

Council warned social care cutbacks will see 'hospitals, care homes, prison cells and morgues fill up'

Unions and charities urge the council to reject a package of cuts to health and social care, which includes the closure of two care homes and funding for support services slashed.

Funding cuts to charities in Edinburgh which provide vital health and social care support in the poorest communities will see "hospitals, care homes, prison cells and morgues fill up", Unite warned the council today (Monday).

Cutbacks to bridge a £60m gap in the health and social care partnership's budget were agreed, despite the warnings they would only deliver a "sugar rush" of savings and cost the council and NHS significantly more in the long-term.

Representatives from trade unions and third sector organisations on the front line of the city's care crisis pleaded with the partnership's joint board to reject the proposals before them, which one said were even worse than the "darkest days of explicit austerity".

However bosses said there was "no plan B" and any delay in balancing the budget would "make things worse".

Included in the latest round of cuts to the already-stretched service, which is funded jointly by Edinburgh Council and NHS

Lothian, is a £1.4m reduction in funding for charities and social enterprises.

Plans were also approved to close Clovenstone and Ford Road care homes, reduce the availability of overnight care, scrap the 'Be Able' programme which provides the elderly with exercise and memory classes, and slash funding for drug and alcohol addiction support services.

Ben Owen from Unite told the Edinburgh Integration Joint Board (EIJB) meeting on Monday, March 18, the cuts were neither "practical or realistic".

He said: "Many of them won't transpire and some of those that do will make the budget deficit worse.

"Thousands of hours of support will be cut; hospitals, care homes, prison cells and morgues will fill up as a consequence.

"It's possible, but not likely, that this will provide a sugar rush of savings in the very short-term. In the long-term it will inevitably increase the size of budget deficits, not just for the IJB but for partner agencies too."

Edinburgh Trades Union Council secretary Des Loughney said he believed officers had "underestimated the risk to the public" from the measures proposed.

"We consider that the approach is a dangerous contradiction of key policies of the Scottish Government and the city council to tackle and reduce increasing poverty, to boost preventative care and to lessen health inequalities in Edinburgh and Scotland," he said.

"The £60m in cuts may be portrayed as a small proportion of the IJB's total budget but it will have a disproportionate large effect on the less well-off."

He said the programme described in the report was also "bad news" for unpaid carers, adding: "They are already under great pressure and it's going to get worse."

He urged the board to "reject the package" – a call echoed by almost every deputation – and "place responsibility of the cut where it right belongs – with the Scottish Government".

David Harrold, from Unison, told members hand-wringing was "not an option".

He said: "Each and every one of you is presiding over the silent slaughter of Edinburgh's essential care services. Yet each and every one of you has the ability to stop this by speaking out."

John Halliday, whose organisation Community Renewal Trust, which through EIJB funding works to tackle poverty and health inequality in Bingham, the city's poorest neighbourhood and other areas with high levels of deprivation, said the 10 per cent reduction in third sector grants was based on "a lack of data".

He said: "The whole £1.4m... won't actually save you any money. It will increase NHS and council and health and social care partnership expenditure.

"If we use some very conservative assessment about how much credit we can take... every time we prevent someone going into hospital that saves about £2,900 from the health budget, every time we make it so that someone has reduced their dependency on alcohol or drugs it's an average of £2,700 saved to council and NHS services. It's £65,000 every time we prevent someone having their child in care, for instance."

Health and social care partnership chief Pat Togher said in a "hugely challenging financial climate" the measures would provide "badly needed" financial stability and protect the most vulnerable by "targeting our resources specifically to those who require it most".

He said: "We are required to set a balanced budget. Otherwise the consequences lead us into the immediate recovery planning."

He added while other options for cash savings would continue to be explored there was "no current plan B".

Chief finance officer Moira Pringle said if the cuts were rejected or delayed and a balanced budget was not achieved the organisation would be constrained from agreeing new packages of care and employing new staff.

Mike Massaro-Maillinson, who was interim chief officer prior to Mr Togher's recent appointment to the top job, warned not agreeing to the report's recommendations would only "make

things worse”.

However Councillor Claire Miller complained there was a “lack of choice” presented to the board.

She said: “That is something I am deeply uncomfortable about. “We’ve been presented with a set of proposals for cuts which say we have no alternative options but I think that even today discussing it we can hear there are some alternatives.

“So I still think we’re not using enough of our own levels or power to fix the problems we’ve got.”

by Donald Turvill Local Democracy Reporter



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