Senior Management Team.

# 3 Future Operation of the Service

- 3.1 In response to the Community Services Overview and Scrutiny Panel's request, initial meetings have been held with Northgate to scope the possibility of a managed service. The responsibility for carrying out desk-based eligibility assessment and Independent Mobility Assessments would necessarily remain within the Council.
- 3.2 A further meeting is scheduled for 9 January 2014, and a note will be provided to Panel Members following this.
- 3.3 Although it seems that talks are underway with other Local Authorities, Northgate are yet to offer a fully-managed service to any other council.
- 3.4 Consideration is also being given to transferring the Blue Badge Unit to sit within the council's Customer Service Centre to be managed within a larger, and thus more resilient, team.

# 4 Equality Impact Assessment (EqIA)

- 4.1 Community Services places diversity, equality and community cohesion at the heart of service development and service delivery. The department aims to ensure that activities and services are accessible to diverse groups in Norfolk and that all policies, practices and procedures undergo equality impact assessment. These assessments help services to focus on meeting the needs of customers in relation to age, disability, gender, race, religion and belief and sexual orientation.
- 4.2 This report provides an update on the Blue Badge process. This has a potential impact on residents or staff from one or more protected groups. Where this is the

case, an equality assessment has been undertaken as part of the project planning process to identify any issues. This enables the Council to pay due regard to the need to eliminate unlawful discrimination, promote equality of opportunity and foster good relations.

#### 5 Section 17 - Crime and Disorder Act

5.1 Community Services takes account of the need to address the issues of social exclusion, one of the key triggers for crime and disorder, in its activities. The department works hard to ensure that people are confident in their community and that its services are relevant and accessible to local people. This helps to encourage participation by people who are at risk of offending, engage offenders through a range of projects, assist schools in improving pupil attainment and deliver opportunities to increase the number of people who are in education, employment or training...

#### 6 **Environmental Impact**

6.1 There are no environmental implications from issues arising in this report.

#### 7 Conclusion

7.1 Scrutiny and revision of all the Blue Badge Unit's processes and procedures has been completed to improve the customer's experience of, and expedite, the application process. The Blue Badge Unit is now successfully processing all applications within the published six to eight week timespan. There has subsequently been a significant drop in complaints with six complaints in September, none of which were related to waiting times. In the same month the Blue Badge Unit received more compliments than any other NCC department.

#### 8 **Action Required**

- 8.1 The Overview and Scrutiny Panel is asked:
  - a. To note the significant improvements that have been achieved as a result of the improvement works
  - b. To note progress towards identifying outsourcing opportunities
  - c. To note the new powers provided to councils in terms of enforcement

# **Background Papers**

Blue Disabled Badge report from Community Services Overview and Scrutiny panel 10 September 2013

### **Officer Contact**

If you have any questions about matters contained in this paper please get in touch with:

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If you need this report in large print, audio, Braille, alternative format or in a different language please contact Jill Perkins on 0344 800 8020 or 0344 communication for all 800 8011 (textphone) and we will do our best to help.

# Report to the Community Services Overview and Scrutiny Panel 7 January 2014 Item No 14

# Delayed discharge from hospital in Norfolk – joint scrutiny task and finish group

Report by the Scrutiny Support Manager (Health)

# **Summary**

This report asks the Panel to consider terms of reference for a joint scrutiny task and finish group of members from this Panel and Norfolk Health Overview and Scrutiny Committee (NHOSC) on 'Delayed discharge from hospital in Norfolk'.

## **Action Required**

The Overview and Scrutiny Panel is asked to:

- 1) Agree to a joint task and finish group with NHOSC members
- 2) Approve or amend the draft terms of reference (attached at Appendix A).
- 3) Nominate four members to the task and finish group.

# 1 Background

- 1.1 Community Services Overview and Scrutiny Panel (OSP) added 'discharge from hospital' to its forward work programme on 10 September 2013. A report focusing on the way that County Council social services work with NHS services to facilitate discharges from hospital, was scheduled to come to the OSP on 4 March 2014.
- 1.2 On 28 November 2013 NHOSC also decided to add 'delayed discharge from hospital in Norfolk' to its forward work programme amid concerns about the predicted pressures of winter 2013-14 and the necessity for all parts of the health and social care system to operate smoothly together. The item was scheduled for NHOSC's 27 February meeting.
- 1.3 Following discussion between the Chairmen of Community Services OSP and NHOSC, it was suggested that a joint group of members from the Panel and the Committee be established to scrutinise the subject on a rapid task and finish basis.
- 1.4 The County Council has decided to cease operating an executive/scrutiny model and implement a committee system of governance with effect from the AGM in May 2014. Any joint scrutiny task and finish group will need to report back to Community Services OSP and NHOSC by April 2014.

# 2 Terms of reference for a joint scrutiny task and finish group

2.1 Draft terms of reference for a Delayed Discharge from Hospital Task and Finish Group are attached at Appendix A.

# 3 Resource Implications

## 3.1 Member resources:-

It is proposed the task and finish group consists of eight councillors, four from Community Services OSP and four from NHOSC, and holds panel style meetings with NHS and social services staff. It is estimated that the work could be completed in two meetings.

### Officer resources:-

The Task and Finish Group would be supported by the Scrutiny Support Manager (Health) and a Committee Officer. The Group would call on the time of Community Services and NHS managers to provide information and attend panel-style meetings.

All the costs of the Task and Finish Group to the County Council can be met from within existing budgets.

## 4 Section 17 – Crime and Disorder Act

4.1 The Task and Finish Group will consider any crime and disorder implications that arise from its recommendations.

# 5. Equality Impact Assessment

5.1 The Task and Finish Group will consider the impact that its recommendations might have on equality of access or outcomes for diverse groups.

# 6. Other Implications

6.1 Officers have considered all the implications which Members should be aware of. Apart from those listed above, there are no other implications to take into account.

# 7. Action Required

- 7.1 1) Agree to a joint task and finish group with NHOSC members
  - 2) Approve or amend the draft terms of reference (attached at Appendix A).
  - 3) Nominate four members to the task and finish group.

# **Background Papers**

None

# **Officer Contact**

If you have any questions about matters contained in this paper please get in touch with:

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### **Terms of Reference**

## **Norfolk County Council**

**Community Services Overview and Scrutiny Panel & Norfolk Health Overview and Scrutiny Committee** 

## Terms of reference for scrutiny of

Delayed discharge from hospital in Norfolk

## Scrutiny by

Joint task and finish group

# Membership of joint task and finish group

8 County Councillors; 4 from Community Services Overview and Scrutiny Panel, 4 from Norfolk Health Overview and Scrutiny Committee (no requirement for the membership to be in line with the political balance of Norfolk County Council).

Healthwatch Norfolk to be invited to nominate a co-opted, non voting member.

The chairman of the task and finish group to be a member of either Community Services Overview and Scrutiny Panel or Norfolk Health Overview and Scrutiny Committee.

## Reasons for scrutiny

On 28 November 2013 Norfolk Health Overview and Scrutiny Committee (NHOSC) heard that the level of delayed discharges from the Norfolk and Norwich hospital has been running at approximately 50 per day (80 on peak days, 35 on the lowest days). These are people who are medically fit to leave hospital but are delayed because of waiting for:-

- Assessment for NHS continuing health care
- A bed in an NHS community hospital where they will receive rehabilitative care
- Social services assessment

NHOSC also heard that a high priority for phase two of Project Domino (a project which has been working since November 2012 to improve the efficiency of the central Norfolk urgent care system) would be to reduce delayed transfers of care at the N&N.

NHOSC was aware that the numbers of delayed discharges at the N&N are no higher than last year but was also aware that all hospitals in Norfolk expect to face significant emergency pressures over the coming winter. Efficient flow of patients through the health and social system is therefore increasingly crucial.

NHOSC decided that it wished to scrutinise the issues around delayed discharges from hospitals across Norfolk, which encompass NHS services and social care services. The

scrutiny was scheduled for NHOSC's meeting on 27 February 2014.

On 10 September 2013 Community Services Overview and Scrutiny Panel asked for a report on discharges from acute hospitals. The report, to focus on the way that County Council social services work with NHS services to facilitate discharges from hospital, was scheduled for 4 March 2014.

Following an Overview and Scrutiny Strategy Group meeting on 3 December 2013 the Chairmen of NHOSC and Community Services OSP agreed to suggest that a single, joint task and finish group of members from the committee and the panel should scrutinise the subject.

## Purpose and objectives of study

The Task and Finish Group's objectives will be:-

- To examine the current situation regarding delayed discharges from the acute and community hospitals in Norfolk.
- To examine the work underway to improve the flow of patients from the hospitals.
- To make recommendations, if appropriate, about how the situation might be improved.

## Issues and questions to be addressed

- Is the funding which has been transferred from the NHS to adult social care (approx £15 million in Norfolk in 2013/14) helping to facilitate discharges from hospital?
- What more could be done on integration of health services and / or health and social care services that would help to address issues surrounding delayed discharges from hospital.
- What planning is underway for use of Norfolk's share of the national £3.8bn integration transformation fund? (This fund will be available in 2015-16 for joint NHS/local authority commissioning of integrated health and social care services. About £2bn of the national pot will come from the budgets of NHS clinical commissioning groups, which are spent mainly on acute hospital services).
- Is 7 day working a practical prospect for health and social care services?
- To what extent does delayed discharge from mental health beds affect discharge from the acute hospitals.

## People to speak to

- Norfolk County Council Community Services
- Norfolk and Norwich Hospitals NHS Foundation Trust
- The Queen Elizabeth NHS Foundation Trust
- James Paget University Hospitals NHS Foundation Trust
- Norfolk and Suffolk NHS Foundation Trust
- Norfolk Community Health and Care (community hospital provider)
- Norwich CCG (leading on Project Domino)
- West Norfolk CCG

Great Yarmouth and Waveney CCG

# Style and approach

Panel-style meetings to receive reports and to discuss the issues with NHS and social care representatives.

### Planned outcomes

A report to both Norfolk Health Overview and Scrutiny Committee and Community Services Overview and Scrutiny Panel outlining the current situation, planned improvements and any recommendations that task and finish group may wish to make.

## Deadlines and timetable

The County Council has decided to cease operating an executive/scrutiny model and implement a committee system of governance with effect from the AGM in May 2014. joint scrutiny task and finish group will need to report back to Community Services OSP and NHOSC by April 2014.

The Cabinet and Scrutiny Committee / Panel system at Norfolk County Council will end in April 2014. This task and finish group is therefore required to report back to Community Services OSP in April (*meeting date to be agreed*) and to NHOSC on 17 April 2014.

The timetable will be determined by availability of Members and witnesses. It is expected that the work will be completed within two meetings (potentially on 3/2/14 pm and 6/3/14 am).

Terms of reference agreed by	Date		
Community Services Overview and Scrutiny Panel	7 January 2014		
Norfolk Health Overview and Scrutiny Committee	16 January 2014		

# Report to the Community Services Overview and Scrutiny Panel 7 January 2013 Item No 15

# **Forward Work Programme: Scrutiny**

Report by the Director of Community Services

## Summary

This report asks Members to review and develop the programme for scrutiny.

## **Action Required**

The Overview and Scrutiny Panel is asked to consider the attached Outline Programme (Appendix A) and agree the scrutiny topics listed and reporting dates.

The Overview and Scrutiny Panel is invited to consider new topics for inclusion on the scrutiny programme in line with the criteria at para 1.2.

# 1 The Scrutiny Programme

- 1.1 The Outline Programme for Scrutiny (Appendix A) has been updated to show progress since the November 2013 Overview and Scrutiny Panel.
- 1.2 Members of the Overview and Scrutiny Panel can add new topics to the scrutiny programme in line with the criteria below: -
  - (i) High **profile** as identified by:
    - a. Members (through constituents, surgeries, etc)
    - b. Public (through surveys, Citizen's Panel, etc)
    - c. Media
    - d. External inspection (Audit Commission, Ombudsman, Internal Audit, Inspection Bodies)
  - (ii) Impact this might be significant because of:
    - a. The scale of the issue
    - b. The budget that it has
    - c. The impact that it has on members of the public (this could be either a small issue that affects a large number of people or a big issue that affects a small number of people)
  - (iii) Quality for instance, is it:
    - a. Significantly under performing
    - b. An example of good practice
    - c. Overspending
  - (iv) It is a Corporate Priority

## 2 Section 17 – Crime and Disorder Act

2.2 The crime and disorder implications of the various scrutiny topics will be considered when the scrutiny takes place

# 3 Equality Impact Assessment

3.1 The scrutiny report is not directly relevant to equality, in that it is not making proposals that will have a direct impact on equality of access or outcomes for diverse groups.

# 4 Action Required

- 4.1 The Overview and Scrutiny Panel is asked to consider the attached Outline Programme (Appendix A) and agree the scrutiny topics listed and reporting dates.
- 4.2 The Overview and Scrutiny Panel is invited to consider new topics for inclusion on the scrutiny programme in line with the criteria at para 1.2.

## **Officer Contact**

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# **Outline Programme for Scrutiny**

Standing Item for Community Services O & S Panel: Update for January 2014

# This is only an outline programme and will be amended as issues arise or priorities change

Scrutiny is normally a two-stage process:

- Stage 1 of the process is the scoping stage. Draft terms of reference and intended outcomes will be developed as part of this stage.
- The Overview and Scrutiny (O&S) Panel or a Member Group will carry out the detailed scrutiny but other approaches can be considered, as appropriate (e.g. 'select committee' style by whole O&S Panel).
- On the basis that the detailed scrutiny is carried out by a Member Group, Stage 2 is reporting back to the O&S Panel by the Group.

This Panel welcomes the strategic ambitions for Norfolk. These are:

- A vibrant, strong and sustainable economy
- Aspirational people with high levels of achievement and skills
- An inspirational place with a clear sense of identity

These ambitions inform the NCC Objectives from which scrutiny topics for this Panel will develop, as well as using the outlined criteria at para 1.2 above.

Changes to Programme from that previously submitted to the Panel in November 2013

**Added** – Mental Health Section 17 Implications;

**Deleted** – Warm and Well; All party home care working group;

# **Community Services Overview & Scrutiny Panel**

# **Action Required**

Members are asked to suggest issues for the forward work programme that they would like to bring to the committee's attention. Members are also asked to consider the current forward work programme:-

- a. whether there are topics to be added or deleted, postponed or brought forward
- b. to agree the briefings, scrutiny topics and dates below.

Meeting dates	Briefings/Main scrutiny topic/ initial review of topics/follow ups	Administrative business
	2014	230000
7 1		
7 January		
Scrutiny items	Blue Badges – update	(Requested at O&S Panel July 2013)
	Fuel Poverty Working Group – final report	(Requested at O&S Panel January 2013)
	ICES Contract- update on implementation	(RoC recommendation 16)
Regular & Overview items	The new Compact for Adult Social Care	,
Overview items	Service and Budget planning 2014-17	
	Finance monitoring report	
	Cabinet Member feedback	
	Scrutiny forward plan	
Briefing notes	<b>Development of the social enterprise-</b> update on staff and customer engagement, use of buildings, transport	(Requested at O&S Panel September 2013)
4 March		
Scrutiny items	Mental Health Section 17 Implications-	(Requested at O&S Panel November 2013)
	Integration and delayed discharges from hospital-  Adult Education -final report	(Requested at O&S Panel September 2013)
	Addit Education -illiai report	

	Adult education service assessment and Performance	
	Working with the voluntary sector on Putting People First- regular update	
Regular & Overview items	Integrated Performance and Finance Monitoring report	
	Cabinet Member feedback	
	Scrutiny Forward plan	
	Making it Real	
Briefing notes	Personal budgets- update	
	Housing with Care- update on new developments	
April (tbc)		
Scrutiny Items	Living Well in the Community Fund- final report	
Regular & Overview items		
Overview items	Cabinet Member feedback	
	Scrutiny Forward plan	

Note: These items are provisional only. The OSC reserves the right to reschedule this draft timetable.

# **Members Seminars**

# <u>Provisional dates for update / briefing reports to the Committee 2013/14.</u>

Working with the Voluntary Sector on Putting People First - To examine the impact on the voluntary sector of the current changes within Adult Social Services Prevention services, specifically looking at contracts valued greater than £5000 and to summarise the current position. (Ongoing monitoring and reporting requested at 6 monthly intervals) – Next update due approx.. March 2013

**Building a better future**-Ongoing reporting regarding the project is required every 6 months along with an annual report – Next update due approx. March 2014

**Key challenges for SDS**-updates every 6 months (requested at O&S Panel meeting 4 September 2012)-Next update due approx. March 2014

# **Working groups of Community Services O&S panel.**

<b>Fuel Poverty</b>	Task and Finish Group			
Membership	Shelagh Gurney, Julie Brociek-Coulton, Emma Corlett, Denis Crawford, Elizabeth Morgan, Ian Mackie, Matthew Smith (plus Dr Sam Revill- Healthwatch Norfolk co-opted member)			
Meetings held 9 Aug , 6 &26 Sept, 14 October	Evidence received from landlords (private & social housing), builders, district councils & voluntary sector organisations.  Next meeting on 31 Oct with district councils and County Council managers. Due to report back to Panel on 7 Jan 2014.			
<b>Home Care W</b>	Home Care Working Group			
Membership	Shelagh Gurney, Julie Brociek-Coulton, Matthew Smith, Elizabeth Morgan, Denis Crawford, Tom Garrod			
Delayed Discharges Task and Finish Group				
Membership	To be confirmed.			

# Working groups of Cabinet of interest to Community Services O&S Panel

Membership	