

TRANSFORMATION FUND BIDS

To: General Purposes Committee

Meeting Date: 20th December 2016

From: Chief Finance Officer

Electoral division(s): All

Forward Plan ref: 2016/046 Key decision: Yes

Purpose: This report sets out requests for investments from the Transformation Fund that are required to deliver transformational improvements in service delivery and associated savings within the 2017-22 business plan.

Recommendation: It is recommended that General Purposes Committee approves the following business cases and associated investment from the Transformation Fund for:

- a) Using assistive technology to help people with learning disabilities live more safely and independently without the need for 24 hour or overnight care**
- b) Enhanced Occupational Therapy Support to reduce the need for double handed care**
- c) Recouping under-used direct payment budget allocations from service users**
- d) Dedicated Reassessment Team – Learning Disabilities**
- e) Care Plan Review Capacity – Physical Disabilities**
- f) Total Transport**
- g) Street Lighting Synergies**
- h) Neighbourhood Cares Transformation Pilot – a new approach to social work in communities**

And note the three proposals approved by the Section 151 Officer in consultation with the Leader, as per approved delegation:

- i) Specialist Adult and Autism Support to increase independence**
- j) Continuing financial re-assessment programme for client contributions**

k) Move to full cost recovery for non-statutory highway works

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1. BACKGROUND

- 1.1 In response to recognising that the traditional method of developing budgets and savings targets through departmental based cash limits was unsustainable in the long term, the Council has agreed a new approach that will result in an outcome focussed method to Business Planning.
- 1.2 As a consequence it was agreed that the Council would need to establish a fund that could be used to supplement base budgets, ensuring that finance is not seen as a barrier to the level and pace of transformation that can be achieved. The approval of a change in the basis for defraying the Council's debt enabled the establishment of a Transformation Fund of nearly £20m.
- 1.3 It has been agreed that executive summaries of proposals seeking pump priming investments of over £50,000 from the Transformation Fund will be presented to the Committee. Investments below this level can be approved without Committee approval but will be reported to the Committee retrospectively.

2. INVESTMENT PROPOSALS

- 2.1 Attached within the appendices to this report are eleven proposals requesting funding from the Transformation Fund. These proposals should secure significant revenue reductions in the base revenue budget.
- 2.2 Seven of the proposals relate to savings within Adult Social Care and Older People, with a focus on increased independence. Two proposals relate to Economy, Transport & Environment services, ensuring the Council is recovering full cost for non-statutory works and benefits from collaborative working. One proposal is a part of the Total Transport initiative, driving savings through improved capacity management. The final proposal relates to a transformed approach to social work in communities.
- 2.3 The titles of the eleven proposals are:-
 - a) Using assistive technology to help people with learning disabilities live more safely and independently without the need for 24 hour or overnight care
 - b) Enhanced Occupational Therapy Support to reduce the need for double handed care
 - c) Direct Payments – Centralised support
 - d) Dedicated Reassessment Team – Learning Disabilities
 - e) Care Plan Review Capacity – Physical Disabilities
 - f) Total transport
 - g) Street Lighting Synergies
 - h) Neighbourhood Cares Transformation Pilot – a new approach to social work in communities
 - i) Specialist Adult and Autism Support to increase independence
 - j) Continuing financial re-assessment programme for client contributions
 - k) Move to full cost recovery for non-statutory highway works
- 2.4 As a package, the eleven proposals request cash investments totalling £3,922k, with cash savings of £43,123k over the period from 2017-18 to 2021-22.
- 2.5 The following tables set out the total request for funding from the Transformation Fund for the eleven proposals, aligned to the relevant Transformation workstreams, and the total savings across the period of the Business Plan. Please note, that the figures are in

absolute terms as opposed to the previous presentation that was aligned to the approach that is adopted for the Business Plan i.e. marginal movements between years. This is in accordance with the request from Members at a previous Committee meeting.

Investment request:

	2016-17 £000	2017-18 £000	2018-19 £000	2019-20 £000	2020-21 £000	2021-22 £000
Adults Services	-	982	746	-	-	-
Commissioning	-	1,060	76	38	-	-
Environment, transport & economy	800	-	-	-	-	-
Finance & budget review	-	133	87	-	-	-
Total	800	2,175	909	38	-	-
Cumulative total	800	2,975	3,884	3,922	3,922	3,922

Savings:

	2016-17 £000	2017-18 £000	2018-19 £000	2019-20 £000	2020-21 £000	2021-22 £000
Adults Services	-	-538	-538	-538	-538	-538
Commissioning	-	-4,112	-7,012	-7,517	-7,972	-7,972
Environment, transport & economy	-	-129	-264	-398	-525	-652
Finance & budget review	-	-776	-776	-776	-776	-776
Total	-	-5,555	-8,590	-9,229	-9,811	-9,938
Cumulative total	-	-5,555	-14,145	-23,374	-33,185	-43,123

- 2.6 The Committee is asked to approve the investment requested from the Transformation Fund. These proposals, both investments and savings, are also included in the Business Planning Tables.

3. ALIGNMENT WITH CORPORATE PRIORITIES

3.1 Developing the local economy for the benefit of all

This report sets out proposed investments and savings across Transformation workstreams.

3.2 Helping people live healthy and independent lives

This report sets out proposed investments and savings across Transformation workstreams. The impacts associated with the people living healthy and independent lives will be captured within supporting detail and/or Community Impact Assessments within the Business Plan.

3.3 Supporting and protecting vulnerable people

This report sets out proposed investments and savings across Transformation workstreams. The impacts associated with supporting and protecting vulnerable people will be captured within supporting detail and/or Community Impact Assessments within the Business Plan.

4. SIGNIFICANT IMPLICATIONS

4.1 Resource Implications

The report above sets out details of significant implications in paragraph 2.5.

4.2 Statutory, Risk and Legal Implications

There are no significant implications within this category.

4.3 Equality and Diversity Implications

The draft Community Impact Assessments providing as supporting information ([link](#)) capture the current understanding from the services of the impacts on Equality and Diversity. These CIAs should continue to be updated as the projects progress in order to continue developing that understanding.

4.4 Engagement and Consultation Implications

There are no significant implications within this category.

4.5 Localism and Local Member Involvement

There are no significant implications within this category.

4.6 Public Health Implications

There are no significant implications within this category.

Implications	Officer Clearance
Have the resource implications been cleared by Finance?	Yes Chris Malyon
Has the impact on Statutory, Legal and Risk implications been cleared by LGSS Law?	Yes Fiona McMillan
Are there any Equality and Diversity implications?	Yes – cleared for provided Community Impact Assessments Daniel Thorp
Have any engagement and communication implications been cleared by Communications?	N/A – no implications
Are there any Localism and Local Member involvement issues?	N/A – no implications
Have any Public Health implications been cleared by Public Health?	N/A – no implications

Source Documents	Location
None	

USING ASSISTIVE TECHNOLOGY TO HELP PEOPLE WITH LEARNING DISABILITIES LIVE MORE SAFELY AND INDEPENDENTLY WITHOUT THE NEED FOR 24 HOUR OR OVERNIGHT CARE

Overview

The LDP has an established savings programme from the use of assistive technology – allowing for the tracking of the cashable savings from AT assessments and also a judgement about the avoided cost per case. This has delivered a track record of savings over the last 3 years and scope still exists for further savings by applying assistive technology to remaining services users and projects.

These savings form a part of the overall care budget savings within the Learning Disability Partnership.

The savings are primarily driven by reducing the requirement for forms of night-time support. Night staff levels and community hours are assessed with assistive technology to see what levels of staffing the service user actually uses and needs. OT's enable independence by teaching daily living skills, recommending aids, technology & adaptations, so that people are more independent and therefore less reliant on paid staff. Service users are then able to move on to the next stage of more independent living. Dual trained learning disability OTs/Assistive Technologists provide recommendations/reports of care needs. These are sent to the LDP team managers and care managers to implement the changes to the care package. All cases are reviewed quarterly with the service and business development manager.

This work also forms part of the wider assistive technology work programme which is:

- Reviewing how the potential of assistive technology is threaded into all of our processes at every stage of people's involvement with the local authority
- Exploring the approach to identifying the latest equipment and buying it most cost-effectively
- Exploring how we can embed the deployment of assistive technology in children's services – especially for families with children with disabilities – helping managing demand for the LDP adult care budget
- Exploring whether we might want to offer some pump-priming funding and capacity to companies looking to develop new ATT
- Exploring the case for using mainstream devices to help support people living with various disabilities.

This proposal is weighed against a do nothing option - whereby the identified scope for cost reduction is not achieved.

Outline of the proposal

The total cost of the team delivering these savings is £186k and so this will require a one off investment in 2017/18 - for the provision of an Occupational Therapy & Assistive Technology Consultancy Service.

Outcomes expected

The predicted savings for 2017/18 are based on the track record of identified savings over the previous business planning periods. For the current 12 month period the team are reporting that the total saving will be £270k in reduced care spend from the review of existing care packages.

[illegible]

ENHANCED OCCUPATIONAL THERAPY SUPPORT TO REDUCE THE NEED FOR DOUBLE-HANDED CARE

Overview

The Double-Up Team, consisting of two Senior Occupational Therapists and two Occupational Therapist Technicians, was set up as a 'spend to save' initiative in 2013 based on evidence from other local authorities. Initially set up as a pilot project, it was endorsed as part of the County Council's prevention agenda, the implementation of Transforming Lives and the requirements of The Care Act.

The team's remit is to focus on the review of service users to assess whether it is possible to either:

- Reduce existing double-up packages of care to single-handed care

OR

- Prevent single-handed care packages being increased to double-up

This team is currently based outside of the existing mainstream Occupational Therapy service to ensure focus on the delivery of actions that will benefit the recipients whilst returning a saving direct to the Council. Through the actions of the existing team, savings against the Council's homecare budget were generated in the region of £1.1m in 2015/16 and are on track to achieve a similar figure in the current financial year.

Outline of the proposal

This business case proposes the expansion of the service through the recruitment of an additional two Occupational Therapists workers to apply the learning and benefits associated with the current model to other settings as well as providing additional review capacity.

Outcomes expected

The savings calculations are as follows:

Number of people transferring between residential and nursing care in 2015/16) = 44

(note - this excludes 'complex' transfers, such as where there was a clear gap in service (eg due to hospital admission))

The cost variation between residential and nursing care is assumed to be £150 per week / £7,800 per year

a 25% reduction in transfers = 11

A full year benefit of a reduction in transfers is therefore $11 \times £7,800 = £85,800$

Two new OT workers will also increase the teams standard double-up review activity. while much of their focus will be on new activity, it is assumed that they will be able to increase the financial benefits of this by around 10% = equating to around £110,000

The latest homecare commissioned hours report suggests there are around 700 hours of double-up care delivered to learning disability service users per week. Assuming a 10% reduction in hours as a result in a successful double-up review from the new OT workers, and a unit cost of £16 per hour, there would be anticipated savings of £1,100 a week.

The full year benefit would be £57,000

$£85,800 + £110,000 + £57,000 = £252,800$

Risks

1. There is a risk that the enhanced service will not deliver savings. This is unlikely but will be dependent on successful recruitment of appropriately experienced staff at a time when there is a national shortage of Occupational Therapists.
2. The service will struggle to attract staff - there is currently a shortage of qualified OT's in Cambridgeshire

However, the underlying assumptions suggest the benefits are achievable.

Community Impact Assessment

Provided as supporting information.

Return on Investment

[illegible]

RECOUPING UNDER-USED DIRECT PAYMENT BUDGET ALLOCATIONS FROM SERVICE USERS

Overview

Based upon the results of an Internal Audit carried out in January 2015, it is understood that around 25% of Direct Payments (DPs) are not currently monitored, and therefore no funding was recouped from these. For 2015/16 the total recouped from DPs was £1.975m, which it can therefore be assumed applies to 75% of DPs. Assuming a further 60% of this is recoverable, there is likely to be in the region of £395,000 potential for recouped DPs from the 25% that are currently unmonitored.

The report identified that a lack of central coordination and impact amongst the roles responsible for monitoring DPs was a root cause of the lack of monitoring.

Outline of the proposal

It is therefore proposed to centralise the administration and monitoring of DPs.

The key change this would allow would be that as soon as a DP is agreed with a service user, the central DP team would take over the administration of that DP. This would ensure that they are aware of all service users with DPs and are therefore not reliant on locality teams to complete administration and monitoring work. The new team would be aware of all of the DPs and could therefore plan a monitoring programme to ensure they are all checked.

The staffing for the new team would be based upon the existing DPMOs, plus additional 1 FTE DPMO post and 0.68 FTE supervisory post, supported by 1.5 FTE admin function. This team would be managed within the central Practice Team by a Consultant Practitioner (an existing role within the Adult Social Care directorate). The additional cost of these posts is £87k per year.

Adults Committee / GPC have endorsed this proposal in principle in the Summer of 2016, however due to a capacity gap in the role that will manage this function it is not envisaged that the additional activity required to generate the saving will be in place before April 2017. This means transformation funding is needed.

Expected outcomes

Having a centralised team should increase the quality of monitoring, enable the central team to develop reports that link practice to DP provision, and maintain oversight of spend and financial reconciliation as well as removing paperwork from Social Care Practitioners.

Once centralised, the team will be ideally situated to act as a central control on the entire Direct Payments system; from creating and setting up on AFM, sending out, following up and processing key documents, through to their work monitoring Direct Payments expenditure, information for/to service users, reviewing the social care documentation which forms part of the Direct Payments process notifying teams of any outstanding reviews and where there appears to be non-compliance with the DP agreement notify and work with the Social care teams. They will be a clear point of contact for the Service user, any Direct Payment Support Organisations and the locality teams and will have specialist knowledge in the area of direct payment.

Assumptions and risks

It has been assumed within this business case that savings would be evenly realised across the year, but further work may refine this assumption.

Community Impact Assessment

Return on Investment

[illegible]

DEDICATED REASSESSMENT TEAM – LEARNING DISABILITIES**Overview**

This is the second year of a 2 year plan. The focus will be on continuing to develop independence and resilience of individuals and their networks through the Transforming Lives approach and the application of policy lines approved by Adults Committee in 2016.

This will include:

- Accepting more risk in packages
- Funding in place to manage situations where there was a likely need for increased support will be removed where there is no evidence that this has been used. Instead, working to the transforming lives model, teams will be more responsive to emerging need and intervene early to prevent or delay that need.
- Identifying opportunities to promote group activities both in the community and in day care settings meaning support staff can be shared.
- Introduction of set (benchmark) prices for care in line with current practice in Physical Disabilities and Older Peoples services requiring negotiation with existing providers.
- Focusing on setting goals in support plans that support people to progress and increase their independence, reducing funding when those goals are achieved.

A continued programme of reviews and re-assessments will underpin these changes; this is the second year of the programme. As the second year, around two-thirds of this saving are the full-year effect of actions taken in 2016/17, with the remainder achieved through new reassessment activity.

The Learning Disability Partnership has a pooled health and social care budget therefore additional savings are required to maintain the pooled budget, this work will be focused on a review of specialist health support including the commissioned inpatient provision. CCC contributes approximately 80% of the pooled budget.

Outline of the proposal

This proposal relates to the management of demand for care budgets. The care budgets are only accessed by service users who have been assessed as having eligible needs. Once a service user is assessed as having eligible needs, provision of a personal budget must be made for them. The only legal way to change that provision is to re-assess and produce a different support plan that still meets the assessed eligible needs. This proposal sets out ways of ensuring that assessment, re-assessment and support planning allow savings to be made.

The principles of the Transforming Lives model is that services respond to an emerging need quickly using the family and community networks around a person to support them or providing short term intensive support to resolve a current issue. This replaces previous practice which would have been to offer an assessment and meet any eligible needs with a service offer, taking into account the support from family carers. In Transforming Lives the emphasis is on addressing the needs early and where possible in the short-term, only considering more intensive long-term social care funded support where the presenting needs cannot be met in any other way.

In the field of learning disability, there is less opportunity to respond to emerging need, because the person will have had a range of needs since birth or very early childhood and over 90% of new people accessing the LDP are young people reaching 18 who are already in receipt of a

funded service. Once people are receiving a service from the LDP it is likely to last for many years and often for the person's lifetime. This means that the Transforming Lives approach needs to be tailored for people with learning disabilities with an increased expectation that, wherever possible, skills will be developed to promote independence and that family and community networks will be explored and where possible will be used to reduce the social care funding required to meet needs.

The amount of funding provided to meet eligible need can depend on local market conditions. Local authorities are able to consider a range of options that can meet a person's assessed needs and can choose the most cost effective option. In effect we therefore only have to provide enough funding for the local authority to purchase the service, not enough funding for anyone to purchase the service. Therefore, negotiation of bulk discounts with providers can also allow savings to be made from care budgets.

A one-off investment of £750k is required to enable a dedicated staffing resource for reassessments to be maintained for the second year of this plan. This will consist of a Commissioning Manager, operational and procurement leads, brokerage support, six social workers and admin support - totalling 12 FTE of additional staff.

In addition, there is resource dedicated to negotiating with providers of care to ensure that contracts and costs are appropriate given the needs of service-users identified through the reassessment process.

It is estimated that the reassessment programme will deliver savings in 2016/17, concentrated in the second half. The full-year effect of this saving is estimated to be around £1m, which will be seen as reduced budget need at the start of the year. It is estimated that new reassessment activity will generate for CCC a further £1.3m of savings in 2017/18 (£1.6m for the pool as a whole), concentrated at the start of the year - this will require approximately a 4% reduction in costs per service-user on average.

Expected Outcomes

1. This is the second year of a programme of re-assessments. In 2016/17 any savings made as a result of re-assessments would have been for part of the year there will therefore be additional savings in 2017/18 against this activity as the full year effect will be realised.
2. The transforming lives approach embeds the principle of teams responding to emerging needs in a timely way and therefore wherever possible preventing those needs from escalating further. The expectation is that through more effective use of an individual's support and community networks and/or the use of short term funded support this will either prevent the need for long term funded support or reduce the amount of long term funded support required. Where a person's needs do change and become greater the teams will in the first instance work with the individual, family carers and providers to reconfigure existing funding and the care and support plan to absorb as much of the additional need within current resource as possible. This will include ensuring that the agreed policy lines continue to be applied.
3. Through the work to date in embedding the Transforming Lives approach teams have been able to identify in local communities groups and activities that are clearly supporting a number of individuals that would otherwise need a level of ongoing funded support. Where necessary to maintain this community resource teams have been able to invest in the resource at a significantly reduced rate than would have been needed if the resource had closed and individual support had been required.

Assumptions and risks

- There is demand for services that is increasing. People are expected to ask for assessments and need support; and the needs of people who already use services are expected to increase.
- That it is possible to reduce personal budgets and meet eligible needs in other ways than they are met at the moment
- That what is being proposed is legal
- That providers will be willing and able to negotiate, and that their business operation will be sustainable and safe after reductions are agreed
- That there is capacity and willingness within the community, family and friends to provide more support
- That service users, family, friends, the community and partner agencies are all willing to tolerate an increase in risk
- The forecast savings for 2016/17 will be delivered as expected

Community Impact Assessment

Provided as supporting information.

Return on Investment

[illegible]

CARE PLAN REVIEW CAPACITY – PHYSICAL DISABILITIES**Overview**

This business case is the second year of a two-year process of reassessing Autistic Spectrum and Physically Disabled service-users. The focus of activity to achieve the savings will be on assessing and reassessing social care needs in the context of the Council's Transforming Lives Model. This is a three tier approach; Tier 1, helping people to help themselves, Tier 2, offering help when it is needed and Tier 3 the provision of statutory support services; the tiers are not exclusive of one another.

This assessment and re-assessment activity will reduce the care budget that is spent on support for people with physical disabilities and those on the autistic spectrum. Support that is currently commissioned for these service users can be divided into three areas:

- Residential and Nursing Home placements
- Supported living/24hour support in the community
- Domiciliary Care and activities

Outline of the proposal

The only legal option for reducing personal budgets is to do a re-assessment of need and review the support plan.

The Physical Disability and Adult and Autism Teams will review/reassess need where it is clear that a person could benefit from short and medium term goals to maximise their independence and where there is significant opportunity to meet personal care needs more cost effectively and/or to renegotiate support costs. Practitioners will also seek community resources to negate/remove the need for long term statutory funding.

The reviews will use a 'toolkit' to re-design packages with people. The toolkit will include:

- All packages to be checked against current ways of working, including no change reviews, to ensure Tier 1 / community / family input has been considered and that live in care does not unnecessarily include breaks for the paid carers etc
- Patches / Teams to ensure that a significant and growing proportion of staff are Trusted Assessors for Assistive Technology.
- Continue close working with Double Up Team
- Work closely with Reablement to identify alternative ways on providing any long term support that might be required, and introduce Direct Payments as early as possible.
- Look at 24/7 care and see if 4/5 calls per day would be more cost effective way of meeting need.
- Cases to be checked prior to finalising any work regarding debts / non-payment of contributions
- Look to form better links with and usage of Brokerage.

£128k of investment is sought to provide a further year's funding for temporary staff engaged in the review process. Without this, there will not be enough staff time to dedicate to reviews in addition to managing business-as-usual activity. This is the approach which is delivering on target in 2016/17.

Expected Outcomes

The saving of £791k in 2017/18 consists of an estimated £252k that is the full-year effect of commitment reductions made in 2016/17, based on savings known to date and assuming £40k of reduction in commitment per month to the end of 2016/17. The remainder, £538k, is based on an assumed reduction in commitment of £80k per month in 2017/18 (an average reduction of around 8.5% per package).

The strategy for delivering these savings is as follows:

1. New support planning policy which sets out a sustainable and legal framework for support plans.
2. Reviews of service users to amend support plans so they are in accordance with new policy.
3. Plan review programme over 2 years.
4. Develop new models of service in Y1 and Y2 to be implemented in Y3 – 5, to deliver savings required in those years.

Assumptions and risks

Key Assumptions:

- These savings are predicated on the assumption that a reduction made in a package gives rise to a saving in terms of 'money not spent' for a full 12 months. The longer-term strategy is to implement new models of service in Y3 when further package reductions do not need to be made.
- Transforming Lives Model of working produces the level of savings required
- Numbers of new users of the Physical Disability Service remains relatively static.
- Number of people entering the Adult and Autism Service is as expected to transfer from Children's Services.
- Income revenue is as predicted
- Staff retention
- Expansion of the Adult Early Help Team

Key risks:

- Spend on people with a Physical Disability in Cambridgeshire is already below the National average. Reductions to packages may not be possible at the proportion that is modelled here. Regular monitoring of the reductions achieved will allow identification of this issue.
- That there is not enough capacity in the team to do the reviews as set above. Mitigation is to produce a good plan so it is clear what needs to be done when. To keep under observation during year to ensure number of reviews stays on track.
- Savings depend on doing follow up activity to identify and arrange alternative services. This follow up activity needs to be included as part of the plan. The amount of time required to do it is unpredictable as it depends on the situation. The team will therefore manage this very carefully.
- Some service users may challenge the package of support offered to them following a review to implement new policy. Policy will continue to do the reduction even if someone is disputing it.

The Physical Disability and Adult and Autism Teams have made good progress to date with reviewing existing users during 2016/17 and as a consequence there may be less scope for reaching the savings expectations for 2017/18. To counter balance this social care practitioners will be more practiced at conducting reassessments and may therefore identify further scope for a reduction in support at second review; particularly those people who have been set clear goals during 2016/17, with the aim of increasing their independence.

[illegible]

TOTAL TRANSPORT

Overview

The aim of this updated business case is to deliver a similar level of savings to those achieved in Phase 1 of the Total Transport pilot in East Cambridgeshire. This took a "clean sheet" approach to mainstream school bus networks, and aimed to maximise efficiency by changing routes, removing smaller vehicles, and combining services where possible.

The previous assumption (that all pupils travel every day) was challenged, and replaced by a flexible approach to capacity management. This means that in a number of cases more pupils were allocated to a route than the contracted capacity. The introduction of smartcard technology allowed remote monitoring of passenger numbers, to minimise the risk of buses actually running full.

The experience and data gained so far from the pilot indicates that by increasing the staff time available to review networks and to actively manage them on an on-going basis, significant savings can be delivered. The benefit of additional staff resource is magnified when supported by new technology such as smartcards.

The original business case focused on the active capacity management element of Total Transport. It didn't propose ""clean sheet"" network reviews, nor the resource to actively manage services. Experience of the pilot so far has indicated that these two strands are particularly important in achieving sustainable savings, however.

Outline of the proposal

The normal approach to school transport within CCC is to review one third of the county each year. This could continue to be the case for any roll-out of Total Transport, however it would result in savings being phased in. The updated proposal instead sets out to conduct a county-wide review from September 2017.

This proposal, focusing on the roll-out of Phase 1, is considered to be the best option for delivering savings. The second phase of Total Transport is not covered within this bid, as the new services won't be implemented until January 2017, and several months of data will be needed before any evaluation can be undertaken. Phase 2 is not, however, expected to deliver direct savings - it's more about getting the most out of a defined resource, and supporting cost avoidance in social care budgets.

The request is for two fixed-term and one permanent appointment. School transport networks are best reviewed at the start of the academic year. In order to complete the engagement, planning and procurement that is necessary ready for September 2017, the new team would need to be in place from the start of April at the latest.

Work is being undertaken to upgrade the Capita ONE system that is used for school transport, including the introduction of a new "optimiser". This may further strengthen the capacity to deliver savings, however it is not a dependency.

[illegible]

STREET LIGHTING SYNERGIES**Overview**

It was agreed between Cambridgeshire County Council, Northamptonshire County Council, Balfour Beatty Living Places and Connect Roads that in the event that both Cambridgeshire and Northamptonshire entered into the Street Lighting PFI Contracts that they would benefit from project efficiencies and synergies. A £8m joint saving was offered, which could begin to be realised once both parties completed their Core Investment Programmes (CIP).

Outline of the proposal

CIP Project savings are created by a cheaper works price for the CIP than was set in the original Financial Model and Loan Facility Agreement, and therefore Connect Roads has drawn down less money than modelled and have not use the full Base Loan Facility.

However, the Base Loan Facility is fully swapped with a Hedge Fund and to realise the CIP Project savings the Authority is required to pay the partial hedge break costs for the savings amount and any other associated costs (other liabilities).

The Break Cost is currently estimated to be in the region of £800,000. However, this figure is subject to change (it could be in the region of £500,000 - £1m).

The Authority has two options with regards to the break costs:

- to pay the cost upfront, or;
- to pay over time by a reduction in the monthly saving

It is considered that the net benefit to the Authority would be greater if the Authority pre-paid the break costs, i.e. it is anticipated that pre-paying the break costs would give a higher Net Present Value to the Authority than a reduction from the monthly savings. This can be viewed as an 'invest to save' project in its simplest form.

The Service Provider was required to give written notice to both Authorities 40 business days before the date both parties were anticipated to complete CIP. The letter confirmed the date by which the Authority was required to formally request the Break.

Expected Outcomes

From the completion of CIP onwards the savings can be taken monthly over the last twenty years of the PFI Contracts.

The Synergies money is made up of two parts:

- CIP Project savings
- Operational savings

The table overleaf details CCC yearly savings which are taken directly as a deduction from the Street Lighting Monthly Unitary Charge (please note that these are estimates but are unlikely to change significantly).

Project	Savings	Operational Savings	Total
Year 0	£95,133	£49,182	£144,315
Year 1	£128,532	£108,216	£236,748
Year 2	£135,401	£89,448	£224,849
Year 3	£133,980	£80,466	£214,446
Year 4	£126,797	£66,714	£193,511
Year 5	£126,939	£64,074	£191,013
Year 6	£123,877	£63,336	£187,213
Year 7	£108,132	£89,880	£198,012
Year 8	£115,830	£86,724	£202,554
Year 9	£122,776	£74,436	£197,212
Year 10	£123,801	£68,046	£191,847
Year 11	£123,741	£69,648	£193,389
Year 12	£123,504	£70,578	£194,082
Year 13	£112,413	£108,828	£221,241
Year 14	£118,045	£105,180	£223,225
Year 15	£122,829	£102,096	£224,925
Year 16	£133,702	£87,024	£220,726
Year 17	£145,924	£85,878	£231,802
Year 18	£147,126	£87,930	£235,056
Year 19	£102,956	£85,392	£188,348
Year 20	£0	£24,886	£24,886
	£2,471,438	£1,667,962	£4,139,400

NEIGHBOURHOOD CARES TRANSFORMATION PILOT – A NEW APPROACH TO SOCIAL WORK IN COMMUNITIESOverview

Proposal to pilot a radically different model of social work in Cambridgeshire, to be known as “Neighbourhood Cares”.

This transformation bid is to pilot the model of care in two patches across Cambridgeshire during 2017/18 and 2018/19 with the aim of offering a better quality of care.

Outline of the proposal

The proposal is to select two Cambridgeshire patches in which to pilot the work. We want there to be some contrast between the two patches so that we can test the approach in different settings and consider how we might need to adapt it to the diversity of different areas of Cambridgeshire. The client groups in scope will be older people in these two localities. It is important to note that this work may involve extending the scope of the number of people we work with in a given patch - including people who wouldn't currently hit existing thresholds for care. By reaching and working with people before they reach the point of requiring statutory services we will have greater success in preventing or delaying needs and helping people to stay independent.

We will specify the functions to be delivered but will look to give the teams as much flexibility as possible in how these are delivered. We will advertise for a single generic position of “Neighbourhood Worker” and will look to recruit people who are enthused by the possibility of working flexibly and creatively and by taking on new challenges and responsibilities from a range of different professional backgrounds and with different skills, encouraging people to share their expertise with one another and allowing the team to match the team member with the most appropriate skills to the needs of each service user.

The following key principles will guide how the teams will operate:

- Empowered Teams.
- Size of Teams – generally maximum of 12 members of staff.
- Team Structure – non-hierarchical, self-managing, collaborative, solution focussed and supportive of each other.
- Role Generosity and Flexibility –key worker tries to take responsibility for doing as much as they can themselves.
- Maximise opportunities to collaborate with partners.
- Local delivery and solutions.
- Devolved budget and decision making.
- Strip out transactional and non value-added costs.
- Local autonomy and accountability.
- Creative solutions developed locally.
- Different solutions in different parts of the county.
- Reduced dependency on care agencies.
- Responsibility for the whole population.
- Increasing community resilience and building on social capital.
- Delivery of statutory responsibilities.

Another key element of the proposal is an investment in external expertise and support from the MySupportBroker organisation. It is proposed that we partner with MySupportBroker, bringing them in to work as part of the team on a short term basis working with and coaching staff.

A research and evaluation framework will be designed to test the financial impact in the pilot sites and capture the learning.

Other costs include project management, administration and also consultation with “Public World”, who are the official partner for Buurtzorg.

The total cost would be £656,000 for each of two years. Breakdown of the figures:

Four full time equivalent (FTE) staff for each patch recruited at MB2 (8 FTE x £49,500= £396,000)

Support role to cover both pilot teams 1 FTE @ £40,000

MySupportBroker Commissioning cost- £75,000

Evaluation- £25,000

Marketing, materials and communications- £20,000

Project Manager- £60,000

Public World- consultation cost -£20,000

Admin support- £20,000

Total for 2017-18 £656,000

Total for £2018-19 £656,000

Initially, the cost of the new staff team would be over and above the cost of the current traditional model, in effect a double running cost. This is because it is important to give the team a period of several months to build the necessary relationships within the community to develop their role as change agents, capacity builders before taking on a large caseload.

The pilot is proposed to run for two years (2017/8 and 2018/19) and if successful, we would expect by 2018/19 to be in a position to re-direct the mainstream resources/team members into the new model and move away from double running.

Expected Outcomes

The key outcomes we want to achieve are:

- Shift as much resource as possible to the front line.
- Free up staff to have more direct contact with the people we need them to work with, in the way we want them to work.
- Improve the quality and continuity of the service user experience.
- Generate capacity where we currently have capacity gaps, particularly in home care.
- Reduce the cost of care (in the back office and in commissioned care).
- Set ourselves up for the future – the learning from the pilot sites would then be the basis for the wider transformation of the whole system.

We see this work as building on, rather than replacing, the successful innovations that have been developed in recent years. The teams would take on as many functions as possible but it is likely that the following will be in place:

- Local patch based teams arranging and delivering the vast majority of care provision for people within communities.
- A central early help service continuing as the first point of referral for anyone calling the contact centre (families or professionals).
- A dedicated discharge and reablement offer which is able to ensure people exiting hospital get the help they need quickly and do not remain in hospital for longer than necessary.

- The Multi-agency Safeguarding Hub (MASH) and some specialist safeguarding capacity being retained centrally to handle the most complex safeguarding issues.

Supporting health and social care integration in Cambridgeshire-the pilots will be developed as an embedded part of work on health and social care integration in Cambridgeshire.

Part of the community resilience strategy- a locally deployed social work service will allow us to support and work alongside the capacity which exists within communities themselves.

The roll-out of the new model of social work will occur alongside the roll-out of the CCC new community hubs programme and we want to link these two projects together.

The pilot sites are opportunities to drive innovative and flexible collaboration with the existing voluntary and community sector and with local public services.

Assumptions and risks

The model proposed is a radical departure from existing practice and so inherently entails some risk. Beginning this work with pilot sites will ensure that the risks are at a manageable scale. We will be learning and amending the model continually as the pilots develops - mitigating any unidentified risks as we proceed.

A less closely managed, directed and monitored model of social work potentially entails a greater degree of risk - it requires us to trust the teams to deliver outcomes and meet need independently. The experience of the Buurtzorg model is that this independence has succeeded, with service users reporting better quality of care and no increase in complaints. However, it is important the greater degree of risk is understood and acknowledged in undertaking this work. The pilots will include a mechanism for the service users to feedback on their experiences regularly.

There may also be a financial risk in that teams will be empowered to use their judgement to spend resources without management oversight. We anticipate that this will lead to reduced overall spend, but this cannot be certain.

Community Impact Assessment

To be completed.

Return on Investment

[illegible]

SPECIALIST ADULT AND AUTISM SUPPORT TO INCREASE INDEPENDENCE**Overview**

Formed in 2014, the Adult and Autism Team (AAT) currently supports approximately 100 people with resources of 3 FTE social worker / Adult Support Worker, 1 FTE management and 1.6 FTE support workers (initially provided by [supplier name]).

Support is most often focused on high quality preventative work. Over 55% of the AAT work has been (transforming lives) Tier 1 and Tier 2 work, where supporting people through crisis, unplanned events or transition into Adulthood has negated the need for long term support.

A further 55 people are expected to transition to the team during 2016/17 and 12 are currently on the waiting list for assessment. Cases that have been passed to the AAT from other services, and are currently on the case load, also need intensive support to shift to a Transforming Lives way of working. It is not expected to be possible to deliver high quality preventative work with this level of demand given current available resources.

Outline of the proposal and Expected Outcomes

The proposal is therefore to continue providing 2 FTE of Support Worker for remaining part of a 12 month fixed term period which began in 2016-17 funded by CFA earmarked reserves. The role holders work with service users, both new (coming through Transitions, more work with families) and existing, to support and teach daily living skills through working to set goals and recommending aids, technology & adaptations, so that people on the Autistic Spectrum and other vulnerabilities are more independent and therefore less reliant on both formal and informal support networks. This is expected to cost £50,000 in 2017/18.

In due course, it is anticipated that the workers would pay for themselves with cash savings by reducing the value of packages that already exist. Savings would also accrue from avoided cost where new service users have had lower packages than expected because they have had Transforming Lives type support.

Assumptions and risks

It is assumed that this provision is enough for demand and that there is enough time to support independence.

1. Exit strategy - this proposal is only for 12 months (in total), workers have begun in 2016 and that means their contract will end in late 2017 at the same time as the [redacted] contract ends. It is assumed that these timescales will not change and therefore that re-commissioning of services for this user group can take place then.
2. Currently, the level of demand for this service is estimated, as it is a relatively new service user group. The AAT has attracted high numbers of service users initially, due to unmet need prior to the service being introduced. The preparing for adulthood processes are still in their infancy and the numbers of young people on the autistic spectrum or similar vulnerability are not yet accurate. It is assumed that the extra workers in this proposal will be enough to meet that demand.
3. Effectiveness - The aim is to support the young people turning 18 during 2016/17 through short/medium term 1:1 support in order to avoid or negate long term funding – but this is yet to be tested on a service scale.

Risks associated with this proposal will be managed in three ways:

- ## Community Impact Assessment

Return on Investment

[illegible]

CONTINUING FINANCIAL RE-ASSESSMENT PROGRAMME FOR CLIENT CONTRIBUTIONS**Overview**

Delivering the programme of increased client contribution income requires a significant increase in the scale and frequency of financial assessments with the majority of clients contributing to their care in the community needing to be reassessed during 2016/17 and 2017/18.

This programme is underway and this bid requests that funding continues until Oct 2016 (this will be 12 months in total). The alternative is to not increase staff resource (or to decrease the extra capacity that is funded until March 2017 only), but this is likely to mean there is limited progress through the additional re-assessments that we know are needed.

The Financial assessment service is continuing to embed use of the Abacus IT system, following the approach used in Northamptonshire County Council. Once the ""bulge"" of backlogged reassessments is progressed by the additional capacity, and there is greater recent loading on Abacus, it will be easier to apply global updates via the system (such as for DWP benefit changes) meaning that the amount collected can be updated much quicker than if a financial assessor needs to consider each case.

Outline of the proposal

This bid to the transformation fund is to continue that approach in Apr - Oct 2017.

Funding for additional time-limited financial assessment capacity is requested to ensure that all service users have an up to date assessment, that policies are appropriately applied and that we rigorously monitor client income in a range of areas. The funding requested is for four additional fixed term Financial Assessment Officers. These staff are based in Northamptonshire, and based on costs to date will require £46k in 2017/18.

In total there are approximately 4800 service users across older people, people with mental health needs, learning and physical disability client groups who make a financial contribution to their care. Approximately 70% of these people's assessment has not been updated for more than 1 year meaning there will be approximately 3360 assessments requiring attention during 2016/17 and 2017/18.

A proportion of this workload can be met within existing resources – particularly if the current vacancies in the service can be addressed, but at least 1600 assessments will require additional posts to undertake. The additional posts have been scoped on a 12 month basis - this is the request for funding the second 6 months.

Given the time required to complete a financial assessment and based on based feedback from Northamptonshire County Council who have already deployed similar roles we estimate that each Finance and Benefits Advisor (FABA) could complete 400 per year. This is a rate of approximately 2 assessments per worker per day meaning we would require 4 additional staff members to address the additional 1600 required (whilst the existing team can address the other 1600 and maintain the existing workload).

The financial reassessment programme is underway (as of October 2016) and is being funded in 2016/17 from CFA Earmarked Reserves.

[illegible]

MOVE TO FULL COST RECOVERY FOR NON-STATUTORY HIGHWAY WORKS**Overview**

Currently non-statutory Local Highways Improvement works and third party highway works do not cover their full cost.

Outline of the proposal

This proposal would involve introducing a new time recording system and new processes for costing and charging for schemes from third parties such as parishes.

Initially this will begin with the Highway Projects and Road Safety team and the Policy and Regulation team. Depending on the nature of the schemes, this scope could be developed to also include Traffic Signals and Parking, IHMC and the Asset Management team. There is also scope to include ongoing maintenance following scheme delivery; this could provide a sustained and increased income. This proposal fits into the wider organisational agenda of fully recovering costs and commercialisation.

We will need to work with ETE Committees and engage with all Members regarding this proposal. We will also need to engage with parishes as their costs will increase as a result of this proposal. The implementation of a time-recording system is vital to the success of this proposal and the commercialisation agenda across ETE, therefore early work to investigate the options for this is already underway. We will also need to train and educate staff regarding recording their time and a commercial culture will be required from our staff to ensure the success of the proposal.

Expected Outcomes

Under this proposal we will also be able to have more transparency regarding the actual cost of schemes and will provide an accurate quote for work in advance of it starting. In addition to costs being fully recovered, a stronger understanding of how officer time is spent will support managers in allocating resources and setting service objectives.

Assumptions and risks**Assumptions**

- Implementation of a new time-recording system.
- Ability to recruit staff to do this work/retain current staff.
- That there is a market for a Local Authority to operate in this way.

Risks

- This is a competitive market, so there is a risk of potential customers choosing other providers.
- Possible lack of Member support, as this will affect all of their patches.
- Reputational risk.
- Culture change takes longer to embed than expected which means that income targets are not achieved.

Community Impact Assessment

Provided as supporting information.

Return on Investment

[illegible]