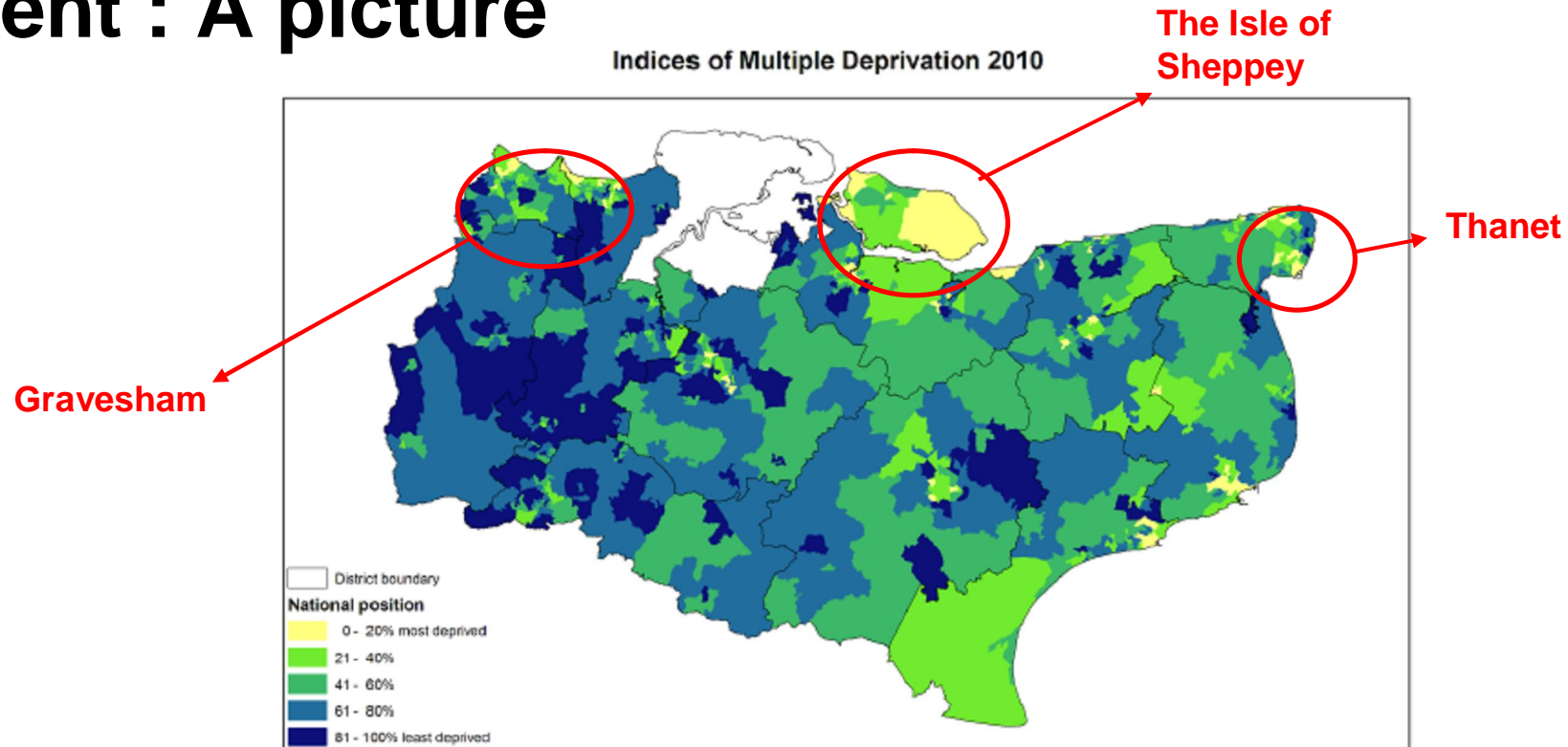

Community Budgets in Kent

“Gaining Traction...”

Paul Carter
Leader of Kent County Council



Kent : A picture



- The 'Garden of England'
- Population 1.42 million (KCC area)
- Largest shire council in England
- 18 major towns (largest Maidstone)
- Some areas of relative affluence

- Some with significant deprivation
- Strong partnership – 'Kent Forum'
- Good track record of working together in deprived areas e.g. Margate Task Force, SIP, PSA 1

This isn't a new way of working for Kent



Our 'Supporting Independence Programme' was launched by Lord Bruce-Lockhart back in 2002. It focused on supporting key groups of vulnerable people. The clear focus of the cross-organisational programme made it 'everyone's priority'.

The programme was targeted at wards with high levels of deprivation / welfare dependency

Our nationally recognised 'Social Innovation Lab for Kent' (SILK) works directly with communities to inform policy and build their capacity to lead their own initiatives i.e. 'Big Society' in action.



Oxford University research

‘Living in a ward with a SLP focus significantly improves your chances of exiting benefit dependency than if you live in a disadvantaged ward without a SLP focus’

*‘In wards like Cliftonville West, there’s a **29% higher chance of exiting benefit dependency** than elsewhere in the South East’*

Source: Oxford University, 2007



Kent people in partnership for a better tomorrow



PSA 1: The Kent Agreement

We Committed To:

- To reduce the number of children in the care of KCC from 1,553 (March 2000) to **1,200** (by March 2004);
- To reduce the rate of admission of people over 65 to residential and nursing care from 112 per 10,000 to **89 per 10,000**.
- To increase the number of children adopted from 58 (1999/00) to **120** (by March 2004)

We Delivered:

- ✓ The outturn was 1163 and the improvement was maintained for 5 years to a low of **1144 in 2009**
- ✓ The outturn was 84.8 and the improvement was maintained for 4 years to a performance of **72 per 10,000 in March 2008**
- ✓ The outturn was **134** and the improvement was maintained to a low of **120 in March 2008**

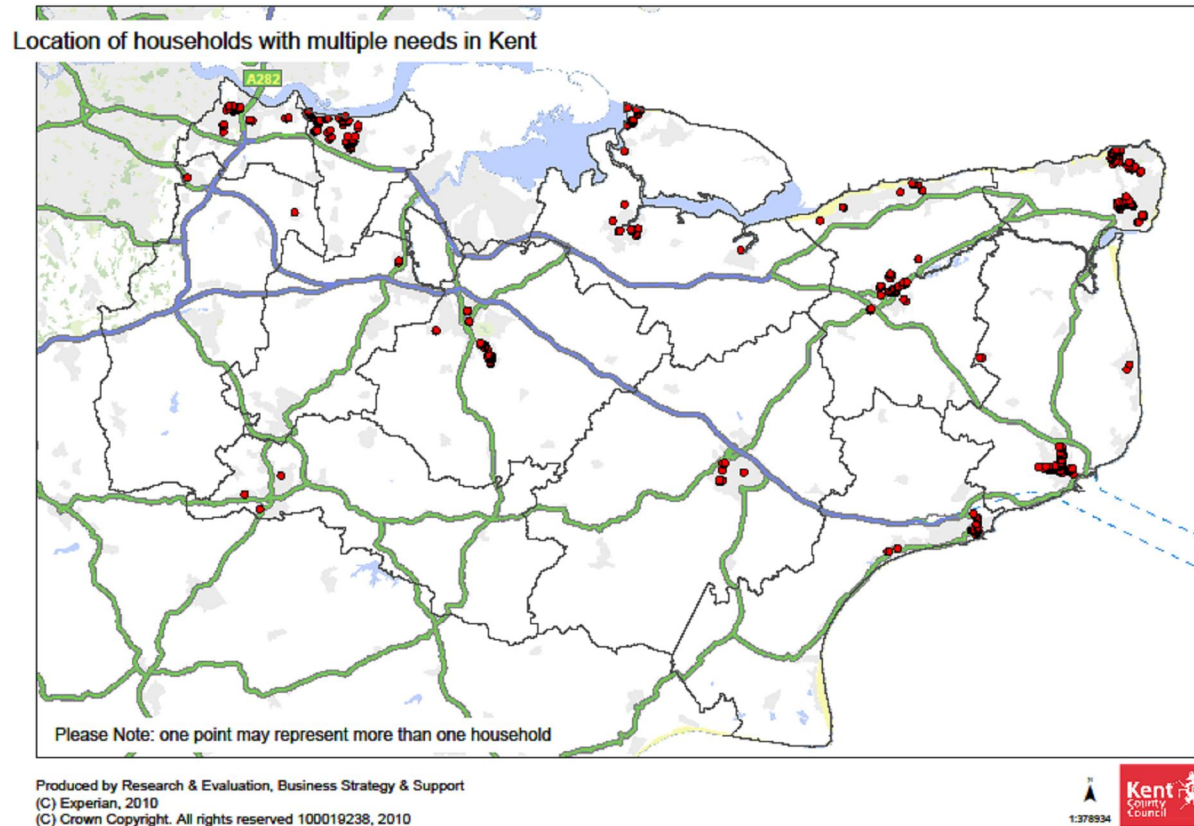
£21.6m Reward

PSA 1: Target 12 - Thanet

Closing the gap between Thanet and the rest of Kent:

	Targets
• Looked After Children	by 50%
• Public disorder incidents	by 15-30%
• 16 year olds obtaining 5 GCSEs A* - C	by 40%
• 16 year olds obtaining 5 GCSEs A* - G	by 100%
• School truancies - primary	by 35%
• School truancies - secondary	by 41%
• Criminal damage rate	by 15-30%
• Violent crime	by 15-30%
• Domestic burglary	by 15-30%

Families with Multiple Problems in Kent



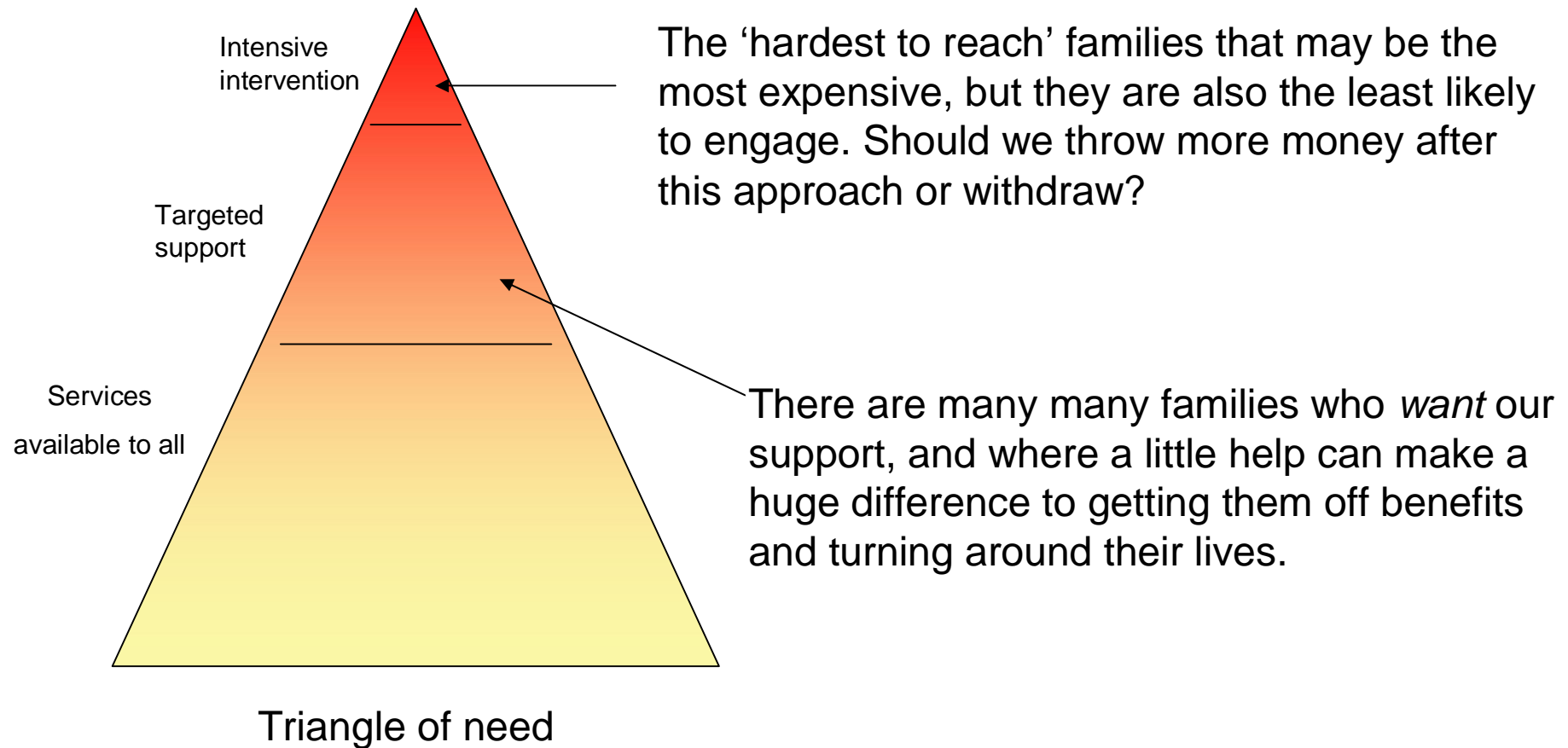
- Government Proportioning Govt stats implies c. 2,700 families across Kent at a estimated cost of £330k per family
- MOSAIC modelling indicates 5,500 families across Kent

Community Budgets Pilot in Kent



- Pilot phase of Community Budgets within two districts in Kent (Thanet & Swale)
 - FIP model pursued in line with national direction, but no existing model in Kent and no up front funding
 - FIP worker model suggests a max of 6 families per worker
 - Consequently number of families we are working with are very small. Early indications are positive & concur with other pilots i.e. targeted intensive intervention can reduce demand
 - More Kent districts coming on board throughout 2013
 - **BUT in a time of reduced budgets, can we really fund this intensive intervention model?**
-

Is the national focus right?



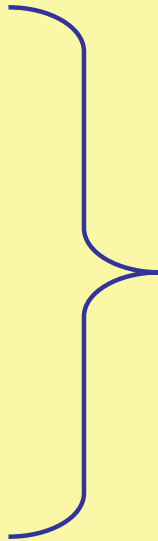
Community Based Budgeting – a wider approach

Locality Boards – setting local priorities:

- Advise district and county councils on service provision, moving towards place-based commissioning where appropriate
- Oversee public services in each locality through direct oversight and community leadership
- Take one area, Youth provision where there less money, 25% reduction in core budget:

In each locality:

- **KCC Youth Services**
- **Family Liaison Officers (FLOs) and Parent Support Advisors (PSAs) working in schools**
- **Education Welfare Officers**
- **Connexions PAs**
- **Youth Offending Teams**
- **PSCOs**
- **Community Youth Tutors**
- **Youth health workers**
- **Community Wardens**



**All currently
siloed, can we do
more with less?**

The Kent Health Commission

- Working with a locality based approach in partnership with CCGs/GPs
- Focusing on community health - preventative and enabling services
- E.g. a minimum of 5% shift from acute spend would deliver **£6m per district** freed up for delivering good practice public health - a total of £72m for Community Health projects



Find out more:

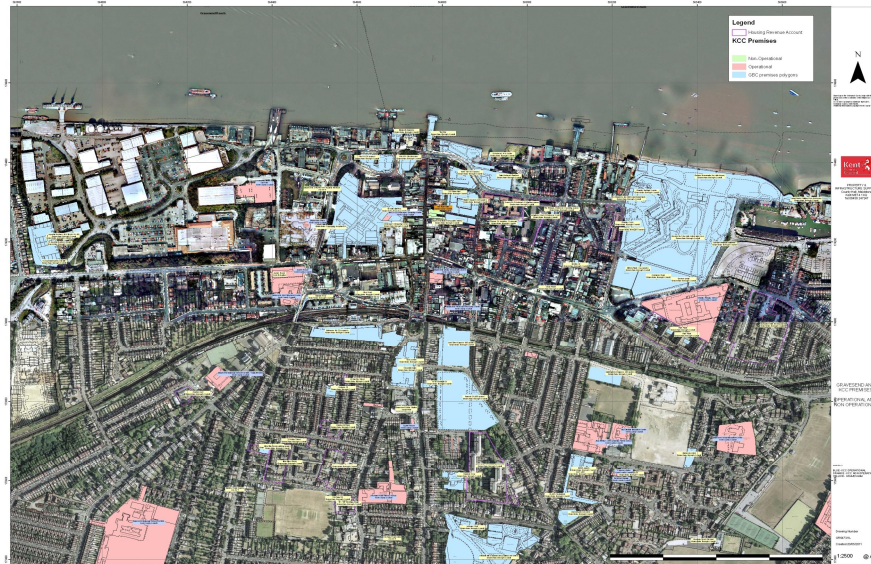
http://www.kent.gov.uk/health_and_wellbeing/kent_health_commission.aspx

Total Place, and Asset Collaboration

- One of 13 pilots in 2009/10 where all key agencies worked at co-location of services (multi-agency frontline service provision in central urban areas).
- Customer insight and intelligence about customer base mapped against assets

The Swale district 'Deep Dive' – Mapping the assets, understanding the revenue costs, the new service provision.

- 6 key projects outlined in early 2010 saving circa £1 million in property revenue costs and £3.5 million in capital receipts in 4 year programme.
- Service transformation across all agencies.
- Key projects are delivered with asset revenue savings on track



- 10 year revenue savings across all local agencies estimated at **£20 million** and additional savings will flow from community budgets
- Capital receipts programme in excess of **£100 million** within 10 years and could be higher once the market bounces back.
- Huge opportunities to reduce energy consumption by intelligent investment

We shouldn't have to be chosen by Government to work this way – we have to break down silos and join up public services

