

Appendix 2d
Adults and Health

Capital Investment Proposals

Independent Living Services (new builds) Page 2

Business Planning: Business Case – Investment / Savings

Project Title: Independent Living Services – Further Expansion
- New Builds

Committee: Adult and Health

2022-23 Revenue Investment amount: N/A

This is purely a capital investment ask, there are no revenue investment implications.

| | 2022/23 (£000) | 2023/24 (£000) | 2024/25 (£000) | 2025/26 (£000) | 2026/27 (£000) | 2027/28 (£000) | Total (£000) |
|--------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-----------------|
| Capital Investment | 0 | 0 | 3,161 | 15,597 | 14,955 | 6,435 | 40,148 |

The proposal is scheduled for savings to flow from the year after the opening of the new services as shown below (figures in £000).

| | Build volumes (in units) and savings flow (in £000's) | | | | | | Total |
|---------|---|---------|---------|---------|---------|---------|-------|
| | 2024/25 | 2025/26 | 2026/27 | 2027/28 | 2028/29 | 2029/30 | |
| Volume | | | | 48 | 64 | 48 | 160 |
| Savings | | | | 418 | 557 | 418 | 1393 |

(Shaded boxed indicate 'make'. Numbers indicate forecast savings.

Brief Description of proposal:

Independent Living Services (ILS) are a new model of residential and nursing care delivery that we are developing in partnership with local providers and communities. The model supports people being able to stay in their own tenancy longer, as care can be stepped up as needs increased, unlike residential care where they may need to move to get increased care needs met.

The proposal is to build and open 160 new tenancy-based flats across Cambridgeshire, thereby increasing residential and nursing care capacity for older people wishing to remain living independently. Stimulating development of new services in this way will generate the much-needed provision to meet population growth forecasts and do so at a cost affordable to the local authority.

Date of version: 09/09/21

BP Reference: N/A

Business Leads / Sponsors: Executive Director of Commissioning, People & Communities

1. Please describe what the proposed outcomes are:

Communities at the heart of everything we do:

- The new service enables high dependency older people to remain within a community setting. It also means care workers from the community can support older people to remain living independently.

A good quality of life for everyone:

- It will also offer greater choice, control and care flexibility for those older people no longer able to remain living safely at home.
- The programme is expected to create new whole time equivalent jobs across Cambridgeshire.

Cambridgeshire: a well-connected, safe, clean, green environment:

- The proposal is expected to benefit public health by reducing future harms from climate change. Initial estimates predict the new service will prevent CO2 emissions.
- The builds in development are low carbon and high energy efficiency

2. What evidence has been used to support this work, how does this link to any existing strategies/policies?

The proposal supports Cambridgeshire County Councils (CCC's) Adult Social Care Older People strategy to help people live with greater levels of independence. The work will build on the early consultation carried out with user groups, providers and social care practitioners. This adds to information and ideas collected from district councils, industry experts and Council Members.

The proposal also helps the care market embed CCC's Climate Change strategy into the accommodation-based services. The approach involves lowering energy demand, eliminating the use of fossil fuels, and generating electricity on the premises. We will learn from experiences of other projects that have already achieved this.

Adults in employment spend a large proportion of their time in work, our jobs and our workplaces can have a big impact on our health and wellbeing. Therefore, work and health-related worklessness are important public health issues, both at local and national level. Consequently, the proposal will pursue social value from the delivery of work to disadvantaged people.

3. Has an options and feasibility study been undertaken? Please explain what options have been considered.

There are two broad approaches to implementing new ILS's:

- the 'make model' option. Here CCC (Cambridgeshire County Council) will have overall control and responsibility for funding, designing, and building an ILS

(Independent Living Services). This level of control is frequent practice across the CCC in long-term capital programmes; and

- the 'buy-model' option. Here the private service providers would be commissioned to build ILS services in Cambridgeshire. We would contract flats within the ILS.

CCC's preferred approach is for it to finance and construct CCC's own service of this type. The lower costs of borrowing and the greater control of a programme were significant factors. This means CCC can use its experience to manage risk rather than pass it through to a third party for an extra fee. This option also has the greatest opportunity to deliver CCC's non-financial and wider societal benefits, particularly as the type of contract we propose means we can still have effective control of the whole service.

Commissioning in services is also explored to assure CCC does not miss out on high quality and innovative services from private providers.

On selection of suitable sites, a feasibility study would be carried out on how the site could accommodate the new social care services. We would conduct the studies applying the [Housing our Ageing Population Panel for Innovation \(HAPPI\) design principles](#). The HAPPI principles are based on 10 key design criteria used in social care housing design. Many are recognisable from good-design generally - good light, ventilation, room to move around and good storage - but they have particular relevance to the spectrum of older persons' housing, which needs to both offer an attractive alternative to the family home and be able to adapt over time to meet changing needs.

4. What are the next steps/ actions the Council should take to pursue it? Please include timescales.

The work to deliver this programme will be governed through the Older People's Accommodation Board. This will ensure it links in with other programmes looking at similar benefits. The programme team would expect continued support by a cross-Committee Members Reference Group who provide advice and guidance on a range of topics. The governance groups will hold the programme team accountable to deliver its benefits realisation strategy, stakeholder engagement plan and risk management.

We will use a structured approach to programme management, including application of the construction industry standard Royal Institute Of British Architects (RIBA) Plan of Work to organise the process of briefing, designing, preparing, and submitting planning application, constructing, and operating building programmes.

This work will require dedicated resource and associated financial commitment to manage each programme. Expenditure would be required for an in-house multi-disciplinary project team covering commissioning, property, finance, legal and procurement. It would also be required for additional expertise in building design, and project management.

High Level Timetable

This work will be phased with each of the 3 schemes working to the same major tasks.

| Task | Duration |
|---|------------------|
| Find suitable site | |
| Carry out feasibility study | 3 months |
| Produce initial business case | 1 month |
| Carry out design work | 10 months |
| Submit planning application | 5 months |
| Produce final business case | 1 month |
| Acquire site & Construct service | 12 months |
| Ramp up service user | 4 months |
| ILS ready for full use | |
| Total estimated project duration | 36 months |

The proposal is scheduled for three 'make' services opening in 2026/27, 2027/28 and 2028/29. Placements will be made gradually, allowing people time to settle in. The locations will depend upon the suitability of land.

5. Could this have any effects on people with Protected Characteristics including poverty and rural isolation? If so, please provide as much detail as possible.

This will affect older people with eligible social care needs receiving a funded care package. It will also provide a choice to older people without eligible social care needs (self-funders). We established this from carrying out the following work:

- benchmarking took place with a range of service providers who support older people in their own tenancies to help with scope;
- the Annual Care Home and Retirement Home market reports from Laing Buisson (well-known international experts in the Housing and Care market) were analysed for trends;
- provider consultation took place followed by one-to-one meetings to understand requirements; and
- care professionals e.g., social workers, commissioners, OT specialists, nurses and care workers were consulted for views on the range of older people to consider for this proposal.

The proposal is to meet people's care needs, whilst maximising their independence. The care model focusses on building on people's existing strengths, their natural support networks, the use of technology and new care models to meet needs.

The proposal does deliver new care services for older people to move into. It might therefore represent a small risk model to current living arrangements when needs increase. Decisions about the best care setting for an individual will always be made in the best interests of service users with social workers acting to identify the most

appropriate care plan and making judgements about the level of independence and support required.

The proposal also affects people involved in designing and building the ILS. Government acknowledges adults in employment spend a large proportion of their time in work and that our jobs and our workplaces can have a big impact of our health and wellbeing. Therefore, work and health-related worklessness are important public health issues, both at local and national level. Consequently, ILS's will pursue social value from the delivery of work to disadvantaged people as well as understanding that some tenants may also still work whilst residing in the ILS.

A more detailed Community (Equality) Impact Assessment is scheduled for the next stage of the business case.

6. What financial and non-financial benefits are there and how will you measure the performance of these? Are there any dis-benefits? These MUST include how this will benefit the wider internal and external system.

Financial Benefits

A financial model is being developed. It shall model factors in investments, income, costs, savings, and cost of risks. The primary financial benefit is related to the annual social care budget for older people, through the delay or prevention of unnecessary escalation of support needs.

| Key Benefit | Measure | Baseline | Target & Timescale |
|----------------|------------|----------|---|
| Cost avoidance | ASC Budget | £8.7m pa | £1.4m pa phased over the programme period |

Non-Financial Benefits

Success is achieved when more older people with higher levels of care and support are happy in their own independent living service. The proposal can support this by firstly delivering great accommodation which has been designed and built in an environmentally considerate manner. Secondly, proposal can further help by delivering high quality care jobs instilling an enabling environment to help older people. Thirdly, the proposal can assist people who would ordinarily find it harder to obtain work in the construction and/or care sector to find meaningful employment.

| Key Benefit | Measure | Baseline | Target & Timescale |
|---|------------------------|----------|---|
| Increase in people living independently | Number of older people | NIL | 160 people phased over the programme period |

| | | | |
|---------------------------|--|-----|--|
| Reduce environmental harm | Amount of CO2 or equivalent in emissions | NIL | 150 tCO2e per annum phased over the programme period |
| Increase care worker jobs | Care worker numbers | NIL | 135 jobs phased over the programme period |
| Increase social value | Number of jobs for people with disability or previously long-term unemployed | NIL | 10 people each for 2 years over the programme period |

7. Are there any identified risks which may impact on the potential delivery of this? What is the risk if we do not act?

The proposal has identified a range of risks. The table below lists the key risks and mitigations.

| Risk | Mitigation | RAG (should the risk occur) | Overall Responsibility |
|---|---|---------------------------------------|-------------------------------|
| IF Covid-19 restriction policies continues THEN there will be delays to work. | Re-arrange work plans to continue making progress and return to Covid-19 affected work at a more suitable time. | GREEN | Programme Team |
| IF suitable land cannot be found THEN there will be delays to work. | Review CCC's land stock and maintain engagement with district councils about potential land use. | AMBER | Programme Team |
| IF construction industry inflation rises rapidly THEN the project will cost more to deliver. | Explore ways to use different materials to offset the rises in prices | AMBER | Governance Board |
| IF the DWP (Department for Working and Pensions) change the criteria agreed for Housing Benefit payments for ILS THEN the programme benefits will be reduced. | Maintain engagement with district councils to remain aware of benefits regulations | GREEN | Corporate Management |
| IF the Cabinet Office change to PCR15 THEN the programme benefits will be increased. But no benefits are expected in the near term. | Contribute to government consultation about the new laws. Maintain a watching brief. | GREEN | Corporate Management |
| IF the DHSC (Department for Health and Social Care) change to adult social care funding policy THEN the | Maintain engagement with government alongside LGA (Local Government Association) and ADASS | AMBER | Corporate Management |

| | | | |
|--|--|--|--|
| programme benefits will be increased. But no benefits are expected in the near term. | | | |
|--|--|--|--|

8. Scope: What is within scope? What is outside of scope?

ILS will focus on those people with high needs (usually but not exclusively aged 65+) who want to retain their independence but can no longer live in their own home. People below the age of 65, for example those with early onset of dementia would also be supported within ILS.