

## Manchester City Council Report for Information

**Report to:** Health Scrutiny Committee – 9 November 2022

**Subject:** Budget 2023-26

**Report of:** Executive Director of Adult Social Services

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### Summary

The Council is forecasting an estimated budget shortfall of £44m in 2023/24, £85m in 2024/25, and £112m by 2025/26. After the use of c£16m smoothing reserves in each of the three years, this reduces to £28m in 2023/24, £69m in 2024/25 and £96m by 2025/26. Officers have identified potential savings options to reduce the budget gap totalling £42.3m over three years.

This report sets out the priorities for the services in the remit of this committee and details the initial revenue budget changes proposed by officers.

Even after these proposals there remains a budget gap of £7m to close to get to a balanced budget in 2023/24 and further savings and cuts options will be required to be worked between now and January and be reported back to Scrutiny committees in February. Each scrutiny committee is invited to consider the current proposed changes which are within its remit and to make recommendations to the Executive before it agrees to the final budget proposals in February 2023.

### Recommendations

The Committee is recommended to:-

- (1) To consider and comment on the forecast medium term revenue budget
  - (2) Consider the content of this report and comment on the proposed changes which are relevant to the remit of this scrutiny committee
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### Wards Affected: All

**Environmental Impact Assessment** - the impact of the issues addressed in this report on achieving the zero-carbon target for the city

The budget reflects the fact that the Council has declared a climate emergency by making carbon reduction a key consideration in the Council's planning and budget proposals.

**Equality, Diversity and Inclusion** - the impact of the issues addressed in this report in meeting our Public Sector Equality Duty and broader equality commitments

Consideration has been given to how the proposed savings could impact on different protected or disadvantaged groups. Where applicable proposals will be subject to completion of an Equality Impact Assessment (EqIA) and an Anti Poverty Assessment. as part of the detailed planning and implementation. Further detail is provided at section 5.

<b>Manchester Strategy outcomes</b>	<b>Summary of how this report aligns to the OMS/Contribution to the Strategy</b>
A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities	The effective use of resources underpins the Council’s activities in support of its strategic priorities as set out in the Corporate Plan which is underpinned by the Our Manchester Strategy.
A highly skilled city: world class and home grown talent sustaining the city’s economic success	
A progressive and equitable city: making a positive contribution by unlocking the potential of our communities	
A liveable and low carbon city: a destination of choice to live, visit, work	
A connected city: world class infrastructure and connectivity to drive growth	

Full details are in the body of the report, along with any implications for:

- Equal Opportunities Policy
- Risk Management
- Legal Considerations

### **Financial Consequences – Revenue**

The changes included within this report are officer proposals and, subject to Member comments and consultation, these will be included as part of the 2023/24 budget preparation.

### **Financial Consequences – Capital**

None directly arising from this report.

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**Background documents (available for public inspection):**

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

[Revenue Budget Report - Executive Meeting 16 February 2022](#)

[Medium Term Financial Strategy 2022/23 to 2024/25 -Executive Meeting 16 February 2022](#)

[Health and Social Care – Adults Social Care and Population Health Budget 2022/23 - Executive 16 February 2022](#)

[Resource and Governance Scrutiny – 6 September 2022](#)

[Revenue Monitoring to the end of July 2022 and Budget update 2023/24 to 2025/26 - Executive 14 September 2022](#)

## 1. Introduction and Purpose

- 1.1. The report is the first in the cycle for the budget programme 2023-26. It sets out an overview of Adult Social Care services and key priorities. The budget is detailed and the financial requirements to conclude the three-year Better Outcomes Better Lives savings programme. The budget growth assumptions in the MTFP are set out. The report provides a draft set of officer proposals for further savings for 2023-26, developed in the context of the financial challenge facing the Council, for comments by Health Scrutiny.

## 2. Service Overview and Priorities

- 2.1. Manchester City Council's Adult Social Care (ASC) services support people who have been assessed and meet the national eligibility criteria for care and support under the Care Act 2014. Following an assessment, a support plan sets out how the needs of people will be met and services are arranged to meet that need and help people to continue to live as independently as possible.
- 2.2. This support ranges from advice and information (minimal cost) to very intensive services. Whilst the Care Act 2014 places a statutory duty on ASC to meet assessed needs and outcomes it does not prescribe how these should be met. In discharging its statutory duty ASC retains discretion to determine how an individual's needs and outcomes should be met within available resources. Adults Eligibility: The Care and Support (Eligibility Criteria) Regulations 2014 sets out the eligibility criteria and determines the circumstances in which an adult meets the eligibility criteria.
- 2.3. In Manchester, we support a large number of Manchester residents with social care needs. At 31st December 2021 (latest complete figures) we supported:

	<b>31<sup>st</sup> Dec 2021</b>	<b>30 Sept 2022</b>
Older people (long term support to 65+)	2,995	2,908
Younger adults (long term support to 18-64)	2,371	2,354

These figures include:

	<b>31<sup>st</sup> Dec 2021</b>	<b>30 Sept 2022</b>
Adults with learning disabilities (long term support)	1,220	1,196
Adults with mental health needs (long term support)	738	759
People we support are living in the community	3,735	3,763
People in residential care	1,072	978
People in nursing care	575	521

We provide:

	<b>31<sup>st</sup> Dec 2021</b>	<b>30 Sept 2022</b>
Homecare to	1,863	1,877
Homecare commissioned hours (weekly)	29,516	31,073
Supported accommodation to	680	688
Support via shared lives schemes to	182	183
Support via an extra care scheme or apartment	113	119
Cash personal budget or Individual Service Fund to	650	645
Cash personal budget or Individual Service Fund to	333	334

Rolling 12 months:

	<b>31<sup>st</sup> Dec 2021</b>	<b>30 Sept 2022</b>
Items of equipment and adaptations were installed/provided	10,207	10,822
Blue badges were issued	7,270	8,212
People benefitted from our core reablement service	1,612	1,641
Carers were assessed	1,512	1,631
Safeguarding enquiries were opened for individuals	6,203	5,350

- 2.4. Adult Social Care in Manchester is deployed into the Manchester Local Care Organisation (MLCO) alongside delivery of community health services in the city which is governed via a section 75 agreement between MCC and Manchester University NHS Foundation Trust (MFT).
- 2.5. The S75 agreement between MCC and MFT includes a Financial Framework which sets out the approach to the management of an 'aligned' budget across MCC and MFT for the services in scope of the MLCO. The ASC budget referred to in this report constitutes the MCC contribution to the aligned budget.
- 2.6. The fundamental priority for Adult Social Care in 2023/24 remains the safe, effective delivery of our statutory duties as outlined above in the Care Act as well as our duties in the Mental Capacity Act and the Mental Health Act.
- 2.7. In January 2021 we commenced delivery of a major transformation programme, building on the Adult Social Care Improvement Programme – Better Outcomes, Better Lives (BOBL). BOBL is a long-term programme of practice led strengths based change, which aims to enable the people of Manchester to achieve better outcomes with the result of less dependence on formal care. The programme has been essential to delivering the 2021-2024 savings programme, and progress has been regularly reported to Health Scrutiny committee.
- 2.8. Given the positive work so far, and the continued opportunities, our work on Better Outcomes, Better Lives will continue in 2023/24 with a focus on:

- (i) **Front Door** - Work to change how services are configured at the front door is progressing, ensuring that we are effectively reducing, delaying and preventing demand through further embedding the strength-based approach to practice-led change at every opportunity. Opportunities which will be realised include offering earlier interventions, reducing demand for care act assessments and a shift of workload from the Integrated Neighbourhood teams and other community teams, all resulting in a more timely offer and better outcomes.
- (ii) **TEC/Digital** – further increasing the number of people given the opportunity to access Technology-Enabled Care (TEC). TEC helps people to remain in their own homes, maintain their independence and improve their personal safety. Work is ongoing to drive further uptake in certain parts of the city and continue to embed the ‘think TEC and digital first’ approach across the organisation.
- (iii) **Continuing to progress strength-based review** work including focused work in learning disability services.

2.9. In addition, working across the work and health care system we are focused on delivering the **Resilient Discharge Programme** – focused on maximising the impact on patient flow with increased ‘safe’ discharge rates and a consistent Home First offer.

2.10. Aligned to our work on BOBL we will continue to be focused on:

- (i) Ensuring we have the right internal capacity to support all of our work;
- (ii) Strengthening our work to safeguard adults;
- (iii) Strengthening our partnership arrangements and governance with GMMH through the new section 75 arrangements;
- (iv) Implementation of Liberty Protection Safeguards;
- (v) Preparation for the forthcoming CQC regulation and inspection;
- (vi) Working with colleagues in Housing and other partners to ensure the right supply of accommodation for vulnerable adults in the city; and
- (vii) Continuing to support the care market intensively, aligned to our Commissioning Plan and performance and quality regime. The Fair Cost of Care programme is integral to this.

2.11. Additionally, as set out in section 4 below and appendix 1 we will now be progressing at pace with a set of additional transformation opportunities including work on our day services offer (internally and externally) and our wider in house provider services (including supported accommodation and short breaks). These are significant additional change programmes which will require the right planning and engagement over a sustained period.

2.12. In July 2022 Manchester Health and Care Commissioning (MHCC) – the CCG in Manchester, ceased to exist with responsibility for health commissioning moving to the newly formed Greater Manchester Integrated Care System (ICS). ASC within the MLCO will be working with colleagues to ensure that this change is beneficial for Manchester residents and that we are continuing to

work to strengthen the MLCO and maximising opportunities for integration including in our collective commissioning of the external market.

### 3. Service Budget and Proposed Changes

- 3.1. The gross 2022/23 budget detailed in the table below is £252.815m and the net budget of £185.457m. Income of £67.358m includes client fees £24.997m, Better Care Fund £16.782m, contributions from health £7.455m and other income of £18.124m which includes grants and use of reserves, notably the integration reserve, in accordance with the plan agreed for the year with Manchester CCG.

Table 1: Latest Approved Base budget 2022/23

Service Area	2022/23 Gross budget £'000	2022/23 Net Budget £'000	2022/23 Budgeted posts (FTE) £'000
<b>Long Term Care:</b>			
Older People/Physical Disability	71,551	40,019	-
Learning Disability	63,009	56,947	-
Mental Health	28,416	24,491	-
Disability Supported Accommodation Service	16,699	14,223	461.50
Investment funding	2,554	2,554	-
Sub Total	182,229	138,234	461.50
<b>Short Term Care:</b>			
Reablement/Short Term Intervention Team	8,409	6,263	270.28
Short Breaks/Respite/Day Centres/Neighbourhood Apartments	5,668	5,237	125.53
Equipment & Adaptations (inc TEC)	6,026	3,761	130.00
Carers/Voluntary Sector	3,511	3,211	-
Sub Total	23,614	18,472	525.81
<b>Infrastructure and Back Office:</b>			
Social Work Teams	21,851	16,788	378.76
Safeguarding/Emergency Duty	3,501	3,064	73.80
Brokerage/Care Home Teams	1,452	1,400	-
Management and support	20,168	7,499	165.20
Sub Total	46,972	28,751	617.76
<b>Total</b>	<b>252,815</b>	<b>185,457</b>	<b>1,605.07</b>

## Completion of Three Year BOBL Financial Plan 2020-23

3.2. 2023/24 is the final year of the three-year BOBL savings programme with an agreed saving target of £3.477m. To support the planned phased delivery of the savings, a one-off use of reserves of £5.5m supported the budget in 2022/23. This leaves an approved savings target of £8.977m to be delivered in 2023/24, plus proposals for a further £5.575m (within a proposed 3 year programme of £10.025m) outlined in this report. Proposals detailed later in **Appendix 1** are in addition to pre-approved savings.

3.3. The BOBL programme has been successful in reducing demand and the remaining target is being met through:

- £0.5m from continuing the successful work programme focused on strength-based reviews in the Older People citizen group working to reduce demand;
- £2m targeted review in Learning Disabilities service to reduce demand through the optimisation of packages of care through enhanced use of TEC and reductions in emergency placements. A dedicated review team is being established;
- For Mental Health a range of priorities have been confirmed including reviewing discharge support planning and community inclusion services with Greater Manchester Mental Health Trust, a review programme aimed at step down and a specific GM funded pilot 'move on' programme within supported accommodation. In total a £1.5m target has been set;
- The 2022/23 budget included financial arrangements to invest in Discharge to Assess (D2A) beds in care homes, following completion of the hospital discharge programme funding on 31 March 2022. This care model is helping to reduce long term care home admissions and with the D2A intervention help facilitate citizens to return to their homes following a stay in hospital, some with a home care package. The expectation is for further benefits into ASC into 2023/24 estimated at £1.5m.

The total across these areas is £5.5m.

3.4. There is expected to be no call on funding set aside for the demographic growth in citizen numbers in 2022/23 and a reduced call on the 2023/24 allocation. Together this is expected to contribute £3m towards closing the budget gap. Nationally it is reported that demographics are averaging 4% of net Adult Social Care budget. This gives a sense of the success of the BOBL programme in Manchester on demand management and the need to continue to have a strong grip on this programme of work to ensure continue delivery.

3.5. The balance of the existing savings (£0.477m) and the budget pressures arising in 2022/23 detailed **within Appendix 2** (£1.889m) will be addressed through the expected underspend against long term care budgets in 2022/23.



- 3.6. The challenges facing Adult Social Care are reported and recognised nationally. As a result of the significant investment in the improvement programme and the transformation of the service through Better Outcomes Better Lives, the current financial outlook is relatively stable and in a good position to look at the next stage of service change and additional savings.

#### Savings Plan 2023-26

- 3.7. The proposed additional savings for 2023-26 total £10.025m and are detailed in **Appendix 1**. In the context of austerity and the national challenges and ASC reform programme underway, the approach to the development of savings builds upon the previous work done to date and is cognisant of:
- (i) BOBL as the underpinning strategy and the commitments already made to deliver the 2021-24 target, detailed earlier in the report and which in itself will be challenging to deliver;
  - (ii) Preventing potential for a negative impact on the wider health and social care system; and
  - (iii) The imperative to maintain the progress against the ASC improvement plan for social work infrastructure and improved practice to support and safeguard our most vulnerable citizens.
- 3.8. The proposals detailed are all considered deliverable but will be challenging to deliver, requiring significant service redesign, reconfiguration and effective change management. The proposals do enable citizen independence and outcomes to be protected or potentially improved but there will need to be an understanding by citizens, families and carers that in some cases care arrangements will have to change and needs may be met in alternative ways. This is integral if the budget strategy is to be achieved. A full impact assessment will be prepared for each proposal, building on engagement work already completed on day services, and further engagement work underway and planned. In considering proposals, it is critical to be cognisant of the duty to meet eligible needs in cost effective ways.
- 3.9. Given the scale and complexity of some of the proposals, detailed work to finalise the modelling for targets and overall approach is on-going and will continue and take account of Health Scrutiny feedback in order that a robust set of proposals will be reported in the February cycle for further consideration.
- 3.10. The proposed savings programme (£10.025m) is detailed in **Appendix 1** and summarised in the table below

Table 2: Proposed Savings Programme

	<b>2023/24 £'000</b>	<b>2024/25 £'000</b>	<b>2025/26 £000</b>	<b>Total £'000</b>
Provider Services	750	1,750	1,450	3,950
Workforce	1,600			1,600
Charges	200			200
Demand Management	2,275			2,275
Other	750	500	750	2,000
<b>Total</b>	<b>5,575</b>	<b>2,250</b>	<b>2,200</b>	<b>10,025</b>

3.11. The proposed savings programme is grouped into key themes as follows:

(i) Provider Services (£3.950m)

This is a substantial redesign programme including in-house Supported Accommodation, Day Services, Transport arrangements and Short Breaks. The overall direction is to enable the service to support citizens with the most complex needs, whilst ensuring care arrangements for lower level needs are met in the most appropriate ways. Our ambition is to support citizens in supported accommodation holistically within that setting in lieu of attending day care. It is intended to develop a new integrated multi-disciplinary MLCO offer for emergency placements preventing the use of the in-house short breaks service for supporting crisis situations. With regards to Transport, a number of options are under consideration with the key ones being to encourage independence through travel training initiatives, potential new criteria for accessing transport and set a charge for the service in line with service cost. The work on provider services has begun with the day services review over the last few months which included extensive engagement with citizens and their carers/families as well as data analysis. Further engagement work is planned for November on our wider Learning Disability commissioning priorities which is also relevant for our work on provider services.

(ii) Workforce (£2.077m less £0.477m pressures £1.600m net)

Use of a vacancy factor is a normal budgeting practice. At any point in time, there is never a full establishment and a level of turnover is a healthy necessity. The increase of £2.077m increases the vacancy factor to 6.3% or approximately 114 FTE (establishment currently 1803 FTE). For Grades 1 to 12 budgeting practice is at the top of the grade and it is unlikely that the whole of the ASC workforce will be at the top of the grade, providing some flexibility in terms of funding. The £0.477m workforce pressures relates to the full year effect of an increase in response officers capacity within Community Alarms (£0.114m) and a shortfall in the funding for social work capacity (£0.363m) implemented as part of the Covid-19 response in the 2022/23 budget.

(iii) Charges (£0.200m)

The choices on the budget are especially difficult this time and the impact of the cost of living situation is well understood and specific Council financial

support is being directed. Where increases to charges are proposed, they have been carefully considered and significant subsidy arrangements maintained. Adult social care policy will continue to support the most vulnerable and especially those with disabilities through the Disability Related Expenditures scheme. The Care and Support (Charging and Assessment of Resources) Regulations 2014 set out examples of Disability Related Expenditure. The overall aim is to allow for reasonable expenditure needed for independent living.

There are two components:

- Community Alarms (£0.150m) - it is considered a better option to increase charges than remove or limit response. The proposal is to increase all charges by 50p a week. To note there would need to be a very significant cost increase to cover the full cost of this service which will continue to be provided at a significant subsidy; and
- Extra care well being charge (£0.050m) - this is an additional amount on top of the rent, service charge and any care charges that apply. It is a charge that every resident in the scheme would pay. The proposal is for a wellbeing charge of £5-10 per person per week.

(iv) Demand Management (£2.275m)

This target has been set for 2025/26. The target has been set on the basis that the programme has delivered evidenced demand reductions to date and that there will continue to be opportunities to improve outcomes and independence of Manchester citizens and many of the Better Outcomes Better Lives arrangements will be fully embedded by then. This target will be the subject of more detailed consideration in the 2024/25 budget cycle and is in effect a commitment at this stage.

(v) Other (£2.000m)

There are two components:

- The services of an occupational therapist in relation to the relevant capital scheme - it is proposed to charge £0.5m to Disabled Facilities Grant and there is headroom within the programme to do so recurrently; and
- High cost joint funded packages - working with partners on opportunities to improve joint commissioning. In addition, there are a number of citizens within long term placements that are at or near the Continuing Health Care (CHC) threshold. If assessed to be eligible for CHC, funding the cost moves to health and citizens are not eligible for charges. A target of £1.5m has been set.

## Growth and Pressures 2023-26

- 3.12. As part of the budget process it is important that as well as having to find savings to balance the budget, that service pressures are recognised and where unavoidable are correctly budgeted for. These emerging pressures are detailed in **Appendix 2**. They include the standard increases approved annually for demographic pressures and the uplift to care costs driven by the Council's commitment to pay the Real Living Wage to care staff. Current pressures reported in 2022/23 which have recurrent budget implications are also included and cover in-house supported accommodation, advocacy costs and deprivation of liberty standards (DOLS) best interest assessments.
- 3.13. The Council budgets for pay and prices inflation corporately and these will be allocated to Directorate budgets when known. Estimates are at Table 3 below.
- 3.14. Currently it is assumed that the Fair Cost of Care reforms will be cost neutral. The budget assumptions will be updated as soon as government announces further information on the financial arrangements for funding reform. It is assumed the funding reforms will be fully funded and the financial risk is not included as a pressure in the budget.
- 3.15. An investment of £1.3m per year 2023-26 will sustain the social work infrastructure and reablement capacity, supporting care models covering Crisis, Discharge to Assess and Manchester Case Management.
- 3.16. If the proposed changes are approved the three-year budget position is shown in **Appendix 3** (excluding the additional savings which are subject to Scrutiny and consultation arrangements). A summary of the key movements is shown in the table below.

Table 3: Summary of Budget Changes

	2023/24	2024/25	2025/26
	£,000	£,000	£,000
<b>Opening budget</b>	<b>185,457</b>	<b>194,699</b>	<b>203,318</b>
Demographic budget growth	2,329	2,636	2,936
Contract Cost of increasing the Real Living Wage	5,590	5,983	4,000
Contribution to Real Living Wage Increase 2022/23 from Corporate Inflation	3,500		
Removal of one-off reserves to support phased delivery of BOBL savings.	5,500		
Budget pressures rolled into 2023/24 (see Appendix 2)	1,889		
Investment to sustain the integrated New Care Models	1,300		
<b>Demand Management:</b>			
Long term care budgets	- 5,500		
Savings approved in 2021/22 budget setting (BOBL Year 3)	- 3,477		
Underspend against 2022/23 budget assumptions	- 1,889		
<b>Total Changes</b>	<b>9,242</b>	<b>8,619</b>	<b>6,936</b>
<b>Total Cashlimit</b>	<b>194,699</b>	<b>203,318</b>	<b>210,254</b>
Estimated Price Inflation	2,126	1,410	1,410
Estimated Pay Inflation	3,913	4,054	4,230
<b>Total</b>	<b>200,738</b>	<b>208,782</b>	<b>215,894</b>

Adults Social Care Funding

- 3.17. The funding arrangements for Adult Social Care have become increasingly complex over the past few years as new specific funding streams have been introduced. The Council's medium term financial plan, as approved in February 2022, assumed a 1% per annum increase in the Adult Social Care Council tax precept for 2023/24 and 2024/25, with the c£2m p.a. raised used to directly fund the service.
- 3.18. In addition, in relation to the Better Care Fund funding streams it has been assumed that these will be uplifted in line with NHS funding, with £2m additional funding included in the MTFP to support the Adults budget.
- 3.19. **Appendix 4** provides a subjective analysis of expenditure and income and **Appendix 5** provide an objective analysis of the 2023/24 budget to also set out the key areas of income.

#### **4. Workforce Implications**

- 4.1 A new 12-month Recruitment Programme led by HROD was launched in February 2022 with an increased focus on recruitment and retention across ASC. Recruitment progress has however still been challenging this year as a result of the competitive and limited labour market, alongside the high number of vacancies we have sought to fill during this time. It is likely to remain difficult in the immediate future, due to a national shortage of social care workers.
- 4.2. The Charging Reforms work will result in a demand for additional assessment capacity on a national scale which is likely to have wider implications on the ability to recruit locally once the number and role definition of the additional roles is concluded.
- 4.3. The savings proposals outlined at **Appendix 1** will likely have a limited workforce impact due to vacant roles in the two main service areas of review (Day Services and the Disability Supported Accommodation Service) currently being held (covered by agency in the interim). This supports the wider review to take place and should mean that once proposals are reviewed and ready to be implemented, there should be minimal impact on permanent staffing.
- 4.4. If the proposals to focus on more complex citizens are implemented within DSAS, this will require a review of current roles and structures to ensure the requirements of the new service offer can be met. The workforce impact is difficult to fully define until the Provider Services review is concluded.
- 4.5. Vacancy Factor

The Council's establishment is fully budgeted for at the top of the grade. In reality there are vacancies caused by staff turnover, recruitment difficulties and staff employed throughout the grade scale. In order to avoid budgeting for costs that will not be required and making bigger cuts elsewhere, adjustments are being made to reflect these issues by applying a vacancy factor to recognise that vacancies will always exist. The continued challenges in filling posts also means that the council is working hard on ensuring we are an employer of choice and can attract people and minimise the pressures on our existing workforce.

#### **5. Equality and Anti Poverty Impact**

- 5.1. Consideration has been given to how the proposed savings could impact on different protected or disadvantaged groups. Where applicable proposals will be subject to completion of an Equality Impact Assessment (EqIA) and an Anti Poverty Assessment as part of the detailed planning and implementation. Those proposals which will be subject to an EqIA include the proposals pertaining to our in-house provider services and the proposals relating to charging as there are likely to be direct impacts on people and specifically MCC priority protected characteristics.

- 5.2. An update on work on equalities, diversity and inclusion in relation to the Better Outcomes, Better Lives programme was provided to the September Health Scrutiny Committee including work on the direct impact of a number of interventions being delivered on the programme. Work is also underway on the way in which equalities data is collected in ASC, supporting the ability to be better informed on the impact of changes being made to services.
- 5.3. As referred to at 3.11(iii) the implications of the impact of increases to the costs of living have been considered in relation to the specific proposals related to charging.

## **6. Future Opportunities, Risks and Policy Considerations**

### **6.1. National strategy for autistic children, young people and adults: 2021 to 2026**

The national autism strategy was published last year with work underway at a Manchester level to respond. An Autism Strategy group has been established with involvement from a number of partners. This group recognises that there will be an increased demand for support for people with a diagnosis of autism which will need to be carefully managed and planned for across the health and care system. In recognition of this ASC is investing in a specialist commissioning and social work role to support this work.

### **6.2. Charging Reforms and Fair Cost of Care (2023)**

A separate report is provided elsewhere on the agenda providing a detailed position statement. Progress will be reported regularly through 2023:

- (i) Fair Cost of Care - the process for determining a fair cost of care for Manchester has been completed in accordance with the requirements.
- (ii) Introduction of the Care Cap and Threshold - from October 2023, the government will introduce a new cap on the cost of personal care over the lifetime and amend thresholds for financial support.
- (iii) Implementation and Policy Implications - the service is currently working towards implementation and participating in many regional and national events focused on 'ready for reform'.

### **6.3. Liberty Protection Safeguards 2024**

The Deprivation of Liberty Safeguards (DoLS) provide a legal process to review and, where appropriate, authorise arrangements for a person's care or treatment which may amount to a deprivation of liberty, for people aged 18 and over in a care home or hospital. It provides key safeguards to protect the person's human rights. In the summer government consulted on proposed changes to the Mental Capacity Act 2005 Code of Practice and implementation of a new Liberty Protection Safeguards system. The consultation outlined that the existing arrangements, if fully operationalised due to increased eligibility arising from recent case law, will lead to spiralling

costs. In the governments preferred model, once embedded, it is expected there will be savings in comparison to the existing DOLS arrangements, albeit the implementation of the model will be complex and resource intensive. The budget pressures included for 2023/24 will be reviewed once implementation and transition arrangements are clear.

#### 6.4. CQC Assurance

From April 2023, local authorities will be subject to regular assessment and assurance by CQC in relation to their statutory duties for Adult Social Care. CQC are in the process of designing and finalising the framework. Manchester City Council, were part of a 'test and learn' process ahead of April 2023 which piloted the approach in two local authorities nationally. The framework will be robust in evidencing local authorities' delivery of their statutory duties and will therefore require planning and capacity to support at a local level once introduced.