## ANALYSIS OF GROWTH DUE TO DEMAND, PRICE AND LOSS OF INCOME - INCLUDED IN 2007/08 BUDGET REPORT

Service	Item	2008/09	2009/10	2010/11	Comments
	Demand led growth				
C&F	Private Fostering - Additional Duties	50			Meeting the cost of new duties imposed by legislation regarding private fostering.
C&F	Independent Fostering Agencies - effect of 2006/07 overspend	50			Budget shortfall in 2006/07 due to increases in independent fostering. As these costs are expected to continue into 2007/08, these will be an immediate budget shortfall unless this growth is provided.
E&C	Adoption of new open space. (Amended total and profile)	38			The Council is proposing to adopt a number of new open spaces. The maintenance costs for these sites are not provided for in the Parks Service budget.
E&C	Dollis Hill House - Insurance Reserve depletion.	44			The ongoing costs of scaffolding and health & safety inspections are being met from the insurance reserve. If the situation is not resolved it is likely that the reserve will run out in 2008/9.
H&CC	Move of clients from Children and Families to Housing and Community Care	316			Children with learning disabilities are funded by CIF until they are 18 or leave full time education. These children are known to the Counci and the costs of care for when they transfer are known. They transfer in August/September each year. Regular transitions meetings are held to identify clients and costs. The full year costs of 2007/08 bid are £148k. For 2008/09 it is estimated at least 27 clients will need social care.
	Total demand led growth	498	0	0	
	Price led growth				
E&C	Vale Farm & Willesden Sports Centres - excess inflation.	3			Contract requires increase based on RPIX currently running at 2.9% Budget only provides for 2%.
H&CC	Older Peoples Services - Increase in nursing home fees above 2%.	338	338		Brent offered all residential and nursing homes an increase of 2% from April 2006 in order to respond to annual inflationary price increases. Between February 2006 and August 2006 the average cost of fees for older people increased by 3.73%. Where the client had remained the same the increase for all client groups was 2.51% Showing that more pressure was on new placements.
	Total price led growth	341	338	0	
	Loss of income				
E&C	Reduction in Planning Deliver Grant	250			It remains the Government's expressed intention to phase out PDG by 2008-9. Agreed growth in previous years has been charged to PDG rather than revenue budget funded. (See OSS)
E&C	Warden Service - Additional Police Community Support Officers	80	320		Greater London Authorities match funding ends
H&CC	Supporting People Admin Budget	23	17		Under funding in current staff budget due to reductions in DCLG Supporting People Grant.

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Service	Item	2008/09	2009/10	2010/11	Comments
H&CC	HRA/General Fund Recharges	250	170		Impact of potential stock transfer at South Kilburn involving 1,534 dwellings.
	Total growth due to loss of income	603	507	20	
	GRAND TOTAL - DEMAND, PRICE AND LOSS OF INCOME LED GROWTH (EXCLUDING COST SHUNTING FROM HEALTH)	1,442	845	20	
	Cost Shunting from Health				
H&CC	Health ceasing to fund s117 cases 50:50, and ward closures	100			In the past there was a working agreement between health and social care to fund the cost of care for patients subject to an order under s117 of the Mental Health Act equally between them. Health are now sating contributions should be decided on a case by case basis. Two mental health wards have recently been closed and reconfigured. This is likely to add to pressures on community based services. The current turnaround team is putting pressure on the PCT to review cases more quickly leading to additional costs.
H&CC	Closure of acute and rehabilitation beds by Health	179			Brent PCT and the acute hospital trusts are committed to reducing beds as part of their shift to community services and budget reductions. 26 of the beds are at Willesden Hospital in the BeCAD facility which have closed temporarily from October and a further 11 Harrow PCT beds.
H&CC	Closure of acute and rehabilitation beds by Health and the Avoidance of bed blocking	342			Brent PCT is closing a 20 bed ward at Willesden Hospital and introducing new admissions criteria, coupled with ward closures within North West London Hospital Trust and Harrow PCT. Clients who have no rehabilitation potential will no longer be able to go to Willesden Hospital to wait for funding for social care assessment and funding for long term placements in residential and nursing homes. It is therefore necessary to contract for a further 12 step down beds to enable discharge to take place and to avoid the £120 per day reimbursing charge payment to Health. The care pathway for clients admitted to the remaining 40 beds has been shortened. It is anticipated that faster through put will increase the demand by 45 FTE places a year.

Appendix D

## ANALYSIS OF GROWTH DUE TO DEMAND, PRICE AND LOSS OF INCOME - INCLUDED IN 2007/08 BUDGET REPORT

Service	Item	2008/09	2009/10	2010/11	Comments
H&CC	Closure of hospital beds	668			The estimate is supported by a model developed by Health to show the impact on other parts of health and social care departments of bed closures. The picture is complicated by faster through put of clients in hospitals resulting in people who are less independent being discharged and needing more support. In the past this support would have largely been paid for by Health through Continuing Care – it is now clear that Continuing Care is increasingly not available or is given for much shorter periods. This bid would fund additional homecare, residential or nursing care, depending on the client's needs.
H&CC	All social care client groups	1,119	3,365		When long stay hospitals were closed it was intended that all of the patients would be transferred into the community and local health authorities would be paid a dowry by strategic health authorities. However, not all patients were identified and dowries paid. Local health authorities then carried the costs of the non-dowry clients, but are now proposing to review these clients against the current Continuing Care criteria and this is likely to result in the conclusion that their needs don't meet the criteria and health will refer them to Brent Council as having social care needs. Health refer to non-dowry patients making a saving of £2m in 2006/07 and £4m in 2007/08. There is a possibility of legal challenge to Brent PCT's decisions either for individual cases or for all or most of these non-dowry clients. A further issue is that some clients have a little or limited connection with Brent prior to their discharge from hospital
H&CC	Mainly Older People : Increased demand due to Health reviewing Continuing Care caseload	668			Brent PCT plan to review Continuing Care patients and aim to save £510,000 in 2006/07 and £880,000 in 2007/08. These clients generally have long-standing conditions but generally require small amounts of health care and they can often get their health needs met via GPs, district nurses or health visitors. Most of their needs are likely to be for social care. It is assumed that if these clients are referred to Brent Council for a social care assessment, most will meet eligibility criteria and will need a service. There may be some variation from their existing service due to differing assessment criteria. It is not clear if this will result in significant savings. 10% of clients are mentally ill. Homecare is the vast majority of the service provided to these clients.

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Service	Item	2008/09	2009/10	2010/11	Comments
H&CC	Mainly Older People : Pre 2003 Continuing Care cases will be passed to Brent Council	59			An informal agreement was reached between Brent PCT and Brent Council that the PCT would not review Continuing Care cases where the service had started before 2003 and would therefore continue to fund the care of these patients. Most have long-standing health conditions but have low levels of health need. Brent PCT have now decided to review these clients against current Continuing Care criteria and are confident that very few will be entitled to a health service. Most that are eligible will get their needs met via district nurses, hospitals or GPs. Brent PCT has received detailed legal advice on the lawful basis of their reviews and plans to refer these patients to Brent Council for a social care assessment.
H&CC	Mainly Older People : Health reduction in community services Pre 2003 Continuing Care cases will be passed to Brent Council	221			Health are planning a reduction in wide range of community services totalling £2.68m in 2006/07 and £5.961m in 2007/08. The savings cover a very wide range of services, including incontinence, discharges from Kingsbury hospital, adult mental health services, closing a day centre, cutting homecare for physically disabled adults, making patients wait longer for treatment, providing less community rehabilitation, reducing the size of the community support team for people with learning disabilities, reducing community nursing and community matrons. The bid assumes that about 25% of those now receiving a health service will be assessed as needing social care. This is one of the most difficult areas to assess its impact as some savings are more likely to translate into 100% increase in costs for Brent such as homecare and community support for people with learning disabilities.
	Total Cost Shunting from Health	3,356	3,365	0	
		4 700	1.010		
	GRAND TOTAL INCLUDING HEALTH COST SHUNTING	4,798	4,210	20	