

# Business Case

## A/R.7.108 Client Contributions - Short Term Overnight Support

### Project Overview

Project Title	A/R.7.108 Client Contributions - Short Term Overnight Support		
Saving	£25K	Business Planning Reference	AR 7.108
Business Planning Brief Description	CCC has reviewed the way it charges for short term overnight care in line with the Care Act. In situations where the Local Authority organises short term support we plan to apply the standard residential rate which brings Cambridgeshire into line with neighbouring local authorities. The council will continue to find ways to support someone to live independently at home and support their carers to avoid carer breakdown.		
Senior Responsible Officer	Claire Bruin		

### Project Approach

#### Background

##### Why do we need to undertake this project?

When a service user in adult social care has a period of short term respite accommodation, traditionally Cambridgeshire County Council has charged for this under non-residential charging rules. Generally, non-residential care contributions are lower than residential contributions and as a result, the council may be able to achieve additional income as a result of deciding to charge for short term respite accommodation under residential care rules which will help off-set some of the authority's care costs. It should be noted that some long term temporary stays are currently charged under residential rules.

The Care and Support Statutory Guidance section 8.34 states the following:

“A short-term resident is someone provided with accommodation in a care home for a period not exceeding 8 weeks, for example where a person is placed in a care home to provide respite care. Where a person is a short-term resident a local authority may choose to assess and charge them based on the rules for care or support arranged other than in a care home.”

Whereas the above statement states that the Council may choose to charge under non-residential rules, the Council does not have to and may charge under residential rules.

In 2016/17, there were 66 service users charged under non-residential rules for short term respite accommodations. The average contribution for these service users was £54.94 per week and the average contribution for short-term residential care is £179.74 per week when charged under residential rules. This is a difference of £124.80 per week.

The average stay in short term respite accommodations is 22 days.

##### What would happen if we did not complete this project?

The council would continue to apply non-residential charging to clients who receive short term respite accommodation and charge £54.94 per week rather than £179.74 per week and not make best use of the options available to the authority.

### Approach

## Aims / Objectives

The aim is to update the Fairer Contributions Policy and make use of options available to the council to generate additional revenue which can off-set some of the care costs associated with providing short term accommodation to adult social care clients

## Project Overview - What are we doing

Reviewing the Fairer Contributions Policy against the Care and Support Statutory Guidance

Benchmarking with statistical neighbours

## What assumptions have you made?

During 2016/17, 66 adult social care clients had a period of short term respite accommodation. If we assume that the same trend continues in 2017/18, the following income generation can be expected:

Weekly increase - £124.80 x 66 = £8,236.80

Annual increase - £124.80 x 66 x 3 (average number of weeks received) = £24,710

This may change as figures are refined and the working estimate is more optimistic with a projected income target of £100,000

## What constraints does the project face?

Respite accommodation is demand led and it is not possible to make accurate predictions about the number of clients who will be needing short term care in the future

## Delivery Options

### Has an options and feasibility study been undertaken?

The Adults Committee rejected the proposal the alternative option of doing nothing and leaving the charging policy unamended

The proposed policy change is now subject to a 12 week public consultation

## Scope / Interdependencies

### Scope

#### What is within scope?

Adult social care clients who access short term overnight support (respite)

## Cost and Savings

See accompanying financial report

## Risks

### Title

Unpaid invoices or late payment

Increase in complaints and appeals

Confusion over different charges

## Project Impact

## Community Impact Assessment

### Who will be affected by this proposal?

Clients in need of respite / short-term accommodation

### What positive impacts are anticipated from this proposal?

A more consistent approach to charging for short term accommodation

An increase in contribution income for the council which can off-set some of the care costs in adult social care

### What negative impacts are anticipated from this proposal?

For service users who receive both non-residential services and short term respite accommodation, the difference in charges can lead to confusion. The impact can be reduced by clearer guidance and good support and advice from support services

If the proposed policy change is implemented, clients in need of respite care will receive an increase in the cost of their care package

### Are there other impacts which are more neutral?

## Disproportionate impacts on specific groups with protected characteristics

### Details of Disproportionate Impacts on protected characteristics and how these will be addressed

Elderly, frail clients and customers with a severe disability are more likely to need respite accommodation as part of their care package so will be impacted by increased charges.

The council has discretionary powers to increase the personal expense allowance if they feel that the client is being disproportionately affected by the policy change

# Business Case

## A/R.7.109 Client Contributions; Higher Rate Benefit Contributions for Day Time Care

### Project Overview

Project Title	A/R.7.109 Client Contributions; Higher Rate Benefit Contributions for Day Time Care		
Saving	£227K	Business Planning Reference	A/R 7.109
Business Planning Brief Description	In line with other local authorities and enabled by the Care Act the Council proposes to further investigate the possibility of amending the Fairer Contributions Policy to take into account the higher rate Personal Independence Payment when calculating clients' contributions to their adult social care package. Subject to 12 weeks' public consultation this proposal could be implemented for financial year 2018/19.		
Senior Responsible Officer	Claire Bruin		

### Project Approach

#### Background

##### Why do we need to undertake this project?

On 09/11/2017, CCC Adults Committee supported the proposal to further investigate the possibility of amending the Fairer Contributions Policy to take into account the higher rate Personal Independence Payment when calculating clients' contributions to their adult social care package. Subject to 12 weeks' public consultation this proposal can be implemented for financial year 2018/19. The committee rejected the option of also charging against the higher rate of Attendance Allowance and Disability Living Allowance. A copy of the committee report and decision log can be found in the documents section.

Prior to the Care Act 2014, Cambridgeshire County Council (CCC) used the Fairer Charging Guidance issued by the Department of Health in order to create a policy for how they calculate contributions towards social care & support services in the community. This has since been superseded by the Care Act 2014.

The Fairer Charging Guidelines included guidance on how disability benefits should be treated within the financial assessment. The current disability benefits in payment are Attendance Allowance (AA), Disability Living Allowance (DLA), and Personal Independence Payment (PIP). These benefits are paid out at different rates dependent upon the level of personal support required. The current rates are as follows:

AA	DLA	PIP	
Low	£55.65	£22.00	£55.65 (known as standard rate)
Middle	None	£55.65	None
High	£83.10	£83.10	£83.10 (known as enhanced rate)

The Fairer Charging Guidelines previously stated that LA's should only take into account the lower or middle rate of any disability benefits if that LA is not providing any night time services. This is a principle which is currently within CCC's Charging Policy and is applied within the financial assessment.

Within the Care and Support Statutory Guidance, it states what income should be included within the financial assessment. The wording used is as follows:

“Any income from the following benefits must be taken into account when considering what a person can afford to pay towards their care from their income:”

The guidance then goes on to list Attendance Allowance, Disability Living Allowance (Care Component) and Personal Independence Payment (Care Component). There is not a section which states that only the lower or middle rate of disability benefits should be included within the financial assessment.

Consequently, in view of the potential additional income which can be generated to off-set the authority's annual care costs, it is recommended that the Fairer Charging Policy be amended to include the full amount of Personal Independence Payment in the calculation of client contributions towards social care and support services in the community.

#### **What would happen if we did not complete this project?**

Without a policy change, the authority will continue to assess individuals who receive the enhanced rate of disability benefit as if they were receiving the standard or lower rate and miss an opportunity to generate additional income for adult social care

### **Approach**

#### **Aims / Objectives**

The aim of the initiative is to amend the CCC Fairer Charging Policy to allow for the council to make adjustments to the financial assessment of clients who are in receipt of the highest rate of Attendance Allowance and Disability Living Allowance with a view to increasing their contribution towards the cost of the care package. Currently, people receiving the highest rate are charged as if they have the standard/ middle rate of benefit.

#### **Project Overview - What are we doing**

Reviewing the current Fairer Charging Policy in light of changes in the Care Act and developing a number of options for public consultation

Benchmarking against statistical neighbours

#### **What assumptions have you made?**

That making this policy change is politically acceptable

That the policy change would have taken effect by 01 April 2018 in order to achieve full-year income

That there would be no change in the number of clients to whom this would be applicable

That option 2 with the mitigating £10.00 is the option which goes forward for public consultation as the financial modelling is done on that basis

#### **What constraints does the project face?**

There are still cases which have not been recorded on Abacus (Financial Assessment Tool) so there may be more numbers affected than shown in this business case. Work is continuing to complete the recording of all cases on Abacus.

### **Delivery Options**

#### **Has an options and feasibility study been undertaken?**

At Adults Committee on 09/11/17, it was decided to proceed with working out the implications of amending

the Fairer Contributions Policy to charge against the enhanced rate of personal Independence Payment.

There are currently 311 service users who are assessed against the standard rate of Personal Independence Payment when they receive the enhanced rate. Of these 311 service users, 159 service users are assessed as nil charge and are therefore not asked to contribute towards the cost of their care. If the decision is made to increase the amount of Personal Independence Payment taken into account in the financial assessment, the increase in contribution for those who are asked to contribute towards their care would be increased by up to £27.45 per week. The increase to LA income would therefore be as follows:

Weekly increase  $£27.45 \times 159 = £4,365$

Annual Increase  $£27.45 \times 159 \times 52 = £226,957$

For the purpose of this calculation, we have only included the service users who are currently assessed to make a contribution however, by changing the policy, some nil charge service users may be asked to make a contribution and therefore further additional income may be obtained.

It should be noted that the DWP are currently still moving claimants from receiving Disability Living Allowance to Personal Independence Payment. Each claimant is review upon request from the DWP and is required to undertake a new assessment. The number of service users receiving Personal Independence Payment is likely to increase significantly while this work is undertaken, meaning that increases in client contribution would increase further should this approach be adopted.

Some thought should be given to the affect that this will have on applicable service users as the increase in charge would be up to £27.45 per week. This may also have an impact on debt as with any increase in contributions. To mitigate the financial impact on service users, the council may consider offering a higher standard rate of Disability Related Expenditure (DRE) allowance for those service users who are assessed against the high / enhanced rate of their disability benefits (this would be on top of the standard DRE allowance of £20 per week:

£5 per week -  $£22.45 \times 159 = £3,570$  per week (£185,617 per year)

£10 per week -  $£17.45 \times 159 = £2,775$  per week (£144,277 per year)

£15 per week -  $£12.45 \times 159 = £1,980$  per week (£102,937 per year)

Alternatively, if service users feel that we are not taking their night time needs into account in the financial assessment, they can ask for a personalised DRE assessment and provide evidence of the costs they have associated to their night time need.

The financial modelling of this policy change has been done on the basis of not increasing the DRE allowance.

Other options considered by Adults Committee were:

1. Do nothing and continue to assess individuals who receive the enhanced rate of disability benefit as if they were receiving the standard or lower rate
2. Amend the CCC Charging Policy to enable the Financial Assessment Team to charge against the higher rate of Attendance Allowance, Disability Living Allowance or Personal Independence Payment.

As the Disability Rights Handbook states that the higher rate of Attendance Allowance or Disability Living Allowance is paid to service users who require personal support through the night, Adults Committee rejected Option 2 due to the risk of legal challenge should the Council not be providing night time services.

With Personal Independence Payment, the award of the enhanced rate is not dependent upon the applicant having support needs through the night. The DWP use a points based system to determine which rate the applicant will be awarded.

A 12 week public consultation will now be undertaken by adult social care

## Scope / Interdependencies

### Scope

#### What is within scope?

Service users receiving the higher rate of Attendance Allowance, Disability Living Allowance or Personal Independence Payment

#### What is outside of scope?

Service users receiving the lower/ middle rate of Attendance Allowance, Disability Living Allowance or Personal Independence Payment

## Cost and Savings

See accompanying financial report

## Risks

### Title

Unpaid invoices or late payment

Negative financial impact on service user

More complaints and appeals

Legal challenge

## Project Impact

### Community Impact Assessment

#### Who will be affected by this proposal?

Clients who are in receipt of adult social care and receiving higher rate Attendance Allowance, Disability Living Allowance or Personal Independence Payment

#### What positive impacts are anticipated from this proposal?

By increasing client contributions in line with the changes introduced by the updated Care Act, the authority is able to generate additional income which can offset some of the savings which would otherwise have to be made in adult social care

#### What negative impacts are anticipated from this proposal?

The proposal will have a negative financial impact on clients who are in receipt of higher rate Attendance Allowance, Disability Living Allowance or Personal Independence Payment

#### Are there other impacts which are more neutral?

## Disproportionate impacts on specific groups with protected characteristics

### Details of Disproportionate Impacts on protected characteristics and how these will be addressed

This proposal will have a negative financial impact on adults with a disability who may struggle to pay the increased client contribution. This in turn can lead to an increase in stress and anxiety associated with having to pay the additional charges.

To mitigate the financial impact on service users, the council can consider offering a higher standard rate of

Disability Related Expenditure (DRE) allowance for those service users who are assessed against the high / enhanced rate of their disability benefits (this would be on top of the standard DRE allowance of £20 per week.) or using the option of an individual assessment to determine DRE where the person can provide evidence of relevant expenditure as a result of their disability.

# Business Case

## A/R.7.110 Learning Disability - Joint Investment with Health Partners in rising demand

### Project Overview

Project Title	A/R.7.110 Learning Disability - Joint Investment with Health Partners in rising demand		
Saving	£900k	Business Planning Reference	A/R.7.110
Business Planning Brief Description	Negotiating with the NHS for additional funding through reviewing funding arrangements, with a focus on ensuring the Council's investment in demand pressures is matched appropriately by the NHS.		
Senior Responsible Officer	Claire Bruin		

### Project Approach

#### Background

##### Why do we need to undertake this project?

In order to meet the eligible needs of all people with learning disabilities we need to invest additional funding to cope with rising demand. Analysis of needs within the cohort indicates that health needs and social care needs are both increasing and so we need to work with our partners to invest together to respond to the rising demand.

##### What would happen if we did not complete this project?

Budget to meet eligible needs would be insufficient - this is a demand led budget and so we would incur an overspend - ultimately resulting in the need for reactive budget reductions and potentially service reductions elsewhere. If we do not ensure our major care budgets are at a sustainable position we would be forced to disinvest in preventative, early intervention services and other schemes which are of benefit to communities

#### Approach

##### Aims / Objectives

To ensure that sufficient investment is made by both the County Council and our health partners in meeting the needs of people with learning disabilities.

To ensure the LDP care budget is set at a realistic and sustainable level - allowing for all care needs to be met.

##### Project Overview - What are we doing

The Council manages and delivers support for people with Learning Disabilities through the Learning Disability Partnership (LDP) – a joint multi-disciplinary service with our health partners. We are working with those partners to respond to the rising demand and level of need amongst people with learning disabilities. As such, the additional investment the County Council is making in disabled people (A/R.3.004 £1.7m in 2018/19) is expected to be matched by investment from the Clinical Commissioning Group to ensure people's health and social care needs are both met and that the health element of the increasing cost is reflected proportionally.

This will enable us to continue to deliver an integrated service to people with learning disabilities and their

families and make best use of the total resource available. It is important to note that the figure of £900k investment from health is an estimate based on current identified trends rather than an agreed figure with health partners at this stage and so the final amount may vary.

#### **What assumptions have you made?**

At the moment the estimated investments for 2018/19 are based on the trends previously identified for 2017/18 in terms of service user numbers, levels of need and the split between health and social care funding within the cohort

#### **What constraints does the project face?**

This work has to be agreed in partnership with health colleagues - and therefore recognises the significant financial pressure within the NHS as well as existing social care pressures. The amount of investment is therefore constrained by the overall resource envelope open to the system in Cambridgeshire.

### **Delivery Options**

#### **Has an options and feasibility study been undertaken?**

Not applicable

### **Scope / Interdependencies**

#### **Scope**

##### **What is within scope?**

All service users supported within the Learning Disability Partnership - with the health funding being agreed for those who have identified health needs as well as social care needs.

##### **What is outside of scope?**

Service users supported by services that are not the Learning Disability Partnership.

### **Cost and Savings**

See accompanying financial report

### **Risks**

#### **Title**

Failure to agree investment with health partners

### **Project Impact**

#### **Community Impact Assessment**

##### **Who will be affected by this proposal?**

People with Learning Disabilities who have eligible social care and health needs and are supported by Learning Disability Partnership services

##### **What positive impacts are anticipated from this proposal?**

This additional investment will ensure we have sufficient budget available to meet all eligible needs - in particular for the health elements of care which are the financial responsibility of NHS partners

##### **What negative impacts are anticipated from this proposal?**

None anticipated for service users.

The need for investment will contribute to the financial pressure on the system.

**Are there other impacts which are more neutral?**

N/A

**Disproportionate impacts on specific groups with protected characteristics**

**Details of Disproportionate Impacts on protected characteristics and how these will be addressed**

This proposal relates specifically to people with learning disabilities - and is intended to ensure they get the care they need by seeking additional investment from health partners to respond to the rising pattern of need.

# Business Case

## A/R.6.115 Retender for domiciliary care for people with learning disabilities

### Project Overview

Project Title	A/R.6.115 Retender for domiciliary care for people with learning disabilities		
Saving	£100K	Business Planning Reference	AR/ 6.115
Business Planning Brief Description	Part-year savings were delivered in 2017/18 through the retender of the domiciliary care contracts, which took effect from 1 November 2017. The remaining effect of this saving will be delivered in 2018/19.		
Senior Responsible Officer	Will Patten/Mubarak Darbar		

### Project Approach

#### Background

##### Why do we need to undertake this project?

This project is to achieve savings through the retendering of Home Care for clients with Learning Disabilities. This is attached to the wider retendering of Home Care contracts for all customers.

The project is already underway and new contracts were issued in November 2017.

##### What would happen if we did not complete this project?

Arrangements for sourcing an purchasing home care provision for clients would remain as-is and savings would not be realised

#### Approach

##### Aims / Objectives

To reduce the cost of Home Care for people with disabilities through new contracting arrangements

##### Project Overview - What are we doing

From November 2017, new domiciliary care commissioned for people with Learning Disabilities will be on a new framework. We therefore expect new domiciliary care commissioned after that point to be cheaper.

The new contractual arrangements implemented in November should deliver a drop in unit cost due to the implementation of a ceiling cost of £16.22 per hour to deliver support.

By using the same contracting arrangements across all client groups in need of domiciliary care, we also expect there to be an expanded market in the longer term for this support, therefore bringing about a reduction in cost.

This work should generate a permanent saving over the twelve month period following the new framework starting. As it was mid-year when it commenced, 70k of the saving will be delivered in 2017/18, and 100k in 2018/19 (5 months' and 7 months' worth respectively).

As the work to deliver the saving will have happened by the start of 2018/19, we should be able to remove the 100k of domiciliary care budget from LD teams as budgets are prepared and achieve the saving from the start

of the year.

#### What assumptions have you made?

The ceiling that have been set for standard and specialist domiciliary care for LD customers are a price that providers will be able to bid at and that these ceilings will achieve the savings.

#### What constraints does the project face?

Restricted by procurement regulations

### Scope / Interdependencies

#### Scope

##### What is within scope?

This proposal relates to contracts for services for people with learning disabilities.

##### What is outside of scope?

Other client groups such as older people and people with mental health needs are covered by separate contracts, not within the scope of this proposal

### Cost and Savings

See accompanying financial report

### Project Impact

#### Community Impact Assessment

##### Who will be affected by this proposal?

This proposal relates to care for people with learning disabilities who have eligible social care needs. However the proposal focusses on the efficiency in the contracting process and so changes to the care people receive are not anticipated.

##### What positive impacts are anticipated from this proposal?

Review of current provisions and tender process. If financial efficiencies can be secured within contracts for provision then this will directly benefit social care service user who pay for their care – in part or in full – as they will need to contribute less as the overall cost will be reduced.

##### What negative impacts are anticipated from this proposal?

There are no negative impacts anticipated from this proposal.

##### Are there other impacts which are more neutral?

N/A

#### Disproportionate impacts on specific groups with protected characteristics

##### Details of Disproportionate Impacts on protected characteristics and how these will be addressed

Since this project is focused on people with learning disabilities eligible for support from the Learning Disability Partnership, it will have a disproportionate impact on people with disabilities. However, there are no negative effects anticipated from this project.

# Business Case

## A/R.6.111 Physical Disability - Supporting people with physical disabilities to live more independently and be funded appropriately

### Project Overview

Project Title	A/R.6.111 Physical Disability - Supporting people with physical disabilities to live more independently and be funded appropriately		
Saving	£440K	Business Planning Reference	A/R.6.111
Business Planning Brief Description	In line with the Council's commitment to promote independence, work will be undertaken to establish more creative ways to meet the needs of people with physical disability. It will also include work with the NHS to ensure health-funding arrangements are appropriate.		
Senior Responsible Officer	Jackie Galway		

### Project Approach

#### Background

##### Why do we need to undertake this project?

This business case is the second year of a two-year process of reassessing people with physical disabilities. 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.

##### What would happen if we did not complete this project?

Savings would have to be sought elsewhere.

#### Approach

##### Aims / Objectives

This assessment and re-assessment activity will reduce the care budget that is spent on support for people with physical disabilities. 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

Support that is currently commissioned for these service users can be divided into three areas:

##### Project Overview - What are we doing

The Physical Disability Team 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.

#### What assumptions have you made?

- Transforming Lives Model of working produces the level of savings required
- Numbers of new users of the Physical Disability Service remains relatively static.
- Income revenue is as predicted
- Staff retention
- Expansion of the Adult Early Help Team

#### What constraints does the project face?

Reducing staffing costs and preventative services (contracts with Third Sector Organisations) have not been chosen as main options for delivering the required savings (although efficiencies have been found and set out in other Business Cases wherever possible).

A reduction in staffing would reduce the ability to work in a transformational way.

At this point it would be counterproductive to reduce contracts currently in place that are directly linked to prevention and avoiding/delaying the need for statutory service

The only option that remains is therefore to manage demand for care budgets and ensure care plans meet people's needs at lowest possible cost.

In order to change the care provision made for service users we need to do a re-assessment of need and review the support plan – this is done in collaboration with service users, their families and involves independence advocacy where appropriate.

The review of the support plan can include the consideration of a range of options for meeting need, and cost-effectiveness can be the determining factor where options that meet need exist. In order to generate different options from those currently found in support plans, we need to work differently in line with the Transforming Lives model.

## Scope / Interdependencies

### Scope

#### What is within scope?

- All expenditure on meeting the needs of people with a Physical Disability.
- Contracts governing the provision of such services.
- The expansion of the Adult Early Help Team; phase 3,4 and 5
- Relevant policies and procedures about implementing savings or Transforming Lives.

#### What is outside of scope?

- Staffing costs
- The Double Up Care Project
- Contracts with providers offering preventative services

## Project Dependencies

### Title

First Contact Project Group

Transforming Live and Care Act Board

The 'Double Up 'Care Project

Development of Re-ablement services

Adult Social Care Brokerage – Residential Home and Nursing Home and continued expansion to include Domiciliary Care

Retendering of ASC provider contracts

## Cost and Savings

See accompanying financial report

## Risks

### Title

Reductions to packages may not be possible at the proportion that is modelled here.

Timescales slip due to capacity

Savings depend on doing follow up activity to identify and arrange alternative services

Some service users may challenge the package of support offered to them following a review to implement new policy.

## Project Impact

### Community Impact Assessment

#### Who will be affected by this proposal?

People with physical disabilities with eligible social care needs

#### What positive impacts are anticipated from this proposal?

As with all of our social work proposals, the focus is on supporting people to build on their strengths and live more independently – with a reduced reliance on formal care. Where people are identified as having eligible health needs and appropriate health funding is secured there may be a financial benefit to the individual as social care services are subject to contributions from service users – whereas health needs are provided free at the point of use as part of the National Health Service.

#### What negative impacts are anticipated from this proposal?

None are anticipated

This proposal does not include any change in care thresholds or reduction in the commitment to meet eligible needs. However it does include the intention to make demand management savings by working with people in a way which supports them to be more independent of care services. It might therefore represent a less risk-averse model. Decisions about the best care plan and setting for an individual will of course 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.

#### Are there other impacts which are more neutral?

### Disproportionate impacts on specific groups with protected characteristics

#### Details of Disproportionate Impacts on protected characteristics and how these will be addressed

# Business Case

## A/R.6.114 Increasing independence and resilience when meeting the needs of people with learning disabilities 2018/19

### Project Overview

Project Title	A/R.6.114 Increasing independence and resilience when meeting the needs of people with learning disabilities 2018/19		
Saving	£3,100K	Business Planning Reference	A/R.6.114
Business Planning Brief Description	Continuing the existing programme of service user care reassessments which requires each person's care needs to be reassessed in line with the Transforming Lives model and with the revised policy framework with a view to identifying ways to meet needs in the most appropriate way		
Senior Responsible Officer	Claire Bruin		

### Project Approach

#### Background

##### Why do we need to undertake this project?

This is the third year of a programme of reassessment work for all people open to the Learning Disability Partnership. The focus is 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.

During 2017/18 additional capacity was made available through the Project Assessment Team to support the delivery of savings using a combination of social work and specialized brokerage negotiations. This capacity was in addition to the ongoing work of the LDP teams to deliver savings.

Approximately 60% of the savings for 2018/19 are due to be delivered via the full year effect of savings achieved in 2017/18. The reassessment work will continue through 2018/19 focusing on those people who have not been reviewed and reassessed using the Transforming Lives approach, the policy lines and the approach of social workers and specialist brokers working together.

##### What would happen if we did not complete this project?

Some people with learning disabilities may be over-supported. Assistive technology may not be used to its full potential and some people with learning disabilities may be less independent than they could be.

#### Approach

##### Aims / Objectives

Ensure that all support packages for people with learning disabilities are appropriate to meet the needs of the people with learning disabilities and offer value for money for the Council.

##### Project Overview - What are we doing

Continuing the existing programme of service user care reassessments which requires each person's care needs to be reassessed in line with the Transforming Lives model and with the revised policy framework with a stronger focus on promoting independence and a strengths based approach with the potential to identify ways to meet their needs at reduced overall cost.

Savings will partly be delivered through the remaining effect of care costs that have been reduced in 2017/18 -

where savings are made in-year the remaining part of the 12 month effect is seen in the following financial year.

The remainder is expected to be made through the continuing programme of reassessment and brokerage work that has delivered savings in 2017/18. This work is managed between a dedicated reassessment capacity funded through the Transformation Fund, and work by existing locality social work teams.

Savings achieved are monitored as part of the monthly process of monitoring package changes that social work teams engage in.

#### **What assumptions have you made?**

Savings are estimated based on an approximate £10k saving per case.

The saving for 18/19 is based on a set of assumptions about the phasing of the reassessment work - this is being monitored and may be subject to change.

#### **What constraints does the project face?**

There are two main constraints (i) relates to the capacity of the team delivering the reassessment work -there have been a number of difficulties recruiting social workers to the Project Assessment Team and this has affected the pace of delivery; (ii) relates to the reducing number of people who have not yet had a review/reassessment using the approach described above, within the fairly static population of people with learning disabilities that we support.

### **Scope / Interdependencies**

#### **Scope**

##### **What is within scope?**

500 highest cost packages of support for people with learning disabilities. Packages of support for people living in the same setting as those with high cost packages. Packages of support for other people with learning disabilities.

##### **What is outside of scope?**

Packages of support that have already been reassessed by the LDP locality teams or the Project Assessment Team

### **Project Dependencies**

#### **Title**

Transforming Lives

PR000018 Reassessment Work 2017/18

### **Cost and Savings**

See accompanying financial report

### **Project Impact**

#### **Community Impact Assessment**

##### **Who will be affected by this proposal?**

People with learning disabilities with eligible social care needs receiving a funded care package.

##### **What positive impacts are anticipated from this proposal?**

The intention is to meet people 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.

**What negative impacts are anticipated from this proposal?**

This proposal does not include any change in the commitment to meet eligible needs. However it does include the intention to work with people in a way which supports them to be more independent of care services. It might therefore represent a less risk-averse model. 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.

**Are there other impacts which are more neutral?**

N/A

**Disproportionate impacts on specific groups with protected characteristics**

**Details of Disproportionate Impacts on protected characteristics and how these will be addressed**

The project is focused on people with a learning disability with an eligible care need therefore they are likely to be disproportionately affected by this proposal.

# Business Case

## A/R.6.129 - Russell Street Learning Disability Provision Re-design 2018-19

### Project Overview

Project Title	A/R.6.129 - Russell Street Learning Disability Provision Re-design 2018-19		
Saving	£70K	Business Planning Reference	A/R.6.129
Business Planning Brief Description	Provide the existing permanent residential provision through an external provider as a supported living project and develop an in-house service that can respond to immediate needs for care and support using the vacated residential provision.		
Senior Responsible Officer	Claire Bruin		

### Project Approach

#### Background

##### Why do we need to undertake this project?

There is a lack of emergency or interim provision for people with learning disabilities within Cambridgeshire. The existing out of area placements project A/R.6.127 will require moving people with learning disabilities and complex needs back into Cambridgeshire, where appropriate. Having a service in Cambridgeshire to provide interim support will enable the flexibility needed to support people to move back into Cambridgeshire and closer to their existing networks of support.

##### What would happen if we did not complete this project?

The overarching savings programme for adults with learning disabilities may not be delivered. In particular, we may not be able to move people with learning disabilities back into Cambridgeshire when it would be beneficial and more cost-effective to do so.

#### Approach

##### Aims / Objectives

The overarching aim of this work is to ensure that our in house service at Russell Street is operating as efficiently as possible and is providing the right sort of provision to support our strategic direction for people with learning disabilities.

The secondary aim of this work is to support people placed out of Cambridgeshire to move back into Cambridgeshire as smoothly as possible. This will involved reshaping the existing provision to provide interim support for people moving back into Cambridgeshire.

##### Project Overview - What are we doing

The expectation is that we will provide the existing permanent residential provision through an external provider as a supported living project. This will be done through mini-competition through the existing Supported Living Framework for both the care and the accommodation. This will release capacity in our in house service as well as providing some cost savings through the 'hotel' costs for the existing residential provision.

The released capacity in our in house services and the vacated residential service will be used to respond to immediate care needs as well as providing interim support for people returning to Cambridgeshire.

#### What assumptions have you made?

- There is an external provider who will take on the existing residential service at Russell Street through a Supported Living model.
- There is an appropriate property near enough to Russell Street to enable transfer of the residential service to a supported living model.
- There will be sufficient interim and immediate demand to necessitate a dedicated service.
- The in house team will be able to meet the interim and immediate demand that is created.

#### What constraints does the project face?

There will need to be a procurement process to obtain an external provider to take on the residential service as a supported living project.

Once the capacity has been released for interim and immediate care, the work to bring people back from outside Cambridgeshire will provide a significant proportion of the demand. If that work has not proceeded at pace, there may not be sufficient demand for the service.

### Scope / Interdependencies

#### Scope

##### What is within scope?

Provision at Russell Street for people with learning disabilities

##### What is outside of scope?

Other in house provision and other services

### Project Dependencies

#### Title

A/R.6.127 - Care in Cambridgeshire for people with learning disabilities

### Cost and Savings

See accompanying financial report

### Risks

#### Title

Lack of suitable property.

Lack of financially viable setting costs.

Lack of demand for the service

### Project Impact

#### Community Impact Assessment

##### Who will be affected by this proposal?

People with learning disabilities living at the Russell Street residential scheme.

People with learning disabilities returning to Cambridgeshire through the work from A/R.6.127

People with learning disabilities with immediate care needs.

Providers of supported living services in Cambridgeshire.

Parents/carers of the above groups of service users.

**What positive impacts are anticipated from this proposal?**

- Provide a provision which that can support the process of service users returning to county from out of county placements ensuring the service users are closer to their existing networks of support.
- Offer a transitional setting for services users to enable progression towards independence.
- Parent/carers are able to visit and support people with learning disabilities more easily.

**What negative impacts are anticipated from this proposal?**

There may be some disruption for the existing service users at the residential provision in Russell Street. This is likely to be short-lived and there will support available to mitigate any negative effects.

**Are there other impacts which are more neutral?**

N/A

**Disproportionate impacts on specific groups with protected characteristics**

**Details of Disproportionate Impacts on protected characteristics and how these will be addressed**

This is a project focused on people with learning disabilities, therefore people with learning disabilities are likely to be disproportionately impacted. The overall impact is expected to be positive for this group.

# Business Case

## A/R.6.126- Learning Disability - Converting Residential Provision to Supported Living

### Project Overview

Project Title	A/R.6.126- Learning Disability - Converting Residential Provision to Supported Living		
Saving	£794k	Business Planning Reference	A/R.6.126
Business Planning Brief Description	This is an opportunity to deregister a number of residential homes for people with learning disabilities and change the service model to supported living. The people in these services will benefit from a more progressive model of care that promotes greater independence.		
Senior Responsible Officer	Mubarak Darbar - PAT Team Lead Tracey Gurney - LDP Head of Service Claire Bruin - Director of Adult Social Care		

### Project Approach

#### Background

##### Why do we need to undertake this project?

Supported living settings promote greater independence in people while still providing 24 hour support to meet their care needs. They have the advantage of allowing people to hold their own tenancies therefore providing security of accommodation in contrast to residential settings where the care provider can give notice to people.

There are also benefits to the Council. In residential settings, the Council pays for accommodation and living expenses as part of the weekly fee. In contrast in supported living settings, these costs are met by the individual, generally through benefits.

Converting residential settings to supported living settings will promote independence for people with learning disabilities within those settings as well as providing cost savings to the Council.

##### What would happen if we did not complete this project?

Savings would not be achieved and potential independence or improved outcomes for people living in residential settings would not be delivered.

#### Approach

##### Aims / Objectives

Aims are as follows;

- 15 services to convert from residential to supported living.
- Financial benefits to the council as housing costs are met through housing benefit.
- Social benefits for people as they can hold their own tenancies, enabling them to have better control over the support they receive.

##### Project Overview - What are we doing

We are identifying existing residential care provision where there is potential to work with the provider and the service users to convert the model to supported living settings.

There is a staged process for each provider

- initial service viewing.
- initial benefits estimates
- reassessments of service users
- negotiation with out of area commissioners.
- families meeting takes place.
- financials are finalised.
- feedback requested by families.
- submit de-registration plan to CQC.

#### **What assumptions have you made?**

1. Providers/Service users/Families are in agreement in principle with this idea.
2. Assumption is that our calculations are correct in that this is better value for council.
3. OOA commissioners will be in agreement.
4. CQC will be in support of the de-registration plans.
5. All 15 services are able to be de-registered.

#### **What constraints does the project face?**

1. There is no potential to extend the project.
2. Dependent upon unanimous agreement from Service Users/Families/providers. Therefore delays are expected in delivery.

### **Scope / Interdependencies**

#### **Scope**

##### **What is within scope?**

15 residential units identified as potentially suitable are in scope at this stage.

##### **What is outside of scope?**

All other residential units and other settings.

### **Cost and Savings**

See accompanying financial report

### **Project Impact**

#### **Community Impact Assessment**

##### **Who will be affected by this proposal?**

People with learning disabilities currently living in residential settings.

##### **What positive impacts are anticipated from this proposal?**

The model of supported living will be more focused on empowerment and independence and choice and control than residential provision.

In most cases service users will experience a positive financial impact as benefit entitlements will change meaning they will have more disposable income.

Supported living arrangements also offer service users greater security of tenure, in residential settings providers are only obligated to give 28 days' notice if they want to end the offer of a place – whereas in supported living the tenure is significantly more secure.

**What negative impacts are anticipated from this proposal?**

No negative impacts are envisaged

**Are there other impacts which are more neutral?**

N/A

#### **Disproportionate impacts on specific groups with protected characteristics**

**Details of Disproportionate Impacts on protected characteristics and how these will be addressed**

This project only relates to settings for people with learning disabilities and therefore is likely to have a disproportionate impact on people with learning disabilities. No negative impacts are anticipated from this project.

# Business Case

## Care in Cambridgeshire for People with Learning Disabilities 2018/19 (A/R 6.127)

### Project Overview

Project Title	Care in Cambridgeshire for People with Learning Disabilities 2018/19 (A/R 6.127)		
Saving	£315k	Business Planning Reference	A/R.6.127
Business Planning Brief Description	Work to enable people with learning disabilities who have been placed 'out of county' to move closer to their family by identifying an alternative placement which is closer to home. To be approached on a case by case basis and will involve close work with the family and the person we support.		
Senior Responsible Officer	Mubarak Darbar - to March 2018 - PAT team lead Tracy Gurney - LDP Head of Service Claire Bruin - Director of Adult Social Care		

### Project Approach

#### Background

##### Why do we need to undertake this project?

The programme of work will achieve improved outcomes for people with learning disabilities and financial efficiency for the local authority by identifying and providing suitable care arrangements in Cambridgeshire for people who are currently living in other counties.

The work programme will achieve 2 outcomes:

1. A comprehensive review of all current out of area placements and a managed programme to organise care in Cambridgeshire where it is in service users' best interests and in line with their wishes.
2. A strategic commissioning review of the sufficiency of care provision in Cambridgeshire now and in the future – and plan to create the additional capacity and improved commissioning processes we will need to minimise the number of new out of area placements in future.

Placements made out of area tend to be more expensive and less cost effective. This is often due to the placements being made to care for people with complex and very significant needs where there is no sufficiently specialist provision available in county. Out of area placements also tend to be less cost effective than those in county since out of area placements are more likely to be individual spot purchased placements rather than part of a commissioning services for a number of people that is likely to deliver better value. There are also additional ongoing costs to the locality teams when reviewing care and support for out of area placements.

This work is linked with the Transforming Care agenda to reduce the number of people with learning disabilities placed in in-patient settings. This work will give the opportunity to commission a specialist service to meet the needs of some of the people returning to county as well as some of the people in in-patient settings in county.

##### What would happen if we did not complete this project?

If this project were not completed, increasing numbers of people with learning disabilities would be placed out of county at a distance from their existing networks of support and potentially at an increased cost for the Council.

#### Approach

## Aims / Objectives

1. A comprehensive review of all current out of area placements and a managed programme to organise care in Cambridgeshire where it is in service users' best interests and in line with their wishes.
2. A strategic commissioning review of the sufficiency of care provision in Cambridgeshire now and in the future – and plan to create the additional capacity and improved commissioning processes we will need to minimise the number of new out of area placements in future.

## Project Overview - What are we doing

The request is for investment from the Transformation Fund for two social worker posts for a 12 month period to a total cost of £120k. The work required to achieve the savings is equivalent to two social worker posts for 12 months, but the funding will be used flexibly to achieve savings. The expectation is that the funding will be front loaded to achieve pace in delivering the savings. The overall saving to be achieved is £373k. £60k of the savings achieved through this project will be reinvested on an ongoing basis to provide brokerage support to the Learning Disability Partnership, initially to support this work and then to provide ongoing business as usual brokerage support. Therefore the net saving for 2018/19 is £313k.

It is not necessarily appropriate for every person placed out of county to be brought back to Cambridgeshire. Of the 130 existing people with learning disabilities living out of area 27 have been identified where it would be beneficial for them to move back to Cambridgeshire. There are a further 35 people where more work is required to identify if a move back to Cambridgeshire would be beneficial.

## What assumptions have you made?

The savings identified against this bid are based on the following assumptions:

- a) 5 people will be moved into Glebe Farm by April 2018, a new service being built by Kingsley Healthcare. This cohort is already identified and waiting on the service to be built.
- b) 31 additional people with a variety of sizes of care packages and a confidence level of 50% will be moved back in Cambridgeshire. This is modelled on extending the existing cohort of people identified to move back to Cambridgeshire. The saving modelled is a full year effect, however the introduction of the 50% confidence level will allow account for some slippage relating to timing.

## What constraints does the project face?

Risks and mitigation relating to this saving are therefore:

- a) The Glebe Farm cohort are unable to move in before April 2018. This risk is being mitigated by close communication with Kingsley Healthcare to ensure that we have the most up to date information regarding their service development.
- b) 31 additional people are not able to be moved back into county. This risk is being mitigated by identifying dedicated social workers to work on this. This will enable the social workers to progress conversations with the existing provision, family and advocates at pace to support the move back into county.
- c) There is insufficient provision in county to meet the needs of those moving back to county. This is being mitigated by the reinvestment of some of the saving into 2 people dedicated to brokerage, providing additional capacity in service development and negotiation to meet the needs of those moving back to county.
- d) People are moved back into county but there are fewer savings delivered than anticipated. This will be mitigated by the regular review and remodelling of the savings to be delivered from the identified cases. The current modelling is based on a conservative estimate of the number of people that can be moved back into county combined with a challenging target for the amount of savings to be delivered from each case. Combined with the confidence level of 50%, this means that there is sufficient flexibility in the modelling for the savings to be delivered even if not necessarily from the originally anticipated people.
- e) There is a risk that savings may be delayed if a number of the cases need to go to Court of Protection. The mitigation for this risk is frontloading the social workers' time to identify cases that may need to go to Court of Protection quickly so that the delay can be minimized.

## Delivery Options

### Has an options and feasibility study been undertaken?

## Scope / Interdependencies

### Scope

#### What is within scope?

Current out of area placements with the exception of those placements that are actively being worked on by the locality teams.

A strategic commissioning review of the sufficiency of care provision in Cambridgeshire now and in the future.

#### What is outside of scope?

Placements in Cambridgeshire and those placements outside of Cambridgeshire where there is existing work to move people back to Cambridgeshire within the locality teams in the Learning Disability Partnership.

## Cost and Savings

See accompanying financial report

## Project Impact

### Community Impact Assessment

#### Who will be affected by this proposal?

People with learning disabilities placed out of county  
Parent/carers and support networks of people with learning disabilities  
Providers for people with learning disabilities both in and out of county

#### What positive impacts are anticipated from this proposal?

People with learning disabilities who it is appropriate to move back into county will be closer to their existing support networks which is associated with better outcomes.

Parent/carers will no longer need to travel significant distances to visit service users.

People with learning disabilities who it is not appropriate to bring back into Cambridgeshire will have a detailed reassessment to ensure that their current placement is meeting their needs.

#### What negative impacts are anticipated from this proposal?

There will potentially be some minor disruption in some services due to people moving in or out. This will not be of a greater magnitude than the normal disruption caused by placement moves.

#### Are there other impacts which are more neutral?

N/A

### Disproportionate impacts on specific groups with protected characteristics

#### Details of Disproportionate Impacts on protected characteristics and how these will be addressed

The project is focused on people with learning disabilities, therefore there will be a disproportionate impact on people with learning disabilities. The impact is expected to be positive.

# Business Case

## A/R.6.132 Mental Health Transformation & Demand Management

### Project Overview

Project Title	A/R.6.132 Mental Health Transformation & Demand Management		
Saving	£400K	Business Planning Reference	A/R 6.132
Business Planning Brief Description	Our programme of work to transform the social care offer for adults and older people with mental health needs will deliver savings totalling £400k through a combination of demand management, staffing restructures, strategic commissioning and ensuring people receive appropriate health funding.		
Senior Responsible Officer	Charlotte Black		

### Project Approach

#### Background

##### Why do we need to undertake this project?

This work is being delivered to respond to the financial challenge facing the local authority which means we need to deliver multi-million pound savings from all parts of the business. In order to deliver financial savings whilst continuing to improve outcomes for service users our approach is based around:

- Investing in our services to transform them, delivering better outcomes and constrained demand
- Transforming the way we work – making improvements to how we manage our business, our people and our money
- Better managing the contracts we have with suppliers and external providers
- Developing new and deeper partnerships – bringing benefits for all

The County Council is impacted by a range of pressures arising from reduced government grant, inflation, demand pressures and increasing need which creates the need for savings from the revenue budget of circa £37.9m in 2018/19 and around £80m over the next 5 years.

##### What would happen if we did not complete this project?

We would not deliver the financial savings associated. Ultimately if the County Council is unable to identify sufficient transformation schemes to address the funding gap then it would have to make reactive decisions to reduce services or raise thresholds.

#### Approach

##### Aims / Objectives

To deliver financial savings to the local authority of £400k in 2018/19 - through a range of approaches:

- To secure efficiency savings from within the staffing model at Cambridgeshire and Peterborough NHS Foundation Trust
- To ensure that people with mental health needs who qualify for Section 117 funding receive this funding as part of the resource used to fund their support
- To continue to implement the transformation of social work and establish a model which support people to live as independently as possible and be supported at home and within their communities wherever possible
- To drive efficiency savings from externally commissioned care contracts
- To increase the use of assistive technology amongst people with mental health needs - supporting

them to live and recover more independently and reducing care costs

#### **Project Overview - What are we doing**

We are working closely with the Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) to transform the social care offer for adults and older people with mental health needs. Savings totalling an estimated £400k are anticipated from a range of approaches.

This business case is based on a number of workstreams;

#### **Restructure**

A range of internal efficiencies have been driven out as part of an ongoing restructure within CPFT – returning a saving to the Council. We are also in discussion about sharing posts with Peterborough City Council to secure further savings - discussions are ongoing. These measures combined will achieve a predicted saving of £150k.

#### **Section 117**

CCC are currently 100% funding 160 service users (Older People Mental Health and Adult Mental Health) who are subject to section 117 aftercare under the Mental Health Act. Section 117 is a joint responsibility between health and social care to provide and fund Aftercare services for people who have been detained under various qualifying sections. Currently CCC are funding 100% of these care packages. A Joint Funding Tool is in place and is use agreed with the CCG. This savings target is based on joint reviews (CCC and CCG) of these care packages and funding splits being agreed going forward. This will achieve a predicted saving of £250k in 2018/19.

#### **Other activities**

Across Cambridgeshire we have seen a growing demand for Mental Health support in recent years; We will continue to work to deliver further efficiencies in order to manage and meet demand within the budget available. Measures include:

- a focus on strategic commissioning of external providers, with efficiencies anticipated from the re-tender of a major supported accommodation contract and of domiciliary care.
- through 2018/19 we are looking to significantly increase the use of assistive technology for service users with mental health needs – reducing the cost of care packages.
- who are developing our support model for people who are stepping down from residential or in-patient care settings and continuing their recovery at home or in community settings. This will improve outcomes and reduce costs by allowing people to step-down from 24 hour care earlier in their recovery process and receive more help whilst living in the community
- we are continuing to invest in the range of community based support models for people with mental health needs – helping people to remain living in their own home or a community setting whilst they get support – and reducing the reliance on costly residential and in-patient settings. We are developing preventative services and integrating the vital support provided by the voluntary sector around community and specialist mental health services that will be delivered through the Recovery and Inclusion service. The business case for additional investment in an Integrated Primary Care Mental Health Service - including specialist mental health social workers is in development and is proposed to come forward for Transformation Funding - to support the delivery of the savings highlighted in this overarching business case

#### **What assumptions have you made?**

We have assumed that a small saving can be made through joint post arrangements with Peterborough City Council.

#### **What constraints does the project face?**

There are some diminishing returns from approaches which have delivered savings in previous years - for example

Efficiencies from the residential and nursing home and care packages have been delivered for the previous 3 years and the scope is almost exhausted from this avenue  
 Additional investment in community-based models will be required if we want to continue to shift care away from in-patient settings to community-based service delivery  
 After implementation of this business case all service users will have been reviewed using appropriate funding tools to ensure health funding is appropriately apportioned - no further financial benefit likely from further reassessments after 2018/19

Social Care Service for people with mental health needs are provided on an integrated basis as part of the wider health and care system - therefore to achieve transformational change and drive out all benefits we need to work with our health partners and secure system wide change. For example if the number of admissions to in-patients settings could be reduced (by changing the support model and pathways) it would deliver reduced demand for ongoing social care - this goal is being pursued as joint action with the Clinical Commissioning Group but is not wholly within the gift of the Local Authority.

## Scope / Interdependencies

### Scope

#### What is within scope?

This proposal covers the totality of savings from mental health budgets - and so covers service users of working age in Adult Mental Health Services as well as older people with mental health needs age over 65

#### What is outside of scope?

Children's mental health services are out of scope

## Cost and Savings

See accompanying financial report

## Non Financial Benefits

### Non Financial Benefits Summary

These proposals are aligned to our strategy and aspiration for all social care service users to receive support which build on their strengths and supports them to live healthy independent lives. In particular there is a strong focus on helping people continue to live in their own homes and communities during and after periods of mental health support, with a reduced reliance on in-patient and 24 hour care settings. We are continually building and developing the community model of care - ensuring voluntary sector support is provided alongside the formal social care and clinical offer and increasingly offering assistive technology to help people live as independently as possible.

## Risks

### Title

Uncertainty of demand-led budgets

## Project Impact

### Community Impact Assessment

#### Who will be affected by this proposal?

This project will impact on adults and older people with mental health needs who are eligible for adult social

care support. It will also impact on the various practitioners within the Cambridgeshire and Peterborough NHS Foundation Trust who provide adult social care services

**What positive impacts are anticipated from this proposal?**

The use of assistive technology and development of community-based models of care will hopefully increase the proportion of service users who can continue to live at home or in community settings during and after their period of mental health support. By helping people to remain living in their own homes we can help them maintain relationships with family and friends, retain the confidence to cope with independent (or semi-independent) living and increase their chances of thriving after their period of treatment and support.

**What negative impacts are anticipated from this proposal?**

This proposal does not include any change in care thresholds or reduction in the commitment to meet eligible needs. However it does include the intention to make demand management savings by working with people in a way which supports them to be more independent of care services. It might therefore represent a less risk-averse model. The evidence suggest that service users living within the community and semi-independently supports better outcomes - with the community focus supporting effective recovery and a greater chance of them returning to good mental health sustained over the longer term. However living more independently does by definition mean that intensive help is not available as readily as it would be in a 24 hour setting for example. Decisions about the best care setting for an individual will of course 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.

**Are there other impacts which are more neutral?**

We will hope to achieve efficiencies from the re-commissioning of external care contracts - this should not reduce care standards and quality.

**Disproportionate impacts on specific groups with protected characteristics**

**Details of Disproportionate Impacts on protected characteristics and how these will be addressed**

Not applicable - no disproportionate impacts

# Business Case

## Better Care Fund

### Project Overview

Project Title	Better Care Fund		
Saving	£7,200K	Business Planning Reference	A/R.6.128
Business Planning Brief Description	The Better Care Fund (BCF) is our joint plan with health partners aimed at providing better and more joined up health and care provision and easing financial and demand pressures in the system.		
Senior Responsible Officer	Will Patten		

### Project Approach

#### Background

##### Why do we need to undertake this project?

The Better Care Fund (BCF) is our joint plan with health partners aimed at providing better and more joined up health and care provision and easing financial and demand pressures in the system. Priority areas of focus are protecting frontline services, preventing avoidable admissions to hospital and ensuring people can leave hospital safely when their medical needs have been met.

The Cambridgeshire BCF plan provides vital support to mainstream services, and allso funds a range of new schemes in areas including: preventing falls, increasing independence, investment in suitable housing for vulnerable people and enhanced intermediate care, Reablement and homecare for people leaving hospital.

The Better Care Fund includes an element of funding intended to protect Adult Social Care services, as the revenue support grant has decreased and demand continues to increase. On this basis a proportion of the overall BCF spend is proposed to be taken to savings, in order to protect services and avoid the need for any service reductions in adult social care services.

Cambridgeshire and Peterborough's full BCF plan is contained within the papers for the Health and Wellbeing Board, available at

[https://cmis.cambridgeshire.gov.uk/ccc\\_live/Committees/tabid/62/ctl/ViewCMIS\\_CommitteeDetails/mid/381/id/12/Default.aspx](https://cmis.cambridgeshire.gov.uk/ccc_live/Committees/tabid/62/ctl/ViewCMIS_CommitteeDetails/mid/381/id/12/Default.aspx)

##### What would happen if we did not complete this project?

If we did not use the BCF to adequately protect social care services there is a significant risk that adult social care services would become unsustainable, creating safeguarding risks to adult social care service users.

#### Approach

##### Aims / Objectives

The aim of Cambridgeshire's BCF is to move to a system in which health and social care help people to help themselves, and the majority of people's needs are met through family and community support where appropriate. This support will focus on returning people to independence as far as possible with more intensive and longer term support available to those that need it.

This shift means moving money away from acute health services, typically provided in hospital, and from ongoing social care support. This cannot be achieved immediately – such services are usually funded on a

demand-led basis and provided as they are needed in order to avoid people being left untreated or unsupported when they have had a crisis. Therefore reducing spending is only possible if fewer people have crises. However, this is required if services are to be sustainable in the medium and long term.

#### Project Overview - What are we doing

The BCF creates a pooled budget between health, social care and housing services in each Health and Wellbeing Board area. Cambridgeshire has a single Health and Wellbeing Board. Plans are developed and agreed by local authorities and NHS commissioners, and signed off by the Health and Wellbeing Board.

BCF contains elements of funding that:

- provide mainstream health, social care and housing services
- supports the development and delivery of transformation projects that will support a shift away from acute health care and long term social care towards care that is more preventative and personalised and focused on keeping people well.
- supports the sustainability of the care market and protects social care services from reductions.

Cambridgeshire's BCF budget for 2018/19 will be c. £50m. It is proposed that £7,200k is taken as a saving to manage increasing demand for social care. The Better Care Fund includes an element of funding intended to protect Adult Social Care services, as our revenue support grant has decreased and demand continues to increase. This part of the BCF spend will be used to avoid the need for any service reductions.

#### What assumptions have you made?

We have assumed that the Better Care Fund budget will match previously published allocations for 2018/19.

#### What constraints does the project face?

Better Care Fund plans, including this proposed saving, must be agreed by a range of partners through the Health and Wellbeing Board; and signed off by NHS England and the Department for Communities and Local Government.

### Scope / Interdependencies

#### Scope

##### What is within scope?

Social care services for adults; health services for older people and adults with long-term conditions

##### What is outside of scope?

Social care and health services for children 0-18

### Cost and Savings

See accompanying financial report

### Non Financial Benefits

#### Non Financial Benefits Summary

The Better Care Fund aims to shift demand across health and care services to an approach based around supporting people to live as independently as possible for as long as possible. In this way we can reduce care costs whilst also securing better quality of life for patients and service users. In particular we want to support people to remain living in their own homes for as long as possible and to receive support from their own network of natural support - rather than just a reliance on formal care provision.

### Risks

**Title**

Reduction in Better Care Fund allocation

**Project Impact****Community Impact Assessment****Who will be affected by this proposal?**

Patients and social care service users

**What positive impacts are anticipated from this proposal?**

Better coordinated care and more sustainable care market promoting better outcomes for service users and patients

**What negative impacts are anticipated from this proposal?**

This proposal does not include any change in care thresholds or reduction in the commitment to meet eligible needs. However the Better Care Fund is predicated on shifting demand by working with people in a way which supports them to be more independent of care services. It might therefore represent a less risk-averse model. The evidence suggest that service users living within the community and semi-independently supports better outcomes - with the community focus supporting effective recovery and a greater chance of them returning to good mental health sustained over the longer term. However living more independently does by definition mean that intensive help is not available as readily as it would be in a 24 hour setting for example. Decisions about the best care setting for an individual will of course 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.

**Are there other impacts which are more neutral?****Disproportionate impacts on specific groups with protected characteristics****Details of Disproportionate Impacts on protected characteristics and how these will be addressed**

Not applicable

# Business Case

## A/R.6.172 Managing Demand in Older People's Services

### Project Overview

Project Title	A/R.6.172 Managing Demand in Older People's Services		
Saving	£1,000K	Business Planning Reference	A/R.6.172
Business Planning Brief Description	Across Older People's Services we continue to invest with our partners in new service models which help us respond to the rising demand for care by supporting service users to retain and regain their independence.		
Senior Responsible Officer	Charlotte Black		

### Project Approach

#### Background

##### Why do we need to undertake this project?

We need to respond to the pattern of rising demand for care - driven in large part by the increasing number of older people in Cambridgeshire and the rising cost of care stemming from inflation and capacity shortages. If we do not change the way we meet people's needs, reduce the level of demand through effective preventative action and manage the cost of care package the budgets in social care will become unsustainable. An effective demand management strategy is therefore essential.

To model the potential for further savings from older people's services in future years we have looked to model the existing trends and project forward based on the assumption that the direction and pace of travel continues. Very simplistically this shows decreasing numbers of service users but higher costs per unit of each type of care in 2018/19. These two impacts offset one another to some extent but do indicate a further overall budget reduction being possible in 2018/19 of circa, if the assumptions are correct.

However we shouldn't underestimate the challenge in keeping the service user numbers on the downward trend – in recent years we have introduced a range of new preventative measures and services and we would need to put a further layer of new demand management strategies in place for 2018/19 in order to keep the numbers falling.

The tables below show projections for numbers of service users and average unit costs - this modelling will be reviewed and updated as the work progresses.

#### Service User Numbers Modelling - by care type

	<b>2015-16 Average</b>	<b>2016-17 Average</b>	<b>2017-18 Average</b>	<b>2018-19 Average</b>
Nursing	321	302	284	265
Nursing Dementia	14	31	48	65
Residential	546	485	425	364
Residential Dementia	344	359	375	390
Domiciliary Care	2,015	1,797	1,579	1,362
Direct Payment	357	294	232	170
Daycare	247	204	162	119
<b>Total Clients</b>	<b>3,870</b>	<b>3,548</b>	<b>3,227</b>	<b>2,905</b>

#### Cost of Care modelling

	<b>2015-16 Average</b>	<b>2016-17 Average</b>	<b>2017-18 Average</b>	<b>2018-19 Average</b>
Nursing	587.48	645.53	703.59	761.65
Nursing Dementia	612.10	681.97	751.83	821.70
Residential	430.78	455.97	481.17	506.36
Residential Dementia	492.63	512.55	532.48	552.41
Domiciliary Care	142.65	150.76	158.88	167.00
Direct Payment	224.44	229.96	235.49	241.02
Daycare	55.43	56.59	57.74	58.90

#### **What would happen if we did not complete this project?**

Ultimately if the cost of providing social care to older people and other client groups cannot be effectively controlled it would make the County Council's budget position unsustainable - leading to reactive reductions to services in order to balance the budget.

#### **Approach**

##### **Aims / Objectives**

To ensure we manage the level of demand for care in older people's services

To invest in new preventative and early intervention initiatives to help people remain more independent and live healthily in their own homes for longer

To secure financial savings for the local authority - without the need for service cuts or reductions

##### **Project Overview - What are we doing**

Across Older People's Services we continue to explore and develop new service models which help us respond to the significant rise in demand for care resulting from the growing and aging population in Cambridgeshire. In particular we have had success through the introduction of the Adult Early Help Service and other new preventative initiatives which are continuing to constrain demand for people with emerging needs within communities. However the impact we've had in preventative services is now being offset significantly by evidence of much higher needs amongst those people who are receiving services and significantly increasing numbers of older people being admitted to hospital and so then coming into the social care system via the hospital discharge pathway. Where previously we were seeing a gradual reduction in the overall expenditure on care for older people, in recent months this trend has now begun to reverse and pressure is emerging again.

In response, we are now working with a consortium of Cap Gemini, iMPower and Grant Thornton through the Adults Positive Challenge programme to develop a new model of care across all adults client groups. The consortium are on site until early in 2018 and the outcome of the review will provide the detail of how we will deliver the estimated £1m of demand management savings in 2018/19 and re-shape services so that they are financially sustainable for the future.

Once the review has concluded we anticipate coming forward with a request to the transformation fund for 'invest to save' resource in order to deliver the recommendations flowing out of the review. Until this detail is complete, the business case and strategy for these savings is therefore draft at this stage, but already includes a focus on;

- Investing with our health partners in a significantly enhanced falls prevention programme which will ease the demand for care driven by older people suffering injury as a result of a fall. This joint work is led via our Public Health teams and a range of social care and health partners and will deliver investment in.
- Enhancing the discharge model – to ensure that the pressure on pace driven by delayed transfers of care does not result in opportunities for demand management being missed – i.e. use of ATT, post discharge reviews, moving on from interim beds quickly, getting community equipment, ensuring throughput in reablement, support to access community health services and similar.
- At the interface of reablement and long term care we are looking to change the care and support planning/direct payments offer including the use of local Personal Assistants. Modernising the Direct Payment Process and so increasing take up will release vital capacity in the domiciliary care market
- Commissioning explicitly for out of hours care – working with independent sector providers to develop this provision – particularly in the Cambridge area.
- Commissioning access to more temporary, bed based support outside hospital that incorporates intensive, possibly therapy led care, and reablement.
- Considering whether Extra Sheltered Care could take more complex people or keep them longer if we increased their staffing levels particularly at night.

#### **What assumptions have you made?**

The modelling for the overall budget reduction is informed by the recent trends in service users numbers in the various client types and the average cost of care packages. There are also underlying assumptions about the impact of Reablement Services, analysis of the impact of Adult Early Help and modelling within the business case for the Falls Prevention Programme.

The estimated savings amount may change as a result of further modelling or if the trends in demand alter as the current financial year progresses.

#### **What constraints does the project face?**

Work to address demand pressures in care for older people is constrained significantly by workforce challenges in recruiting to key roles – in particular social workers, reablement staff and homecare providers – all of which are in insufficient supply.

We are also operating in the context of a local health system which is under-substantial pressure – health and care services are working together strategically to address underpinning trends in demand – whilst also having to contend with immediate financial pressures, peaks in demand pressure and shared workforce challenges.

## Scope / Interdependencies

### Scope

#### What is within scope?

Preventative and early intervention initiatives for older people's services

## Cost and Savings

See accompanying financial report

## Non Financial Benefits

### Non Financial Benefits Summary

Our social work strategy is based around supporting people to live as independently as possible for as long as possible. In this way we can reduce care costs whilst also securing better quality of life for service users. In particular we want to support people to remain living in their own homes for as long as possible and to receive support from their own network of natural support - rather than just a reliance on formal care provision.

This scheme is also about prevention - with the investment in the falls prevention programme in particular offering better preventative work which will reduce the number of people having falls, incurring injuries and losing quality of life as a result. All of our work is about building on individual strengths and community resilience to help people live happily and healthily for longer.

#### Title

## Risks

#### Title

Unexpected demand pressures

## Project Impact

### Community Impact Assessment

#### Who will be affected by this proposal?

This proposal relates to all service users supported by Older People's teams - in particular those with eligible needs for social care or where we are working with people to prevent needs escalating. The service age threshold is 65+, but the majority of service users are 80+.

#### What positive impacts are anticipated from this proposal?

Our social work strategy is based around supporting people to live as independently as possible for as long as possible. In this way we can reduce care costs whilst also securing better quality of life for service users. In particular we want to support people to remain living in their own homes for as long as possible and to receive support from their own network of natural support - rather than just a reliance on formal care provision.

This scheme is also about prevention - with the investment in the falls prevention programme in particular offering better preventative work which will reduce the number of people having falls, incurring injuries and losing quality of life as a result. All of our work is about building on individual strengths and community resilience to help people live happily and healthily for longer.

Where service users are paying for their own care (in part or in full) then our work to support a greater degree of independence will also have a direct financial benefit – for example if we can keep people in their own homes for longer rather than requiring residential care, or meet their needs with fewer daily care visits then the amount paid in contributions to the cost of care will be much lower – and the depletion of financial assets

will be much slower.

**What negative impacts are anticipated from this proposal?**

There are no negative impacts envisaged and there is no change to the care threshold or service level associated with this saving. The proposal is about working with people in the right way, supporting their independence and acting preventatively.

Care packages will always be designed to meet needs and achieve positive outcomes for service users - but it is important to be clear that in some case this will lead to fewer hours of care being delivered or people being supported to live more independently. All of the evidence suggests that this approach is better for service users - but it is potentially less risk-averse and will represent a change for service users and families. We will work with them to address any concerns they might have about the ability of service users to cope with greater independence - ensuring that contingency plans are always in place and that advice is on hand if questions or concerns arise.

**Are there other impacts which are more neutral?**

**Disproportionate impacts on specific groups with protected characteristics**

**Details of Disproportionate Impacts on protected characteristics and how these will be addressed**

The above impacts relate specifically to older people - who are the focus on this proposal. The expectation is that our strategy will continue to lead to better outcomes and services for older people as well as financial savings to the local authority.

# Business Case

## A/R.6.143 Homecare re-tendering

### Project Overview

Project Title	A/R.6.143 Homecare re-tendering		
Saving	£306K	Business Planning Reference	A/R 6.143
Business Planning Brief Description	Re-tendering of home care to develop the market through a number of best practice initiatives including the expansion of direct payments		
Senior Responsible Officer	Richard O'Driscoll - Lead Decision Maker  Claire Bruin		

### Project Approach

#### Background

##### Why do we need to undertake this project?

Cambridgeshire County Council's current Home and Community Support contract comes to an end in November 2017 and as a result the services need to be retendered to ensure continuity of services for Cambridgeshire residents.

Home and community services are currently procured separately for the disciplines of Older People, Physical disability, Learning Disability, Childrens and Mental Health Services. This has resulted in some capacity issues for some disciplines and some geographical areas. To address these deficits, create efficiencies and for increased synergy across all service areas a new home and community support contract will be introduced. We aim to improve service availability, user choice, flexibility of provision and further prevent delays in the provision of homecare.

Cambridgeshire is amongst the highest payers regionally for Homecare. The wide client group this contract will cover requires a range of existing arrangements and the implications to be addressed in developing the pricing model. The new living wage and inflation will need to be taken into account in new contract.

We will review local authority use of a dynamic purchasing approach (eg Northamptonshire and Cardiff) with view to making recommendation about whether this should be utilised for this contract. A Dynamic Purchasing System could increase available capacity across the county.

It is recognised that recruitment and retention is an ongoing challenge for the homecare sector. A further and specific challenge for the homecare workforce is the impact of Brexit. Currently, across Cambridgeshire around 9% of the independent sector homecare workforce are from the EU. We do not know what Brexit will result in in terms of right to work in the UK, but it is likely that there will be a detrimental effect on a number of providers who currently recruit from the EU. There has already been difficulty in attracting EU workers due to the fall in the value of the pound, as well as concerns about a reported rise in anti-EU sentiment. This is likely to result in a recruitment challenge in an already strained sector. Meeting this challenge will rely largely on the success of a joint sector recruitment and retention strategy. Particularly in the short term it may also be necessary for independent providers to direct recruitment drives at countries outside the EU.

##### What would happen if we did not complete this project?

Without this project we would not have a home and community support service contract in place from

## Approach

### Aims / Objectives

1. To jointly procure home and community support services across Cambridgeshire for children, adults with physical and learning disabilities, older people and people with a mental health need.
2. To improve the availability and flexibility of home care services, whilst ensuring that we maintain a high quality service.
3. Deliver an efficient and cost effective homecare service - effective pricing structure to be implemented, savings achieved and capacity increased.
4. To commence the transition towards an outcomes based approach to commissioning home and community support services for Cambridgeshire citizens.

### Project Overview - What are we doing

This project will be responsible for delivering the Home and Community Support contracts for:

- Cambridgeshire County Council Children's Social Care
- Cambridgeshire County Council Learning Disability Partnership
- Cambridgeshire County Council Older People and People with a Physical Disability
- CCG Children's Continuing Healthcare (CHC)
- Cambridgeshire County Council Adult Mental Health Services

Work will include:

- Consultation with home care users, community groups and care providers to ask about their views of home care services.
- Development of a new specification for home and community support.
- Financial modelling to provide effective pricing structures.
- Competitive tendering process for homecare services. Providers will be selected on the basis of quality, CQC rating, cost, capacity and ability to meet current and future service requirements.
- Introduction of a procurement model called Dynamic Purchasing system (DPS) which allows successful providers to bid for individual packages of work. As part of this procurement model the Council needs to implement a system capable of advertising care packages, receiving provider's bids and awarding work.
- Development of homecare brokerage service
- Communication and engagement with providers, service users and stakeholders
- Workforce development - to develop the County Council's strategic position and response to supporting the development of the homecare workforce.
- Development of an outcome focused approach
- Rationalisation of CCC and CHC discharge cars

### What assumptions have you made?

We will not be progressing a joint tender process with Peterborough City Council.

Peterborough and Cambridgeshire CCG Continuing Healthcare services will be included in the tender process

### What constraints does the project face?

Recruitment and retention is an ongoing challenge for this sector. A further and specific challenge for the homecare workforce is the impact of Brexit and potential effect on recruitment.

Risk of reduced resources / changes to resources and structures as a result of internal changes (e.g. Corporate Capacity Review, LGSS, Children's Change Programme, CCG changes)

County Council IT systems are currently unable to support outcome based payment models

## Scope / Interdependencies

### Scope

#### What is within scope?

Home & community support across Older People, Learning Disability Services, Children's services, services for people with a physical disability and people with a mental health need and for CCG Children's Continuing Healthcare.

#### What is outside of scope?

Arrangements at Peterborough City Council

## Project Dependencies

### Title

Development of centralised brokerage

## Cost and Savings

See accompanying financial report

## Non Financial Benefits

### Non Financial Benefits Summary

Increased synergy across service areas.

Improved service availability, user choice and flexibility of provision

Prevent delays in the provision of homecare.

Increased homecare capacity

### Title

Increased homecare capacity

## Risks

### Title

Reduced resources

Risk of successful post award challenge

Current provider failure

CHC providers not meeting standards/quality

Brokerage Service is not in place and operational by 1 November 2017

## Project Impact

### Community Impact Assessment

#### Who will be affected by this proposal?

Homecare users, carers and providers across Cambridgeshire

#### What positive impacts are anticipated from this proposal?

We aim to improve service availability, user choice, flexibility of provision and further prevent delays in the provision of homecare.

#### What negative impacts are anticipated from this proposal?

Service users may experience a change in carer.

Are there other impacts which are more neutral?

Disproportionate impacts on specific groups with protected characteristics

Details of Disproportionate Impacts on protected characteristics and how these will be addressed

# Business Case

## A/R.6.173- Client contributions - reassessments

### Project Overview

Project Title	A/R.6.173- Client contributions - reassessments		
Saving	£412K	Business Planning Reference	A/R.6.173
Business Planning Brief Description	Increasing staff resource in LGSS financial assessment team in order to undertake a greater number of financial assessments of clients in receipt of adult social care. This is to ensure that the correct client contribution is being charged in line with updated Care Act guidance and upcoming changes to CCC Fairer Contributions Policy		
Senior Responsible Officer	Will Patten		

### Project Approach

#### Background

##### Why do we need to undertake this project?

In July 2016, Adult Social Care agreed to award transformation funding to a 12 months project with the aim of undertaking a large amount of financial reassessments of client contributions towards non-residential care and support. This was required as many clients had not had their contributions reviewed for a number of years and their details and financial circumstances needed to be added and/ or updated on Abacus.

At the start of the project, it was estimated that approximately 3,000 service users would require a reassessment due to the length of time it had been since the last assessment was processed and it was estimated that it would take approximately 1.5 – 2 years to complete all of the reassessments.

As there was no existing resource within LGSS to undertake this task, four FTE Financial Assessment Officers at pay scale 4 were employed on a fixed term contract to focus on these reassessments which, to date, has resulted in an extra 498 reassessments being completed and an additional income of £354,729 generated.

The fixed term contracts are now coming to an end (March 2018) and it is proposed that these contracts are extended until March 2019 and that an additional four financial assessment officers are recruited on a 12 months fixed contract with a view to speeding up that reassessment process to ensure that client contributions are being duly and correctly collected. A recent pay review has resulted in these posts being regraded at scale 5.

##### What would happen if we did not complete this project?

The fixed term contracts x 4 would be terminated once transformation funding runs out. There would not be enough resource within LGSS to complete the reassessments (approx 2000) and the current contribution amounts would remain unchanged.

#### Approach

##### Aims / Objectives

The aim of the initiative is to carry out more reassessments in financial year 2018/19 (approximately 2000 cases) with a view to adjusting client contributions in line with changes to their financial circumstances and updating client details on Abacus.

## Project Overview - What are we doing

Extending four fixed term contracts for financial assessment officers and recruiting an additional four on a 12 months fixed term contract to undertake more reassessment of adults social care clients

## What assumptions have you made?

There is an assumption that carrying out a reassessment of approximately 2000 clients who haven't had a reassessment for at least 2 years would result in those clients' contribution being increased. Last year, the increase was on average £13.83 per week / £719 per year.

However, it is important to point out that larger increases in contributions were achieved in 2016/17 due to the length of time these service users had waited for a reassessment and it is anticipated that weekly increases in 2018/19 would consequently be less than £13.83 per week.

It should also be noted that some service users who are reassessed at this point in time would have ceased having services and therefore, no additional income would be generated as a result of the reassessment exercise.

## Option 2 (extend existing four fixed term contracts until March 2019)

	17-18	18-19	19-20	20-21	21-22
Number of assessments	333.5	667	667	333.5	NA
Estimate of average increase	£13.83	£11.06	£8.85	£7.08	NA
Likelihood they would be still be in receipt of care from AFM analysis	100%	77%	65%	45%	NA
Income amount	120,243	267,579	247,849	128,164	27,652

**Total over whole period £791k additional income – doesn't take account of additional FABA costs**

## Option 3 (option 2 + recruit an additional four financial assessors on fixed term contracts until March 2019)

	17-18	18-19	19-20
Number of assessments	667	1334	NA
Estimate of average increase	£11.98	£7.67	NA
Likelihood they would be still be in receipt of care from AFM analysis	100%	77%	NA
Income amount	208,374	412,680	204,306

**Total over whole period £825k additional income – doesn't take account of additional FABA costs.**

## What constraints does the project face?

It is difficult to predict the number of reassessments that can be carried out in a year as it's a manual process so rely entirely on the performance of the financial assessors

It is impossible to predict how much extra income will be generated as a result of reassessments as the current financial circumstances of the clients are unknown

It is difficult to recruit / retain staff on temporary contracts

## Delivery Options

### Has an options and feasibility study been undertaken?

1. Terminate 4 x fixed term contracts and cease to carry out reassessments of client contributions once transformation funding runs out
2. Extend the contract of current 4 x FTE for an additional 12 months
3. Option 2 + recruit an additional 4 fixed term financial assessors

An increase in staff numbers will result in more financial assessments being completed; generating additional

income for the authority

## Scope / Interdependencies

### Scope

#### What is within scope?

LGSS Financial Assessment Team

## Cost and Savings

See accompanying financial report

## Risks

### Title

Increased client debt

Recruitment and retention

Reassessment rates do not improve in line with expectations

Income generated from reassessed client contributions do not increase in line with expectations

## Project Impact

### Community Impact Assessment

#### Who will be affected by this proposal?

Clients whose circumstances have changed but who have avoided a reassessment due to staff shortage at the council will have their case reviewed sooner which may result in an increase in their client contribution charges

#### What positive impacts are anticipated from this proposal?

Reassessment backlog will be cleared and charges corrected when appropriate

#### What negative impacts are anticipated from this proposal?

A financial reassessment may lead to higher client contributions which can cause financial hardship for the individuals concerned

#### Are there other impacts which are more neutral?

Engaging with the clients to discuss their social care contribution charges may lead to them setting up direct debits which are easier to manage for them compared to paying invoices

### Disproportionate impacts on specific groups with protected characteristics

Details of Disproportionate Impacts on protected characteristics and how these will be addressed

# Business Case

## A/R.6.174 Supported Housing Commissioning Review

### Project Overview

Project Title	Supported Housing Commissioning Review		
Saving	£1,000K	Business Planning Reference	A/R.6.174
Business Planning Brief Description	This project will review how we commission housing related support services for homelessness or vulnerably housed people across Cambridgeshire and Peterborough.		
Senior Responsible Officer	Adrian Chapman		

### Project Approach

#### Background

##### Why do we need to undertake this project?

Councils, Housing Associations and charities have historically provided housing for vulnerable households who have for one reason or another become homeless or are otherwise unable to live independently. Support is usually provided by the landlord in addition to more intensive housing management. These accommodation based services provide stable housing from which vulnerable clients can continue to live semi-independently. For some, this will be short periods while they regain independent living skills but for others this will be a longer term housing solution.

The Government has announced proposals that will restrict housing benefit payments for supported housing with effect from April 2019 to the same level as Local Housing Allowance rates. This rate is much lower than supported housing rent levels which are higher due to the specialist nature and type of accommodation. In order to ensure that supported housing remains viable the Government has proposed to provide separate funding in order to provide a 'top-up fund' for vulnerable households. This fund could be as much as £10m for Cambridgeshire although there is no further detail about how the funding will be decided. The housing sector is currently awaiting the Government's Green Paper which is now overdue.

A recent internal Commissioning Review has considered Cambridgeshire and Peterborough's investment in housing related support (HRS) services for homelessness or vulnerably housed people. The recommendations included the need for a full Supported Housing Review across Cambridgeshire and Peterborough and across all client groups when the Green Paper is published.

The current investment by the County Council in the services covered by this review is £3.1m, (excluding investment in services for young people) supporting over 750 homeless and vulnerably housed people. Peterborough invests £1.12m in similar services supporting 362 people. This is across three support areas:

- Services for rough sleepers (£861,762)
- Homeless hostels/refuges (£1,393,167)
- Floating support services – homeless prevention (£896,389)

The first two consist mainly of accommodation based and outreach services.

#### Accommodation based supported housing

Accommodation based supported housing is currently subject to Government proposals that will restrict

housing benefit payments to the same level as Local Housing Allowance rates from April 2019. As part of the proposals the government intends to provide a separate pot of funding (potentially to upper tier authorities) in order to provide a top-up fund for vulnerable households. This fund could be as much as £10m for Cambridgeshire. An all party Select Committee Inquiry in the spring reported that the Government proposals as presented are not workable. The housing sector is currently awaiting the Government's response along with a Green Paper which is now expected in 'late summer'.

### **Floating (visiting) Housing related support services**

Floating support services are not affected by these changes and can be retendered.

Current providers report 100% increase in demand over the last four years with many households with complex problems also suffering from mental health issues. These are being further impacted by recent benefit changes and associated financial pressures. Providers currently have to maintain waiting lists as they are working at full capacity.

The mental health visiting service was remodelled in 2016 to provide a stronger focus on mental health rather than housing issues, although the criteria for acceptance into the service is that a person's housing must be at risk. Although it is a countywide service, numbers supported are low (35) and there is significant confusion for clients (and agencies) about what this service delivers as opposed to the floating support service.

Peterborough CC also funds visiting support services. Cambridgeshire Young Peoples service is considering commissioning a visiting support service for young people. Initial discussions have taken place with partners and support received in principle.

For more detail please see the attached document - Cambridge sub-regional housing board report dated 6th Oct 2017

### **What would happen if we did not complete this project?**

If we did not complete this project then we would not be commissioning services in the most efficient way which would negatively impact on resource allocation and service user experience.

## **Approach**

### **Aims / Objectives**

The objectives of the project are;

- To review the scale of the current housing related support programme across Cambridgeshire and Peterborough to ensure it is fit for purpose
- To consider the Governments Green Paper and the likely impact on supported housing including risk to providers, local authorities and individuals

### **Project Overview - What are we doing**

The project will specifically consider:

- A needs analysis of levels of need for supported housing
- Explore procurement models including tender, grant or joint commissioning
- Examine provider views and opportunities
- Understand and enhance value for money of assessments
- Explore different delivery models for visiting or accommodation based support
- Review and implement opportunities for transformation of supported housing
- Understand how alignment with Peterborough can be achieved

### **What assumptions have you made?**

The following assumptions have been made;

- The Governments Green Paper will be published in 2017
- A joint delivery model with Peterborough City Council is required

#### What constraints does the project face?

At the present time the supported housing sector is in flux as the Government's proposals are not yet known. It is also not clear whether there will be an administration grant to accompany any funding or how the level of funding will be decided.

## Scope / Interdependencies

### Scope

#### What is within scope?

The project will include all supported housing commissioning activity. This covers a number of client groups including;

- Older People
- People with a mental health problem
- People with a learning disability
- People who have a physical disability
- Children and young people
- People who are homeless (families, couples and single people)
- Offenders and those released from prison
- People with substance misuse issues

#### What is outside of scope?

Commissioning activity not related to supported housing.

## Cost and Savings

See accompanying financial report

## Risks

### Title

Timeframe for completion dependent on Government consultation

## Project Impact

### Community Impact Assessment

#### Who will be affected by this proposal?

All Cambridgeshire and Peterborough citizens who find themselves homeless or are unable to live independently.

#### What positive impacts are anticipated from this proposal?

Having a strategic commissioning plan supported by a clear needs analysis will allow services to be commissioned in an efficient way for the benefit of service users

However, as the Government's Green Paper is still awaited it is unclear as to the full impact of any proposal

#### What negative impacts are anticipated from this proposal?

As the Government's Green Paper is still awaited it is unclear as to the full impact of any proposal

**Are there other impacts which are more neutral?**

As the Government's Green Paper is still awaited it is unclear as to the full impact of any proposal

#### **Disproportionate impacts on specific groups with protected characteristics**

##### **Details of Disproportionate Impacts on protected characteristics and how these will be addressed**

Any changes to Government policy are likely to affect those who are most deprived, either positively or negatively. The full impact will be known once the Green paper is released and analysed.

# Business Case

## A/R.6.175 Automation- Mosaic and Adult Business Support Processes

### Project Overview

Project Title	Automation (C/R.6.103)		
Saving	£150K	Business Planning Reference	A/R.6.175
Business Planning Brief Description	The Citizen First, Digital First programme began to drive efficiencies through systems integration and streamlined customer contact across a number of services. We will continue a thorough systematic review of service processes that investigates the end-to-end process and identifies where they could be automated and fundamentally considers how and why we provide what we do which could lead to larger savings which will enable us to more fully exploit the technologies that the Council has.		
Senior Responsible Officer	Amanda Askham		

### Project Approach

#### Background

##### Why do we need to undertake this project?

At its most fundamental level, this project is about our ability to adapt, and leverage the benefits of rapid changes wrought by evolving technologies. The Citizen First, Digital First programme began looking at possible efficiencies that could be made in the back-office through integrating different systems. There is now the opportunity to reboot and refocus the programme to ensure that we create an environment in which we can innovate at pace.

Public interest in automation, artificial intelligence (AI) and robotics is increasing. Recent years have seen the emergence of systems that can diagnose cancers as accurately as pathologists, detect fraudulent financial transactions in a matter of milliseconds, produce coherent news stories for media outlets, shuttle goods and pallets within complex distribution warehouses, trade stocks and shares in financial markets, and perform case research for the legal industry. The breadth and depth of accomplishments expands by the day.

A more thorough systematic review of service processes that looks at the end-to-end process and not only identifies where they could be automated but fundamentally considers how and why we provide what we do will support the outcomes of the County Council more efficiently.

The RSA report titled 'The Age of Automation' ([https://www.thersa.org/globalassets/pdfs/reports/rsa\\_the-age-of-automation-report.pdf](https://www.thersa.org/globalassets/pdfs/reports/rsa_the-age-of-automation-report.pdf)) includes findings from an RSA/YouGov survey of 1,111 business leaders in 2017. The findings show that business leaders on average believed that 15% of jobs could be fully automated in the next 10 years.

As part of the Outcome Focused Reviews (OFR), the Transformation Team are working with services to understand how automation can support them to increase productivity to allow 'people to do people jobs'. The OFR programme is a mechanism for the Council to conduct an in depth analysis of our activity, functions and processes for delivery through the lense of our Strategic Outcomes; this approach enables us to step away from considering our activities as discrete pieces of work and understand how collectively the work we do with the resources we have - or the potential work we could do in the future - contributes to the delivery of

the outcomes we believe are important for people in Cambridgeshire, which are for:

1. Older people live well independently
2. People with disabilities live well independently
3. Adults and children at risk of harm are kept safe
4. Places that work with children help them reach their potential
5. The Cambridgeshire economy prospers for the benefits of all residents
6. People live in a safe environment
7. People lead a healthy lifestyle, and stay healthy for longer

#### What would happen if we did not complete this project?

We would not achieve the productivity benefits or achieve the cultural change required to support the organisation in understanding how technology changes the conditions under which business is done, and the expectations of customers, partners, and employees.

### Approach

#### Aims / Objectives

The main aims / objectives of the project are:

- investigate (and implement where appropriate) new technology to automate existing processes
- to support the culture of the organisation in adopting new technology and being included within all option appraisals

#### Project Overview - What are we doing

The initial phase of the project will focus on

- Automation of some training, advice and guidance in Learning and Children's Services
- Icon (payment system) roll-out
- Online self-assessments
- Productivity gains from implementation of Mosaic

This will require;

- Research into available and future technology to understand the opportunities
- Identify possible organisations to partner with to develop new ideas

The first phase of Icon (invoice payments) has been implemented by LGSS for 6mths. The benefits are mainly being received by the LGSS Income Team and a benefits realisation review will shortly be undertaken. The next phase of Icon will be replacing netbanx which will have more impact for CCC but is not yet ready for implementation.

The implementation of Mosaic is currently being overseen by a separate project team / governance arrangements. The project is on track to be implemented next year. Online self-assessments will be part of phase 2 of this project.

#### What assumptions have you made?

##### Cost reductions

Using the YouGov/RSA survey findings we can estimate that 15% of current tasks carried out by the services in this review could be automated. The assumption is automation will release staff capacity and savings will be driven out of the system through redeployment of this capacity and reduction in FTE over time i.e. through;

the Contact Centre from review of Customer Front Door across Cambridgeshire and Peterborough. Learning and Children's' services related to more automated models of delivering advice and guidance. Reduction in processing costs relating Icon (payment system) roll-out benefiting CCC Increase in

staff productivity resulting from implementation of Mosaic replacing current processes.

#### Implementation:

- The organisation is ready for and to adopt new technology
- Investment will be available to pump-prime the implementation of new solutions
- There is a willingness to review the type of workforce required to support the implementation of new technology

#### What constraints does the project face?

Currently some of the services identified as being in scope are part of the Outcome Focused Review process which could impact how quickly new solutions could be implemented.

### Scope / Interdependencies

#### Scope

##### What is within scope?

Initially, the following specific service areas will be in scope;

- Automated school admissions and education transport service
- Automation of some training, advice and guidance in Learning and Children's Services
- Icon (payment system) roll-out
- Online self-assessments

##### What is outside of scope?

The focus of the project will be those services listed as in scope. All other processes and service areas will be considered out of scope although links will be made, and other projects started, to support any service area that may benefit from automation within the Council.

### Cost and Savings

See accompanying financial report

### Non Financial Benefits

#### Non Financial Benefits Summary

The following non-financial benefits could be achieved;

- Increased customer satisfaction
- Increased response time for customers
- Leaner processes
- Improved/increased performance data

### Risks

#### Title

Costs out weigh anticipated savings

Management / Staff acceptance of new technology

Lack of ambition to exploit new ways of working

Technology can't be implemented within our current infrastructure

Not able to meet the proposed FTE staffing savings due to automation

Capacity of LGSS IT to support the programme

## Project Impact

### Community Impact Assessment

#### Who will be affected by this proposal?

All County Council staff as well as customers using specific services

#### What positive impacts are anticipated from this proposal?

It will improve / increase;

- the ability of the organisation, its leaders and employees, to adapt to rapid changes wrought by evolving digital technologies.
- the ability of frontline staff to deliver services effectively
- the speed and quality of service for customers.
- the productivity of the workforce

The benefits of introducing mosaic for the organisation include;

- Management Information to enable statutory reporting, performance management and resource allocation
- Improved User experience for system and service users
- Enabling efficient business processes to minimise cost and maximise service user benefit
- Flexibility to respond to changing business needs
- Flexible access for system users, including mobile access.
- Reduced transaction cost and user convenience through self-service for service users and providers.
- Links to partner systems, and support for joint processes
- Information sharing within the organisation and partners.
- Sustainability – a reliable system over the period of the contract
- Cost management.

#### What negative impacts are anticipated from this proposal?

Research indicates that for 60% of roles, 15-30% can be automated which means that staff may need to be deployed in different areas which could result in the need for re-training

Service users who do not have access to the IT required to exploit these advances will require additional support.

#### Are there other impacts which are more neutral?

Service users might fear that with increased automation their personal data is less secure, however, we will continue to adhere to necessary standards.

### Disproportionate impacts on specific groups with protected characteristics

#### Details of Disproportionate Impacts on protected characteristics and how these will be addressed

N/A

# Business Case

## A/R 6.122 Transforming Day Services for People with Learning Disabilities

### Project Overview

Project Title	Transforming Day Services for People with Learning Disabilities (A/R.6.122)		
Saving	£50K	Business Planning Reference	A/R 6.122
Business Planning Brief Description	Developing a model of day opportunities for people with learning disabilities that is focused on enabling progression and skills development, supporting people with LD into employment where appropriate. Most of this saving will be delivered in 19/20 with a small amount in the latter part of 18/19.		
Senior Responsible Officer	Claire Bruin Mubarak Darbar		

### Project Approach

#### Background

##### Why do we need to undertake this project?

Cambridgeshire's employment figures for people with learning disabilities are poor, therefore there is significant work required to support people to progress as far as possible towards full-time paid employment. In parallel, it is acknowledged that there are a number of people who will require a more traditional model of day care due to the complexity of their needs. Therefore, the project will develop a range of support from full-time supported employment to traditional day care to promote independence and enable people with learning disabilities to progress towards full-time paid employment where possible.

##### What would happen if we did not complete this project?

Cambridgeshire's employment figures for people with learning disabilities will remain low. This is associated with worse outcomes. In addition, savings would not be delivered.

#### Approach

##### Aims / Objectives

##### Project Driver

Day Services is part of the wider LD Savings programme in 2018/19 with retendering taking place currently - up until April 2018. It is important not to consider day services in isolation but as part of the wider provisions offered for adults with learning disabilities as well as considering how the service can be positively influenced and driven by the group. Equally it is important to recognise that although the review is driven in part by an expectation to deliver financial savings to CCC, it does not start with any assumption about how that might be achieved or that day service provision will be reduced or negatively impacted. It will be important to develop a fuller understanding of the contribution of day services to the wider market of care and ultimately the financial position of the authority.

##### Objectives

There are a number of potential positive outcomes for Day Services with potential savings linked to them. Opportunities could include alternative provision, such as; education and training opportunities, employment opportunities, shared spaces and services provided by third sector services. There may be geographical practicalities which may provide financial savings such as reviewing transportation costs, which needs to

investigated. The group will consider, where possible, the wider Opportunities such as reviewing respite provision for service users, may mean service users can remain in their own home for longer, reducing the need for residential provision.

### **Vision/Aims**

The vision for the project is to move from the traditional 'daytime respite' model for day services and to a more progression-focused model with the aim of promoting employment opportunities for those for whom it is appropriate.

### **Project Overview - What are we doing**

Enabling someone with Learning Disabilities to secure and sustain a job is a crucial step in promoting independence and improving outcomes. The Council Plans to develop a model of day opportunities for people with learning disabilities that is focused on enabling progression and skills development with the aim of supporting people with learning disabilities into employment where appropriate. The majority of this saving will be delivered in 19/20 with a small amount in the latter part of 18/19.

### **What assumptions have you made?**

- Implementing a progression model for day services for adults with learning disabilities will lead to reduced support needs and therefore reduced costs.
- There is appetite to shift the model from 'day time respite' to progression among in house services and independent sector providers.

### **What constraints does the project face?**

- Resistance from providers, service users and families
- Public perception of reducing support available
- Resource Management
- Capacity of service users to adapt to the model

## **Delivery Options**

### **Has an options and feasibility study been undertaken?**

Idea is currently in the very early stages - vision paper to be produced to clearly define to issue to address and potential options - estimated October 2017

## **Scope / Interdependencies**

### **Scope**

#### **What is within scope?**

Day services for adults with learning disabilities

In particular, in house day services across the county, independent sector providers of day services commissioned by Cambridgeshire.

Possible dependency on work with assets/estates and review of OP day services.

#### **What is outside of scope?**

Day Services for other client groups

Other services for people with learning disabilities

## **Project Dependencies**

### **Title**

Framework tender for day opportunities

## Cost and Savings

See accompanying financial report

## Non Financial Benefits

### Non Financial Benefits Summary

More people employed leads to more independence and a lower level of reliance on services

## Risks

### Title

Teams do not engage with new vision

## Project Impact

### Community Impact Assessment

#### Who will be affected by this proposal?

Service Users of LD Day Services in Cambridgeshire.  
Parents and carers of service users.  
Day Services staff and volunteers.  
Independent Sector providers.

#### What positive impacts are anticipated from this proposal?

More disabled people become economically active which is good for them and the local economy.  
Disabled people are likely to be healthier and more independent if they are in employment.  
Disabled people generally have lower income and worse health outcomes than the general population and having greater numbers in employment will help to address these disadvantages.

#### What negative impacts are anticipated from this proposal?

Some disabled people may need to travel further to access appropriate day service provision.

#### Are there other impacts which are more neutral?

None anticipated.

### Disproportionate impacts on specific groups with protected characteristics

#### Details of Disproportionate Impacts on protected characteristics and how these will be addressed

The project is targeted at services for adults with learning disabilities, therefore impacts, both positive and negative, will disproportionately affect people with that protected characteristic.