

Business and Financial Plan 2024-2029

To: Adults and Health Committee

Meeting Date: 25 January 2024

From: Executive Director of Adults, Health and Commissioning
Executive Director of Public Health
Executive Director for Finance and Resources

Electoral division(s): All

Key decision: No

Forward Plan ref: N/A

Executive Summary: This report summarises the business plan proposals, as presented to the Strategy, Resources and Performance Committee on 19 December as to the remit of this Committee according to its terms of reference. This includes proposals relating to:

- Adults, Health and Commissioning; and
- Public Health

Recommendations: The Committee is asked to:

- a) consider and scrutinise the proposals relevant to this Committee within the Business and Financial plan put forward by the Strategy, Resources and Performance Committee, 19 December 2023.
- b) recommend changes and /or actions for consideration by the Strategy, Resources and Performance Committee at its meeting on 30 January 2024 to enable a budget to be proposed to Full Council on 13 February 2024.
- c) Receive the fees and charges schedule for this Committee included at appendix 2.

Officer contacts: Director of Adults, Health and Commissioning
Director of Public Health

Names: Patrick Warren-Higgs and Jyoti Atri

E-mail: Patrick.warren-higgs@cambridgeshire.gov.uk
Jyoti.atri@cambridgeshire.gov.uk

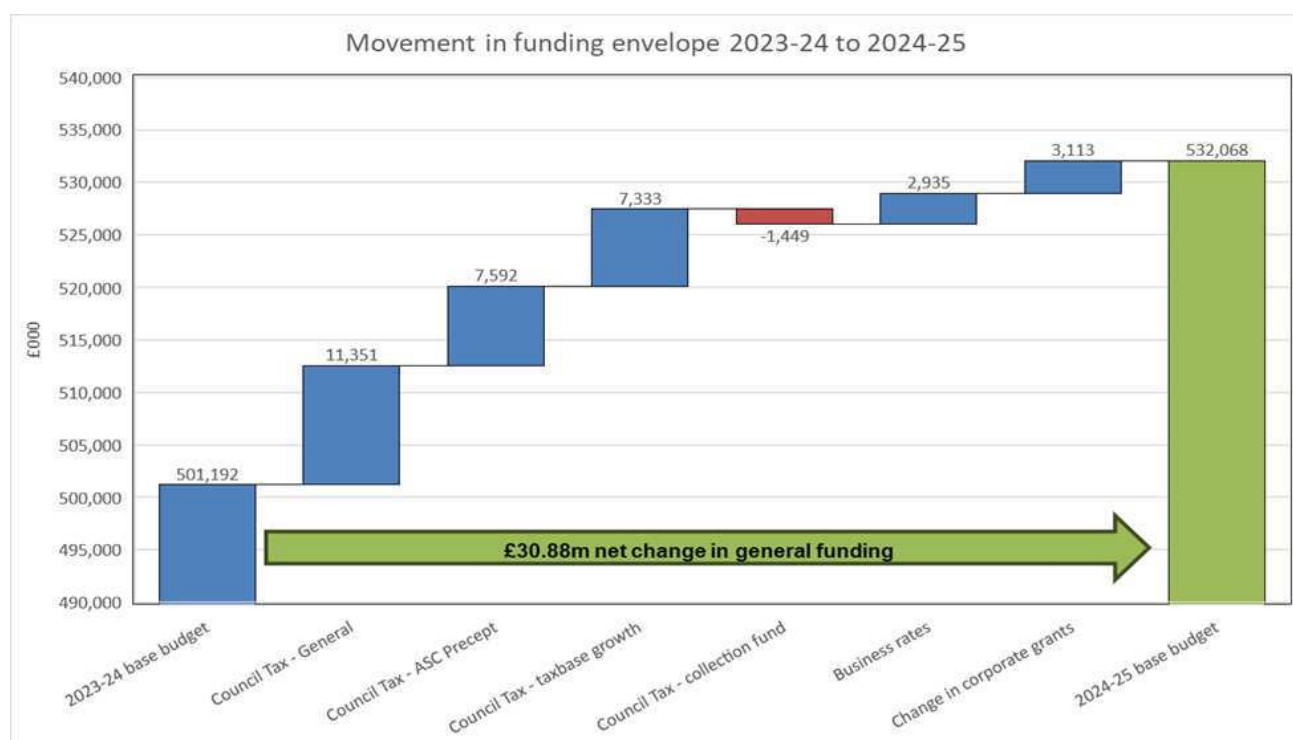
1. Creating a greener, fairer and more caring Cambridgeshire

- 1.1. The proposals presented to the Strategy, Resources and Performance Committee, 19 December, set out the Council's delivery and plans against its seven ambitions in the  Strategic Framework 2023-28.
- 1.2. This report provides an assessment to this committee, of the draft budget for 2024/25, as presented to Strategy, Resources and Performance Committee at its meeting on 19 December 2023. The council's budget takes account of the impact on Council Tax, the capital investment programme, schools' overall budgets, as well as Council reserves. The report sets out the corporate position, delivery of the strategic ambitions, investment in priorities and the proposed 2024/25 revenue and capital changes relevant to this committee.
- 1.3. This committee, alongside other Policy and Service committees will consider the draft budget proposals, and any feedback will be presented to Strategy, Resources and Performance Committee at its next meeting 30 January 2024 for consideration.

2. Overview of corporate position

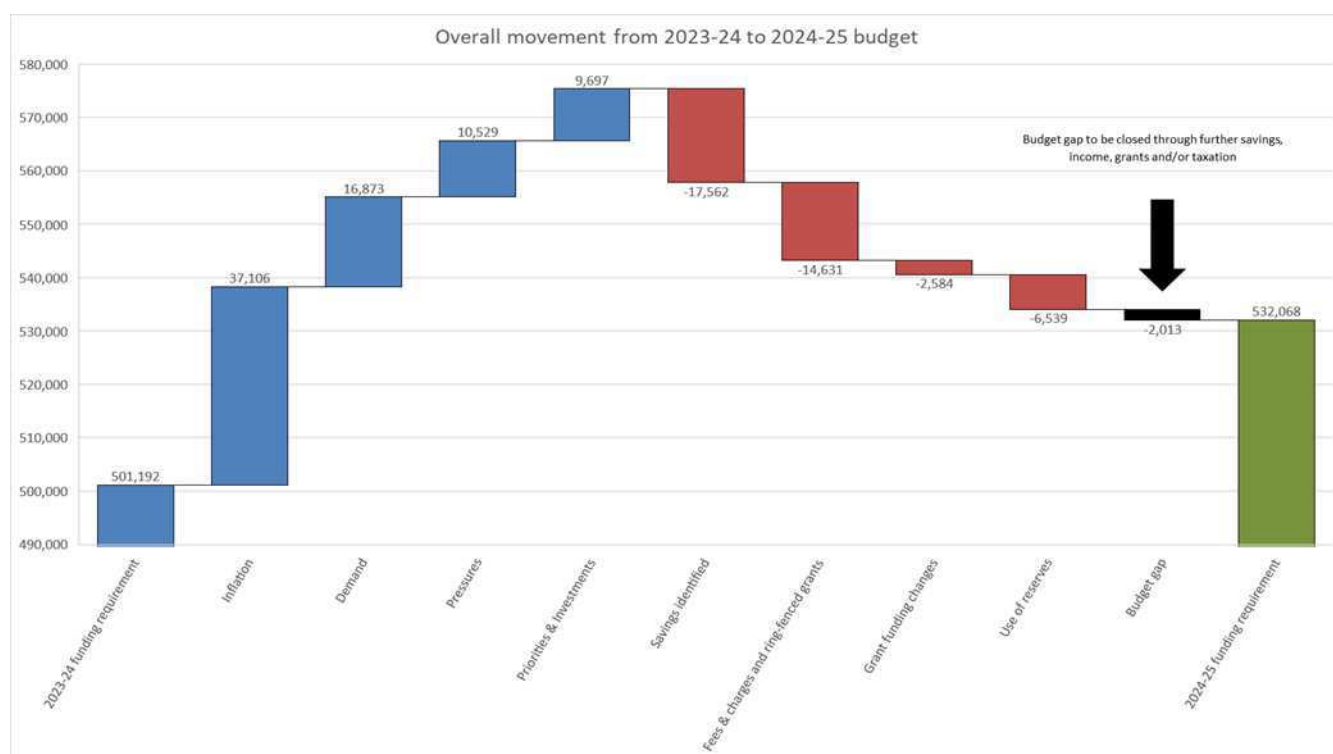
- 2.1 The Strategy, Resources and Performance Committee considered draft proposals in order to balance the 2024/25 budget as well as longer term business and financial planning priorities. Papers are available at the following link - Strategy, Resources and Performance Committee - Item 6: Business and Financial Plan 2024-29
- 2.2 Proposals cover a range of services provided by the Council. Each of the service and policy committees have been asked to provide scrutiny and feedback on proposals within their remit, in order to inform the Strategy, Resources and Performance Committee 30 January 2024 in its consideration of recommending budget proposals to Full Council on 13 February 2024.
- 2.3 The Council draws its funding from two main sources – Council Tax and government grants. The Council's government funding allocated for 2024/25 comprises of three elements; the first two make up what is referred to as Cambridgeshire's Settlement Funding Allocation (SFA), which is the Department for Levelling Up, Housing and Communities (DLUHC) calculation of what the Council's spending should be compared with other councils across the country. A third element of government funding is from additional grants, such as the social care support grant. The other main source of funding is from Council Tax. For 2024/25 it is forecast this will mean £30.9 million more income in 2024/25. This funding and the impact for Cambridgeshire are set out in more detail in the following chart 1 and represents the current assumptions from DLUHC, a 2% Adult Social Care Precept and a 2.99% Council Tax increase:

Chart 1 – Movement in funding envelope 2023/24 to 2024/25



- 2.4 In total, the Council is facing gross pressures, alongside the prioritisation being proposed and costs of borrowing of £74.2 million. That means that after accounting for the funding envelope noted above (£30.88 million as shown in Chart 1), there is a net financial gap to bridge of £43.3 million.
- 2.5 It is proposed that this financial gap is closed by £6.5 million of reserves to support the bottom-line position; £17.6 million of savings proposals identified to date and which are outlined at Section 9 and Appendix 1C of the Strategy, Resources and Procurement Committee 19 December 2023; plus, £17.2 million of other income through grants, fees and charges. That leaves a remaining gap of £2 million still to be addressed to achieve a balanced position. This is summarised in Chart 2:

Chart 2 – Overall Movement from 2023/24 to 2024/25 Budget



- 2.6 Against that context, the report includes a further forecast for 2025/26 to 2028/29. This brings into focus key change programmes that have begun or will begin in 2024 to help determine the future shape and funding of the Council to achieve a balanced budget in each of the years remaining of the current Strategic Framework.
- 2.7 The Council is continuing to invest capital spend in the County's infrastructure, such as schools, roads and social care facilities. We are proposing a capital programme for 2024-25 of £217.9 million, and a further £306 million across the following nine years and beyond, giving a total programme of £523.9 million. The capital programme will be funded from grants, capital receipts and borrowing, with £102.1 million of borrowing forecast for 2024-25, at a revenue cost in 2024-25 of £42 million. The total capital programme is summarised in the table 1 below.

Table 1: Capital Programme by Directorate 2024-29

Directorate	2024/25	2025/26	2026/27	2027/28	2028/29	Later years	Total 2024-2029
	£,000	£,000	£,000	£,000	£,000	£,000	£,000
CEF	95,885	83,227	34,128	12,725	4,836	26,487	230,801
AHC	14,481	20,205	10,670	15,005	15,005	30,188	75,366
P&S	100,176	46,027	19,534	19,561	19,584	17,361	204,382
F&R	5,547	2,288	1,116	1,116	1,008	4,320	11,075
S&P	1,810	7	-	-	-	-	1,817
Total	217,899	151,754	65,448	48,407	40,433	78,356	523,941

- 2.8 The cost of capital is expected to continue rising for the next two years with increases exceeding £2.5m in both 2025-26 and 2026-27. Although the capital programme has been prioritised to ensure that the expected cost of capital is within the prudential limit set by the capital strategy for 2024-25 and in the later years of the plan, it can be seen that in 2025-28 the budgeted cost is currently in excess of the prudential limit. Assuming costs of borrowing remain as currently projected, this will mean further prioritisation of investment may be necessary in future planning rounds.

3. Delivering the Council's Strategic Framework Ambitions and investing in its priorities

- 3.1 The Strategic Framework sets out the Council's vision to create a Greener, Fairer and more Caring Cambridgeshire. The following paragraphs note what progress Adults and Health has achieved in delivering these in the last nine months as well as plans and prioritisation of funding for the coming years.

Ambition 1: Net Zero

- 3.2 Adults and Health are supporting the delivery of this ambition through a number of priorities, including:
- The continued development of the Care Together programme, which is transforming the way that care is delivered, moving to paid carers delivering more care in local neighbourhoods. By supporting the development of more care micro-enterprises to increase local capacity, alongside recommissioning the model of home care we aim to reduce the

carbon footprint of Council commissioned home care provision through reduced travel.

- We are embedding net zero in commissioning and retendering approaches, supporting a reduction in our Council commissioned adult social care and Public Health carbon footprint.
- Exploring opportunities to improve and maximise digitalisation and the use of technology, whilst ensuring equity of access for all, to ensure that individuals and carers have the information and advice they need to access the support they need at a time that suits them.

Ambition 2: Travel across the county is safer and more environmentally sustainable

- 3.3 Adults and Health promotes active travel through its commissioning and working with partners within the Council and externally.

Ambition 3: Health inequalities are reduced

- 3.4 The Council will spend £36.8million on Public Health as well as other investment funded through Adult Social Care budgets in 2023/24.
- 3.5 In 2023/24 these funds have ensured that Public Health commissioned services have addressed the needs of the most vulnerable and shaped services to increase the acceptability and accessibility.
- The majority of clients accessing Drug and Alcohol Treatment services provided by 'Change Grow Live' experience health inequalities. The Service address their treatment needs but also the wider complex socio-economic factors that affect their treatment outcomes and ongoing needs. The service has most recently achieved a successful completion rate of 21.11% of those referred for treatment, marginally higher than the national completion rate of 20.32%.
 - The Behaviour Change services are shaped to increase uptake of those most at risk. Our health trainer offer has achieved its target of 30% of adults referred to the service from deprived areas.
 - Weight Management Services have had considerable success with the number of people accessing the services greatly outstripping the target and furthermore they have good outcomes with 45% of service users achieving the desired weight loss against a target of 30%.
 - NHS Health Checks is an important intervention and identifies those at risk of cardiovascular disease amongst 40–74-year-olds with no previous diagnosed condition. The numbers undertaken fell dramatically during the COVID-19 pandemic but are recovering well in 2023/24 and expected to exceed the pre-pandemic figures.
 - The Public Health Grant also funds services for children. The Healthy Child Programme for example supports family's where there is high

level of need. There are different initiatives to support breastfeeding which has seen an increase in the number of children breastfeeding.

- Public Health also contributes to the identification of health inequalities and providing the evidence for interventions. Various needs assessment and Joint Strategic Needs Assessments have been undertaken. The Learning Disability Needs Assessment for example clearly identifies the Health Inequalities experienced by those with learning disabilities.

3.6 Strategically we are working at system level to address health inequalities especially across the areas of mental health, obesity, children, poverty (housing and employment) along all the wider determinants of health.

3.7 Public health has invested in several adult services, contributing £447k in 2023/24 towards services which have addressed health inequalities, including:

- The Good Life Service which provides a range of support and activities to decrease social isolation and loneliness, improve mental well-being and self-management of mental health, including information and signposting, good mood cafes, peer support and online self-help and counselling.
- The Community Navigator service reaches out to people at risk of poor health and wellbeing, to support them and overcome barriers to access activities to support them to remain independent, safe and well. 99% of those accessing the service feel more independent and able to access support and information when they need it and 91% feel more connected to the community of their choice.

3.8 260 out of the 283 care settings across Cambridgeshire, graded Good or Outstanding at their most recent CQC inspection.

3.9 Ten settings that were in intervention due to a Requires Improvement or Inadequate inspections outcome have been reinspected throughout the year, all with an outcome of Good or better.

3.10 Over the last 12 months, as of November 2023, we have issued 75,770 pieces of community equipment which have helped to support people's independence in their homes.

3.11 The Quality-of-Life survey shows that 40% of residents struggled with physical health problems. Going forward into 2024/25 we recognise that there is a growing demand for services due to increasing numbers of people accessing services, alongside people's care needs becoming more complex. The need to balance health inequalities remains a key ambition for the Council. As such these proposals would see prioritisation of funding for:

- £38.3 million to enable Adult Social Care to meet inflation, demographic and increasing pressures to ensure they can continue to provide quality services to support Cambridgeshire people.

- 3.12 As we go forward through into 2025/26 and the latter part of this decade, we need to be mindful of the continued challenges we face with an ageing population considering how we strengthen community capacity and resilience, as well as improve our care and support offer. As a result, we will be working with our partners across the public, independent and voluntary sector to change the way we work across the whole care and health landscape of the county, such as bringing care closer to communities, exploring digital solutions, increasing reablement and developing accommodation-based options.

Ambition 4 – People enjoy healthy, safe and independent lives through timely support that is most suited to their needs

- 3.13 Key investments made at last year's budget have meant that in 2023/24 the Council has:
- Launched individual service funds in East Cambridgeshire, enabling more people to have greater choice and control of how their care and support is provided.
 - Begun to deliver a Self-Directed Support Programme, which is designed with people who use it and aimed at putting people in control of their lives and how they are supported.
 - Invested £19.7m in the care market to support providers to meet the costs of inflation and staff pay increases (NLW and RLW).
 - Invested an additional £8.9m of Market Sustainability and Improvement Funding in the care market to increase fee rates, as well as supporting the expansion of the adult's workforce programme and addressing waiting times for assessments and reviews.
- 3.14 The Council will continue to invest in supporting adults with learning disabilities, physical disabilities, mental health issues, along with older people to enjoy healthy, safe and independent lives. In 2024/25 this will include:
- £35 million to fund inflationary and demand pressures; of which,
 - £3.2 million to reflect increases in demand seen for older people's services in 2023/24, over and above the current budget.
- 3.15 In addition, the Council has committed capital investment in the development of Independent Living Support (ILS) for older adults, including those with nursing needs, and for people with learning disabilities and autism, designed to offer a wide range of supported needs to people to retain their independence. The capital programme includes £55 million of programmed works for adults' accommodation-based services during 2024-29.
- 3.16 Looking beyond 2024/25 the Council will focus on managing demand and increasing independence through the following priorities:
- Further developing the prevention agenda across the breadth of adult social care, to support people's independence and enable them to

have greater choice and control to live in their own homes for longer. This includes further expansion of the Care Together programme scope to offer a prevention and early intervention model for all ages which is delivered locally.

- Exploration of opportunities to enhance the Council's digital offer, to promote more self-service.
- Learning disabilities and mental health – supporting people to live independently in their communities, in line with the co-produced vision, including:
 - Strengthening our reablement offer for people with learning disabilities, supporting people with short-term goal-oriented support to maximise independence following a period of illness or hospital stay.
 - Exploring development of a local enablement offer, supporting young adults with learning disabilities to develop the skills to live independently.
 - Increasing the local mental health and learning disabilities accommodation offer, to ensure that we are able to provide greater choice and control to meet the needs of local people.
 - Decoupling of the LDP (Learning Disability Partnership) pooled budget arrangement with the ICB.
- Hospital discharge pathways – supporting effective 'home first' principles and maximising independence.
- Reviewing our in-house opportunities with a focus on identifying further growth and diversification, as well as considering other efficiencies and improving the effectiveness of our in-house services.

3.17 Public Health commissioned services all focus upon preventing poor health or enabling people to manage their health issues.

- Tobacco Control Services include preventing people smoking but also treating those who smoke and minimising their risks of poor health. In 2023/24 we have commissioned bespoke services in Fenland as part of the Closer to Communities Programme. There is a high smoking rate in the area, and we have developed specific interventions to address these. In 2024/25 we will receive additional funding to address smoking (circa £900k per annum for five years) funding that will need to be focused upon addressing smokers in population groups where smoking rates are higher and people are not accessing services, for example the homeless and people with learning disabilities. Some of the funding will also be invested in regulatory services including Trading Standards which will be important for the prevention of smoking and will address illegal sales of tobacco and vapes.
- Public Health commissioned Sexual and Reproductive Health Services play an important role in both preventing and treating poor sexual and reproductive health. They enable the prompt treatment of infections which prevents the spread to others. The services also support people

living with HIV to live their lives independently and to have the same life expectancy as others.

- Public Health has also invested in the prevention of falls amongst older people at risk and helps to keep them independent and well.

Ambition 5: Helping people out of poverty and income inequality.

3.18 As the Quality-of-Life Survey showed, there is significant concern around the current cost of living crisis, with 86% of residents being concerned and 47% of those having made a change because of this (limiting heating, food or medicines). Delivering on this ambition has never been more key. In 2023/24, the Council has:

- Spent £1.3 million on extending the Real Living Wage to increase earnings for more of the adult social care workforce, including personal assistants.
- Invested £19.2m of inflation in the adult social care provider market to enable providers to invest in staff wages and address other inflationary pressures.
- Supported adults through the Household Support Fund. This has included continued work with Age UK to offer a dedicated package of support for residents of pensionable age to ensure they can access income maximisation support as well as access to £110 financial awards (for those who are eligible) towards food and fuel costs.

3.19 In 2024/25, the Council is investing £18.8m in the adult social care external provider market to meet inflationary pressures associated with National Living Wage (NLW), Real Living Wage and CPI increases. This includes a specific investment of £500k to support providers to continue to pay their staff the Real Living Wage, in line with the increase to £12 per hour for 2024/25. We have worked closely with all providers to ensure they are paying the RLW. Currently 87% of providers pay their staff the RLW and we will continue to work with those remaining providers, several of whom are out of county, and we have limited influence over due to our proportionality as a commissioner. As we recommission services, we will continue to build in the requirement for providers to pay their staff the RLW as part of the specification.

Ambition 6: Places and communities prosper because they have a resilient and inclusive economy, access to good quality public services and social justice is prioritised.

3.20 We have launched a number of pilot programmes across the County as part of our Care Together programme to assess how we can work closer with our communities. This has resulted in:

- The continued roll out of the Care Together programme, introducing an approach to commissioning care and support in the community, with dedicated commissioners established in each district across Cambridgeshire. The programme is supporting the creation and growth of voluntary, community and social enterprises to support people to remain living independently for longer in their communities. The programme is also reshaping the way we deliver home care to become more personalised, focused on individual outcomes and being locally delivered, introducing new and different providers into the market with a number of local care microenterprises already established and delivering.

3.21 In 2023/24, we have also:

- Supported 87% of residential and domiciliary care providers to pay their staff the Real Living Wage.
- We have focused on increasing fee rates to improve local market sustainability. As a result of this investment, fee rates have increased on average by 10.4% locally during 2024/25.
- A workforce development programme has been established to address the challenges of recruitment and retention of the local workforce. This has led to the recent launch of the CARE Academy which will provide a training and skills portal for external social care staff.
- We have committed to delivering more for the community through embedding social value in commissioning approaches and we have embedded Themes, Outcomes and Measures (TOMs) within tenders to measure and monitor the delivery of social value.

3.22 In 2024/25 the budget proposes to continue to invest and invest further in:

- Care Together, will continue to be extended across more communities within the county, offering greater choice and control to more people; working alongside providers to grow and increase their services within localities.
- Specific investment to continue to support providers to meet their costs of delivery, in particular paying their staff increases to the RLW. We will continue to include the RLW as a contractual term and condition within all newly commissioned services.
- We continue to build on embedding social value into commissioning, a key feature in our contract specifications, ensuring that we maximise opportunities for a social value return on investment.

- 3.23 Public Health works with its commissioned services to ensure that their staff have “fair” wages and that social value is embedded into any commissioning.
- 3.24 Public Health is working with the Integrated Care Board, the Department of Work and Pensions and other organisations to support people with a health condition or disability, back into or to stay in, work. This includes work with the Combined Authority to address skills’ barriers and to work with employers to improve the work environment.

Ambition 7: Children and Young People have the opportunity to thrive

- 3.25 The largest proportion of the Public Health Grant is spent on children (34%) and includes commissioning of the Healthy Child Programme, Healthy Schools Programme and some mental health programmes.
- 3.26 During 2024/25 Public Health will be re-commissioning the higher value services that is Sexual and Reproductive Health Services, Behaviour Change Services, Drug and Alcohol Services and the Healthy Child Programme which together account for around 85% (circa £27m) of the Public Health Grant. These re-commissions will enable us to ensure that services reflect the seven ambitions, other priority areas, offer value for money and achieve the desired outcomes.

4. Adults & Health Committee Revenue and Capital proposals

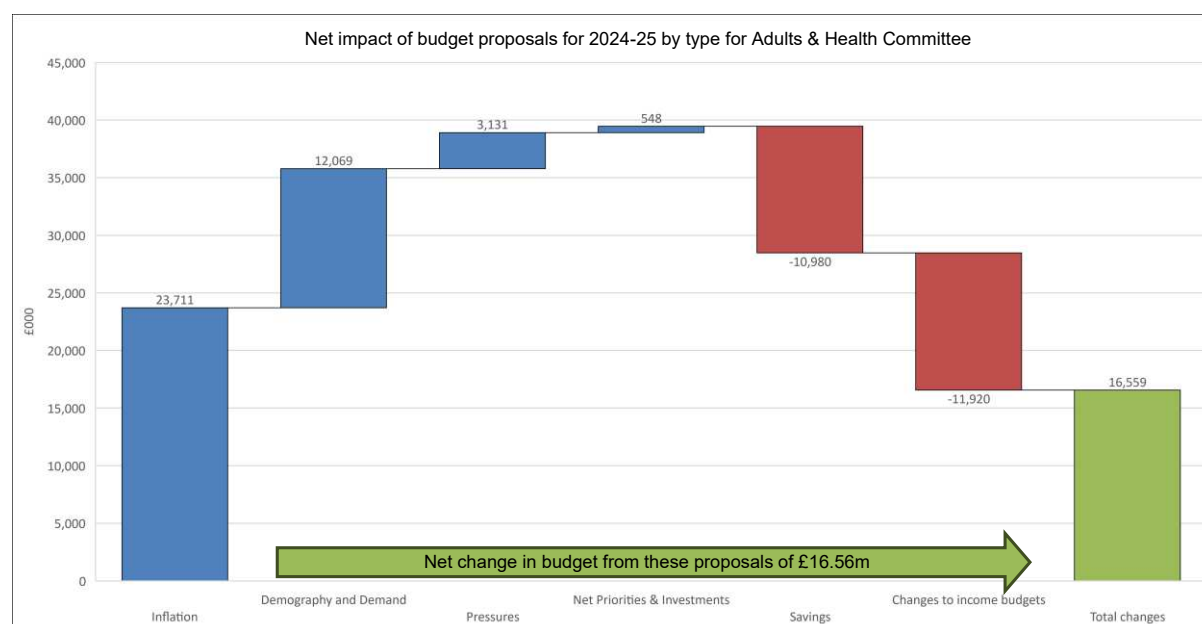
- 4.1 Overall, for 2024/25 there is a gross forecast pressure for Adults, Health and Commissioning (AHC) of £38.9 million. The main reasons for the pressure relate to an increase in demographic demand and the cost of care and support, for all people who draw on services, which has already seen an increase in numbers of people and the cost of meeting care needs (£12.1 million), alongside pay inflation, including provider uplifts, and general inflation across Adult Services.
- 4.2 Overall, there is a gross pressure forecast for Public Health of £563k. The main reasons for the pressure relate to pay inflation, including provider inflation.

Table 2: Adults, Health and Commissioning and Public Health Directorate draft proposed Medium Term Financial Plan 2024-29

	2024-25 Gross to Net		Net Budget				
	Spend	Income	2024-25	2025-26	2026-27	2027-28	2028-29
Adults, Health & Commissioning							
Executive Director	18,678	-52,984	-34,306	-34,876	-35,419	-35,255	-35,086
Learning Disability Partnership and Prevention	156,840	-40,389	116,451	119,345	125,219	133,326	142,376
Care & Assessment	139,600	-34,594	105,006	114,262	124,688	135,931	147,912
Commissioning	58,462	-15,065	43,397	45,848	48,548	51,608	54,764
Total Adults, Health & Commissioning	373,580	-143,032	230,548	244,579	263,035	285,609	309,966
Public Health	Spend	Income	2024-25	2025-26	2026-27	2027-28	2028-29
Children's Public Health	15,028	-4,150	10,878	10,878	10,878	10,878	10,878
Other Public Health	21,740	-32,618	-10,878	16,929	16,929	16,929	16,929
Total Public Health	36,768	-36,768	0	27,807	27,807	27,807	27,807

- 4.3 A more detailed breakdown of the table above can be found in Table 1s for Adults, Health and Commissioning and Public Health within Appendix 1.
- 4.4 This section provides an overview of the pressures, risks, savings and income proposals within the remit of the Committee. The detailed business cases supporting the principal items in this section are annexed at Appendix 3. The figures shown in the extracted narratives below are the impacts in the first year of the business plan (2024-25), please refer to the detailed appendices for the current forecast impact across the full period.

Chart 3: Net impact of budget proposals for 2024/25 by type for Adults & Health



- 4.5 The comprehensive record of the information summarised in the table above, and its allocation to council services, can be found in Table 3 within Appendix 1 of this report.

Demography and Demand

- 4.6 Demand continues to rise across most services. This has been particularly notable across older people's bed-based care where we have seen demand increase to pre-pandemic levels. As well, as increasing numbers of people accessing services, we are also seeing the levels of needs increasing in many instances which is leading to more complex and costly packages of care being sourced.
- 4.7 There is no demand growth included for Public Health services which are universally available although demand for many services is exceeding supply particularly for services related to weight management.

Budget Table 3 Reference	Title	2024- 25	2025- 29	Description
B/R.3.001	Additional funding for Older People demand	4,562	21,084	Additional funding to ensure we meet the demand for care amongst older people providing care at home as well as residential and nursing placements. In recent years, the impact of Covid-19 resulted in a shift away from bed-based care. However, we have seen demand rise again in 2023-24 at the sort of levels we were seeing pre-pandemic. This activity is expected to continue and current patterns of activity and expenditure is modelled forward, with account being taken of increasing complexity of cases coming through the service. B/R.4.002 reflects the pressure we will expect to see in 2024-25 from increased placement numbers in 2023-24 which were not budgeted for.
B/R.3.002	Funding for additional Physical Disabilities demand	839	3,946	Additional funding to ensure we meet the increased demand for care for people with physical disabilities. The current pattern of activity and expenditure is modelled forward using population forecasts and activity data. Account is then taken of increasing complexity as a result of increasing need, in particular, more hours of domiciliary care are being provided per person. This work has supported the case for additional funding of £839k in 2024-25 to ensure we can continue to provide the care for people who need it.
B/R.3.003	Additional funding for Autism and Adult Support demand	1,058	2,205	Additional funding to ensure we are able to support the increasing number of people with autism. Demand funding reflects both expected increases in numbers of people being supported and increasing needs of the existing cohort.
B/R.3.004a	Additional funding for Learning Disability demand attributable to CCC	3,297	16,731	Under the current Learning Disability Partnership (LDP) pooled budget arrangements, 76.78% of LDP costs are borne by the Council with the balance funded by Cambridgeshire & Peterborough ICB (C&P ICB). This line reflects additional CCC funding required to ensure we meet the rising level of needs amongst people with learning disabilities.
B/R.3.004b	Additional funding for Learning Disability demand attributable to C&P ICB	998	0	This line reflects additional ICB funding required to ensure we meet the rising level of needs amongst people with learning disabilities.

Budget Table 3 Reference	Title	2024-25	2025-29	Description
B/R.3.005	Funding for Older People Mental Health Demand	523	2,092	Additional funding to ensure we meet the increased demand for care amongst older people with mental health needs, providing care at home as well as residential and nursing placements. The current pattern of activity and expenditure is modelled forward using population forecasts to estimate the additional budget requirement for each age group and type of care. This work has supported the case for additional funding of £523k in 2024-25 to ensure we can continue to provide the care for people who need it.
B/R.3.006	Funding for Adult Mental Health Demand	758	3,032	Additional funding to ensure we meet the increased demand for care amongst working age adults with mental health needs. The current pattern of activity and expenditure is modelled forward using population forecasts and data relating to the prevalence of mental health needs. This data is showing particular growth in supported living placements. This work has supported the case for additional funding of £758k in 2024-25 to ensure we can continue to provide the care for people who need it.
B/R.3.007	Funding for additional demand for Community Equipment	34	140	Over the last five years, our strategy has seen a positive movement in supporting people to live at home for longer, maximising their independence through the use of community equipment as a key element of our prevention and early intervention approach. Additional funding is required to maintain the proportion of people supported to live independently, through the provision of community equipment and home adaptations. This requirement is important in the context of a rising population and the increasing complexity of the needs of the people in question.
		12,069	49,230	Demography and Demand Total

Inflation

- 4.8 Inflation continues to be a considerable pressure for AHC, with £23.1m of investment going into the 2024/25 budget. This will support inflation across staff pay inflation, as well as inflation on external commissioned provider contracts; supporting providers to meet the National Living Wage (NLW), and additional investment to support providers to pay the RLW increases for staff, as well as addressing some of the additional inflationary pressures that they may be facing.

- 4.9 Inflation for Public Health is largely related to Agenda for Change staff pay uplifts which the Council will need to fund in provider services, as well as staffing inflation for Council employees and totals £563k.

Budget Table 3 Reference	Title	2024-25	2025-29	Description
B/R.2.001	Adult social care providers inflation	1,950	11,720	Forecast pressure from general inflation relating to care providers.
B/R.2.002	Impact of increases in the National Living Wage (NLW) on Adult Social Care Contracts	16,351	24,310	The National Living Wage will rise to £11.44 in 2024-25. This will have an impact on the cost of purchasing care from external providers. In addition, the Council has committed to paying the Real Living Wage (RLW), and an additional investment of £500k is being made to allow providers to continue to pay RLW (B/R.5.008). This reflects the fact that the RLW is growing at a higher % rate than NLW for 2024/25. NLW pressures in later years follow OBR estimates and assume a 3% increase each year.
B/R.2.003	AHC inflation - miscellaneous other budgets	435	849	Forecast pressure for inflation relating to miscellaneous other budgets
B/R.2.004	CCC Staff pay inflation on AHC budgets	2,542	8,327	Assumed 5% increase for 2024-25 and 3.5% thereafter
B/R.2.005	Provider inflation on Learning Disability services attributable to Cambridgeshire and Peterborough Integrated Care Board (C&P ICB)	1,771	0	Under the current Learning Disability Partnership (LDP) pooled budget arrangements, 76.78% of LDP costs are borne by the Council with the balance funded by C&P ICB. The Council's share of provider inflation on services to people with learning disabilities is included in B/R.2.001 and 2,002 above.
B/R.2.006	Staffing and other inflation on Learning Disability services attributable to C&P ICB	99	0	C&P ICB contribution to staffing inflation on services for people with learning disabilities. The Council's share of staffing and other inflation on services to people with learning disabilities is included in B/R.2.003 and 2,004 above.
F/R.2.001	CCC Staff pay inflation on PH budgets	175	543	Assumed 5% increase for 2024-25 and 3.5% thereafter.
F/R.2.002	Provider inflation related to 2023/24 Agenda for Change uplifts	304	0	Inflation to be paid to providers of Public Health services for 2023-24 Agenda for Change uplifts on staff pay. These costs were funded through the Integrated Care Board on a one-off basis in 2023-24.
F/R.2.003	Provider inflation not related to Agenda for Change uplifts	82	0	Estimated inflation to be paid to providers not related to Agenda for Change uplifts on staff pay.
F/R.2.004	Public Health - miscellaneous other inflation	2	8	Forecast pressure for inflation relating to miscellaneous other budgets
		23,711	45,757	Inflation Total

Prioritisation & investments

- 4.10 The below table outlines the proposed investment in AHC. This includes £3.2m of one-off investment to support delivery of the AHC savings over the next three years, which is being funded from a combination of Just Transition Fund and Adults reserves. This investment will support the necessary additional capacity and resource required to ensure we are able to deliver on a significant programme of transformation.
- 4.11 £500k of additional recurrent funding has been committed for 2024/25 onwards to support the ongoing commitment to the Real Living Wage. This will support providers to continue to pay their staff the Real Living Wage in line with the increase to £12 per hour for 2024/25.

Budget Table 3 Reference	Title	2024-25	2025-29	Description
B/R.5.001	Adults Retention Payments	-62	-39	An investment was made into retention payments in previous years; this line reflects the planned reduction of the new budget required for that over time as other costs come down.
B/R.5.002	Reviews of Learning Disability packages	-280	0	Repayment of one-off investment for reviews of the care and support provided to people with learning disabilities to ensure the right level of care is provided (links to B/R.6.005)
B/R.5.003a	CCC Investment in commissioners to support development of supported living offer	108	0	Investment in 2 full-time equivalent (FTE) commissioners to support development of supported living offer to manage future demand - links to saving B/R.6.014
B/R.5.003b	C&P ICB share of costs of commissioners to support development of supported living offer	32	0	Under the current Learning Disability Partnership (LDP) pooled budget arrangements, 76.78% of net LDP costs are borne by the Council with the balance funded by C&P ICB. A share of the costs of investments and any savings delivered within the pooled budget will also be in part attributable to the ICB. Links to saving B/R.6.014
B/R.5.004a	Commissioning manager to manage Learning Disability voids	53	0	Investment in commissioning manager to deliver savings from voids in properties where people with learning disabilities have tenancies - links to saving B/R.6.007
B/R.5.004b	C&P ICB share of costs of commissioning manager for LD voids	16	0	Under the current LDP pooled budget arrangements, 76.78% of LDP costs are borne by the Council with the balance funded by C&P ICB.
B/R.5.005a	Investment in staffing to deliver cost avoidance savings	150	-150	Investment from reserves to support Residential / nursing project - investment in 1 commissioner / Broker, and 2 social worker posts into Duty team to deliver cost avoidance by increasing independence for mental health placements. - links to saving B/R.6.009

Budget Table 3 Reference	Title	2024- 25	2025- 29	Description
B/R.5.005b	Investment into review of In-house provision and opportunities	100	-100	One off investment funded from reserves to support scoping of opportunities associated with delivery of in-house services savings - links to savings B/R.6.030 - B/R.6.032
B/R.5.005c	Investment into review of Discharge pathways	500	-500	One off investment funded from reserves to undertake a diagnostic review of local hospital discharge pathways to ensure we are embedding the home first approach and maximising opportunities to support people to optimise their recovery and independence post discharge. Links to savings B/R.6.027 - B/R.6.029.
B/R.5.005d	Investment into review of prevention agenda	363	-363	One off investment funded from reserves to support expansion of Care Together programme to deliver an all-age locality prevention strategy to manage demand. This includes further developing the prevention agenda across the breadth of adult social care, to support people's independence and preventing people needing to access adults' services. It also includes exploration of opportunities to enhance the council's digital offer, to promote more self-service. Links to saving B/R.6.024.
B/R.5.005e	Investment into review of Learning Disability spend	498	-498	One off investment funded from reserves to ensure capacity and resource to support delivery of change in services for people with learning disabilities. Links to savings B/R.6.016 - B/R.6.019.
B/R.5.005f	Investment in expansion of LD Shared Lives outreach	104	-104	One off investment funded from reserves in additional resource to support the expansion of the outreach service for people with learning disabilities. Links to saving B/R.6.020a.
B/R.5.005g	Investment required for decoupling of Learning Disability pooled budget	1,115	-1,115	One off investment funded from reserves in CCC capacity and resource to support the work needed to decouple the Learning Disability Partnership pooled budget arrangement with C&P ICB. Links to saving B/R.6.038
B/R.5.005h	Funding from Adults reserves for invest to save schemes	-510	510	Investment from Adults reserves funding to contribute towards the cost of one-off investments to support delivery of adults' savings. Links to investments B/R.5.005a-g.
B/R.5.005i	Funding from Just Transition Fund for invest to save schemes	-2,320	2,320	Investment from Just Transition funding to contribute towards the cost of one-off investments to support delivery of adults' savings. Links to investments B/R.5.005a-g.
B/R.5.006	C&P ICB share of investment into review of learning Disability spend	150	-150	Under the current Learning Disability Partnership (LDP) pooled budget arrangements, 76.78% of LDP costs are borne by the Council with the balance funded by C&P ICB. Links to savings B/R.6.016-B/R.6.019
B/R.5.007	C&P ICB share of investment in LD Shared Lives outreach	31	-31	Under the current Learning Disability Partnership (LDP) pooled budget arrangements, 76.78% of LDP costs are borne by the Council with the balance funded by C&P ICB. Links to saving B/R.6.020a.

Budget Table 3 Reference	Title	2024-25	2025-29	Description
B/R.5.008	Investment to support continuing payment of the Real Living Wage	500	0	We are making specific investment to enable providers to pay their staff the Real Living Wage. This will enable providers to increase staff pay in line with the increase in Real Living Wage to £12 per hour for 2024/25.
		548	-220	Net Priorities & Investments Total

Pressures

- 4.12 £3.1m of pressures are proposed to be funded for 2024/25. This is predominantly due to the 2023/24 budget pressure we have seen due to increased demand for older people's bed-based care, which is now returning to pre-pandemic levels of demand.

Budget Table 3 Reference	Title	2024-25	2025-29	Description
B/R.4.001	Adult Social Care market pressures - workforce development	-64	-88	Ending of one-off funding to support workforce development in the Adult Social Care market. Total investment £240k over 2 years.
B/R.4.002	Older People pressure from additional growth in 2023-24	3,195	0	Full year impact of unexpectedly high growth in Older People placement numbers in 2023-24
		3,131	-88	Pressures Total

Savings

- 4.13 £10.8m of savings opportunities have been identified for AHC that focus on managing demand for services with a focus on prevention and maximising independence.
- 4.14 £174k of savings opportunities have identified for Public Health across Health in all Policies, alongside some minor underspends and recommissioning savings.

Budget Table 3 Reference	Title	2024-25	2025-29	Description
B/R.6.001	Independent Living Service - Huntingdonshire	0	-114	We are exploring alternative models of delivery for residential and nursing care provision, including a tenancy-based model that offers more choice and control for people at a lower cost to the council.
B/R.6.002	Expansion of Direct Payments	-32	-60	Savings generated by investment in 2022-23 to increase the uptake of Direct Payments To secure delivery of this saving the Self-Directed Support Programme has

Budget Table 3 Reference	Title	2024- 25	2025- 29	Description
				been reviewed to re-focus on delivery over the course of 2024/25 and 2025/26 with clear timescales and responsibilities set. This work will cover a range of activities including market shaping and development activities, improvement of processes and systems, practice improvements, a focus on the use of direct payments as part of the transition process from childrens' to adults' services and further development of Individual Service Funds.
B/R.6.003	Decommissioning of block contracts for car rounds providing homecare	-2,473	-100	We currently have provision to deliver homecare in the county using cars, enabling people to return from hospital, and providing care for people in hard-to-reach places. However, with demand being met by mainstream homecare providers, the 26 homecare cars have a very low level of use and are no longer cost effective. Decommissioning of these contracts will be phased from January onwards. Due to good capacity in the market to meet demand, alongside local models of delivery being developed through our Care Together programme, the decommissioning should have no negative impacts for people requiring home care.
B/R.6.004	Mental Health section 75 vacancy factor	100	0	Savings from vacant posts due to staff turnover in our section 75 agreement with health partners were taken on a one-off basis in 2023-24. This aligned with the vacancy factors we carry across our own staffing teams recognising that there will always be some posts vacant as people leave and new people are recruited. But in the longer term we are looking to full recruitment for this team.
B/R.6.005a	Learning Disability mid-cost range placement review	-203	0	Review of the care and support provided to people with learning disabilities packages to ensure the right level and type of support is provided to allow people to be as independent and connected to their own communities as possible - links to B/R.5.002
B/R.6.005b	ICB share of Learning Disability mid-cost placement reviews	-61	0	Under the current LDP pooled budget arrangements, 76.78% of LDP costs are borne by the Council with the balance funded by C&P ICB. A share of the costs of investments and any savings delivered within the pooled budget will also be in part attributable to the ICB - links to B/R.5.002
B/R.6.006	Mental Health supported accommodation	-137	-267	Savings on retendering and restructuring of mental health supported accommodation provision.

Budget Table 3 Reference	Title	2024- 25	2025- 29	Description
B/R.6.007a	Learning Disability Voids Saving	-230	0	Savings from ensuring best use of pre-paid contracted capacity when finding accommodation for people with learning disabilities, reducing void rates and the use of spot placements. Saving attributable to the Learning Disability Pooled budget arrangements - links to investment B/R.5.004.
B/R.6.007b	ICB share of LD voids saving	-70	0	Under the current LDP pooled budget arrangements, 76.78% of LDP costs are borne by the Council with the balance funded by C&P ICB. - links to investment B/R.5.004
B/R.6.008a	Reduction in 1 day of care	-398	0	Adjustment in number of days budgeted for in 2023-24 and creation of sinking fund to accommodate future leap year increases and decreases in costs
B/R.6.008b	ICB share of reduction of 1 day of care (day 366)	-58	0	ICB share of the LD element of the saving in care costs as a result of there being one less day in 2024-25 than in 2023-24. And creation of sinking fund to accommodate future leap year increases and decreases in costs.
B/R.6.009	Mental Health residential and community	-357	-619	A three-year investment to deliver savings, focused on three key areas for improvements in the current commissioned provision of mental health social care services: Sharing resources with existing residential or nursing placements, for example adding one-to-one care in addition, where required, rather than isolated packages; Rolling out the Step Care model for early intervention to promote independence and help reduce escalation in needs - links to investment B/R.5.005
B/R.6.010	Block beds void management	-380	0	Making best use of block contract capacity when making placements, reducing the rate of voids and the number of spot placements being made.
B/R.6.011	Reablement surplus following restructure	-91	0	Surplus budget following restructure of teams
B/R.6.012	Historic saving from ending of Lifelines service	-70	0	Historic savings target now achievable
B/R.6.013a	Prevent, reduce and delay needs presenting - reablement	-480	-465	Our reablement service provides short term support for up to six weeks to help people regain their independence, for example after an illness or a stay in hospital, preventing the need to go into longer term care support. We aim to achieve greater capacity in the service to allow more reablement activity to be undertaken and support more people to continue living in their own homes for longer. This work will be further refined in year by the outcomes of the review of hospital discharge

Budget Table 3 Reference	Title	2024- 25	2025- 29	Description
				pathways to improve outcomes for people leaving hospital. See 6.027-29.
B/R.6.013b	ICB share of Prevent, reduce and delay needs presenting - reablement	-45	0	Under the current LDP pooled budget arrangements, 76.78% of LDP costs are borne by the Council with the balance funded by C&P ICB. A share of the costs of investments and any savings delivered within the pooled budget will also be in part attributable to the ICB.
B/R.6.014	Accommodation - Supported Living, core and cluster capacity	0	-460	Development of supported living offer to manage future demand. Ensuring local capacity to meet needs at sustainable costs, reducing the need for more costly out of area placements. - links to investment B/R.5.003.
B/R.6.015	Prevention Agenda - Digital Innovation	-300	0	Front door process and practice. Maximising opportunities for digitalisation, web based, self-serve and Artificial Intelligence (AI) tools to support self-management and manage demand and support efficiencies in the service. This will build on a range on non-digital access options, so people feel supported with a range of options and are not digitally excluded.
B/R.6.016a	Learning Disability Low-Cost placement review	-130	-130	Review of packages to ensure the right level of care is provided and people are supported to be as independent as possible in their own homes. Links to investment B/R.5.006
B/R.6.016b	ICB share of Learning Disability - low-cost placement review	-39	0	Under the current LDP pooled budget arrangements, 76.78% of LDP costs are borne by the Council with the balance funded by C&P ICB. A share of the costs of investments and any savings delivered within the pooled budget will also be in part attributable to the ICB. Links to investment B/R.5.006
B/R.6.017	Learning Disability Vehicle Fleet Reduction	-50	0	Vehicle reduction by centralising day services fleet
B/R.6.018a	Learning Disability Respite Utilisation	-190	-95	Increase respite utilisation rates by optimising scheduling and maximising use of the service
B/R.6.018b	ICB share of Learning Disability - respite utilisation	-57	0	Under the current LDP pooled budget arrangements, 76.78% of LDP costs are borne by the Council with the balance funded by C&P ICB. A share of the costs of investments and any savings delivered within the pooled budget will also be in part attributable to the ICB.

Budget Table 3 Reference	Title	2024- 25	2025- 29	Description
B/R.6.019a	Learning Disability Negotiation with providers	-449	0	Stronger contract management and relationships with providers to support more robust oversight of contract monitoring and performance. This will ensure that we maximise capacity and get the best value for money.
B/R.6.019b	ICB share of Learning Disability - negotiation with providers	-136	0	Under the current LDP pooled budget arrangements, 76.78% of LDP costs are borne by the Council with the balance funded by C&P ICB. A share of the costs of investments and any savings delivered within the pooled budget will also be in part attributable to the ICB.
B/R.6.020a	Learning Disability Cambridgeshire Outreach	-200	0	Expand outreach services, to support people more effectively in local areas, reducing the demand on other services. Links to investment B/R.5.007.
B/R.6.020b	ICB share of Learning Disability - Cambridgeshire Outreach	-60	0	Under the current LDP pooled budget arrangements, 76.78% of LDP costs are borne by the Council with the balance funded by C&P ICB. A share of the costs of investments and any savings delivered within the pooled budget will also be in part attributable to the ICB.
B/R.6.021a	Learning Disability Enablement	-300	0	Development of an enablement offer for people with learning disabilities to support the skills and technology needed for people to live their lives as independently as possible.
B/R.6.021b	ICB share of Learning Disability - Enablement	-91	0	Under the current LDP pooled budget arrangements, 76.78% of LDP costs are borne by the Council with the balance funded by C&P ICB. A share of the any savings delivered within the pooled budget will also be in part attributable to the ICB.
B/R.6.024	Prevention Agenda - All Age Locality Strategy	-177	0	Improve commissioning opportunities, aligned to locality model to maximise delivery of home first model, and expansion of an all-age prevention and early intervention offer on a locality basis to manage future demand into services.
B/R.6.025	Mental Health Recommissioning Supported Accommodation	-75	-75	Savings on retendering and restructuring of Mental Health supported accommodation provision.
B/R.6.026	Independent Living Service - East Cambridgeshire	0	-119	We are exploring alternative models of delivery for residential and nursing care provision, including a tenancy-based model that offers more choice and control for people at a lower cost to the council.

Budget Table 3 Reference	Title	2024- 25	2025- 29	Description
B/R.6.027	Review discharge pathways - Pathway 3, Reduce bed-based care	-400	0	Opportunity to undertake a diagnostic of our hospital discharge pathways to ensure we are maximising support available, with a home first approach, to maximise independence with a focus on reducing reliance on referrals into long term bed-based care.
B/R.6.028	Review discharge pathways - Pathway 3, Reduce homecare	-400	0	Opportunity to undertake a diagnostic of our hospital discharge pathways to ensure we are maximising support available, in the correct setting, with a focus on reducing reliance on referrals into long term homecare.
B/R.6.029	Review discharge pathways - Pathway 2, Reduce bed-based care	-400	0	Opportunity to undertake a diagnostic of current arrangements for hospital discharge pathways to ensure we are maximising support available, with a home first approach, to maximise independence with a focus on reducing reliance on referrals into interim bed-based care.
B/R.6.030	Review in house services - Cost avoidance / efficiencies and new opportunities	-300	0	To include exploration of efficiencies in operations and opportunities for growth in in-house services, with a focus on maximising independence to deliver cost-avoidance and demand management savings and diversification of new opportunities.
B/R.6.031	Review in house services - supported living	-400	0	To include exploration of efficiencies in operations and opportunities for growth in in-house services, with a focus on supported living. Aligned with saving B/R.6.030.
B/R.6.032	Review in house services - Respite / residential	-300	0	To include exploration of efficiencies in operations and opportunities for growth in in-house services, with a focus on respite and residential services. Aligned with saving B/R.6.030.
B/R.6.033	Extra Care	-350	0	Savings due to recurring budget underspend. Budget has been reviewed in line with current forecast demand for services.
B/R.6.034	Advocacy contract recommissioning	-128	0	Savings on retendering and restructuring of advocacy contract.
B/R.6.035	Care Home Trusted Assessor service	-69	0	Savings on decommissioning of current service provision and restructuring to an alternative delivery model which has been brought in-house.
B/R.6.036	Adults, Health and Commissioning vacancy factor	-560	0	Like other areas of the Council there is a level of underspending in staffing budgets across Adults, Health and Commissioning due to a variety of factors, such as a time lag between resignations and

Budget Table 3 Reference	Title	2024-25	2025-29	Description
				appointments, as well as recruitment challenges. To reflect this, we have offered an additional vacancy saving for 2024/25 onwards.
B/R.6.037a	Day Opportunities	-200	0	Review of day opportunities for people with learning disabilities to ensure services represent an up to date offer that supports people to achieve their individual outcomes drawing on strengths and community assets as well as paid services where needed. The work will be co-produced and developed during 2024-25, with proposals arising for delivery in 25/26.
B/R.6.037b	ICB share of Day Opportunities	-60	0	Under the current LDP pooled budget arrangements, 76.78% of LDP costs are borne by the Council with the balance funded by C&P ICB. A share of the any savings delivered within the pooled budget will also be in part attributable to the ICB.
B/R.6.038	Savings from ending of Learning Disability pooled budget arrangements	0	-6,169	Ensuring appropriate health contributions to packages of care jointly funded by the council and the ICB following the ending of the current Learning Disability Partnership pooled budget arrangement with C&P ICB. Links to B/R.7.005a.
F/R.6.001	Health in all Policies	-125	0	The additional budget requirement added in the previous business plan is not needed to deliver on Health in All Policies as it is being addressed through existing capacity.
F/R.6.002	Public Health savings	-27	0	Public Health business planning for 2024-25 pulls together outstanding underspends and options for savings across several service areas. These will have minimal disruption as they are largely from services which are already underspending as a result of savings already made.
F/R.6.003	Savings from recommissioning of contracts	-22	-451	Savings from recommissioning of contracts.
		-10,980	-9,124	Savings Total

Income

- 4.15 £11.509m of additional income has been identified for Adults, Health and Commissioning. This includes increases in ringfenced grants for 2024/25, including inflation to fees and charges.
- 4.16 £411k of additional income for Public Health has been identified for 2024/25, including £386k uplift in the Public Health Grant.

Budget Table 3 Reference	Title	2024- 25	2025- 29	Description
B/R.7.003	Fees and charges inflation	-292	-601	Increase in external charges to reflect inflationary increases
B/R.7.004	Client contributions inflation	-3,553	-4,268	Increase in anticipated contributions paid for care in line with the current charging policy and national regulations
B/R.7.005a	Learning Disability Partnership Pooled Budget - cost share	-1,469	0	In Cambridgeshire most spend on care for people with learning disabilities is currently paid for from the Learning Disability Partnership budget, to which both the council and NHS contribute. We have been seeking to re-establish the relative social care and health needs of the people supported by the Learning Disability Partnership to ensure that their care is funded by the correct organisation. Work on a sample of cases suggests a rebaselining will be in the council's favour. This line is based on the outcomes for that sample being representative, with some dampening in 2024-25. Beyond 2024-25 the shift in the Council's anticipated share of LDP costs is recognised as a saving (B/R.6.023) as the Council has served notice on the pooled budget arrangements. Links to B/R.6.038.
B/R.7.005b	Increased ICB contributions - share of net demand, inflation, investments and savings	-2,420	0	Contribution to Learning Disability demand, inflation, investments and savings attributable to C&P ICB in line with the current Learning Disability pooled budget arrangement.
B/R.7.006	Increased income from reducing Financial Assessments backlog	-931	-90	The financial assessments service currently has a significant number of backlog cases due to staff vacancies and increasing complexity of case management. We propose to invest in outsourcing a proportion of the case work to a third-party provider who can carry out the work on our behalf. In addition to reducing the uncertainty and stress for clients awaiting the assessment, it will positively address income to the council.
B/R.7.007	Increased Health income	0	-120	Increased Continuing Health Care capacity generating additional Health income
B/R.7.008	Income for Prisons end of life care	-45	0	Health income for end-of-life care
B/R.7.102	Uplift in Better Care Fund	-1,637	-1,287	The 2023-24 Better Care Fund uplift exceeded the budget set in the last Business Plan. In addition, an uplift for 2024-25 is anticipated. These annual uplifts enable us to utilise these funds to offset the demand pressures in Adult

				Social Care in line with the national conditions of the grant.
B/R.7.103	Adult Social Care Market Sustainability and Improvement Fund	-1,191	0	Increase in Adult Social Care Market Sustainability and Improvement Fund
B/R.7.105	Reduction in Social Care in Prisons grant	29	0	Reduction in Social Care in Prisons grant received in 2022-23 and impact on future year assumptions
B/R.7.107	Change in income reflecting end of Learning Disability pooled budget arrangements	0	33,353	Change in income reflecting end of Learning Disability pooled budget arrangements
F/R.7.200	Increased contribution from PCC	-25	-100	Inflation on shared posts costs with Peterborough City Council
F/R.7.201	Increase in Public Health grant	-386	0	Application of increase in the Public Health grant for 2024-25 to cover Agenda for Change uplifts and other provider inflationary pressures.
		-11,920	26,887	Changes to income budgets - Total

4.17 The total fees and charges budget within the remit for this Committee for 2024/25 is as follows:

Item	£000
Fees and Charges by directorate	
Adults, Health and Commissioning	92,343
Public Health	8,961

4.18 In accordance with the Council's scheme of financial management, Executive Directors are responsible for reviewing annually the levels of fees and charges, in consultation with the section 151 officer, and presenting a schedule of fees and charges to the relevant service committee. The planned fees and charges within the remit of this committee are included as Appendix 2.

- **Capital**

4.19 The below table provides an overview of the capital investment for Adults and Health.

Funding	Total funding £000	Previous Years £000	2024-25 £000	2025-26 £000	2026-27 £000	2027-28 £000	2028-29 £000	Later Years £000
Government Approved Funding								
Disabled Facilities Grant	45,630	-	5,070	5,070	5,070	5,070	5,070	20,280

Total – Government Approved Funding	45,630	-	5,070	5,070	5,070	5,070	5,070	20,280
Locally Generated Funding								
Prudential Borrowing	60,740	816	9,411	15,135	5,600	9,935	9,935	9,908
Total – Locally Generated Funding	60,740	816	9,411	15,135	5,600	9,935	9,935	9,908
TOTAL FUNDING	106,370	816	14,481	20,205	10,670	15,005	15,005	30,188

4.20 The capital programme for this committee comprises £14.5m of expenditure in 2024-25 and a further £60.9m up to 2029. Full details are provided in tables 4 and 5 of the appendix 1 to this report. This includes:

- £43.4m for Independent Living Services across Cambridgeshire and a further £12m for specialist accommodation services for people with complex or challenging needs.
- £2m for community equipment to allow people to sustain their independence; and a further £25.4m is for adaptations to the homes of people with disabilities and is largely channelled through Disabled Facility grants awarded by the District Councils in Cambridgeshire.
- Capital variation budget of -£8.3m
- Capitalisation of interest costs £0.9m

5. Significant Implications

Resource Implications

5.1 The proposals set out the response to the financial context and the need to review our service offer and model to maintain a sustainable budget. The full detail of the financial proposals and impact on budget will be described in the financial tables of the business plan. Proposals will seek to ensure that we make the most effective use of available resources and are delivering the best possible services with the money allocated.

5.2 Procurement/Contractual/Council Contract Procedure Rules Implications

There are no significant implications for the proposals set out in this report. Details for specific proposals will be set out in the business cases. All required procurement activity will be fully compliant with the Council's Contract Procedure Rules.

- 5.3 Statutory, Legal and Risk Implications
The proposals set out in this report respond to the statutory duty on the Local Authority to deliver a balanced budget. Cambridgeshire County Council will continue to meet the range of statutory duties for supporting our residents.
- 5.4 Equality and Diversity Implications
Each of the proposals will be developed alongside an Equality Impact Assessment, where required, to ensure we have discharged our duties in line with the Equality Act 2010, including the Public Sector Equality Duty, as well as met our commitment to implementing the Socio-economic Inequalities Duty.
- 5.5 Engagement and Communications Implications
Our Business Planning proposals are informed by the CCC public consultation and will be discussed with a wide range of partners throughout the process. The feedback from consultation will continue to inform the refinement of proposals. Where this leads to significant amendments to the recommendations a report would be provided to Strategy and Resources Committee.
- 5.6 Localism and Local Member Involvement
As the proposals develop, we will have detailed conversations with Members about the impact of the proposals on their localities. We are working with members on materials which will help them have conversations with Parish Councils, local residents, the voluntary sector and other groups about where they can make an impact and support us to mitigate the impact of budget reductions.
- 5.7 Public Health Implications
Any public health implications will vary depending on the detail of each of the proposals. Any positive or negative impacts will have been considered for each proposal as part of its development. The Quality-of-Life Survey provides some useful information on physical and mental health outcomes that could usefully inform ongoing business planning.
- 5.8 Climate Change and Environment Implications on Priority Areas
The climate and environment implications will vary depending on the detail of each of the proposals. Any positive or negative impacts will have been considered for each proposal as part of its development.

Have the resource implications been cleared by Finance? Yes
Name of Financial Officer: Stephen Howarth

Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the Head of Procurement and Commercial? Yes
Name of Officer: Clare Ellis

Has the impact on statutory, legal and risk implications been cleared by the Council's Monitoring Officer or Pathfinder Legal? Yes
Name of Legal Officer: Emma Duncan

Have the equality and diversity implications been cleared by your EqIA Super User? Yes

Name of Officer: Faye McCarthy

Have any engagement and communication implications been cleared by Communications? Yes

Name of Officer: Christine Birchall

Have any localism and Local Member involvement issues been cleared by your Service Contact? Yes

Name of Officer: Joe Lacey-Holland

Have any Public Health implications been cleared by Public Health? Yes

Name of Officer: Jyoti Atri

If a Key decision, have any Climate Change and Environment implications been cleared by the Climate Change Officer? Yes

Name of Officer: Emily Bolton

6. Source Documents

6.1 Appendix 1a – Adults, Health & Commissioning Indicative budget tables

Appendix 1b – Public Health Indicative budget tables

Appendix 2 – Adults and Health proposed Fees and charges

Appendix 3 – Adults & Health Draft Business Cases

Appendix 4 – Glossary of terms