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Section 4a Children and Young People

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Business Planning: Business Case – Savings proposal

Project Title: Children in Care Placement Costs

Committee: Children and Young People
Committee

2022-23 Savings: £600k savings

Brief Description of proposal:

Placement budgets for meeting the cost of externally provided placements for children and young people in care are adjusted annually to allow for both demand growth and the impact of inflation. These changes are built into the budget. After taking these changes into account, it is possible to deliver a saving of in excess of £600k, through the re-baselining of placement budgets within children's services and by removing an historical investment item.

Date of version: 22 October 2021 BP Reference: A/R.6.255

Business Leads / Sponsors: Lou Williams

1. Please describe what the proposed outcomes are:

Children and young people in care access a variety of different types of care placements according to their assessed needs and their age. These placements include:

- In-house foster care;
- Kinship care, where children in care are placed with relatives or others who know the child well, who are approved as foster carers for the specific child or children only;
- Foster care provided by an Independent Fostering Agency;
- Residential care;
- Supported accommodation, which is available for young people aged 16 and 17.

Younger children and those with fewer needs are most likely to be placed with foster carers. Older young people, and those who may have significant emotional health needs and/or present with difficult and challenging behaviours are more likely to need a residential placement.

Some young people aged 16 and 17 make very good progress within semi-independent provision. In some cases, this kind of accommodation can provide an appropriate step-down from residential provision as part of the journey towards fully independent living. In others, it may be that a young person newly entering care at 16 or 17 is most likely to do well in this kind of provision.

In Cambridgeshire, the make up of our population of children in care has changed as overall numbers have reduced and the Family Safeguarding model of practice has become established. This has meant that we now have proportionately fewer younger children in our care.

This general trend towards our care population being older and/or having more complex needs has resulted in an increase in the use of residential placements and higher cost, more specialist fostering and semi-independent placements. There is also less demand for placements that have historically been most likely to have been provided by our in-house foster carers who specialise in placements for babies and very young children. Our Family Safeguarding model is much better at supporting parents of younger children to make sustainable changes in their lives that enable them to provide the stable and loving homes that their children need, meaning that we have fewer babies and young children in our care now than was the case even two years ago.

Alongside these changes, the costs of residential placements in particular, but also of the most specialist independent foster placements, has increased rapidly over the last 24 months, as the number of placements available has failed to keep up with demand. This is why we have seen an increase in overall placement costs in the current financial year despite overall numbers of children and young people in care continuing to decline.

More positively, we have been taking focused action to improve the quality and consistency of care planning for children and young people in care over the current financial year. While this meant that for a few young people, a move to more specialist (and higher cost) placements was needed after reassessing their needs, the overall position has been a significant reduction in the number of placements that are coming to an end in unplanned ways. This is clearly better for our children in care, but it is also better from a financial perspective, since it is those placements that need to be identified in an emergency after the breakdown of the previous placement that are almost always the most expensive.

Taking these changes together, we have re-baselined the budgets associated with all placements for children and young people in care, while modelling the likely demand for placements over the next financial year. Allowing for some headroom for continued increases in unit placement costs in 2022/3, this work indicates that the continued slow reduction in overall numbers and the impact of greater placement stability over the current financial year enables a saving of £600k to be made across budgets for children and young people in care.

We have also taken the decision to reverse a planned investment into flexible shared care, which amounts to a further saving of £174k. This type of care is sometimes thought to be of benefit where families are struggling to manage the challenging behaviour of one or more of their (usually teenage) children. There are, however, a number of difficulties with such an approach including that it is often very difficult to secure the permanent return home to family of the child in question once a service like this has been offered.

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

The reduction in numbers of children and young people in care is the direct result of the implementation and embedding of Family Safeguarding in Cambridgeshire.

Our fostering strategy seeks not only to secure the continued recruitment of fostering households, but to continue to offer the training and support to enable our carers to offer more placements to older children and young people with more complex needs, in line with our changing population of children in care.

Estimates of overall likely demand for placements next year are based on experience over the last two years, which is the period during which the profile of our care population has changed and the pressures in placement availability have become most pronounced.

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

No - this would not be relevant in relation to this issue.

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

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Apply savings and associated re-baselining	1 st April 2022	N/A	Lou Williams/Martin Wade Finance

The ability to offer this saving from core budgets is the result of increased levels of government grant. No additional steps or actions are required.

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

A review has concluded that an Equality Impact Assessment is not required for the re-baselining of the budget. There is no change to service delivery and children and young people in care will continue to be placed in placements that are in line with their age and assessed needs.

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

Financial Benefits

Achievement of £600k savings as described above.

Non-Financial Benefits

No change; we will seek to continue to identify placements for children and young people in care that are in line with their assessed needs.

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

Budgets associated with children and young people in care are highly volatile. Placement numbers and mix can change in response to the recognition of new risks facing children and young people. An example is that of the recognition of the exploitation of young people through county lines over recent years. This recognition

resulted in some young people accessing care placements because of the level of risks they were facing.

Some types of placement costs are very high and so even a small increase in the numbers of young people requiring such placements can have a significant budgetary impact. For example, a welfare secure placement can cost around £10k per week.

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Continued increase in the unit cost of residential placements	Some headroom built into budget for 2022/3; Commissioning colleagues continue to seek value for money placements.	Amber	Lou Williams
Increase in overall numbers of children and young people in care	Continued embedding of the Family Safeguarding approach	Amber	Lou Williams
Increased demand for highest cost most specialist placements	Continued improvement in care planning processes	Amber	Lou Williams

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

This business case is solely related to placements for children and young people in care.

Business Planning: Business Case - Savings proposal

Project Title: Reduction in Special Guardianship Order allowance budgets

Committee: Children and Young People Committee

2022-23 Savings amount: £250k savings

Brief Description of proposal:

Because of the reduction in care proceedings as a result of the 2019 restructure and implementation of Family Safeguarding, the budget for payment of allowances for Special Guardianship Order arrangements is consistently underspent. This offers the opportunity to offer a saving with no impact on users of the service.

Date of version: 9 Sept 2021

BP Reference: A/R.6.257

Business Leads / Sponsors:

Lou Williams, Director of Children's Services

1. Please describe what the proposed outcomes are:

Special Guardianship Order allowances are paid to the permanent carers of children who would otherwise be in care. Generally speaking, these carers are close family members (aunts/uncles, grandparents etc.) of the child concerned.

Arrangements for providing allowances to carers of children under a Special Guardianship Order are covered by statutory guidance. Not all those who have a Special Guardianship Order in respect of a child are eligible for financial assistance. Those who are eligible for an allowance may only be eligible subject to an assessment of financial means, or may be eligible for a non-means tested allowance for a period (usually two years) from the making of the order, after which a means test applies. Allowances automatically cease at age 18 or when the child no longer lives with the carer/relative.

The decision about whether to make a Special Guardianship Order lies with the courts and forms part of the consideration of an appropriate order in care proceedings. Special Guardianship Orders provide a good outcome for many children, enabling them to live in a permanent family arrangement with relatives who share parental responsibility with the parent outside of the care system.

Special Guardianship Orders therefore contribute to the Cambridgeshire County Council outcomes of helping our children learn, develop and live life to the full and protecting and caring for those who need us.

This is a demand-led budget; underspends have arisen because we have been successful in reducing the number of children coming into care following the extensive restructure of the service in 2018/19 which dramatically increased management oversight. This reduction has continued through the use of our Family Safeguarding model, which enables more children to safely remain in the care of their birth parents, and which was launched in March 2020.

We expect this reduction in numbers in care to be permanent. Should this not be the case, the number of Special Guardianship Order arrangements would be likely to increase, placing pressure on the associated allowance budgets.

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

The Family Safeguarding approach involves the secondment of adult facing practitioners into the children's social work teams who work with children in need and children in need of protection. These adult-facing practitioners work with the parents to enable them to address the issues that they are facing, and which are impacting on their ability to provide safe, stable and loving homes. The specialisms that the adult practitioners work within are:

- Substance and problematic alcohol misuse;
- Domestic abuse, and;
- Mental and emotional ill-health.

These parental issues are common factors that result in a high risk of children coming into the care system if they remain unresolved.

Our statutory duties include providing services and support to families to reduce the likelihood of children needing to come into care. The evidence base for the effectiveness of the Family Safeguarding model has grown since it was initially developed in Hertfordshire in 2016/17, and then piloted in four other local authorities including Peterborough. The model is currently funded in Cambridgeshire as part of the DfE Stronger Families, Protecting Children programme, for which Cambridgeshire County Council is a trailblazer authority.

The table below evidences the reduction in the number of care proceedings between 2017/18 and the year ending 31 March 2020, the most recent data available. The table shows the rate of care applications per 10,000 children and young people aged 0-18: ¹

Statistical Neighbours

		2017	2018	2019	2020
919	Hertfordshire	6.50	6.00	5.30	5.20
869	West Berkshire	10.80	10.00	9.10	6.10
850	Hampshire	8.00	9.10	9.30	7.20
873	Cambridgeshire	12.00	11.10	10.30	8.00
865	Wiltshire	7.60	6.90	7.50	8.50
803	South Gloucestershire	7.10	7.20	8.50	9.20
931	Oxfordshire	11.10	9.40	11.00	10.10
800	Bath and North East Somerset	7.40	8.20	11.40	10.20
885	Worcestershire	12.90	11.80	10.20	10.80
938	West Sussex	9.40	9.50	8.50	11.00
916	Gloucestershire	9.50	8.00	11.30	11.20
	Statistical Neighbours	9.03	8.61	9.21	8.95
985	East of England	-	-	-	-
970	England	12.30	11.90	11.30	10.80

Special Guardianship Order arrangements where carers are entitled to a financial allowance almost always arise as a result of care proceedings; the reduction in care proceedings is the reason for the reduced demand on the Special Guardianship Order allowance budget.

¹ Source for table is the Local Authority Interactive Tool [LAIT]: <https://www.gov.uk/government/publications/local-authority-interactive-tool-lait>

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

N/A: The reduced demand has led to the underspend.

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

The reduction in demand for Special Guardianship Order allowances is the result of improved support to families facing some of the most complex difficulties.

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Apply budget reduction	1 st April 2022	N/A	Lou Williams/Roger Brett/Finance

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

A review has concluded that an Equality Impact Assessment is not required for this proposal. Special Guardianship Order allowance budgets are demand-led and payments of allowances are dictated by statutory guidance. There is no discretion in relation to who does or does not qualify for a Special Guardianship Order allowance.

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

Financial Benefits

The reduction in care proceedings as a result of the structural changes made in children's services in 2018/19 and together with the subsequent adoption of Family Safeguarding have resulted in a reduced demand for Special Guardianship Order allowances, and a consistent underspend in the associated budget. This enables a budget reduction and saving of £250K per annum from 2022/23.

Non-Financial Benefits

Children do best when supported to safely remain within their immediate birth families. Family Safeguarding enables parents to make the sustainable changes to enable them to provide the stable and loving homes that children need.

Key Benefit	Measure	Baseline	Target & Timescale
Rate of children in care per 10,000 remains at or below average of statistical neighbours	Rate of children per 10,000	49 per 10,000 [average of statistical neighbours as of March 31 st 2020 ²	47 per 10,000 March 2023

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

The main risk is that care proceedings and the number of children in care begin to increase, potentially as a result of the increased pressures that families have experienced during the COVID-19 pandemic.

It should, however, be noted that numbers of proceedings and children in care in Cambridgeshire were significantly above the average of our statistical neighbours in previous financial years, which will mitigate the impact of COVID-19 since the reduction is from a higher than anticipated level, as opposed to being from a level that was already in line or below that of similar authorities.

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Increase in care applications	Continued embedding of Family Safeguarding model	Amber	Lou Williams

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

The budget for Special Guardianship Order allowances to be reduced by a level that is consistent with underspends and reduced demand.

Special Guardianship Order carers will continue to receive allowances to which they are entitled. Special Guardianship Order carers are also entitled to support (as are adoptive

² The statistical neighbour group for Cambridgeshire changed during 2020/21 resulting in a revised statistical neighbour average of 51.6 as of March 31st 2020. For consistency in this financial year, the original SN average continues to be used. The change in the SN rate will not affect our targets.

carers) to help them to address any difficulties they may be experiencing in providing a permanent home to the child. This non-financial support is not affected by these changes.

Business Planning: Business Case - Savings proposal

Project Title: Programme of work to deliver savings in Social and Education Transport

Committee: Children and Young People Committee

2022-23 Savings amount: £380k

2022-23 Investment amount: £161k

Date of version: 8 November 2021

BP Reference: A/R.6.268

Business Leads / Sponsors: Hazel Belchamber/Clare Buckingham

Revenue Financial Breakdown						
Shown in recurrent, business plan format						
	2022-23	2023-24	2024-25	2025-26	2026-27	Separate funding source available?
Permanent Savings	-£380	-570k	-345k			
Permanent Pressure / Investment						
Temporary Pressure / Investment	161k	161k	161k			

1. Please describe what the proposed outcomes are:

This proposal supports the following County Council outcomes for Cambridgeshire:

Helping our children learn, develop and live life to the full:

A number of the discretionary elements, within the Council's Home to School Travel Assistance Policy, help support and provide continuity for the County's most vulnerable children/young people, and those families with the lowest incomes.

Developing and supporting children and young people to enable them to share transport, including using public transport, will provide them with essential life skills.

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

All schools must have a Travel Plan which promotes sustainable transport choices and encourages families to plan their journeys and builds/strengthens links with the local community. Plans are written with teachers, parents, students, governors and the local community. The workstreams identified in this Business Case provide the opportunity to reinforce the importance of these Travel Plans and reduce journey times for children and young people. Fewer single occupancy taxi journeys and increased use of shared transport, including public transport, will reduce the number of vehicles required to get children to and from school and the associated emissions and carbon impact of those journeys.

Background information

The Social Education Transport Team (SETT) is experiencing significant increases in demand for transport services, especially for children with Special Educational Needs and Disabilities (SEND).

The total budget for Social and Education Transport (mainstream, SEND and Children in Care) has increased by almost 50% from £18.4m in 2018/19 to £26.96m in the current financial year. Within this total, the budget for mainstream school transport has risen by 16%, but the budget for SEND transport has risen by more than 90%, reflecting the intense pressure on this area of service. This increase reflects rising numbers of pupils with SEND, greater complexity of needs (especially Autism Spectrum Disorder (ASD) and Social Emotional & Mental Health (SEMH), more diverse placements (including to out county provision, and a greater number of bespoke/individual timetables), parental expectations as well as operational transport pressures such as fuel increases and driver shortages.

Although only approximately 15% of those in receipt of school transport receive it because of their SEND, their transport accounts for 60% of overall spend. Transport

for all pupils with SEND is currently in excess of £6,300 per pupil p.a., compared to an average of £1,000-£1,500 for primary or secondary school pupils.

The trends in SEND transport are projected to continue, with an estimated 47% increase in the number of pupils with Education Health Care Plans (ECHPs) by 2031 (compared to 2020), with associated greater pressures for support for pupils with ASD, SEMH, and on specialist independent placements. If transport continues to be provided to approximately 60% of pupils with ECHPs, at today's unit costs, overall expenditure on SEND transport would be expected to rise from £16m to £26m.

Work is ongoing to address the continued pressure on costs, improve contract performance, streamline systems and processes and improve the overall outcomes for young people whilst ensuring best value for money.

The following projects are already underway:

- Review and replacement of IT software with an integrated transport system which will significantly reduce the manual handling of data;
- Implementation of a Dynamic Purchasing System across Cambridgeshire and Peterborough, leading to improved contract management practices and providing greater flexibility to adapt to changing markets and suppliers (completed in September 2021);
- Implementation of a two-year Independent Travel Training pilot (commenced in September 2021).

In September 2021, the Children and Young People's Committee gave its approval to the following additional workstreams to deliver savings:

- a) Consultation on a review of the Council's discretionary policy of funding free transport to the After School Clubs, which are run by five of the County's Area Special Schools;
- b) A detailed review of routes currently deemed as unavailable (unsafe) for a child to walk to school, accompanied as necessary, by an adult;
- c) Adoption of criteria to inform future decisions on Parental Transport Budgets, in particular enhanced payment rates, in cases where to do so would result in a saving on the cost of Local Authority provided transport.

This business case is proposing that the following workstreams are delivered over the next three years in order to reduce both financial and operational pressures, achieve further savings and improve cost controls through a combination of operational efficiencies and improved demand management.

Workstream 1:

Review and re-tendering of routes serving special schools (routes to mainstream secondary and primary schools are not to be included in the scope)

Evidence (also see Workstream 2)

- Of the total expenditure for the home to school transport service, more than (60%) approximately £16m is accounted for by transport for pupils with SEND and EHCPs who are placed in specialist provision.
- Transport to the County's 11 special schools accounts for more than £8.7m expenditure for 1,400 pupils – equating to more than £6,200 per pupil p.a. (compared to the County's overall average for all pupils transported of less than £2,500).
- The remainder is spent on transporting nearly 300 pupils to specialist provision out of the County and >800 pupils to post-16 colleges or mainstream schools.
- Although home to school transport is provided to 255 schools, transport to just 16 of those schools in each case exceeds £0.5m p.a. and in three cases exceeds £1m p.a. An analysis of current contract costs has indicated that there are 15 special schools where a combination of high unit costs and a significant number of routes would indicate there is potential for route rationalisation and review. In total, these 13 schools account for almost £10m expenditure.

Proposal

- Whilst on-going route optimisation is undertaken by SETT as a matter of course, due to the level of change of needs/locations of pupils and complexity of SEND transport there is benefit in periodic “clean sheet” reviews of transport to the largest special schools where there is often greatest scope to replan networks to achieve greater efficiencies. This can ensure that spare capacity and “solo routes” are minimised. It can also ensure that pupils receive the most appropriate transport for their needs.
- It is proposed that such a series of reviews be undertaken over the next three years, working to a timetable which would ensure that new contracts can be in place in time for the start of the next new academic year. It is proposed that three schools be reviewed in year 1, and five each in years 2 and 3.

- Such reviews require highly developed negotiation, persuasion and communication skills. Local knowledge of schools, pupils, and suppliers, as well as familiarity with the recently procured QRoutes software would also be highly desirable. It is expected that 2 x FTE (Full Time Employee) P1 roles would be required to allow these reviews to be undertaken.
- A further additional 1 x FTE Scale 4 Business Support Officer to provide administrative support to the Contract Officer will also be required. It would be beneficial for this role to be made permanent given that there is only one Contracts Officer supporting a £20million contract with over 1000 routes per day.

Savings potential

A 10% saving for the three largest special schools being reviewed would generate estimated potential annual savings of £300,000 (less staff costs), with similar reviews being undertaken in subsequent years to realise a similar scale of savings.

Recurrent yearly savings from each of the school reviews are likely to diminish as routes change/new pupils are added or contracts renegotiated.

Risk

Medium: Review of SEND school transport inevitably involves considerable liaison with parent representatives (Pin Point), schools, SEND service colleagues and operators, requiring dedicated staff resource to undertake the initial preparatory work, route planning and retendering. Sufficient time needs to be allowed for this to ensure as smooth a transition as possible from the current to new transport arrangements.

Analysis of contract data has shown that there are more than 100 suppliers. On average each tender received 8 bids. There are, however, some risks related to the lack of potential competition in some areas, with more than 60 recent tenders receiving no bids. This will also involve some early termination of routes if all routes to schools are to be reviewed collectively. There is, therefore, an element of risk relating to the level of market competition and early proactive work with operators to generate interest, and some flexibility in approaches to procurement e.g. allowing combined/alternative bids will be necessary to help to mitigate such risks.

Workstream 2:

Review of solo routes to in-County special schools (this workstream will be combined with Workstream 1)

Evidence

- Although the number of pupils with SEND has been rising (40%), the increase in costs has been far in excess of the increase in the number of pupils.

- There are more than 100 routes to placements within the County carrying only one child, at a cost of more than £2m p.a. (the cost per child averaging £20,000 p.a.).
- There are 15 in-County schools served by multiple routes that each have only one child carried at a cost of nearly £2m p.a, suggesting there is scope for rationalisation.

Proposal

- A review is undertaken this financial year with SEND service staff of each “solo route” in cases where there are multiple such routes serving one school. The 2 x FTE P1 posts identified for Workstream 1 would provide the capacity necessary for this review to be undertaken in liaison with the SEND service team.

Savings potential:

A conservative estimated 5% savings in solo routes to these 15 schools would realise an estimate £100,000 p.a. [Note that if the review of the large special schools’ transport in Workstream 1 was being undertaken, this would be expected to incorporate the review of solo routes to those schools, which would mean the saving for this stream of work should be revised to £25-50,000.]

Risk:

Low: There would be no withdrawal of transport or change of placement to existing pupils. This is an operational review of provision to ensure value for money and that transport remains appropriate to the child/young person’s needs.

Workstream 3:

Operational review and demand management to reduce out authority transport costs.

Evidence

In the last three years the largest increases in costs have been for pupils with SEND placed out of authority (increasing from £0.97m to £1.52m) - an increase of nearly 60% and exceeding the budget last year by nearly £300,000.

- Analysis of the current contract data indicates that transport to out-County placements is continuing to rise this year and that, as a result, costs will be expected to be close to £1.9m-2m.
- Transport is provided to 60 out-County schools/establishments for almost 100 pupils with SEND, at a cost of in excess of nearly £20,000 per pupil p.a. on average. Many of these are pupils travelling in taxis on their own.

- Sixteen routes to out-County placements have costs per pupil p.a. in excess of £25,000, and thirteen of the establishments account for nearly £1m of expenditure (for 40 routes).

Proposals

- It is proposed that a fundamental review of out-County transport for pupils with SEND be undertaken, commencing with the transport that is provided to the nearly 100 pupils travelling solo, and/or those out-County placements where unit costs are exceptionally high (e.g. in excess of £25,000 per pupil p.a.). This means reviewing transport requirements and, where necessary, consolidation of routes to remove spare capacity.
- Additional work should be undertaken to ensure the SEND service team are informed and fully aware of the potential costs of such placements over the education lifetime of the children concerned and that transport costs are considered alongside placement decisions, where a suitable school is closer and/or there is a more cost-effective transport option available and reviewed regularly.
- An additional 1FTE P1 would be required to undertake an initial review of all out-County placements/rationalisation, and then work in liaison with the SEND service team to ensure that future decisions on placement take full account of the transport implications, and that this area of transport expenditure is proactively monitored.

Savings potential:

A review of the exceptionally high cost out-County transport routes (£25,000 per pupil), and out-County establishments accounting for more than £50,000 annual expenditure would be expected to result in some short-term rationalisation of transport capacity, estimated at 5% of current out-County transport costs i.e. £100,000 pa.

Longer term an ongoing review of out-County placements would be expected to continue to manage demand and expenditure for these pupils. Achieving a further 10% reduction in the number of out-County placements would equate to a £120,000 p.a. [The cost of transport to an out-County placement = £9,300 compared to £6,200 to an in-County special school, saving £100-120,000 p.a. for approximately 30-35 pupils.]

Given projections are for more pupils to have ASD/SEMH needs over the coming years, and an increasing number to require independent placements, the improved management of transport demand to out-County placements will be necessary to contain significant upward pressure on the transport budget. High quality transport cost data for this group of pupils will also be critical to informing longer term business planning decisions relating to in-County school placement /capacity planning. This workstream is therefore seen as the highest priority area of work.

Risk:

Low: There would be no withdrawal of transport or change of placement to existing pupils. This is an operational review of provision to ensure value for money and that transport remains appropriate.

Workstream 4:

Recruitment of volunteer drivers, volunteer Passenger Assistants (PAs)

Evidence

- On-going dialogue by the SETT team with suppliers has indicated that there has been a reduction in the number of drivers available to deliver contracted work for the Council (all drivers need an Enhanced DBS check to work on Council-contracted school transport). This is reflected in the challenging market conditions where it is not uncommon for routes to be rejected on the basis that either drivers or Passenger Assistants (PAs) cannot be secured.
- There are more than 440 routes with PAs, and 11 operators supply nearly 300 of these. Currently daily contract rates do not separate the PA costs from the driver/vehicle cost.
- An exercise was recently undertaken to recruit volunteer drivers and of the 50 initial expressions of interest, 12 are now volunteer drivers. There was also an initiative to recruit volunteer drivers for transporting individuals for Covid tests, and this may have created more appetite for more permanent volunteer drivers.

Proposal

- Staff from the Business Improvement & Development (BID) Directorate are assigned to develop and deliver a pilot project to recruit volunteer drivers and to investigate opportunities to create a 'pool' of volunteer PAs, including looking at options for using staff within our own organisation. Depending on the results of the pilot, this will be rolled out to more routes, as a longer-term project.
- This work will also look at the terms and systems in place under which drivers and PAs are recruited and managed to ensure a more reliable service and greater certainty or flexibility for volunteers.
- SETT will need to identify the separate costs of vehicle/drivers and escorts for some routes, which could identify those routes which may benefit from the use of a volunteer PA rather than a contractor provided PA. This could also provide greater consistency of service for parents/pupils, where the PA will continue to travel on the route with the child/children even if the driver/contract changes. This may increase the attractiveness to bid for some routes as the operator would no longer be required to secure PAs for their routes.

Savings potential:

Pilot project to deliver £30k of savings in Year 1. This will involve intensive work on very specific areas/routes. Depending on the results of this, further savings may be delivered in future years as the project is rolled out more widely.

Risk:

Low, however it will be critical that the safety of the children and reliability of the service are placed front and centre of any volunteer initiatives.

Workstream 5

Fleet review: looking into fleet infrastructure (vehicles and depots) and potential for the fleet to work across multiple Council areas

- The fleet (although under the same transport manager as children's transport) currently provides services for adults' transport only. It comprises 27 vehicles, 3 of which are funded by care homes, and includes 8-15 seat minibuses and smaller 5-seater MPVs.
- A recent review has been undertaken of routes used to transport adults to day centres and further work is underway to explore greater efficiencies using the existing fleet.
- The Council has not recently explored synergies for having a fleet providing services across both Adults and Children.
- The market conditions for children's transport (particularly SEND) are extremely challenging. Entering the market with an internal fleet of vehicles, drivers and PAs could provide greater certainty over the Council's continued ability to meet its statutory duties to get children entitled to transport to and from school/college.
- The analysis of school transport contracts has illustrated that there have been a number of contracts tendered recently that have attracted little or no interest from the market. Use of the in-house fleet in such circumstances may be beneficial to maintain quality of service and contain costs.

Proposal

- To undertake a thorough and holistic analysis of the fleet across the organisation, splitting into three workstreams
 - Integrated transport unit (where education, children and adults transport are combined operationally)
 - Integrated fleet maintenance (assessment of all depots and buildings where fleets are maintained across service areas)

- Rationalising the service (undertaking analysis of fleet capacity and opportunities to maximise efficiency)
- This work is substantial and would require third party consultants, as well as backfilling service roles to allow for adequate time to be allocated to the project.

Savings potential:

It is likely that there could be significant savings in the longer term, however, more work is needed to explore this further to understand the scope for savings, and the implications for the current market.

Risks:

High. Investing in vehicles, drivers and PAs will be costly and the business case is likely to be based on the ability to secure business outside of school/core hours, which could involve competing with the market, which can be challenging with Council standards as well as staff pay and conditions.

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

In October 2021, an independent specialist consultant was appointed to undertake a high-level analysis of the costs of education transport by supplier, route, school and the basis on which transport had been awarded to highlight potential areas for saving.

The purpose of this work was to generate evidence to identify trends, provide understanding of the pressures, and areas for potential improvement (savings and cost reduction) and workstream areas that could be pursued in order for these opportunities to be realised.

The outcome of this work has been integrated into the evidence that has been used to support this business case.

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

As outlined in the Section 2, there is a significant amount of evidence that has been applied to inform the work areas that are outlined in this proposal. Other options that were evaluated but rejected are listed in the table below:

Potential Workstream	Decision
Review of mainstream school catchment areas across Cambridgeshire	This is complex and politically sensitive and will not tackle the high costs areas identified in this

	proposal, which are primarily the transport to special schools and out county placements.
Re-tendering of routes for secondary, primary schools	<p>Although more than two thirds of all pupils in receipt of home to school transport are attending secondary schools with 10% at primary school, the number of primary and secondary school pupils in receipt of transport has been falling in recent years.</p> <p>Currently unit costs for mainstream pupils are well managed, and due to the large networks into the secondary schools' contract rates are competitive and vehicles used to capacity.</p> <p>It is unlikely that significant savings could be realised from retendering these networks and there is limited scope for rationalisation of routes.</p>
<p>Re-negotiation of a proportion of commercial routes to deliver cost reduction</p> <p>A consultant undertook a light touch high level review of existing contract costs and extrapolated the minimum and average savings experienced in other areas to reach a potential savings range of £400k to £1.2m.</p> <p>A consultant would need to be employed to undertake further work at a cost of approximately £150k (no risk/reward) or £90-£105k with a 20-25% risk reward mechanism.</p>	<p>This work does have some potential risks as it involves terminating high-cost contracts and reprocurring these, which could result in costs increasing at a time when the Council is seeing unprecedented numbers of contracts being handed back.</p> <p>Information from a recent report does suggest the number of suppliers currently in place is relatively strong (although there are clearly some areas of the County where significant issues exist, and contracts are handed back).</p> <p>The analysis undertaken for this paper has highlighted that the cost pressures are focussed on SEND and out-County placements, and, therefore, a more targeted approach to route rationalisation and retendering is proposed.</p>
Review of admissions to mainstream and managing school placements, specifically for SEND schools	<p>It is not legal to hold school places open in the expectation a child might require one following a house move, for example. There is also a legal limit on Infant Class Sizes (maximum of 30 children to a qualified teacher). It is difficult to predict number of families who might move into the county in-year and where they will choose to live. As such the ability for the Team to actually influence this is incredibly hard.</p>

	<p>The Admissions Team will take a more proactive approach with regard to contacting parents in cases where children have been offered a place at a school which isn't their catchment or nearest school because it was full when a place at their catchment or nearest school becomes available.</p> <p>There is a separate project underway to increase the number of special school places in the County.</p>
Changing the policy with regard to the entitlement to free transport for children aged 8-11 years	<p>Cambridgeshire is one of the few Shire authorities that continues to use its discretion and provide home to school transport to pupils aged 8-11 years who live more than 3 miles from their nearest school. (The statutory entitlement distance is 3 miles for this age group).</p> <p>There are relatively few pupils who would no longer be entitled to free transport as it would still be necessary to provide free transport on many of the routes on the grounds of road safety. Other pupils would continue to qualify on grounds of low income.</p> <p>It is unlikely that the small number of pupils no longer travelling on a route due to such a change would result in any savings in vehicle capacity i.e., if two or three children cease to be entitled on a route served by a 53-seater, the vehicle would still be required to continue to serve other entitled pupils achieving no overall saving on that route.</p> <p>The last time this was considered, the level of saving to result from such a change was in the order of £10,000.</p> <p>Given the potential administrative time involved in this change, the high-profile challenge/appeals envisaged, and the very limited potential to achieve any savings this is not being pursued.</p>

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

As with virtually all Services across the Council, the SET Team and budget holders have regularly and consistently explored opportunities to deliver savings. As such, there are no quick wins to be achieved. The workstreams identified within this proposal are complex and need dedicated time and resource if they are to be undertaken thoroughly and robustly. Although there is scope for some operational savings, to realise these will require additional staff resource in the short-term.

Longer-term, if cost pressures are to be managed, a more robust and on-going approach to demand management must be in place, challenging out-County SEND placements and solo transport provision to contain the rapid upward pressure on costs in these areas.

The proposals in this business case have been put together using strong, reliable data, however, the means by which to deliver this work are still uncertain. The next step will be to understand the approach to delivering the workstreams, ensuring that we have the right capabilities and capacity, to optimise the outcomes.

All of these workstreams will require additional resource and a subsequent business case will need to be produced detailing resources for planning, delivery, backfilling, design, project management and procedural changes. Whilst some of this can be delivered internally, external /additional capacity is essential in order to realise the improvements and savings/cost reduction identified. Key skill requirements are persuasion, negotiation and communication (both written and oral).

The subsequent business case will detail the timescales for delivery, taking into account considerations in respect of procurement, contract retendering and recruitment, as well as aligning workstreams to the academic as well as the financial year.

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Workstream 1	January 2022	ongoing	Transport Project Board
Workstream 2	January 2022	September 2023	Transport Project Board
Workstream 3	January 2022	ongoing	Transport Project Board
Workstream 4	September 2022	April 2024	Transport Project Board
Workstream 5	September 2022	April 2024	Transport Project Board

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

An Equality Impact Assessment has been developed for this proposal. Children and young people will continue to be entitled to free or subsidised transport to and from school/college. What might change is how the child or young person is transported to school. We appreciate and understand that any change can be disruptive, unsettling and cause increased levels of anxiety and stress. For many children and young people with SEND changes to their routine and/or the people who transport them to and from school/college or support them with those journeys can cause them significant levels of distress and anxiety. It is essential, therefore, to ensure that any proposed changes are discussed with the parents/carers and, where the child or young person is able to verbalise and/or express their views, these will be listened to and that sufficient lead-in time is allowed to enable the child/young person and their family to adjust to those changes.

Travel time may be reduced, and support increased for independent or group travel. However, we also recognise the need to, and importance of, undertaking appropriate safeguarding assessments to ensure that no child or young person is placed at risk as a result of any changes to their transport arrangements.

Once a child has been placed at a school, they have a right to remain at that school even if a place was to become available at a school which is closer to their home. Any change of school would require the agreement of the child's parent/carer.

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

Financial Benefits

The following savings have been identified:

Saving Area	2022/23	2023/24	2024/25
Workstream 1: Review and re-tendering of routes serving special schools	£200k	£400k	£200k

Workstream 2: Review of solo routes to in county special schools	£50k	£50k	£25k
Workstream 3: Operational review and demand management to reduce out authority transport costs.	£100k +Demand management	£120k +Demand management	£120k +Demand management
Workstream 4: Recruitment of volunteer drivers, volunteer Passenger Assistants (PAs)	£30k (pilot)	-	-
Workstream 5: Fleet review; looking into fleet infrastructure (vehicles and depots) and potential for the fleet to work across multiple Council areas	-	TBC	TBC
Total gross savings	£380k	£570k	£345k
Resourcing costs (see table below for details)	£161k	£161k	£161k
Total NET savings	£219k	£409k	£184k

Additional staff resource is essential given that current staffing levels and operational demands on SETT do not allow for the capacity for offline reviews, or to provide the additional “challenge” function with SEND service colleagues that would be required to better manage demand and address out-County placement and transport requests.

Resourcing Costs per workstream:

Saving Area	2022/23	2023/24	2024/25	Total
Workstream 1 and 2 2xFTE @P1 for 3yrs and 1x FTE @S4 for 3yrs (potential permanent)	£45k p/a £45k p/a £26k p/a £116k total	£45k p/a £45k p/a £26k p/a £116k total	£45k p/a £45k p/a £26k p/a £116k total	£348k
Workstream 3 1xFTE @P1 for 3yrs	£45k	£45k	£45k	£135k

Workstream 4	Internal BID	Internal BID	Internal BID	-
Workstream 5	-	TBC (external)	TBC (external)	TBC

Non-financial benefits

Key Benefit	Measure	Baseline	Target & Timescale
Reduce travel time/long journeys for pupils	Reduce /contain out of County placements where more local provision would meet pupil needs	Approx. 300 pupils transported to out-County placements	No more than 200 pupils transported to out-County placements 3-5 years
Increase support of independent /group travel	Reduce solo taxis where no longer required	359 pupils on solo routes	No more than 200 pupils on solo routes in 3 years

Reducing carbon emissions

In addition to the benefits to children and young people, shorter journeys, fewer single occupancy taxi journeys and increased use of shared transport, including public transport, will reduce the number of vehicles required to get children to and from school and therefore reduce the associated emissions and carbon impact of those journeys. Potentially, these changes may improve feasibility for future fleet improvements as fewer vehicles and shorter trips may make a future shift towards low carbon vehicles (e.g., electric) more viable.

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Continued upward pressure on SEND transport budget	Demand management through active review of placement decisions and transport requests (there is an existing well-established process for reviewing and reaching decisions in respect of	Red	SEN

	exceptional transport requests – final approval rests with the budget holder)		
Reduction in competition for school transport contracts (due to driver shortages etc)	Continued proactive engagement with market to encourage new entrants /retain suppliers. Consider use of in-house fleet to address specific shortages	Amber	SETT
Unable to find the right personnel with the skills and knowledge required to deliver the work	Intention is to seek recruitment for both project roles or backfilling roles to maximise chances of finding the right staff	Amber	SETT

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

The five workstreams (as detailed in section 1) are currently in scope.

Business Planning: Business Case – Savings proposal

Project Title: Virtual School

Committee: Children & Young People Committee

2022-23 Savings amount: £50,000

Brief Description of proposal:
Reviewing external income opportunities

Date of version: 18 November BP Reference: A/R.6.269

Business Leads / Sponsors: Jonathan Lewis

1. Please describe what the proposed outcomes are:

The Virtual school has seen an increase in external funding through pupil premium and a new grant to support children in the social care system that are not in care. Our current contribution from our core funding is higher than national average and we have more opportunities to recharge costs of the Virtual School to the grant income. As a result, a reduction in core funding is achievable whilst these grants are in place. The service will be unaffected by this change although there will be some reduced capacity for projects / initiatives but we are currently meeting our objectives in this area.

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

We have reviewed the latest Section 251 statement and it shows that we are spending above national average per pupil in this area. We have also seen some significant improvements in the work of the Virtual School and it is an appropriate time for this saving to be made.

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

Not applicable – saving can be realised without further work.

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

The saving can be delivered from the 1st April 2021, in line with new grant allocations.

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Adjustment to budget	1 st April 2021	1 st April 2021	Finance

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

The work of the virtual school covers all children in the social care system including those children in care. However, as the previous provision funded by direct council funding will now be met by grant, an Equality Impact Assessment will be developed.

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

Financial benefits: £50k savings

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Ofsted inspection	The Virtual School is performing well and has sufficient capacity to undertake its work.	Green	Virtual School headteacher
Rising in the number of children in care	Bid back into the budget process for further funding.	Amber	Jonathan Lewis

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

In scope: The grant is in relation to the virtual school.

Business Planning: Business Case – Savings proposal

Project Title: Grant and Core funding adjustments for support costs for Unaccompanied Asylum Seeking Children [UASC]

Committee: Children and Young People Committee

2022-23 Savings amount: £350k savings

Brief Description of proposal:

Following a review of the level of grant funding provided by Central Government to local authorities for the support of unaccompanied asylum seeking children and young people, it is possible to re-balance the contribution to support costs made from the core budget. This will have no impact on the services we provide to this group of children and young people; it merely reflects the increase in grant funding available.

Date of version: 22nd October 2021 BP Reference: A/R.6.271

Business Leads / Sponsors: Lou Williams

1. Please describe what the proposed outcomes are:

Cambridgeshire County Council is responsible for providing care, accommodation and other support to Unaccompanied Asylum Seeking Children [UASC] aged under 18, and to former UASC aged 18+ when a UASC has either presented to authorities within the local authority area, or has been transferred to our care through either the regional or national transfer schemes.

Those under 18 are children in care to the authority; once they become 18 years of age, they are entitled to continuing support as care leavers. Until their immigration status is resolved, however, they are unable to access public funds such as housing benefit or universal credit/income support. Case law has confirmed that ordinary housing and living costs for care leavers who were formerly UASC must be met by the local authority as part of their duties to support care leavers.

The Government has contributed to the costs of providing care and support to UASC and former UASC for a number of years. Until these arrangements were revised in the 2019/20 financial year, the grants provided by Government did not meet the actual costs of caring for and supporting UASC and former UASC, resulting in councils like Cambridgeshire County Council supplementing these costs from core budgets.

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

This proposal is informed by the monitoring of actual support and care costs for this group of children and young people.

The saving identified is in line with amounts that could have been possible to transfer from grant to core funding over this and the previous financial year.

COVID-19 and trade/transport restrictions have reduced the number of spontaneous arrivals in the County, but numbers are beginning to increase once more. Because of the way that the grant funding operates, there is potential to transfer higher levels of grant funding to core funding if the numbers of UASC in the county increase.

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

N/A - This is not applicable in relation to this proposal.

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

The ability to offer this saving from core budgets is the result of increased levels of government grant.

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Implement contribution towards Children's Social Care from existing grant allocations, allowable under conditions of grant	1 st April 2022	N/A	Lou Williams/Roger Brett/Finance

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

There is no change to service delivery and UASC and former UASC will continue to receive the same levels of service in accordance with statutory guidance. However, an Equalities Impact Assessment will be developed to ensure the change is equitable.

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

Financial Benefits

A saving to the core budget as a result of higher levels of government grant funding as explained above

Non-Financial Benefits

N/A The service delivery will remain the same

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

There are no identified risks.

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

The core funding contribution to supporting UASC and former UASC with care and support needs will be reduced as a result of increased government grant. Actual funding will remain unchanged.

Section 4b Children and Young People

Pressures and Investment Proposals

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SAFE Team	Page 67

Business Planning: Business Case - Investment proposal

Project Title: Children's Occupational Therapy Investment

Committee: Children and Young Peoples (CYP) Committee

2022-23 Investment: £496,000

Brief Description of proposal:

Approval for permanent recurrent additional funding of £496,000 for Paediatric Occupational Therapy in Cambridgeshire County Council via a Section 75 agreement with Cambridgeshire Community Services.

Date of version: 14 September 2021 BP Reference: A/R.4.037

Business Leads / Sponsors: Lucy Loia, Senior Commissioner, SEND
Toni Bailey, Assistant Director for SEND & Inclusion

1. Please describe what the proposed outcomes are:

In June 2021, CYP Committee noted an interim investment of £261,000 into the Occupational Therapy (OT) Service in Cambridgeshire, delivered by Cambridgeshire Community Services (CCS) via a Section 75 agreement.

CYP committee also noted permanent recurrent funding will be required to be approved as part of the business planning process for 2022/23 onwards in line with the ongoing commissioning and review of the contract between Cambridgeshire County Council and CCS. The recurrent funding was agreed at £496,000 per annum.

Until March 2021, the service was funded fully by the Dedicated Schools Grant (DSG) and High Needs Block at a value of £245,000. There were a number of issues identified in relation to the funding arrangement and the use of the DSG, as the service actually provides support to both children and young people with an Education, Health and Care Plan (EHCP) but also those known and open to Disabled Children's Social Care. This is highlighted and explained in more detail later in the business case.

The Clinical Commissioning Groups (CCG) health contribution to CCS Occupational Therapy service is £685k, to support Health OT elements.

There was an inequity of funding to support the joint approach across health, social care and education. Of the £245k from CCC for the social care element of the OT role; £210k currently funds the housing pathway (major adaptation work primarily), leaving £35k to fund staff across the whole county for equipment, moving/handling assessment/review etc. Other funding from CCC included ad hoc payments for tribunal-related work and a Service Level Agreement (SLA) for mainstream school staff and school adaptation work.

Specific tribunal pressures – In 2020, CCS had in excess of 52 requests from Education; ranging from tribunal request input into mediation related to tribunals, advice following an independent OT report has been received etc. These could not be managed within the existing caseloads and so resulted in additional spot purchases of around £75,000 to the Special Educational Needs & Disabilities (SEND) service.

Caseload sizes are up to 50% higher compared with the Royal College of Occupational Therapy recommendations with CCS OTs typically carrying a caseload of 47 vs. a recommendation of 23.

The Section 75 for OT identifies both education and social care support within the scope of delivery, however CCS report that they are currently only providing support for the Social Care service (including the provision of disabled facilities grants and housing adaptations) and the budget for this is already pressured. Support for education provision is being provided, however this is spot purchased by the SEND Service over and above the current S75 agreement.

There is no permanent recurrent budget for OT within Social Care or in other Council

funded budget and the only available funding is via Designated Schools Grant and High Needs Block, which is not a sustainable position long term in respect of demand or equity in funding provision. The high needs block guidance is clear on the use of funding in relation to therapies not met by primary care or NHS Services, however this funding requirement is outside of that scope and for the provision of Social Work; and therefore, needs to be provided from General Council Funds. The definitions are detailed below:

High Needs Block

Therapies and other health related services: include costs associated with the provision or purchase of speech, physiotherapy and occupational therapies. Include any expenditure on the provision of special medical support for individual pupils which is not met by a Primary Care Trust, National Health Service Trust or Local Health Board.

Local Authority

Social work (including local authority functions in relation to child protection): Social workers who are directly involved with the care of children and with the commissioning of services for children. Include most of the direct social work costs (except those detailed below), including the processes for assessing need, determining, and defining the service to be provided and reviewing the quality of and continued relevance of that care for children. Also include:

- Child protection costs;
- Field social work costs (include hospital social workers);
- Occupational therapy services to children;
- Relevant support staff costs.

Therefore, the Council need to provide more funds to meet the statutory requirements and duties for disabled children, for example Section 27 of the Children Act 1989 which encourages Councils to engage other agencies in the assessment of children:

“The guidance places emphasis on the importance of involving other agencies - paragraph 5.3 states:

...These ‘agencies’ could include a child’s school, GP, physiotherapist, speech and language therapist, occupational therapist and other professionals they may have had contact with.”

The OT service provides input to children with an Education, Health and Care Plan (EHCP). The service should also provide support to children and young people who have SEND needs that may not have an EHCP. However, this is limited due to capacity and funding shortfalls. In 2020, out of the 768 children on the existing/current caseloads, 517 have an EHCP.

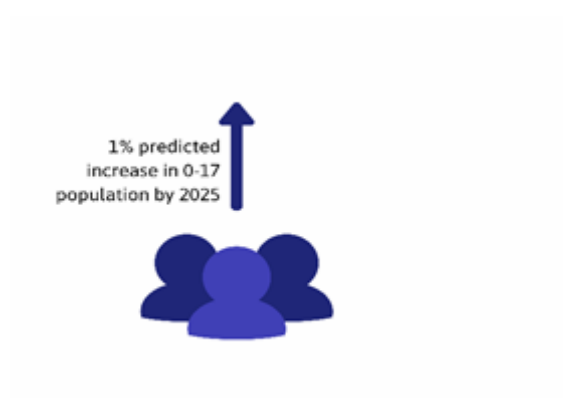
Within an integrated service and the nature of Occupational Therapy, it is not currently possible to accurately divide a child's care into what is school, what is home and what is health when collating data. Best practice would view the child holistically and discuss all elements of daily living. The data below from a typical year (2018 and 2019) sets out broadly the primary category for input:

	Percentage of overall number of referrals in (averaged over two years)	
Health	12%	Reason for input linked to Health in 56% of all referrals
Health and Local Authority	36%	
Health and Social Care	8%	
Local Authority	20%	Reason for input linked to Local education authority in 56% of all referrals
Social Care	24%	Reason for input linked to social care in 32% of all referrals

It is important to note that this doesn't capture the amount of time spent on an average case under each category, which naturally is dependent upon the complexity of the child's needs related to Occupational Therapy.

Demand and Growth in Population

Cambridgeshire is predicted to see a 1% growth in population size of 0-17 year-olds in the coming five years.



In the next five years England overall expects a 2% increase in the 0-17 population.

Cambridgeshire is set to have significant new housing development with a total of 74,000 new homes to be built by 2031 across the five districts. Including a new town, Northstowe, north of Cambridge which will create 9,500 new homes. On top of this single large development there will be multiple smaller developments of around 600 homes each, with each development requiring its' own school and early years/childcare facilities. Also in

Cambridgeshire, there are a number of interdependent commissioning priorities and capital planning programmes that look to address and respond to growth in population, demand for EHCP's and the increasing complexity of need of children, young people and adults. These are all likely to further increase the demand for Occupational Therapy and therapeutic interventions to enable inclusion in Schools.

1. Enhanced Resource Base Review (ERB) – a review of the cost, quality and provision of ERBs that provide inclusive provision for children and young people with Autism on mainstream school sites.
2. New School Provision – Development of three new special Schools across the County.
3. Special School Expansion on two sites and alternations to age range and status on a further site ;
4. As well as the new Children's Hospital on the Addenbrookes site

Demand and Growth in EHCPs in Cambridgeshire

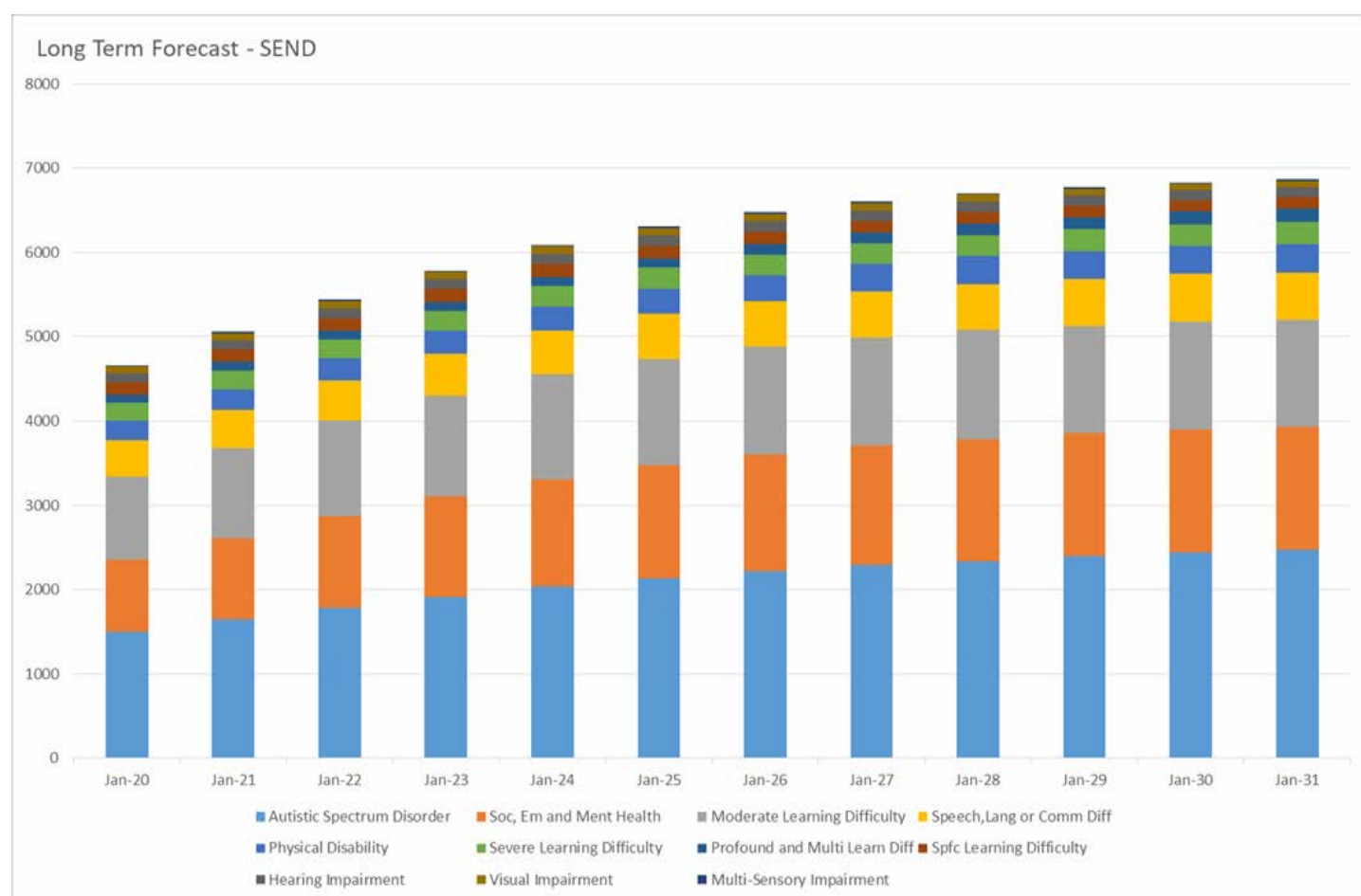
Cambridgeshire County Council are anticipating a growth of approximately 47% of EHCPs in the next 10 years. Much of this growth occurs in the coming five years, with particular notable increase in both Autism Spectrum Disorder [65%], Social Emotional Mental Health [70%] and Profound and Multiple Learning Disabilities [63%]

There are growth areas and variable financial impacts as a result of this growth, however these figures are specifically pertinent to the provision of Occupational Therapy in Education Settings and in children and young people's homes.

Table 1 is a simple representation of the total growth across all age categories and educational need groups.

Educational Need	Jan 20	Jan 31	Change	% Change
Autistic Spectrum Disorder	1497	2475	978	65.3%
Social Emotional Mental Health	857	1458	601	70.1%
Moderate Learning Difficulty	989	1270	281	28.4%
Speech, Lang or Comm Difficulty	434	561	127	29.£%
Physical Difficulty	228	337	109	47.8%
Severe Learning Difficulty	209	265	56	26.8%
Profound and Mult Learn Diff	97	159	62	63.6%
Spfc Learning Disability	146	129	-17	-11.6%
Hearing Impairment	110	124	14	12.7%
Visual Impairment	84	71	-13	-15.5%
Multi Sensory Impairment	11	17	6	54.5%
Total	4662	6866	2205	47.3%

Table 2 represents the same information above but demonstrates the data over time to articulate the specific growth areas and when they occur.



Growth and Demand in Disabled Children

Table 3 outlines the predicted growth of the 0-18 population across Cambridgeshire and Peterborough; the 8% prevalence rate (as per the Department for Works and Pensions Family Resource Survey) has been applied to try and get a better understanding of the number of children and young people with disabilities across both counties.

Population Forecasting 2016-2036

Year	0-4	5-14	15-17	Total 0-17	% INCREASE ON 2016	8% PREVALA NCE RATE APPLIED
2016	58,810	101,870	28,550	184,230	-	14,738
2021	56,630	113,540	30,530	200,700	8.94%	16,056
2026	60,230	119,190	35,580	215,000	16.70%	17,200
2031	59,560	112,650	35,660	217,870	18.26%	17,430
2036	57,670	121,690	36,830	216,460	17.49%	17,137

The table demonstrates that we can expect to see a rise in children with disabilities of over 17% in the next ten years, around 2500 more children than in 2016.

Table 4 outlines the number of children and young people open to Social Care currently, and the projected increase based on previous years.

	Current CCC	Project CCC (2036)**
Open under 1989 Children Act	280	333
Open under the Chronically Sick & Disabled Persons Act (CSDPA)	828*	989

*646 of whom are accessing the Local Short Break Offer

**assuming growth in line with population

This demonstrates that we can expect a rise of around 18% of children and young people open to social care over the next ten years.

It is not possible to consolidate the totality of data available that assists us in understanding the exact demand for OT services, as many children may or may not have an EHCP, may or may not have a disability; and there is variance in the level of interventions required at any one time for children and young people.

However, we know already that the service is not sufficient in meeting the demands of existing cases as set out within Section 2, at least a third of children and young people on existing case loads do have an EHCP and, as mentioned above, case loads are already over 50% higher than what is considered best practice.

There are currently around 500 [10% of the total number of EHCPs] children and young people with an EHCP accessing the OT service, we can therefore broadly assume that based on EHCP data alone, if there are 2200 more EHCPs in the next ten years, with significant spikes in 2021-2025 [around 1500 new plans] then in the next three years we can expect around 150 children with EHCPs alone requiring OT support, in addition to those already accessing the service.

Outcomes to be achieved:

Communities at the heart of everything we do

- Access to education and support to live within the home and local community.
- Upskilled workforce to ensure education and social care staff have the skills to meet the needs of their communities.
- A county with good quality of provision and offer, supporting the response to the growth and development of our communities and population.

A good quality of life for everyone

- Timely and good quality provision of OT for children and young people with and without

disabilities and SEND.

- Efficient provision of OT without delay.
- Integrated service to ensure consistency in assessment and support.

Helping our children learn, develop and live life to the full

- Early intervention
- Prevention of escalation in need
- Family resilience and skilled parenting and support
- Independence of children and young people and ability to remain in their local schools and communities
- Sufficient funding for a fully integrated model
- Well prepared parents

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

This programme of work and the ongoing need for an Integrated Education, Health and Social Care Occupational Therapy Service, along with the continuing need to ensure sufficient provision of service to meet future demand, is well articulated in both the Council's SEND Strategy and SEND sufficiency strategy, as well as a continuous programme of work through the SEND Recovery and Transformation Board in relation to ensuring early intervention and prevention to manage demand of EHCP's and ensure needs are met locally, within existing school settings, with the skills and resources to ensure inclusion.

CCS have told us that the additional funding and resources will provide the following impact:

- Use of our specialist knowledge with regards to supporting provision needs (assessments, reports, intervention within core offer and discussions when additional input is required)
- A training offer to SENCOs and settings around core areas identified within our team and at SENCO forums to again ensure efficient referrals and knowledge across Peterborough
- Updated resource guides sign post to our universal offer (so Parents and Settings can access for free online) and a more targeted offer suggesting resources either freely or commercially available for settings/teachers to follow up on if ongoing concerns

Providers told us that "Positive work on jointly commissioned services is beginning to make a difference. For example, the additional budgets used to increase capacity within the Occupational Therapy team means that there are sufficient budgets to meet current demand and implement a changed model that will see a reduction in waiting times for children and young people; as well as smoothing the gaps in assessment and provision for 19-25 year-olds."

The funding will be pooled to ensure seamless and efficiency of delivery, under a single service specification between Cambridgeshire County Council and Cambridgeshire Community Services, with the existing £245k primarily funding the SEND provision [namely EHCP assessment, advice and tribunal] and the additional funding supporting the social care elements [namely housing adaptations, disabled facilities grants and assessments], therefore ensuring appropriate use of both DSG and Council general funds.

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

The Cambridgeshire and & Peterborough CCG already block purchase Occupational Therapy via CCS and the Councils S75 agreement extends that offer to meet the needs of children and young people open to Social Care and with SEND. Therefore, there is little benefit to commissioning the additional proposed capacity via an alternative route, as this will undermine the economies of scale, integration and seamless delivery of provision for children, young people and families.

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

The current contract is jointly commissioned between the Local Authority and C&P CCG and will continue to be contract managed, commissioned and report to the Joint Child Health Commissioning Board.

Following approval of recurrent funding, the service specification and S75 agreement will be adjusted to reflect the permanent nature of funding and Key Performance Indicators and contract monitoring meetings are already well established.

Task	Start Date	End Date	Overall Responsibility
Draft Section 75	Commenced for 2021/22 funding	December 2021	Lucy Loia
Contract Management	January 2021	Ongoing	Lucy Loia
Commence Integration programme	January 2021	March 2022	Jenny Maine, Peterborough & Cambridgeshire Clinical Commissioning Group

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

The contract and additional funding are likely to improve and have a positive impact on those with protected characteristics including poverty and rural isolation, as it will extend the capacity and resources within the service and therefore in turn will bolster the offer of both targeted and specialised services, but also the universal offer provided within schools. No negative impacts can be foreseen at present, however an Equality Impact Assessment has been developed to ensure we are considering people with protected characteristics in our decision making and to allow us to mitigate against any risks of adverse impacts.

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

Funding Breakdown

Funding Options

Year 1: 2021/22 Additional Staffing Requirement

2 x Band 7 OTs –Education
 1 x Band 6 OT – Education
 1 x Band 7 OT – Social Care

Note “Band” is in relation to the NHS pay band.

- This funding was already secured, pro rate, as detailed in with section 1.2
- The provision of services primarily covers Education Health and Care Plan Assessment, Tribunals and support and training in schools and settings.
- It includes the application of a tiered model (universal, targeted, specialist) to make most efficient use of Occupational Therapy services.
- The provision of services has reduced unsustainable caseload levels.
- The provision of services has increased the training offer to all special schools, further releasing capacity on the targeted and specialist service provided by CCS.

Total for 2021/22 £260,970

Year 2: 2022/23 Additional Staffing Requirement

- 1 x Band 6 – Education
- 1 x Band 6 – social care
- 2 x Band 4 – education
- 1 x Band 4 – social care

- This is new and recurring money as requested by this paper.
- It will support the further roll-out of the tiered model – focussing on targeted support within schools and pre -schools.
- Create a sustainable service with introduction of further skill mix, support the apprenticeship ‘grow your own’ scheme.
- Support clinical delivery.
- Sustainable caseload levels for social care elements of the OT role.

Total for 2022/23 £235,482

The total overall additional funding for CCS children's OT service from Cambridgeshire County Council:	
2021/22 and 2022/23	496,452

Therefore, the combined increase inclusive of the existing funding of £245k from the Dedicated Schools Grant [DSG] and the additional requested funding detailed throughout 5.0 will be:

Current Funding	£245k
Requested uplift for 21/22	£261k
Total Funding for 21/22 – which would then be permanent in the base	£506k
Requested uplift for 22/23	£235k
Total Funding for 22/23 – which would then be permanent in the base	£741k

Non-Financial Benefits

- Use of our specialist knowledge with regards to supporting provision needs (assessments, reports, intervention within core offer and discussions when additional input is required)
- A training offer to SENCOs and settings around core areas identified within our team and at SENCO forums to again ensure efficient referrals and knowledge across Peterborough

- Updated resource guides sign post to our universal offer (so Parents and Settings can access for free online) and a more targeted offer suggesting resources either freely or commercially available for settings/teachers to follow up on if ongoing concerns
- Improved timeliness of assessment and provision
- Improved confidence in accessibility and provision of support
- Equitable provision of services across education and social care

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Failure to negotiate new specification	This is already in final form and new offer from CCS is in writing	Amber	P&CCCG Childrens Commissioning
Recruitment – national shortfall in workforce causing both delays in services for families and non-delivery against contract	Recoupment mechanisms within the specification on vacancies Provision of private OT's with recoupment [although more costly]	Amber	CCS
Ongoing increasing demand – so may additional resources in the future	Close contract managements and deployment of resource to manage demand Upskilling of schools so improved universal offer reducing demand on specialist therapies	Amber	P&CCCG Childrens Commissioning CCS
Inaccurate forecasts	Forecasts are redefined annually in line with SEN2 return	Amber	P&CCCG Childrens Commissioning
	<i>Contract management and analysis of management information</i>		CCS

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

The service covers education and social care in Cambridgeshire only. Peterborough City Council is out of scope for this business case, as is any other therapies already commissioned by the Council.

Summary & Recommendations

1. There is already a significant pressure on the existing Occupational Therapy Service across Cambridgeshire, significantly impacting on the timeliness and efficiency of provision offered to children and young people eligible for service. In addition, there is a growing financial pressure on services as a result of a lack of Occupational Provision in order to assess and provide quality EHCP advice and subsequently robust evidence of provision resulting in expedition of tribunal process.
2. There is also an opportunity to conduct a full and proper commissioning exercise that looks to understand the detailed and segmented demand likely to require Occupational Therapy in the future and ensure the totality of resources across all funding services and organisations to deliver efficient, effective, high quality and good value provision through the implementation of an integrated service delivery model across education, health and social care.
3. However, the current funding arrangements are significantly stalling the ability to deliver early intervention, prevention and timely provision of advice and support and therefore it is recommended that the funding identified in 5.0 is agreed under an interim service specification to address the immediate issues and concerns, whilst allowing for a sufficient pool of resources to be considered as part of an Occupational Therapy review and identification of the correct service delivery model to ensure a robust and sustainable provision in the future.

Business Planning: Business Case Investment proposal

Project Title: SEND Capacity

Committee: Childrens and Young People (CYP)

2022-23 Investment amount: £562,200 / £325k

Annual permanent investment of £562,200. Plus a one off investment in 22/23 of £325k

Brief Description of proposal: SEND (Special Educational Needs and Disability) Capacity to address resourcing challenges with Education, as previously approved at JMT (Joint Management Team).

Date of version: 17 September 2021

BP Reference: A/R.4.038

Business Leads / Sponsors: Jonathan Lewis, Director of Education

1. Please describe what the proposed outcomes are:

This business case outlines the need for a permanent increase in base budget for the service, so we can keep pace with our statutory responsibility. A huge amount of work is currently underway to look at savings/transformation in SEND, but in this area, any efficiency saving is likely to be offset by increasing numbers, especially as growth in numbers is highest in the primary sector and these will move through into secondary where rates are lower.

Additional capacity is required in the following teams, with the full cost breakdown contained in section 8:

- Statutory assessment team - Casework and Business Officers
- Educational psychology - Educational Psychologists
- Place planning and business intelligence - Education Officer with SEND specialism and Senior Analyst.

The Statutory Assessment Team is required to undertake the following tasks, all of which relate to the statutory duties of the Local Authority:

Managing Education Health and Care Needs Assessment (EHCNA) and Education, Health and Care Plan (EHCP) processes	<p>These processes include managing within statutory timescales:</p> <ul style="list-style-type: none"> • Requests for Education Health and Care Plan Needs Assessment (EHCNA). • Statutory EHCP planning meetings with parents. • Preparing and issuing proposed, amended and final EHCPs. • EHCP Annual Review monitoring and issuing amended EHCPs.
Arranging placements and provision for children and young people with EHCPs (or Statements).	<p>These processes include managing, within statutory timescales, the following:</p> <ul style="list-style-type: none"> • The LA response to parent and/or child /young person (C/YP) views. • Consultation with special and mainstream schools and education settings to arrange placement. This includes placements in Independent Special Educational Provision (ISEP). • The monitoring of start and end dates for C/YP in special educational provision. • The annual phase transfer of C/YP with EHCPs (e.g. Primary to secondary school). • Placement of C/YP arriving in Cambridgeshire from another LA. • Provision of alternative education such as home tuition where required. • Provision of specialist equipment, therapies, specialist support where required.

	<ul style="list-style-type: none"> • Resolution of placement breakdown – including exploration of alternative placement or provision. • Provision of advice on transport needs for pupils with EHCP.
Financial management.	<ul style="list-style-type: none"> • Allocation of top up funding to mainstream schools, colleges, special schools and units for students with EHCPs. Checking start and end dates and monthly updating central finance records. • Raising purchase orders for Independent School placements – managing within-year-adjustments – checking start and end dates – updating records • Ordering specialist equipment – raising purchase orders – checking costs against committed expenditure. • Provision of monthly financial reports (e.g. general ledger) • Management of recoupment. • Home tuition for pupils Educated at home – managing referrals – managing provider bids - raising purchase orders – checking invoices – checking start and end dates - updating records – scanning provider contracts.
Each of the above responsibilities carries extensive administrative processes including the preparation of EHCP documents themselves, papers for panels, papers for SEN Tribunals, record keeping, finance spreadsheets, performance reports, letters to parents, schools, and other professionals	

Current team pressures in the Statutory Assessment Team and SEND District Teams (Educational Psychology)

The service maintains consistently high key performance indicators for Statutory Assessment, the high percentage rate of timescales being met for 20 week assessment masks an underbelly of strain within the system. Educational Psychologists, as part of the wider multi-disciplinary SEND district teams offer a time allocation model to schools. We are now seeing a pattern where Educational Psychologists non-statutory assessment time is being suspended to be able to fulfil the numbers of statutory assessments. This comes at a time where preventative work and critical incidents are more crucial than ever. Where early intervention support decreases, Cambridgeshire will see an even greater demand for EHCPs.

Over the past three years, our Annual Review processing within Business Support runs at around 6-12 months behind timescales. Again, this is a common issue across the Eastern region and beyond, with some London authorities, for example, reporting a three year back log in Annual Reviews. The crucial issue here, though, is that casework officers and Educational Psychologist do not have the capacity to:

- Attend annual reviews – this is leading to a lack of capacity to de-escalate when needs have been met.

- Attend annual reviews at key points of transition.
- Have adequate time to analyse annual reviews carried out by the setting and agree or challenge wording, changes to provision, use of funding, quality of outcomes or consideration for the ceasing of plans where outcomes have been achieved.
- Where there are emergency annual reviews, Educational Psychologists or Casework Officers are not always able to attend, to facilitate solutions which prevent breakdown of placement. There is a direct correlation between these instances and the increase of pupils moving on to expensive tuition programmes, into special school or more specialist independent provision.

Analysis of recent data around complaints highlights the significant amount of complaints and Local Government Ombudsmen (LGO) investigations relating to the Statutory Assessment Team in particular complaints related to delays in meeting statutory deadlines. Mediation and Tribunals are currently covered by one Casework Officer (CWO) (0.8) and this volume of work is too high. This is currently a single point of failure for the Statutory Assessment Team.

Place Planning team works effectively and efficiently to ensure the delivery of all of the Council's statutory duties with respect to mainstream education place planning, specifically securing an appropriate match between places and demand for the populations served by Cambridgeshire County Council (CCC) and Peterborough City Council (PCC), including through the commissioning of new provision to serve children and young people in the 0-19 age range. It does this with the support of Business Intelligence, Education Capital and Planning colleagues.

Currently the provision for SEND children sits outside of this team and the responsibility for the strategic planning for SEND places and schools is not supported by a dedicated and skilled SEND place planning team. Place planning at this strategic level should be the same for all children irrespective of their needs. In some ways, the information utilised by the place planning team also covers the demographics and changing needs of children with SEND as the demographic and sufficiency data which informs the Place Planning Team's work is based on birth rate analysis as well as growth in housing, amongst other factors. All these factors include a percentage of SEND needs, which potentially, is not accurately being fully incorporated into plans within the overall place planning strategy.

This proposal seeks to add capacity to the existing and excellent place planning team, enabling them to have, within their compliment, a dedicated SEND officer, who can work alongside the team and utilise specific data from Business Intelligence and Commissioning to ensure we have a strategic approach to planning education infrastructure that incorporates all children irrespective of needs. Plus additional Senior Analyst Role within Business Intelligence for forecast modelling, data interpretation and model development.

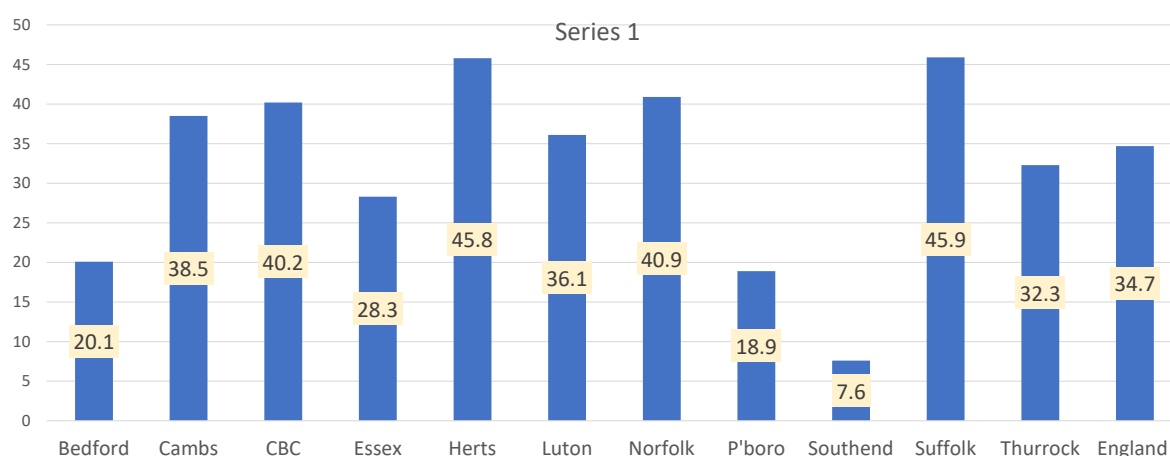
This additional capacity will enable SEND sufficiency to be planned alongside mainstream provision plans and will support joined up approaches to solutions that will increase the level of inclusion and ensure that all children are 'in sight' from birth.

We are also expecting an Ofsted inspection of our SEND services in 2022 and the inspection will focus on these areas.

This business case supports the Council's outcome of 'Helping our Children learn, develop and live life to the full'.

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

Our growth in numbers has been exceptional since the reforms in SEND in 2015 but our overall rate of growth in recent years has been similar to other shire counties, showing the challenges we face nationally.



There are currently 6044 EHCPs (Education, Health and Care Plans) in Cambridgeshire, with over 900 new plans issued in the last year, an increase of 41.5% against the previous reporting period. This represents an increase of 236% over the last six years. Growth in EHCPs is particularly acute in those aged 10 and under (primary school and early years) and 20 and over.

Trends for the future forecast a year on year increase in EHCPs representing a 47% increase by 2031 based on current trends.

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

This is an in house provision and is a statutory requirement to deliver. Currently there is insufficient capacity in the team to meet the increased demands for the service.

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

Recruitment to additional posts will be required, as outlined in section 8.

Task	Start Date	End Date	Overall Responsibility
Recruitment of posts	November 2021	February 2022	Jo Hedley (SAT & Eps) Clare Buckingham (Place Planning) Tom Barden (Business Intelligence)

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

Children and young people - a continued focus on improving outcomes with an emphasis on meeting a child's needs inclusively.

Statutory Assessment staff – the service has lost seven posts in the last two months including two senior managers. All have cited the work pressure as their reason to leave. Additional capacity should have a positive impact by reducing the pressures placed upon staff, and improving continuity of the service for children and young people.

An Equality Impact Assessment has been developed to ensure this proposal is equitable in its aims and delivery.

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

Financial Benefits

A huge amount of work is currently underway to look at savings / transformation in SEND (see SEND Transformation Business Case) but it is likely in this area that any efficiency saving is likely to be offset by increasing numbers especially as growth in numbers is highest in the primary sector and these will move through into secondary where rates are lower.

Non-Financial Benefits

Ensuring compliance with statutory responsibilities and to meet our statutory requirement for Education, Health and Care Plans.

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Identified risk with this proposal is that we are unable to recruit to posts which delays ability to enhance capacity levels.	Broaden advertising routes. Use support of OPUS/HR.	Green	Jo Hedley
<p>Risk if we do not increase capacity:</p> <ul style="list-style-type: none"> • Loss of Local Authority reputation • Adverse Ofsted judgements • Formal complaints from parents/carers and other stakeholders • Increase in Tribunals and Ombudsman investigations • Judicial Review • Data Breaches • Reduced efficiency in other SEND teams 		Red	

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

The business case covers additional capacity for the SEND service, as outlined below:

Role	To be funded permanently	To be funded on a temporary basis
<u>SAT & Ed Psychs</u>		
Casework Officer Statutory Assessment	£156,306	£0
Casework Officer Monitoring and Review	£178,636	£0

Increased Tribunal Casework Officer	£9,900	£0
Business Officer	£0	£325,000
Educational Psychologist	£132,448	£0
Total	£477,290	£325,000
Total	£477,290	£325,000
<u>Place Planning and Inclusion/Business Intelligence</u>		
1FTE grade P3 point	£59,410	£0
1 Senior Business Analyst for 26 weeks	£25,500	£0
Total	£84,910	£0
Overall Total	£562,200	£325,000

Business Planning: Business Case – Pressure / Savings

Project Title: Children's Disability 0-25 Service

Committee: Children and Young People Committee.

2022-23 Pressure amount: £400,000

In addition to the £400k pressure amount, there is currently £100k Children with Disabilities (CWD) saving in the Business Plan for 22/23. It is proposed that this will be offset over a two-year period by increasing the Adults Positive Challenge Saving Preparing for Adulthood saving by an additional £54k in 22/23 and 23/24.

Brief Description of proposal:

Pressure funding to off-set the cost pressures within the in-house residential short breaks service.

2023-24 -£100k savings

2024-25 -£100k savings

Date of version: 17 September 2021

BP Reference: A/R.4.039

Business Leads / Sponsors: Sasha Long, Head of Service, Disability Social Care 0-25 Service) and Debbie McQuade, Assistant Director.

1. Please describe what the proposed outcomes are:

Cambridgeshire County Council (CCC) delivers a range of short breaks services for disabled children and young people, including activity clubs, holiday clubs, community support, and overnight short breaks. These services are provided for parent carers of disabled children in order to support their ability to continue their caring responsibilities as effectively as possible, whilst the young people have the opportunity to develop their independence, promote and support their physical and emotional health, build relationships and enjoy new experiences.

In 2019 the Council undertook a review of the overnight short breaks aspect of this offer in order to better understand the present and future needs of families accessing these services. Between April 2019 and October 2019 a range of consultations with parents, the workforce, other Councils, and children/young people took place. The feedback gathered throughout this consultation process evidenced a clear need for a more flexible approach around the offer of overnight short breaks, to provide families with greater choice, more control, and placing the families at the centre of their child's person-centred care planning.

Up until this point, the funds for residential overnight short breaks were committed to a block contract arrangement with Action for Children, meaning there was no flexibility around how these funds could be utilised. This contract covered the delivery of residential short breaks across three Ofsted registered residential children's homes in Cambridgeshire: Haviland Way (shared care and long term care), Woodland Lodge (short breaks care), and London Road (shared care and long term care).

Following the consultation, the council acknowledged the need to change the block contract funding arrangements, and a business case was made to in-source the three children's homes. By bringing the three children's homes in-house, it was anticipated the Council would release the block contract funding and have greater control over the re-design of the services to meet the requirements of families. This would also place the service closer to senior decision making processes, and therefore better able to pre-empt and/or respond to crises with stronger links and a single approach to care planning across Education, Health and Social Care. This proposal was heard at the Children and Young People Committee (Jan 2020 and July 2020) who approved the plan, followed by the Commercial and Investments Committee (September 2020). The three children's homes were subsequently successfully in-sourced in September 2020.

Despite the many benefits of this move, this insourcing presented financial challenges, as acknowledged within the committee business case. The contract, with a value of £2,473,525.00, had been awarded in October 2015 for four years and it was acknowledged the service would cost the same, if not more, to provide in-house. Through the in-sourcing process, additional cost pressures were identified in relation to the greater cost to the service from LGPS pension contributions once staff transferred (TUPEd) over to CCC, and property costs required in order to bring the buildings up to standard. A cost pressure was therefore acknowledged in advance of

the decision to bring these services in-house, with the business case to the committees consistently forecasting an anticipated £300,000 pressure. However, following the TUPE of staff from Action for Children to CCC, some staff have opted to resign from their AFC posts and to re-apply for new vacancy posts under CCC terms and conditions, which have increased staffing costs. In addition to this, an entitlement to pay enhancements that were not relevant when the staff were employed by Action for Children has come into effect, resulting in the cost pressure forecast of £400,000 for this financial year 2021/22.

Having acknowledged this cost pressure, and in agreeing to in-source the children's homes, the service was tasked with reducing the budget once the homes were brought in-house. The service plan was to achieve these savings by changing our service delivery model around overnight short breaks. Rather than relying on the residential children's homes to deliver all overnight care, we planned to introduce overnight short breaks via Direct Payments. This would enable the overnight support to be delivered in the child's own home, with a paid Personal Assistant overseeing their care, effectively reducing the number of children accessing residential short breaks, and creating savings through reduced staffing / reduced agency spend within the children's homes. Whilst we were able to implement the first phase of this plan (bringing the children's homes in-house and setting up a Direct Payments overnight scheme), the COVID-19 pandemic has had a detrimental impact upon these plans and prevented the service from achieving any savings to date. This is due to the pandemic causing a significant reduction of available Direct Payment workers, resulting in an increased reliance on either agency staff (at a higher cost), or residential short breaks (eliminating any proposed staff savings). In addition to this, there has been an increased demand for overnight short breaks for the families of disabled children and young people throughout the pandemic in order to prevent family breakdown. Therefore, whilst the initial phase of this work has been instigated, we are not in a position to realise any savings around this project within this financial year.

However it is recognised that through working collaboratively with the Adults Positive Challenge Preparing for Adulthood workstream, that savings can be generated through that work to offset the £100k CWD disability saving that is currently in the MTFs in 22/23. This saving will be offset across both 22/23 and 23/24.

Demand for the initiative:

The three residential children's homes are a fundamental aspect of our short breaks offer, providing essential respite to the families of vulnerable children and young people with complex and challenging needs. The children's homes are consistently well populated with children and young people who access support across a range of timescales; from short breaks, to shared care and full time care. As outlined above, our service plan is to gradually reduce the demand on residential short breaks and to use the funding more flexibly to enable families to have greater choice regarding how this support is delivered, such as via a Direct Payment. However, the COVID-19 pandemic has significantly reduced the available PA workforce, whilst simultaneously increasing the need for overnight short breaks within vulnerable

families, so the demand for residential care has remained high, and increased, throughout the past year.

The proposal links to the following CCC priorities:

- **Communities at the heart of everything we do:**
The children's homes enable these children to continue living within their local communities, accessing their local health services, attending their local schools and keeping in regular contact with their friends, families and support networks.
- **A good quality of life for everyone:**
The children's homes enable families to have a sustained break from their caring roles, whilst their children spend time in a provision which has been tailored for their individual needs, through targeted health training for staff, careful matching with other residents and person-centred planning around the child's skills, abilities, interests, likes and dislikes. This supports the children and young people to achieve good outcomes linked to preparing them for adulthood.
- **Helping our children learn, develop and live life to the full:**
The children's homes enable children to access fun and educational activities alongside their peers, whilst being supported to build upon their existing skills and increase their independence in preparation for adulthood. The children are supported within the children's home setting, and also out in the community, ensuring they remain part of their local network and develop their skills around travel training, for example. The children are carefully matched to other residents in order to encourage friendships and so they can spend time with children who have similar interests.
- **Cambridgeshire: A well-connected, safe, clean, green environment:**
The children's homes enable the children to remain living in their local communities, connected to their local services and continuing to be full members of their local communities. The alternative could be for them to be placed in out-of-county placements, resulting in them being displaced from all forms of local support, and creating travel requirements for their families, the staff visiting them on a regular basis and the multi-agency group around the child. Being local to family, friends and communities also provides a natural care, support and safeguarding network that cannot be offered easily in a provision that is further away.
- **Protecting and caring for those who need us:**
This proposal would enable the continued provision of essential support and services to children and young people with disabilities and complex needs. This would improve their outcomes, both in terms of being able to remain living at home with their families, but also remaining within their local communities, attending their local schools and accessing their local support network. This will support these children and young people to achieve their desired outcomes in terms of increasing their independence, enhancing their opportunities, and preparing them for adulthood. There are no identified

health and safety concerns relating to this proposal, as continuing to operate the in-house children's homes would strengthen the safeguarding networks around these children and enable a greater degree of professional oversight of their care and support arrangements, compared to that which is possible for children placed out-of-county.

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

This proposal is clearly linked to the public consultation which took place in 2019 and concluded that families across Cambridgeshire wanted more choice and control in relation to the offer around overnight short breaks for children and young people with disabilities. The key points noted in the summaries from this consultation suggested that initially there would be an immediate take-up of Direct Payments, followed by a likely steady increase in families moving towards a Direct Payment in the future. This outcome has been delayed by the impact of the COVID-19 pandemic, but we remain confident that families will start to utilise the additional options for overnight short breaks once there is a consistent workforce of Direct Payment PA's to facilitate this.

Furthermore, the move in-house affords the Council greater control over the re-design and shaping of the services to meet our requirements in the future, whilst allowing for a programme of work that aligns and maximises innovative efficiency opportunities, such as enabling a greater flexibility around the use of overnight short breaks funding. This fits with the overall strategic service plan and enables a closer oversight of service management by the Local Authority, due to the service sitting closer to senior decision making processes. It also increases the service's ability to pre-empt and/or respond to crises through stronger links to local services, including Education, Health and Social Care.

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

Prior to the insourcing taking place, the service considered all other options to meet the evolving needs of the families accessing overnight short breaks for children and young people with disabilities. This included holding an extensive consultation with parents, the workforce, other Councils, and children/young people. This consultation and the subsequent insourcing activity outlined the need for greater flexibility and control over the overnight short breaks option, which could only be achieved by bringing the three children's homes in-house.

This was always with an acknowledgement of the financial pressures which would result from this, and the investment of the £400,000 pressure funding will enable the service to continue delivering essential support to vulnerable children and families across Cambridgeshire.

As outlined above, the service have aspirations for making changes to the service delivery model and achieving savings in the future, but these plans have been impeded by the ongoing impact of the COVID-19 pandemic. This proposal is therefore to put in this pressure funding until such a time as we can start to realise the anticipated savings from devolving demand from the children's homes and replacing this support with more cost effective Direct Payments option.

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

By providing the £400,000 pressure funding, the service will be able to continue running under the existing model in 2022/23, enabling recovery from the COVID-19 pandemic and continuing to support vulnerable families without any disruption in care. Moving forward the service will be working on plans to make savings to manage down these costs.

Having consulted extensively with Pinpoint (our parent carer forum) and the Voiceability Speak Out Council (young people's forum) in the early stages of this project, we will continue to work alongside these agencies moving forward to ensure our plans for the service re-design will continue to meet the needs of this cohort of families.

Task	Start Date	End Date	Overall Responsibility
Development and Delivery Board meetings to track the progress with Phase Two.	Monthly	Ongoing	Debbie McQuade (Assistant Director)
Monthly liaison with Pinpoint and Voiceability Speak Out Council representatives to ensure co-production of plans.	Monthly	Ongoing	Sasha Long (Head of Service.)

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

By providing the £400,000 pressure funding, there will be no change to the service delivery for the children and young people who have protected characteristics; Disability, Race, Religion, Sex, Sexual Orientation, Poverty and Rural Isolation (which are all factors which could be present for this cohort but which are supported by the consistent provision of overnight short breaks support).

There is no financial impact upon these families as the overnight short breaks are funded via Personal Budgets based on the child's assessed level of needs. Furthermore, in delivering this support we are enabling families to receive essential breaks from their caring roles and to ultimately recover from the impact of the COVID-19 pandemic. If we were unable to continue delivering this level of support via the children's homes, these families would face risks in terms of potential family breakdown and significant impacts upon the wellbeing of each family member. An Equality Impact Assessment has been developed to ensure equitable outcomes.

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

Financial Benefits

By providing the £400,000 pressure funding, we will be able to manage the service within budget throughout the next financial year (2022/23), as opposed to accumulating an over-spend. Looking ahead, the service will plan to manage down these costs once the impact of the pandemic has lessened and we are in a position to implement the service re-design.

Non-Financial Benefits

The service will be able to continue delivering essential overnight short breaks support to children and young people with disabilities, and their families, preventing a risk of family breakdown. These children and young people will be supported to remain living within their local communities and accessing all local services, including education and health. The success of this project will be measured through the numbers of children and young people who have accessed this support, achieving the positive outcomes identified through their review planning meetings, and through family feedback to the service. In addition to this, success will be measured through the eventual re-design of the service, enabling more children and young people to access overnight short breaks via a Direct Payment, and providing families with increased choice and control over their child's care planning arrangements. We will continue to work closely with our parent carer and young people forums in order to evidence this through family feedback and the co-production of future service changes.

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Without the pressure funding, we will overspend in the next financial year, which could risk the continuation of service delivery, or being able to support as many children and young people as needed.	We would try to reduce costs to enable the ongoing running of the service, but this would affect service delivery and our ability to meet demand.	Red	Sasha Long

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

The in-house residential short breaks service is the key area within scope, with benefits also being achieved in relation to meeting the goals of the Adult's Positive Challenge programme and the Preparing for Adulthood workstream of the SEND Strategy.

Business Planning: Business Case – Investment proposal

Project Title: Investment in SAFE Team

Committee: Children and Young People
Committee

2022-23 Investment amount: £268k investment

Brief Description of proposal:

The SAFE team works with young people at very high risk of criminal exploitation. The team had been funded by grants, but these have now ended. There is some potential for government and partner funding to reduce the investment identified above, but any such funding is likely to be one off and is uncertain.

Date of version: 25th October 2021 BP Reference: A/R.5.012

Business Leads / Sponsors: Lou Williams

1. Please describe what the proposed outcomes are:

The SAFE team is part of our youth justice offer and works with young people who are actively the subject of criminal exploitation.

Young people involved in criminal exploitation are vulnerable to serious violence and other forms of harm including serious sexual assault. They are groomed by older young people and adults to participate in organised criminal activities including the transportation of Class A drugs around the country (also called 'County Lines').

Young people often do not recognise that they are the victims of criminal exploitation. Those exploiting them are from serious and organised criminal groups. It is not uncommon for young people involved in county lines to be, for example, 'robbed' of drugs and money in their possession by members of the organised crime group. The financial loss becomes a debt, and young people are then threatened with harm, or with harm to their families, unless they continue to work for the gang to pay off their 'debts'. This type of criminal activity can be associated with serious youth violence, as young people become involved in the violence of the organised crime groups in protecting their areas of business. Young women becoming involved in these activities are also at particular risk of sexual harm, as well as violent harm.

The SAFE team has demonstrated significant impact in its work to date; young people open to the service and, crucially, also after they have ceased involvement, are very much less likely to come to the attention of the police either as suspects, victims or witnesses to offences. The team has also successfully worked with a number of young people who were at significant risk of coming into the care system because their relationships at home had deteriorated or in order to offer protection. In some cases, young people have been supported to end their involvement with the organised crime group, and they and their family supported to relocate to another part of the country.

Placements for young people in these situations tend to be very high cost and while it is difficult to say with complete confidence that the actions of the SAFE team have definitely avoided placements for specific young people, there is clear evidence that the team is an important part of our overall approach at preventing young people coming into care as a result of harms from outside of their families.

Being able to continue this service will support the following County Council outcomes for Cambridgeshire:

- Communities at the heart of everything we do
- A good quality of life for everyone
- Helping our children learn, develop and live life to the full
- Protecting and caring for those who need us

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

The service has monitored outcomes information for young people currently supported by the team, as well as those who have ceased their involvement.

The team works with young people already involved in serious offending. Nevertheless, the reduction in police investigations of young people involved with the team or post involvement as a suspect in an offence is 60%. Missing instances reduced by over 90% for young people currently involved with the service or who had ceased involvement.

While these indicators may be seen as only benefiting the police, in reality they are also proxy indicators for the likelihood of children's services expenditure and continuing involvement.

The SAFE team has also successfully supported the stepping down from care to a return home for three young people, one of whom was in a residential placement, because of concerns for their on-going safety. The team has also worked with a total of 15 young people who were all assessed as being of very high likelihood to enter the care system, and who have successfully remained at home with their families.

There is therefore an emerging body of evidence to support the view that the SAFE team is successfully avoiding a higher level of spend than the investment required to provide the service. It is also, of course, supporting significantly improved outcomes for extremely vulnerable young people which have the potential to be lifelong, with long term benefits to the community as a whole.

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

An option of using temporary funding from reserves has been considered on the basis that the group of young people worked with by the team have been adversely affected by COVID-19, and that continued funding maybe possible to achieve through identified savings to the cost of placements.

While this group of young people have been particularly affected by COVID-19, the proliferation of the organised criminal exploitation of young people is unlikely to come to an end as we move beyond the pandemic.

Seeking to fund this team from the placement budget is also high risk, given the volatility of this budget and the shortage of placements for children in care that has been articulated elsewhere.

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

In the event that this investment is supported, no further action would be required; the team would continue to work as they currently are doing.

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Investment decision	30 November CYP Committee	N/A	Lou Williams

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

A review has concluded that an Equality Impact Assessment is not required for this proposal. Continuing the service through approval of the investment requested would mean that the current positive impacts for young people continue.

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

Financial Benefits

As noted above, while it is difficult to calculate cost avoidance for any preventative service, there is growing evidence that the team is preventing young people from entering or remaining in care.

The annual cost of the team is £268k; placements for young people who have become ensnared in criminal exploitation tend to be high cost, with even semi-independent/supported placements being in the £1,500-£2,000 per week range and residential placements closer to £4,000 and above. These are not young people for who any foster care placement is likely to be identified.

Even at the lowest cost of placement, if the service avoids 4 young people coming into the care system at a placement cost of £1,500 a week, there is a financial return on investment. Clearly, even one young person prevented from needing a residential placement will almost result in meeting the investment costs.

Non-Financial Benefits

The benefits of preventing young people from becoming involved in criminal exploitation are very significant and potentially life-long.

Young people who receive custodial sentences are much more likely to remain involved in offending, have much poorer mental health and be less likely to be able to make a positive contribution to their community as adults and parents.

There are challenges in demonstrating benefits of preventative services such as these. However, outcome measures will continue to be monitored, including:

- The number of care placements avoided;
- Arrest rates;
- Reduction in numbers of young people being victims of offending;
- Reports of missing episodes.

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

As the service is already in operation; there are no risks assuming it continues to remain in operation.

Should investment not be supported, there would be:

- a need to explore the extent to which current team members can be redeployed to other areas of the business
- consideration of negative impacts to young people at very high risk of criminal exploitation

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

This business case is for continued investment into the operation of the SAFE team.

In the event of any one off or recurring funding from central government or partners, the investment required will be reduced accordingly.

Section 4c Children and Young People Committee

Temporary Funding Proposals

SEND Transformation Programme Page 73

Business Planning: Business Case – Savings / Investment

Cambridgeshire SEND Transformation Programme

Committee: Children & Young People

Savings amount:	£19.7m cost avoidance over 3 years
Investment amount:	£909,696 over 3 years (plus a contingency cost ranging £272,016 - £395,316)

Brief Description of proposal:

Delivering a new SEND Transformation and improvement programme focusing on early intervention for children and young people with Special Educational Needs and Disabilities (SEND) in Cambridgeshire.

Date of version: November 2021

BP Reference: N/A

Business Leads / Sponsors: Jonathan Lewis, Service Director Education

1. Please describe what the proposed outcomes are:

Work has taken place to develop a refreshed SEND Transformation programme for 2021-23, ensuring that we focus on the right things to drive delivery of better outcomes for children and young people, sufficiency of the right services delivered at the right time and in the right place and at the right cost and impact on finances (VFM). Initial calculations estimate that this transformation plan could deliver cost avoidance of £19.7m over three years. £909,696 investment is requested to support the transformation programme split over three financial years, plus a contingency cost ranging £272,016 - £395,316.

The strategic priorities for SEND Transformation are:

- Identify and respond to needs earlier to reduce the level of new demand for statutory support, an ambition set out in the SEND Strategy. A focus on earlier prevention, ensuring support is put in place as early as possible to support children and young people and their families with their needs.
- Focus on ensuring our work reduces costs through improving outcomes for children and young people with SEND. Our transformation plan is underpinned by the idea that through improving outcomes and the wider SEND system, lower costs should result through more children and young people being supported at SEND support level, more young people being able to maintain placements within mainstream settings and those who do require specialist provision accessing this locally.
- Reduce the escalation of need and minimise the current push to move children from mainstream to specialist provision. Supporting children to re-integrate within mainstream where better outcomes can be achieved. These principals may also have carbon benefits from a potential reduction in travel – if children can travel to their local school rather than a specialist school that may be a distance way.
- Take a system wide approach, ensuring our transformation plan is connected to the SEND Strategy and supports delivery of a shared ambition with partners and communities.

We know that to achieve significant system improvement we need to do things differently, with transformation in SEND underpinned by the following principles:

- Ensuring we have the right provision at the right time - investing in early years and earlier prevention.
- Embedding a focus on strengths and outcomes - understanding the needs of our children and young people and commissioning provision that enables them to meet their outcomes.
- Developing a system-wide view and collaborative working with partners, particularly health, as part of the children's collaborative to shape and deliver change.

- Ensuring our processes enable transparent decision making, with the child at the centre.
- Measuring and sharing our impact.

The programme will consist of a series of workstreams to shift system behaviours, to manage demand, improve local provision and processes and consequently reduce spend. The proposed workstreams and expected outcomes are as follows:

1. Changing the Conversation (CtC)

Embedding a strengths-based, person-centred approach to conversations across the education, health and care system to enable positive, sustainable change that focuses on early intervention, inclusivity and education, health and care provided close to home across the SEND system, providing the foundation for the new way of working and processes.

2. Mapping Provision

Developing a strategic view of provision to inform what is needed, developed and possible. To ensure that SEND provision is fully aligned with the aims of the transformation programme, we need to fully understand what provision currently exists and how impactful this is on children's outcomes and what value for money they provide (quality and cost). This workstream may also deliver carbon benefits if it leads to decreased travel requirements –e.g. through either improved ability to locate children closer to home and/or leading to filling geographical gaps in provision resulting in less travel

3. SEND Support

Designing and the wide promotion of our SEND Support offer with CYP, families and settings. All stakeholders will be aware of the support available to them without requiring a plan. Developing a SEND system, toolbox, and a shared understanding about what can be provided in mainstream settings. Ensuring professionals are confident talking to families and CYP about what SEND Support can offer, providing reassurance that CYP can have their needs met and receive the best possible support without requiring a plan. By ensuring there is a consistent approach to SEND Support, we should see a system that does not see EHCPs as a 'golden ticket' or necessary requirement to be able to access support.

4. Tuition

Review existing arrangements to ensure that tuition and alternative provision is used appropriately, consistently and in line with Preparing for Adulthood values and a strengths-based approach. There is an opportunity to ensure tuition provision enables children and young people to return to classroom settings where their outcomes and life chances will improve, and support will be most cost effective.

5. Outreach Model

To facilitate supporting children and young people with SEND in mainstream provision through Special Schools outreach. Special schools are experts in supporting children with SEND needs and with greater support could more effectively upskill peers in mainstream settings to support children to remain in their schools.

6. Enhanced Resource Bases (ERB)

Confirming the commissioning arrangements for ERB and SEND units and develop a Cambridgeshire offer for ERB ensuring that ERBs are effectively meeting the needs of children and young people, and that there is a clear understanding of what they provide and how this differs from other types of provision. Ensuring provision that is aligned with sufficiency, forecasting and ambitions for more children and young people to have their needs met in mainstream, local settings. Local provision may also provide greater resilience to climate change through having less travel (and therefore less reliance on infrastructure) to get to school.

7. Social Emotional and Mental Health (SEMH)

Working with health colleagues in the children's collaborative to deliver enhanced mental health support to schools and other education settings. Developing specialist provision for pupils with SEMH needs on primary school sites. A clear and consistent approach to monitoring, challenging and supporting schools and settings. A primary school network of early intervention and prevention support services. This will improve outcomes for children experiencing SEMH needs while remaining in mainstream education.

8. Preparing for Adulthood

Ensuring focus across the SEND system on preparing every child with SEND to successfully transition into adulthood. Developing clear information and a supported employment/internships offer for all cohorts (delivered where appropriate in FE settings) with alignment to the inhouse job coaches.

9. System Design

To redesign and simplify the SEND system to improve navigation for parents/carers and improve consistency in access and provision. This workstream will create the blueprint of a transparent SEND system, to ensure that as far as is possible, the component parts of the Cambridgeshire SEND system are aligned and talking with one voice in terms of process, finance, decision, and goals.

10. Banding & Descriptors

To transform our funding systems to include banding & descriptors of need whilst exploring the concept of zero-funded plans, to give reassurance of support without the need for additional funding. To bring clarity to the graduated approach for staff and parents by having a consistent approach to understanding and planning to meet needs. To develop system wide banding and a robust set of descriptors of need and

expectations of provision and how those needs can be met within settings. Align practice across mainstream and special schools about how needs can be met. The banding work links to recommendations detailed in August 2021 DSG High Needs Block Demand Management Audit.

10. Valuing SEND

Explore the potential of introducing the Valuing SEND tool or similar approach, to settings to enable holistic and strengths-based conversations, a better understanding of individual and cohort needs, and how settings are able to meet this.

11. Panel Redesign

Redesigning our panel structure including the Needs Assessment Panel, Funding Panels and high cost placement panels, developing consistent, transparent and strengths-based multi-agency decision making from assessment through to issue of plans. We will also introduce improved systems for making a 'no to issue' decision. Ensuring decisions are child centred and robust, making sure that children are receiving EHCPs when required, and that those who do not require plans are pointed towards appropriate support. This will include explicit reasoning and feedback to stakeholders, increasing transparency and confidence in the system. The panel redesign will address a number of the recommendations raised in the August 2021 DSG High Needs Block Demand Management Audit.

12. Annual Review improvement

Improving our annual review process to ensure these are timely, outcome-focused and of high quality. Improving confidence in the system and increased transparency in decision-making and the importance and purpose of Annual Reviews in supporting outcomes. Through increasing the quality of reviews, support to CYP will be proportionate and more plans could be ceased where outcomes have been achieved, this should be seen as a positive achievement by professionals, parents/carers, children and young people. This is particularly a focus for young people leaving school to ensure their journey to independence is best supported. The review will seek to address a number of the recommendations raised in the August 2021 DSG High Needs Block Demand Management Audit.

13. Legal Review

Enabling better use of council resources and more effective joint working with professionals by involving the right professionals at the right time to reduce escalation of cases to legal proceedings; engage in mediation earlier and bring some aspects of legal proceedings 'in house'; effective use of Legal provider SLA to ensure effective working and value for money.

14. Early Years

Capacity building to improve prevention and early intervention one of the key principles of the transformation plan to reduce the level of new demand for statutory support (further scoping required)

In addition to the workstreams detailed above, we have identified the following enabling activities that will support us to deliver change:

a) SEND case management system

Procurement and implementation of a SEND case management system. This work sits outside the programme, with governance via the Education System Programme. It will have a major impact on the day to day working of the SAT team (Statutory Assessment Team) and beyond, facilitating efficient working and system collaboration. It will improve the SAT team's ability to process cases and reduce the backlog on an ongoing basis.

b) Trajectory Management

Development and embedding of a trajectory management approach and mechanisms for capturing and sharing programme impact.

c) Workforce roles, responsibilities, and development

All people in the SEND system are clear about their role and the role of others and how they each add value to every child with SEND.

d) Communications and engagement

To identify and manage stakeholder engagement across the programme for a range of stakeholders (including education, health and care staff, schools and settings, children, young people & families) and build effective relationships across the system to support engagement and buy-in to the programme. Develop and rollout a programme communications plan, to plan and prepare for the key messages that need to be delivered to stakeholders over the course of the transformation with messages aligned in content and timing to the key activities and milestones within the programme.

e) Quality Assurance

Focus on the continuous improvement in the quality of services delivered. Ensuring the recommendations from the Dedicated Schools Grant High Needs Block Demand Management Report will be built into the QA Framework review.

f) Data quality

To improve the quality of data recording about EHCP process and placement, delivering new processes for recording activity and finance.

In summary, the overriding principle of our SEND Transformation Programme is early prevention, ensuring support is in place as early as possible to support CYP and their families with their needs, where possible without the need for an EHCP. We have re-focused our transformation work to ensure that whilst cost reduction remains a key factor of success, outcome improvements are placed front and centre by ensuring better outcomes for CYP with SEND. This should mean that the cost to support them reduces. Through roll-out of our strengths-based practice/behavioural science approach 'Changing the Conversation' within the system, CYP and their families will be at the heart of all conversations - with an emphasis on their strengths, outcomes and aspirations. Through the Bandings & Descriptor workstream, we will set out clearly how settings can meet the needs of CYP, ensuring that support is proportionate and enables young people to take steps towards independence. Through increased co-production, promotion and engagement with our SEND Support offer, clearly setting out our expectations around Preparing for Adulthood, and ensuring that more young people either transition into independence or into further support. Our vision is that CYP with SEND will have their needs and outcomes more effectively met at all stages of their journey.

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

Cambridgeshire continues to face increasing challenges in relation to funding for children and young people with SEND. The High Needs Block has a forecast in-year pressure of £11.2m for 2021/22, this will add to the current Dedicated Schools Grant cumulative deficit of £26.4m.

Locally and nationally, there is a continuing increase in the number of children and young people with an Education, Health and Care Plans (EHCP - outlines a child or young persons special educational, health and social care needs), alongside increasing complexity of need and the legal extension of eligibility to support for young people up to the age of 25.

There are currently 6,044 EHCPs in Cambridgeshire, with over 900 new plans issued in the last year, an increase of 41.5% against the previous reporting period, which represents an increase of 236% over the last six years. Growth in EHCP numbers is particularly acute in those aged 10 and under (primary school and early years) and 20 and over.

Trends for the future forecast a year-on-year increase in EHCPs, there will be a 47% increase in the number of EHCPs by 2031 based on current trends. EHCPs which show Autistic Spectrum Disorder, Social, Emotional and Mental Health (SEMH) or Moderate Learning Difficulties as the primary need are likely to grow more quickly and make up most of the expected growth. Much of our increase, as with other Local Authorities results from the 2015 reforms which extends the eligibility for support up to the age of 25; requiring a need to support plans for longer and therefore representing a growth in demand for Post-19.

Cambridgeshire County Council has been responding to these growing pressures through a range of actions detailed within the 2019-21 SEND Recovery plan, achievements include:

- Review of targeted group of young people to ensure support is timely, appropriate & focused on outcomes
- Improving block contract arrangements
- Reviewing Behaviour & Attendance Improvement Partnership (BAIP) support
- Reviewing Enhanced Resource Base provision
- Developing a sufficiency forecast model and strategy to improve provision planning
- Embedding strengths-based practice with the Statutory Assessment Team.
- Continuing progress on SEMH Review, including specification for Centres of Excellence
- District Team restructured to strengthen support offered to schools
- SEND Quality Assurance Framework introduced in September 2020
- Work beginning to implement a SEND Case Management System to improve process efficiency

Work has taken place through engagement with staff across the service to reflect on the SEND Recovery plan, building on the progress made during the last two years while resetting our approach to develop a refreshed and reprioritised SEND Transformation programme for 2021-23 to ensure that we are still focusing on the right things to drive better outcomes for children and young people and impact on financial pressures.

The programme links to many other pieces of work and with stakeholders across the system including:

- SEND Strategy
- SEND Commissioning Strategy
- Autism Strategy and development of pathways
- Best Start in Life
- Strong Families and Strong Communities
- Development of Children's Collaborative Local offer
- Alternative provision and inclusion teams
- Schools Improvement Service
- Preparing for Adulthood work in Adults (APCP), ensuring alignment around transitions
- Quality Assurance
- Sufficiency data
- Education system programme (SEND case management system)
- SEND training/ workforce development
- DSG High Need Block Demand Management Audit report
- DSG Management Plan

The programme workstream interdependencies have been mapped, this has been used to sequence the workstreams to make best use of resource (sequenced workstream illustrated in table 2).

At the time of submitting this business case, a separate business case for the Young Adult's Team, Disability Social Care 0-25 Service, had also been submitted. The Young Adult's Team business case is requesting funding for permanent staffing to increase operational resource. This is entirely consistent with the ongoing increase in demand locally and nationally, one of the key drivers for the transformation programme, and is in line with the recent agreed additional investment for the Statutory Assessment Team to increase capacity to deal solely with BAU (Business as usual).

The transformation programme includes workstreams that will impact and benefit the work of the Young Adult's Team as we work to shift system behaviours, improve processes, and manage demand, for example, Preparing for Adulthood, Panel Redesign, Annual Review Improvement and a Tribunal Review. Alongside their BAU, this requires operational staff to have sufficient capacity to manage their caseloads and implement change. Further key principles in line with SEND Transformation, as detailed in the YAT business case are increased capacity which will enable the team to undertake reviews at an earlier stage with the potential to reduce packages, deliver savings and focus on maximising the young adults' strengths and independence. As we launch the transformation programme our links with Disability Social Care, as an identified stakeholder, will be developed and strengthened, including representation on the SEND Transformation Board

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

Through our trajectory management planning, five scenarios of action have been considered, including a do-nothing approach. The transformation programme is based within a scenario that will not bring spend in line with High Needs Block allocation, however it is considered by all involved the most realistic and deliverable option, with emphasis on early intervention and changing behaviours early in the system, a reduction in the number of requests for EHCPs, through a strengthened SEND support offer and improved inclusion within settings; a reduction in the number of plans being issued through more robust, strengths-based decision making, greater inclusivity within mainstream settings, enabling more children to remain in settings and able to return from specialist settings; transparent decision-making and clear expectations around funding.

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

Investment is required to bring in capacity, skills and expertise to deliver the programme. We are looking at a mix of new roles and internal backfill arrangements, external partners and BID colleagues to provide a blended delivery team. This provides added benefits of drawing on existing skills, and subject matter expertise, as well as offering development opportunities and skills and knowledge exchange. The posts and backfill requirements are detailed in the table below and total an investment request of £909,696. The funding request spans three financial years with an immediate requirement in 2021-22 of £220,852.

COST PLAN			Breakdown over 24 month period		
Expenditure detail	Expenditure Rationale	Total Cost	21-22	22-23	23-24
Assistant Strategic Improvement Manager (P3) for 24 months	Additional capacity across SEND Transformation Programme, bringing SEND expertise and knowledge. Role to include management of seconded SENCOs. (P3 £56,676 - £60,938 per year inc. 30% oncosts, total cost £121,876)	£121,876	£15,235 Assuming Jan 22 start date	£60,938	£45,703
Preparing for Adulthood lead(P3) for 24 months	Preparing for Adulthood is a large scale complex workstream that requires dedicated resource to lead and develop work. Propose a 24-month secondment for Additional Needs Team Leader with an uplift from P2 to P3. Additional Needs Pathway Adviser from within team to backfill for Team Leader. Recruitment of an Additional Needs Pathway Adviser, ensuring capacity is not withdrawn from the team and current expertise is utilised to support the work. Total cost £113,350	£113,350	£14,169 To start Jan 22	£56,675	£42,506
SEN support workstream lead, backfill costs for 9 months	Backfill Team Leader to lead on SEN Support workstream with a senior teacher via TLR 1 day per week to provide capacity for 9 months. Total cost £2k	£2,000	£1,333 Start Oct	£667	
External interim Tuition Lead, for 125 days	External SEND expertise required to undertake detailed analysis and lead tuition workstream. There is no current capacity within the service to do	£50,000	£38,000 Mid -Nov start if funding	£12,000 (30 days)	

	this work, so external support is required. (£400 per day x 125 days) Total cost £50k		approval allows. (95 days)		
External interim Annual Review Improvement Lead for 52 days	SEND Leadership and Management Consultant for 1 day per week for 12 months to shape and lead annual review improvement process (£550 per day for 52 days)	£28,600		£28,600	
Area SENCO	To implement annual review improvement changes, protecting SAT team capacity. UPS plus 1 SEN point 38-41K + £2,270 SEN + 30% Total £56,251 per year	£56,251		£56,251	
Changing the Conversation external support for 6 months	We will explore the market for available SEND and behavioural change expertise to lead on taking a strengths-based approach across the SEND system.	£125,100	£62,550	£62,550	
SEND readiness tool development and implementation	To bring in capacity and skill to develop and implement SEND tool to determine school and parental readiness to meet needs, to include training practitioners. (£450 for 130 days, total £58,500)	£58,500	£29,250	£29,250	
SENCO secondments (5 SENCO's 1 day per week for 24 months)	Time to be used flexibly across programme, providing external expertise from SEND System to support co production and development of workstreams. This will include Early Years SENCOs. SENCOs to be trained as Changing the Conversation Champions. £300 per day for 78 weeks x5. Total cost £117,000.	£117,000	£18,000 From Jan 22	£58,500	£40,500
Headteacher secondment (78 days, based on 1 day per week for 24 months)	Time to be used flexibly across programme, to bring in expertise of one of more Headteacher. Based on SIS costs £400 per day for 78 days, total cost £31,200	£31,200	£4,800 From Jan 22	£15,600	£10,800
Subject matter expertise to support SEMH workstream.	SENCO support £300 per day, 1 day per week for 24 weeks, total cost £7,200	£7,200		£7,200	
SEMH lead	Staff backfill for 1 day for 52 weeks (P2 @£49,981)	£10,000	£2,500	£7,500	
Communications and digital	Budget for communication and digital expertise and resource to support system wide	£30,000	£3,750	£15,000	£11,250

	transformation activity, local offer and strategic communications plan eg professional videos, branding, training materials, animations, web developments, event costs, toolkits, peer led campaigns. Total cost £30,000				
Business Officer x 0.5 fte for 24 months	To provide support to the SEND Transformation workstreams, ensuring capacity is not drawn away from statutory functions and more costly/specialist staff. Scale 4 officer £20,092 + 30% = £26,119 per year.	£26,119	£3,265	£13,060	£9,795
Business Analyst	To support work to improve data quality, to develop, implement and embed new workflows. 25 weeks full time resource @ £350 per day	£43,750	£28,000 Assume from Dec 21	£15,750	
Trajectory management resource	Capacity to support trajectory management development and tracking. Likely to be 4-6 months.	£43,750		£43,750	
Early Years	Resource to bring early years capacity into the SEND Transformation Programme.	£45,000		£45,000	
Total		£909,696	£220,852	£528,291	£160,554

Contingency plan

Given the scale of this two-year transformation programme we have outlined a contingency plan with a contingency cost ranging between £272,016 and £395,316, depending on the options available for specific costs.

Expenditure detail	Contingency rationale	Contingency range (top)	Contingency range (lower)
Assistant Strategic Improvement Manager (P3) for 24 months	If we are unable to recruit to this post we would look to bring in an external interim to provide short term cover to ensure sufficient management capacity for the programme, whilst we re-ran the vacancy. We need to ensure this post is covered as soon as possible because part of the job-holders role will be management of the seconded SENCOs, we need to avoid adding additional pressure to existing management capacity.	£450 per day x 60 days = £27,000 This is an uplift of £11,765	£11,765
Area SENCO	We are proposing an initial 12 months for the Area SENCO role with particular focus	£56,251	£56,251

	on taking forward the Annual Review improvement changes. If the Annual Review Improvement implementation requires further resource to embed change and given the potentially wide-reaching impact this role will bring - we would like the option (following review) to extend, possibly for a further year.		
Changing the Conversation external support	CtC with external partners is a new approach. There is a risk that six months support will be insufficient time to develop the approach and we may need to extend the period of support, therefore a contingency cost is proposed.	£62,500	£62,500
SEND readiness tool development and implementation	We have proposed a contingency cost for the development and implementation of a tool to determine school and parental readiness to meet needs. We will need to explore the external market for this and have included costs for an external interim rather than a consultancy firm. However, if this is not possible, due to availability or knowledge of this type of tool we may need to procure consultancy support. We have used the indicative quote provided by a consultancy firm for this, for six months (£166k) and nine months (£249,300) support and present the difference to the external interim cost as the contingency request.	Uplift for 9 months consultancy £190,800	Uplift for 6 months consultancy £107,500
Early Years	We are working with Early Years and Childcare to scope the options for the Early Years workstream. This requires further development and agreement. We have three indicative costs based on early plans. We have included the low-cost option (£45k) in the cost plan. The medium option is an indicative cost of £79k and top end option is £119k. We have included the uplift from the low-cost option in the contingency plan ie £34k-£74k.	Uplift for high-cost option £74,000	Uplift for medium cost option £34,000
Total		Contingency (high range) £395,316	Contingency (lower range) £272,016

In addition to the resource requirements detailed above and the current SEND Service resource, the Business Improvement Directorate will look to allocate the following existing resource to the programme:

BID - Programme and Projects Project management skills to drive forward individual workstreams and programme management capacity to oversee transformation	1 Programme Manager 1 Senior Project Manager 0.5 Project Manager
BID - Design and Behaviour Change To support discovery, as is mapping and stakeholder engagement, problem definition, intervention design and testing, coproduction, implementation, and delivery and measuring impact	1 Senior Design Advisor 0.2 fte Senior Project Manager for 6 months to use knowledge from APCP to advise on CtC
BID - Commercial Team Support and advice on business planning, contract management and procurement	Commercial Manager
BID - Business Intelligence Provision and development of performance /management information. Development of trajectory management Business process improvement in SAT / case management system development. SEND Dashboard, SEN2 data return Contribute to workstream data requirements eg ERBs, Tuition, Annual review improvement process	Head of Business Intelligence Currently supported through BAU
Finance Financial management and reporting Development of trajectory management To contribute to workstreams on development of banded funded, ERB review, panel redesign.	Strategic Finance Manager
Commissioning Lead on commissioning arrangements SRO and lead officer for ERB review and mapping provision	SEND Commissioning Manager SEND Commissioner
Communications, web and digital Support on communication and engagement activity	Communications Manager to coordinate resource as required.

Dedicated Schools Grant Block Transfer.

As in previous years, local authorities continue to be able to transfer up to 0.5% of their schools block to other blocks of the Dedicated Schools Grant, with Schools Forum approval. 0.5% of the schools block will equate to approximately £2.1m in 2022-23. The local authority is therefore proposing a transfer of 0.5% / £2.1m to support a range of activities aimed at providing additional support to schools, increasing training opportunities and increasing provision to mitigate the requirement for higher cost

independent or out-county placements. This also includes a proposal to contribute circa £500k towards the costs of this transformation programme in 2022-23.

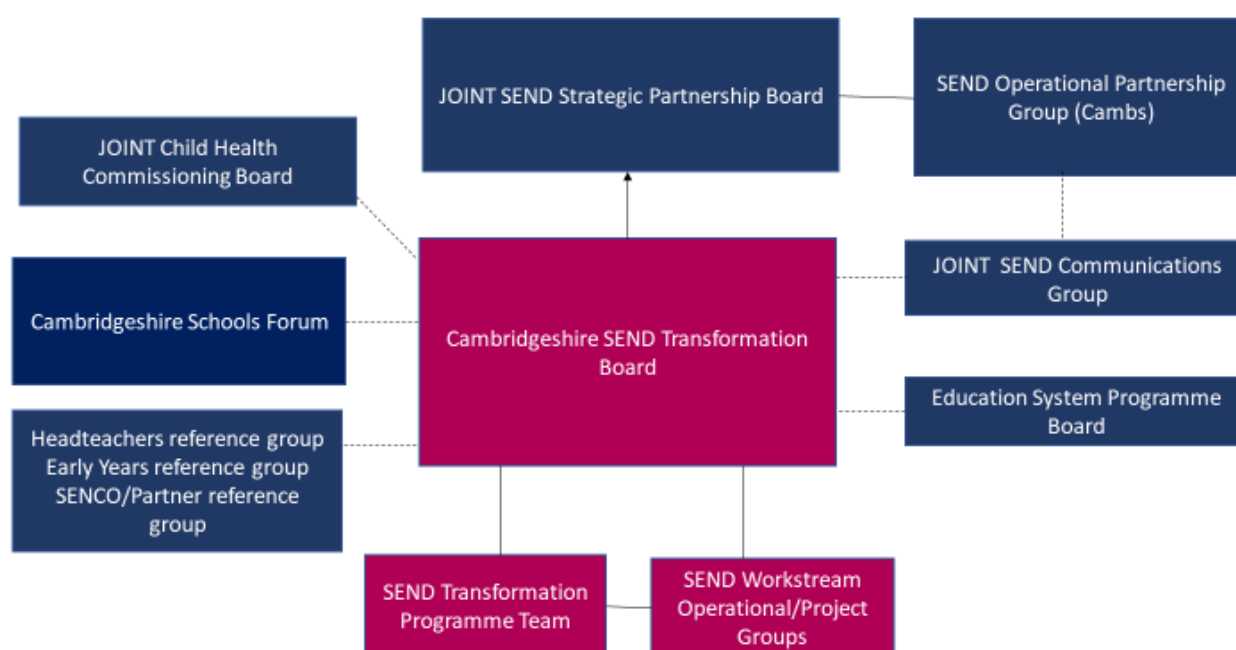
At the Schools Forum meeting held on 5th November 2021 members of Schools Forum voted to approve in principle the 0.5% / £2.1m transfer. However this agreement was subject to the Local Authority returning to Schools Forum at the next meeting, having undertaken further discussion with relevant representative bodies, with a more detailed, fully costed plan, and, furthermore, the impact of which is reviewed, monitored and evaluated on a regular basis by Schools Forum.

Further to this the treatment of the funding is to be discussed with the DfE to ensure it is shown correctly in the annual Section 251 budget statement.

Governance arrangements

The Service Director for Education will be the Senior Responsible Officer for the SEND Transformation programme. The SEND Recovery Board and the Strategic Education Commissioning and Governance Board will be reformed as the SEND Transformation Board to oversee delivery of the plan and monitor progress against the plan and trajectories. Each workstream will have a senior responsible officer and workstream lead. The workstream SROs will sit on the Transformation Board to report progress, risks, issues and manage dependencies. We will establish (or link to an existing forum) a Headteachers reference group and a partner working group to guide the work of the programme. The programme will be supported by a programme team and trajectory management working group.

Table 1 - SEND Transformation Governance



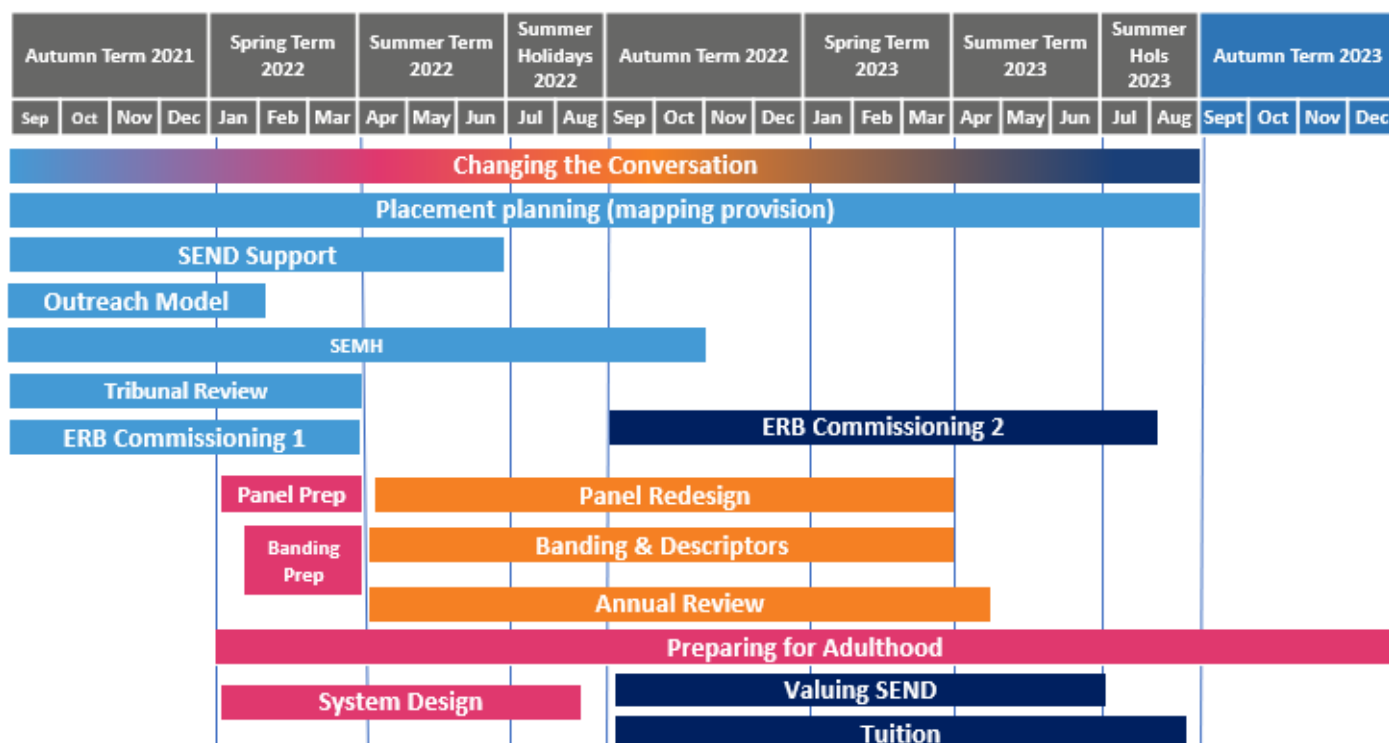
Programme plan

We have identified a number of workstreams (detailed in section 1) important in shifting system behaviours, managing demand and reducing spend, meaning more attention is needed on sequencing of change, especially due to dependencies between workstreams. Most of the workstreams involve the 'influenceable space', requiring a strategic and consistent approach to co-production and engagement with partners. The SEND Transformation Plan proposes a phased approach to the workstreams across 2021-23. The workstreams have been prioritised and sequenced based upon a prioritisation of the following criteria:

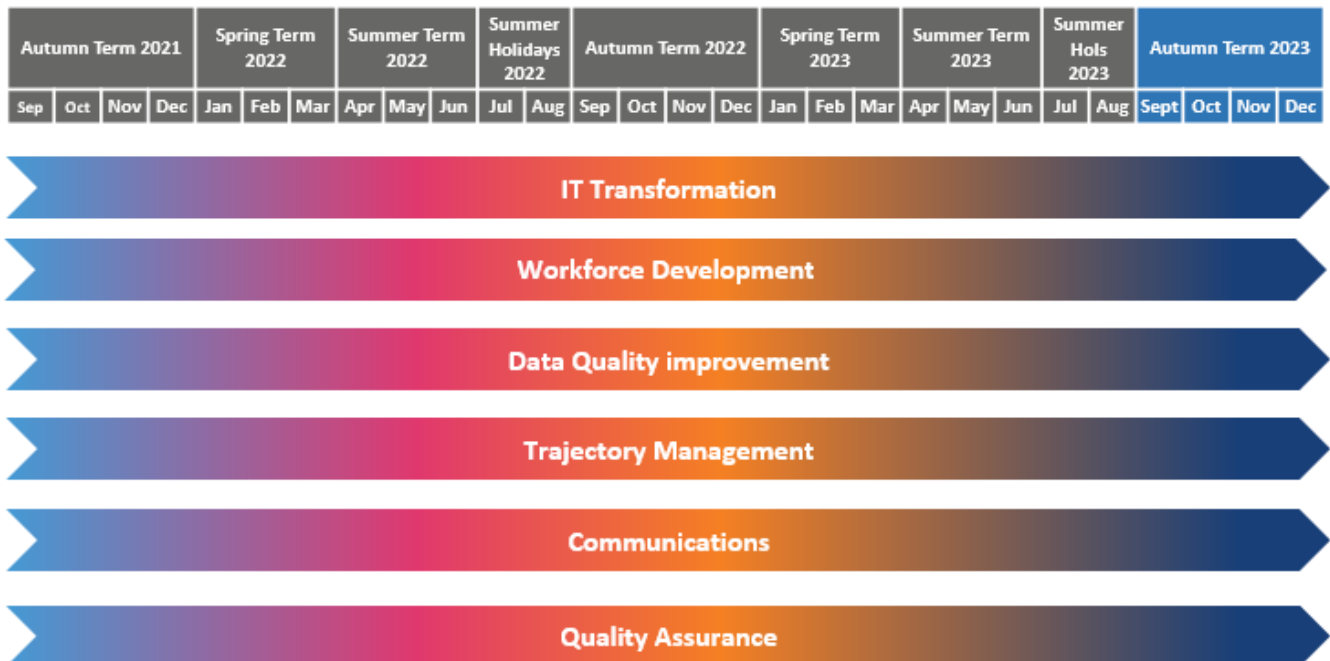
- Alignment to SEND Strategy
- Impact on outcomes for CYP, families, settings & staff
- Financial impact and timeframe for delivery
- Investment required to deliver change
- Complexity of delivering change
- Dependencies between workstreams
- Legal & representation risks to delivering, or not delivering change
- Essential skills to deliver change

Table 2 – High level programme plan

SEND Transformation | High-level plan



SEND Transformation | High-level plan Enablers



Programme Milestones

Initial planning has determined the following high level milestones:

Milestones	Date milestones achieved by
Mobilisation activity – governance arrangements	
Develop PMO functions eg risks, dependencies, reporting, impact measures	End Sept 21
Governance and Terms of reference agreed	29 September 21
Mobilisation activity – resources	
Agree workstream SROs and leads	September 21
Agree programme resourcing	Nov 21
Business case and costs drafted	14 September
Phase 1 workstream groups established	End Sept 21
Mobilisation activity – communications	
Stakeholder mapping and analysis	Sept 21
Develop communication content	Sept 21
Communication and engagement plan developed	Sept 21
Engagement and launch events	Sept – Nov 21
Phase 1 Workstreams	To Start Sept 21
Design Changing the conversation intervention	Sept 21
Rollout CtC intervention (Additional Needs Team)	Sept – Nov 21
Plan next CtC intervention	Dec 21
SEND Support - engagement with stakeholders	Nov – Dec 21

Provision mapped	Dec 21
Outreach model in place	Jan 22
ERB phase 1 activity completed	Dec 21
Phase 2 Workstreams	To start Jan 21
Preparing for Adulthood workstream mobilised	Jan 22
SEND System design reports	July 22
Banding and descriptors of need workstream planned	April 22
Panel redesign planned	April 22
Phase 3 workstreams	To start April 22
Panel redesign implemented	April 23
Banding and descriptors or need implemented	April 23
Annual review improvement implemented	April 23
ERB commissioning completed	Aug 23
Phase 4 workstreams	To start Sept 22
Tuition review completes	Aug 23

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

Who will be affected?	Positive Impact	Negative Impact
Children, young people and their families	A continued focus on improving outcomes with an emphasis on meeting a child's needs inclusively. Strengthened local provision will enable CYP to have their needs met within their communities and close to home. Families will feel more engaged in activity undertaken by the council and more confident in the support available within settings to help their children succeed.	
Schools and settings	Strengthened SEND system with a shared ambition and more meaningful co-production. Using strengths-based child-centred approach to conversations and decision-making Areas of good practice can be more widely celebrated and used as a basis for further change.	Capacity to engage.

SEND Service staff	Improved resilience within the service with improved outcomes and reducing demand reducing pressure on staff. Opportunities to engage with change and upskilled on strengths-based approaches. The knowledge that issues are being addressed will improve staff morale.	A call on already stretched staff capacity to contribute to the transformation activity (this is being mitigated through planning for additional resource)
SEND Management	Focus and capacity to progress change. A strategic view of provision to inform what is needed, developed and possible. Tools to measure and share impact.	A call on already stretched staff capacity to contribute to the transformation activity (this is being mitigated through planning additional resource)
Stakeholders	There will be a shared ambition and priorities across the system for CYP with SEND - including within Health & Social Care.	Capacity to engage.

A full Equalities Impact Assessment has been developed which will continue to be reviewed and refreshed accordingly.

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

Financial Benefits

The financial impact of most workstreams will be cost avoidance, avoiding additional spend rather than reducing the current pressure. We are proposing a shift from the line-by-line savings approach of the SEND Recovery Plan 2019-21, moving to a trajectory management approach which enables the flexibility to adapt approaches and re-focus transformation activity as required. It will also allow for better performance measuring, as the line-by-line savings approach is so often affected by demand. Trajectory management allows us to measure impacts taking into account demand increases. The Trajectory management approach was successfully adopted by the Adults Positive Challenge Programme. Work has begun on Trajectory planning for the SEND programme, but this will be further developed over the coming months.

Due to the nature of the demand within SEND many of the strategies are focussed around mitigating the scale of the potential increases rather than cashable savings resulting in a reduction in budgeted expenditure. Performance will be monitored against revised demand forecasts to ensure delivery against original baseline assumptions. Alongside this, workstreams (such as the introduction of a banding system and the continuation of reviews of high-cost placements) should result in reductions in unit costs.

However, implementing a banding system alone is unlikely to yield reductions in costs without the accompanying work around behaviours and changes in practice.

Based on work with Impower Consulting to develop our Trajectory Management, five scenarios are provided to show potential financial impact from a range of approaches:

- Scenario 1 which aims to return demand to the level in the original sufficiency model
- Scenario 2 which aims to reduce demand to this model & reduce the number of plans by 5%,
- Scenario 3 which focuses just on reducing the number of plans,
- Scenario 4 which aligns with the re-prioritised transformation plan
- Scenario 5 which stretches that plan to be aligned with statistical neighbours over three years

The financial impact of these scenarios is captured in table 2.

The scenarios suggest that Cambridgeshire could possibly avoid between £19.7m-£52.7m over three years when compared to the 'Do Nothing' scenario. This cost avoidance/savings are largely made up of fewer plans entering the system, more plans being stepped down, and a reduction in unit costs through changed commissioning and funding practices. Scenario 4, based on the transformation plan and following assumptions shown in table 4, could deliver a cost avoidance of £19.7m.

Table 3. Scenarios – Financial Impact

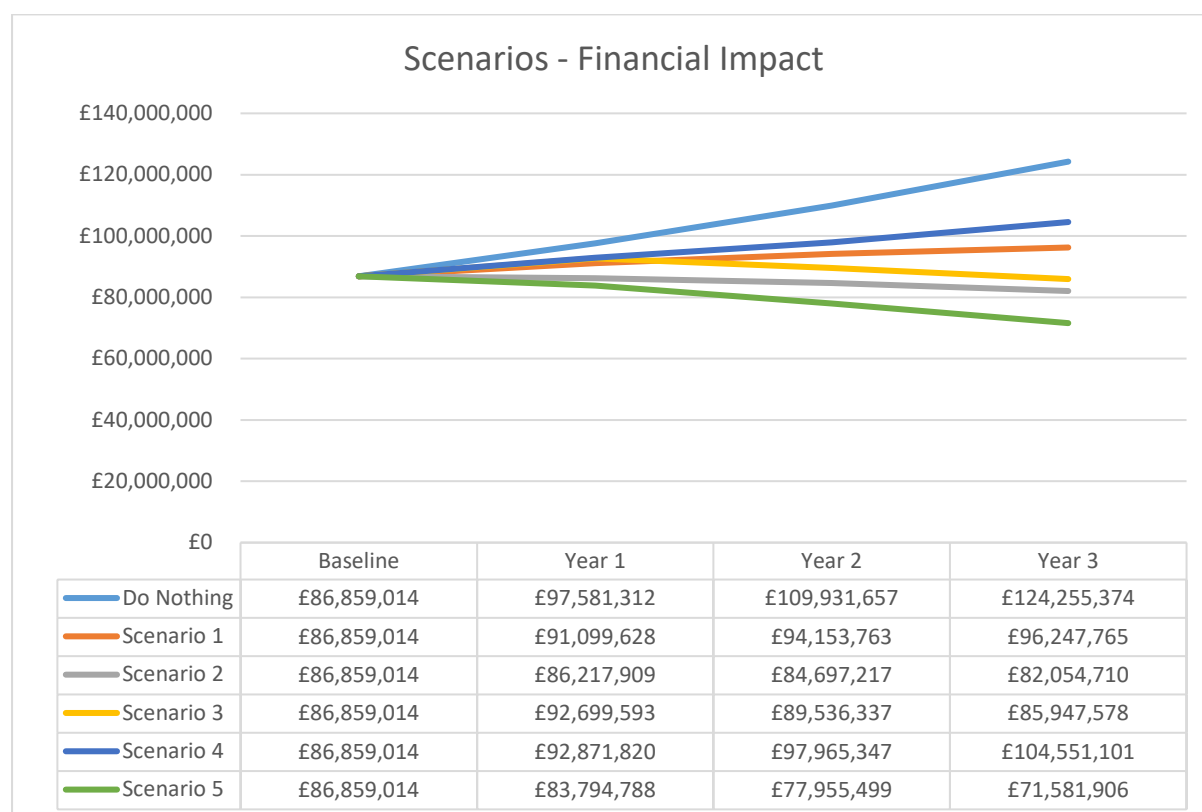


Table 4.

Compares High Needs Block allocation with the Do Nothing and Scenario 4.

- Cambridgeshire's High Needs Block allocation will increase by £21.9m by 23/24. Whilst this will narrow the gap in spend, it will not resolve the financial position of the service
- Compared to the High Needs Block allocation, the 'Do Nothing' scenario results in an overspend of £27m in Year 3
- Scenario 4 results in an overspend of £7.3m in Year 3.

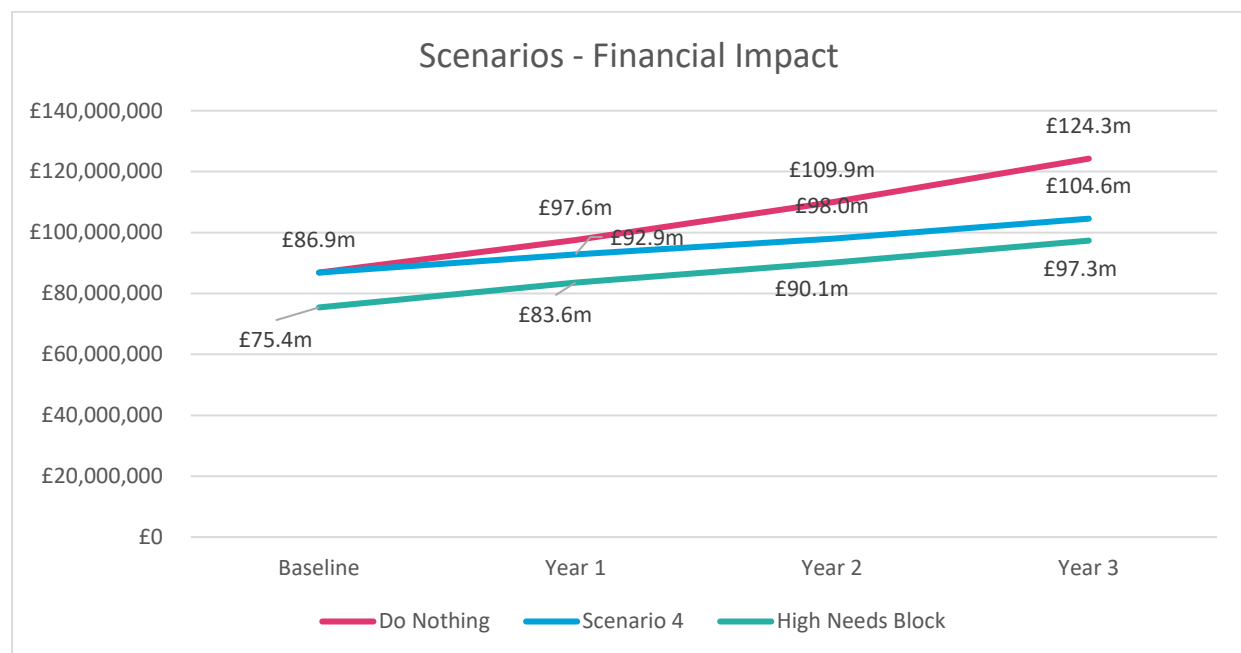


Table 5. Compares High Needs Block allocation with Scenarios 1-4

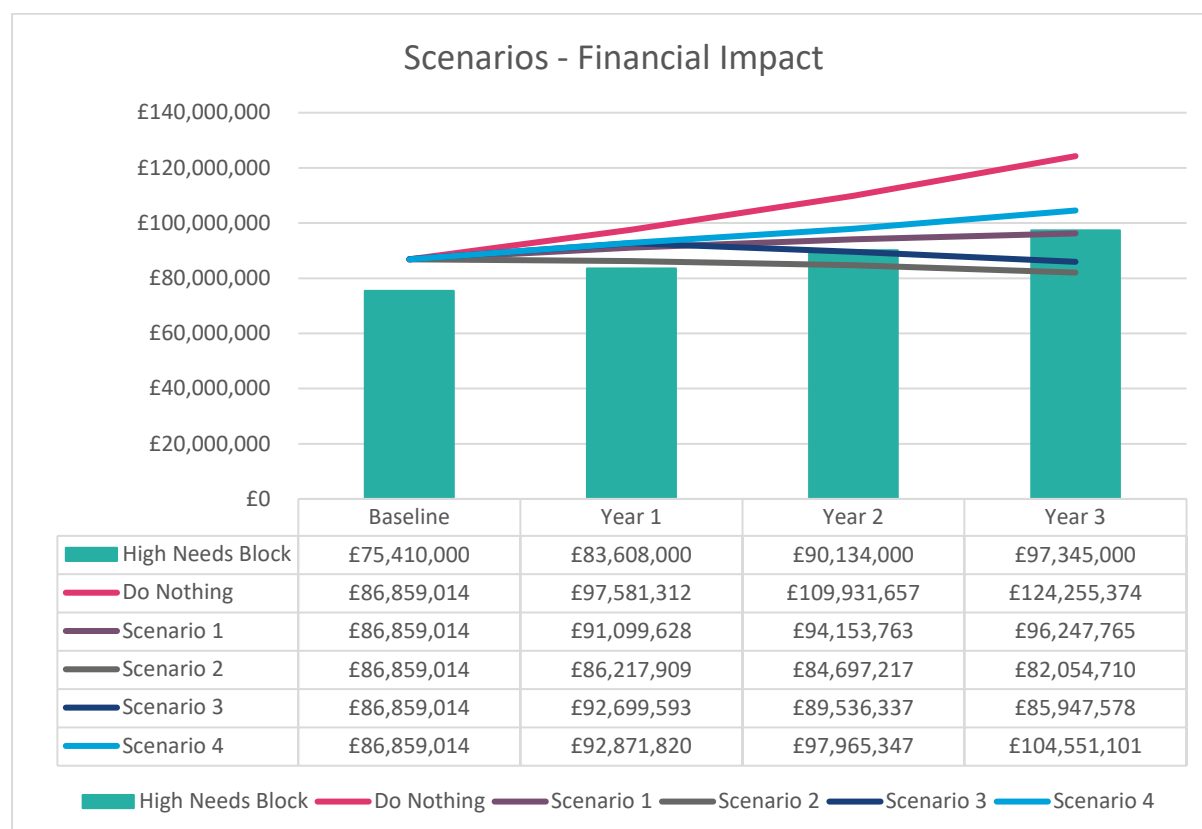


Table 6. Breakdown of Scenario 4

Year 1	Year 2	Year 3
<ul style="list-style-type: none"> 5% reduction in requests for EHCPs 5% reduction in plans being issued 41 CYP not on school roll placed based on report shared at June 21 Board Placement mix as at Jan 21, with 2% increase in mainstream placements & 2% decrease in specialist placements 5% reduction in average top-up funding for units/resourced provision 	<ul style="list-style-type: none"> 15% reduction in requests for EHCPs (cumulative from yr 1) 5% reduction in requests being approved 25% reduction in plans being issued New placement mix as at Jan 21, with 2% increase in Early Years, 2% increase in mainstream placements & 2% decrease in specialist placements 3% reduction in existing tuition, independent specialist, post 16 and NEET placements 6% increase in existing mainstream placements 5% reduction in average top-up funding for all new placements 	<ul style="list-style-type: none"> 30% reduction in requests for EHCPs (cumulative from Yr1-2) 10% reduction in requests being approved 30% reduction in plans being issued New placement mix as at Jan 21, with 2% increase in Early Years, 2% increase in mainstream placements & 2% decrease in specialist placements 3% reduction in existing tuition, independent specialist, post 16 and NEET placements 6% increase in existing mainstream placements Reduction in top-up funding for new placements remains

Non-Financial Benefits

The non-financial benefits of the transformation programme fall across five main areas:

1. A continued focused on improving outcomes with an emphasis on meeting a child's needs inclusively, and using Changing the Conversation to have a strengths-based child-centred approach to conversations and decision-making
2. Improved resilience within the service with improved outcomes and reduced demand reducing pressure on staff, in addition to giving them opportunities to engage with change
3. Strengthened local provision which enables children and young people to have their needs met within their communities and close to home. As mentioned earlier in this business case, this would also have benefits in relation to carbon reduction.
4. Shared understanding of the impact of decision making, enabling more staff across the education, health and care system to understand their impact on finances and demand across the service
5. Strengthened SEND system with a shared ambition and more meaningful co-production

The table below details the deliverables and expected impact of the proposed workstream, plus a note on whether the workstream is primarily within our controllable or influenceable space.

Workstream	Deliverable	Success measures	Impact
Changing the Conversation (CtC) - Embedding a strengths-based, person-centred approach to conversations to enable positive, sustainable change across the SEND system, providing the foundation for the new way of working and processes. Influenceable space	Define and develop CtC intervention approach and roll out plan for SEND.	Practitioners report greater understanding and confidence in using a Strengths-Based Approach.	Strengths based approach should ensure CYP are able to meet their potential and receive support that is proportionate and meets their needs. In terms of placements and provision this should result in an:
	Recruit and train CtC Champions.	Increase in the number of practitioners across system trained in CtC.	
	Roll out workshops, training, facilitation of huddles with identified teams/partners/groups.	More specific success measures to be developed following development of CtC Roll-out Plan, including on outcomes for	
	Design of strengths-based tools and impact tracking.		
	A strengths-based review and refresh of documentation.		Increase in mainstream meeting needs, less children being moved to specialist placements

		children and young people	<p>Reduction in request for EHC Needs Assessment (EHCNA)</p> <p>Reduction in new specialist placements (cost avoidance).</p>
<p>SEND Support Building confidence and understanding of the SEND Support offer across Cambridgeshire, enabling CYP to access support when they need it without necessarily requiring an EHCP.</p> <p>Influenceable space</p>	<p>Developing & promoting a SEND support offer for parents/carers to address concerns early.</p> <p>Developing a 'toolkit' of resources for settings to support CYP at SEND Support level.</p> <p>Establishing what should be 'ordinarily available' within settings across Cambridgeshire for CYP with SEND.</p> <p>Promoting and updating a training plan that will enable this offer to be in place.</p>	<p>Settings feeling more confident to meet needs without a plan.</p> <p>Parents feeling more confident in the provision at SEND Support level.</p> <p>Decrease in requests for EHCNA.</p>	<p>EHCPs are no longer seen as the golden ticket to accessing support, leading to a reduction in requests for EHCNAs /EHCPs (Cost avoidance)</p>
<p>Tuition Review existing arrangements to ensure that tuition and alternative provision is used appropriately, consistently and in line with Preparing for Adulthood values and a strengths-based approach</p> <p>Controllable space</p>	<p>Understand cohort of children awaiting placement to provide a snapshot of requirements. Identify the CYP, their needs and location.</p> <p>Development of specification for tuition requirements for those who are not on school roll and wider cohort.</p> <p>Explore options and provide</p>	<p>Increase in number of CYP reintegrating from tuition to school settings</p> <p>Reduction in number of CYP receiving long-term tuition</p> <p>Children not on roll provided with a placement.</p>	<p>Reduction in tuition packages (cashable)</p> <p>CYP not on school roll placed (cashable)</p> <p>CYP outcomes and life chances will improve on return to school setting.</p>

	<p>recommendations for additional provision.</p> <p>Develop delivery plan for agreed expansion sites.</p>		
<p>Enhanced Resource Base Confirming commissioning arrangements for ERBs, and development of the Cambridgeshire offer for ERBs</p> <p>Controllable space</p>	<p>Commissioning requirements for ERBs confirmed, informed by data.</p> <p>ERB SLAs with all participating schools in place. Clear understanding of what they provide and how this differs from other types of provision. Transparent and consistent finance structure for ERBs.</p> <p>Admissions policy ensuring routes to admission and eligibility are within the scope of the ERB specification.</p> <p>Provision, offer, finance profile reviewed and revised specification for identified Trust.</p> <p>Clear and transparent practice and pathways.</p> <p>Local offer updated to reflect the ERB and SEND unit offer.</p>	<p>ERB provision matches what is required across the County.</p> <p>ERBs are effectively meeting the needs of CYP.</p>	<p>Ensuring provision is aligned with sufficiency, forecasting and ambitions for more CYP to have their needs met in mainstream, local settings. This is expected to deliver a reduction in cost of ERBs</p>
<p>Outreach Model To facilitate supporting children and young people with SEND in mainstream provision through Special Schools outreach. Special schools are experts in supporting</p>	<p>Develop and consult on outreach model.</p> <p>Minimum requirements agreed.</p> <p>Model designed and costed SLAs with participating special schools in place</p>	<p>CYP supported by outreach model remain in mainstream settings.</p> <p>Reduction in new plans being issued with special school support</p>	<p>Needs are met in mainstream, keeping children local.</p> <p>Reduction in new specialist placements (cost avoidance)</p>

<p>children with SEND needs and with greater support could more effectively upskill peers in mainstream settings to support children to remain in their placements.</p> <p>Influenceable space</p>			
<p>Social Emotional and Mental Health</p> <p>To implement the recommendations from the SEMH review, to improve outcomes for children experiencing SEMH needs while remaining in mainstream education.</p> <p>Influenceable space</p>	<p>A clear and consistent approach to monitoring, challenging and supporting schools and settings, linked with School Improvement Strategy.</p> <p>Conditions for successful managed moves identified and used as the basis for future practice.</p> <p>An agreement developed between primary schools to develop a network of early intervention and prevention support services.</p> <p>Specification for SEMH Hubs.</p> <p>Area needs established through mapping.</p> <p>Process for approval, funding and delivery in place.</p>	<p>LA staff work together to give clear and consistent messages regarding the support, inclusion and development of children with SEMH needs.</p> <p>Guidance for schools on managed moves include key success criteria and case/ data examples are included in reporting of managed moves.</p> <p>Multi agency/ peer networks maximise the resource in the area and support best practice as identified in the SEND support graduated approach and beyond.</p> <p>Specialist provision for pupils with SEMH needs established on primary school sites.</p>	<p>Improved outcomes for children experiencing SEMH needs while remaining in mainstream</p>
<p>Mapping Provision</p> <p>Developing a strategic view of provision to inform</p>	<p>Complete As is map of SEND provision in Cambridgeshire.</p>	<p>SEND provision is fully aligned with the aims of the transformation</p>	<p>Understanding current provision, its impact on CYP outcomes and</p>

<p>what is needed, developed and possible.</p> <p>Controllable space</p>	<p>Data available to inform other workstreams eg spatial mapping of SEMH provision, understand the awaiting placement and not on school roll cohort.</p> <p>Contracts reviewed and renewed inc. Out of County & Independent Placement contracts.</p>	<p>programme, SEND Strategy and Sufficiency Strategy.</p> <p>New or revised specific, costed and agreed SLAs and contracts with appropriate contract management and monitoring in place for most provision.</p>	<p>what value for money it provides, will provide information to inform change eg to optimise contracts, reduce unit cost of provision, a reduction in Out of County and Independent Placements and therefore a reduction in spend. (Cashable).</p> <p>Understanding those awaiting placement will inform options/recommendations to get CYP not on school roll placed (cashable, depending on placement)</p>
<p>Banding & Descriptors</p> <p>To transform our funding systems to include banding & descriptors of need. To bring clarity to the graduated approach for staff and parents by having a consistent approach to understanding and planning to meet needs.</p> <p>Controllable space</p>	<p>Banded funding system with robust set of descriptors of need, expectations of provision and how needs can be met within settings.</p> <p>Recommendations on zero-funded plans, to give reassurance of support without the need for additional funding.</p> <p>Align practice across mainstream and special schools about how needs can be met.</p>	<p>More consistent decisions made around funding allocations</p>	<p>Introduction of banding could see a reduction in average costs of new placements.</p> <p>Transparency and clarity of funding for schools, parents and carers.</p> <p>Increased capacity in teams, as administrative burden is reduced.</p>

			Reduction in cases of human error and resulting wasted costs.
<p>Panel Redesign Developing consistent, transparent and strengths-based multi-agency decision making from assessment through to issue of plans</p> <p>Controllable space</p>	<p>Improvement/delivery plan drafted for joint work. Approach established for 'No to Issue' decisions e.g. £0 EHCPs, next steps meetings.</p> <p>Paperwork redesigned to be strengths-based.</p> <p>Membership and attendance and TORs of Panels refreshed.</p> <p>CtC training with Panel members to embed a strengths-based approach.</p> <p>Performance metrics for Panels reviewed.</p>	<p>Improved satisfaction with Panel processes Improved attendance at Panel meetings Decrease in the average amount of funding per plan</p>	<p>Increased transparency and confidence in the system. Consistency and equity of funding decisions. (linked to banding work)</p> <p>Decisions are child centred and robust, children will receive EHCPs when required, and that those who do not require plans are pointed towards appropriate support, leading to a reduction in costs.</p> <p>Improvement for staff capacity.</p>
<p>Annual review Improving the annual review process, including timeliness, communication and quality of annual reviews, enabling better outcomes for children & young people and ensuring improved processes in Cambridgeshire</p> <p>Controllable space</p>	<p>Paperwork updated to ensure it is user-friendly, strengths-based, and there is a robust way to track progress.</p> <p>Stakeholders involved in process trained to ensure there is a shared understanding of what 'good' looks like.</p> <p>Robust approach to communicating with stakeholders established.</p>	<p>Clear strengths-based planning for children/young people with improved satisfaction from parents</p> <p>Increase in QA ratings.</p>	<p>Reduction in existing specialist placements/increase in existing mainstream placements (where there is stepdown rather than closure)</p> <p>Enable strengths-based approach, ensuring support provided for CYP is proportionate and meets their needs in terms of</p>

	Internal process improved including clear roles and responsibilities.		<p>placement and provision.</p> <p>Meeting needs in mainstream and locally.</p> <p>Improved parental and school satisfaction</p> <p>Improved joint working and engagement of health and social care into process.</p>
<p>Preparing for Adulthood Developing a clear information and supported employment/internships offer for all cohorts (delivered where appropriate in FE settings) with alignment to the inhouse job coaches</p> <p>Influenceable space</p>	<p>Consultation with the FE sector re provision and transitions, engagement with parent/carer/YP to coproduce the post 16 local offer.</p> <p>Pathways mapped across Adults and Children's to develop more robust transitions and identify opportunities for building supported employment provision and job coaches to develop more consistent offer for YP.</p> <p>Review of online platforms developed during Covid that have improved accessibility.</p> <p>Clear and differentiated pathways for YP mapped onto a specialised platform for service users to navigate their options easily and track their outcomes on a personalised pathway.</p>	Reduction in NEET and improved transitions	<p>Preparing every child with SEND to transition into adulthood, we could expect to see a reduction in NEET placements and reduction in Post 16 placements (Cashable)</p> <p>Increase in apprenticeships, pathways to employment and internships.</p> <p>Potential to result in a reduction of costly Individual Curriculum Solutions.</p> <p>Parental confidence in pathways for their young adults.</p>

	<p>Development of a post 16 commissioning framework to meet gaps in provision and to ensure quality of provision.</p> <p>Fully implement the PfA checklist and audit tool for post 16.</p> <p>Develop routes into employment through supported employment training for Area Special Schools with P16 provision and a supported internship offer to enable YP to access age appropriate support and ensure PfA outcomes are met.</p> <p>Review of how personal budgets could be used to tailor post 16 offers.</p>		
<p>Legal Review Enabling better use of council resources and more effective joint working with professionals to reduce expense of SEND tribunals. LAs lose 95% of all tribunals. We need a system where we identify early if we are likely to lose or win a tribunal and reduce costs</p> <p>Controllable space</p>	<p>System to identify early if we are likely to lose or win a tribunal, based on previous rulings in place.</p> <p>Process to ensure the right professionals are involved at the right time and mediation used at early stage to reduce escalation of cases to legal proceedings.</p> <p>Some aspects of the tribunals brought 'in house'</p> <p>Fit for purpose SLA with legal provider in place to ensure vfm and effective working.</p>	<p>Fewer cases escalating to tribunal decisions.</p> <p>Fewer cases resulting in high-cost placement decisions.</p>	<p>Reduction in high-cost placements. Increase vfm from legal provider.</p> <p>Reduce expense of tribunals that we are not going to win - Reduction in tribunal fees (£10,000 per case) - checking on saving per year</p>
<p>System Design To redesign and simplify the SEND system to improve</p>	<p>Journey maps showing how children navigate the system now and in future.</p>	<p>Increased understanding of the way the system currently works.</p>	<p>Better understanding of the way the</p>

<p>navigation for parents/carers and improve consistency in access and provision. This workstream will create the blueprint of a transparent SEND system, to ensure that as far as is possible, the component parts of the Cambridgeshire SEND system are aligned and talking with one voice in terms of process, finance, decision, and goals</p> <p>Influenceable space</p>	<p>Organisational diagrams showing how the parts of the system connect and should connect e.g. around 'Hand Offs', IT, decision making and thresholds, finance system, governance.</p> <p>SEND key skills and competences framework.</p> <p>Ways to improve the experience of all partners and ensure pathways are effective identified.</p>	<p>Partners engaged with change process and report shared ambition and recognise the role they play within this.</p> <p>Parent/carers report increase satisfaction with ability to navigate system</p>	<p>system currently works.</p> <p>Identified and improve partnership working.</p> <p>Shared understanding and narrative around SEND.</p> <p>System parts aligned, supports improving outcomes for children with SEND in a sustainable way.</p>
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Impact of change in CYP Journey– How will things be different?

For Children and young people not currently known to SEND

They be supported by SEND Support. There will be a clear expectation about what should be ordinarily available within settings and we will better understand how inclusive settings are. For many children, this more robust SEND Support offer will meet their needs without requiring an Education, Health & Care Plan (Cost Avoidance).

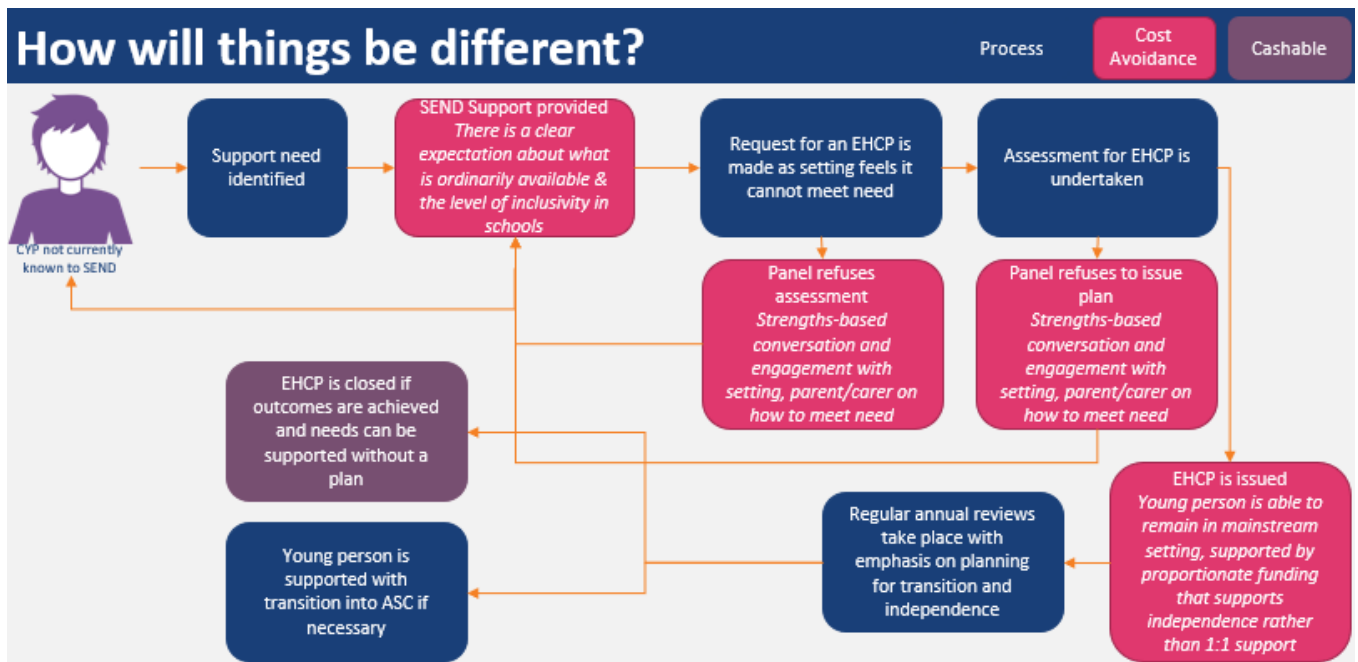
Where settings feel they may need additional support to meet need, the panel decision process will be both more strengths-based and robust. Where decisions are made not to assess or issue plans, strengths-based conversations will happen with settings and families to enable them to recognise their own strengths in meeting children's needs without a plan (Cost Avoidance).

When plans are issued these will be mostly within mainstream settings with proportionate, independence-focused funding, moving away from TA-based support (Cost Avoidance).

Annual Reviews will take place focused on outcomes, strengths and preparing for adulthood.

Where outcomes are being met, support will be reduced, and plans will be ceased (Cashable).

For those young people with the most complex needs, transition into further support will take place with strengths at the centre. This is illustrated in the diagram below:

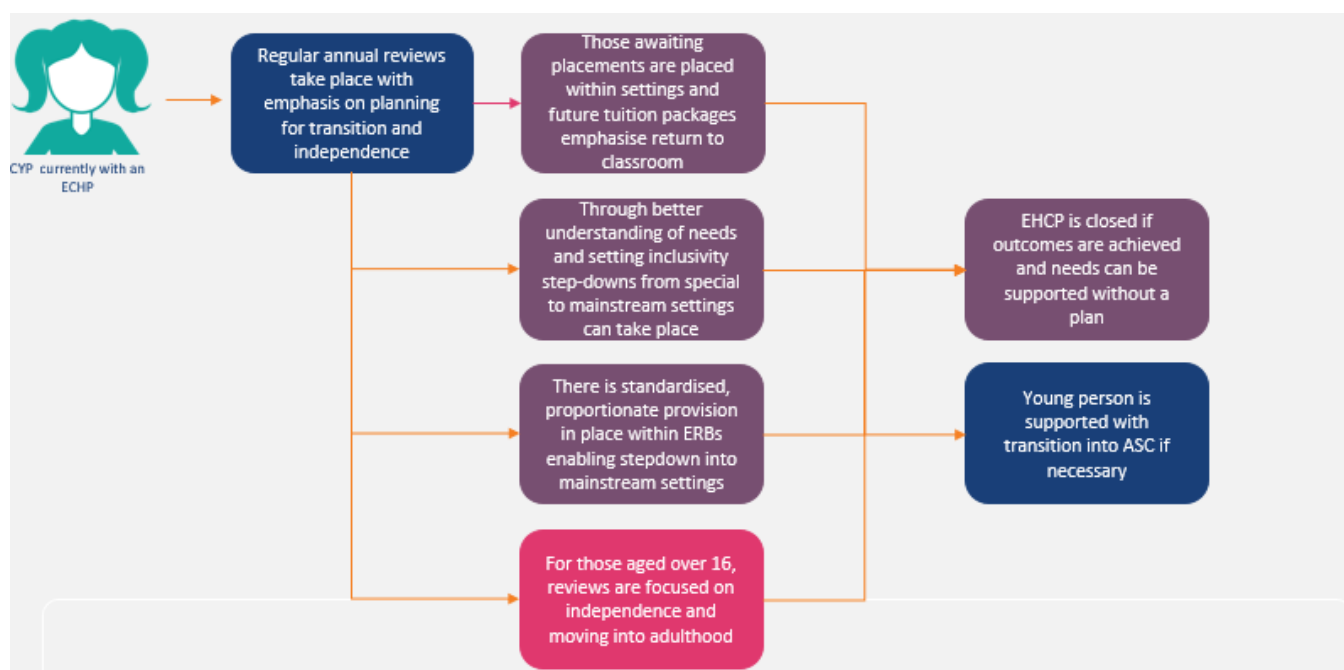


For Children and young people who already have an EHCP

Annual reviews will take place focused on outcomes, strengths and preparing for adulthood. These annual reviews can be a catalyst for impacting change across a number of areas:

- For the cohort of CYP who are currently receiving costly tuition packages as they are unable to have a school place, they will be supported into suitable classroom settings (Potentially cashable) with future non-classroom support being focused on enabling CYP to return to the classroom with their peers (Cost Avoidance)
- Through better understanding needs and inclusivity, step-downs can take place between specialist and mainstream provision where CYP can achieve their best outcomes (Cashable)
- Provision is available locally, with standardisation of provision for placements such as ERBs with a focus on returning to classroom settings (Cashable/Cost Avoidance)

Where outcomes are being met, support will be reduced, and plans will be ceased (Cashable). For those young people with the most complex needs, transition into further support will take place with strengths at the centre. This is illustrated in the diagram below:



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

Description of Risk What is the cause or source of the risk, the event or threat and its effect on the proposal?	Mitigating Actions Describe what action needs to be taken	Impact	Probability	Value
Partner capacity to engage due to continued focus on covid e.g. health	Utilising existing partnership and engagement opportunities to maintain links	3-Significant	3- Moderate	9- Amber
New Members may not be aligned to the focus of the transformation programme	Ensure member engagement is part of the comms plan; regular engagement with lead member	3-Significant	4 – High	12-Amber
Delays in mobilising project team.	Business case prepared to seek approval of resources for backfill, external support and BID resource.	3-Significant	5 -Very high	15 – Red
Lack of quality data may reduce progress on trajectory management and impact other workstreams.	BI undertaking work to improve data reporting processes and data quality. Seeking to appoint Business Analyst to support work.	3-Significant	5–Very high	15 Red

	Trajectory management approach in development.			
While we have prioritised and sequenced the programme of work, we may have been too aspirational with our time frames and workstreams may take longer than we anticipated.		3-Significant	5–Very high	15 Red

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

Shifting system behaviours, managing demand and spend within the SEND system in Cambridgeshire are all within scope.

Section 4d Communities, Social Mobility and Inclusion

Savings Proposals

Registration Service income Page 109

Communities and Partnerships Efficiencies Page 115

Business Planning: Business Case - Income proposal

Project Title: Registration Services

Committee: Communities, Social Mobility, and Inclusion

2022-23 Income amount: -£200k

Brief Description of proposal: The proposal is to achieve a £200k increase on the current profiled income budget, through revenue generated by ceremony bookings and associated fees, the addition of more ceremony booking slots, and a review of locally set fees to ensure they are set at full cost recovery.

Date of version: 14 September 2021 BP Reference: A/R.6.290

Business leads / sponsors:

Louise Clover – Registration Service Manager/ Peter Gell Assistant Director
Regulatory Services

1. Please describe what the proposed outcomes are:

Realisation of £200k of additional income through recovery of pre-pandemic ceremony revenue streams, increasing ceremonial capacity, and review and revision of fees to ensure full cost recovery.

With support agreed from the Policy, Design and Delivery Team, opportunities for diversification will be explored to inform future budget planning. An options appraisal with a feasibility assessment is expected by the end of this financial year.

The £200k for 2022/23 is not reliant on diversification being realised during the year, though where feasible they will be.

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

In a normal operating year, the Registration Service successfully achieves its already challenging income targets whilst at the same time delivering a high-quality statutory function. There has been a sustained demand for registration services for many years, and there is no reason to suggest that the demand will change unless there is a national intervention in the form of regulatory landscape changes. Previous demand is consequently a reliable indicator of future demand in this case. The profiled income forecast for the service is £1.8 million, with £1.3 million of that derived from ceremonies, associated notices, and certificate changes.

One of the impacts of the pandemic is that there are fewer ceremony slots available due to rebooked ceremonies for those couples whose ceremony could not take place due to national lockdowns, or who moved their ceremony due to the level of COVID-19 restrictions in place at the time. Although it is not possible to accurately quantify what the additional demand may look like next year, increasing ceremony slots will help ensure the council can pick up some, if not all, of the demand. Additional Ceremony Officers are currently being recruited (on zero hours contracts) to provide additional capacity.

In addition, consultation is taking place with all our Approved Ceremony Venues to explore whether they are looking to increase the number of ceremonies they hold, and if so on what days and times. This will help ensure that the council has the resources to meet demand, and therefore are able to derive revenue from it. Approved Venues are an important stakeholder when looking at ceremony service provision outside of council premises, the council is aware that there are limited booking slots with many venues booked for months ahead.

The services for which the additional revenue will be generated for this case are statutory functions, therefore this aligns to national requirements, and local service responsibilities.

The service was restructured prior to the pandemic, with increased management and business development capacity brought into the service which has not yet been fully

able to explore other commercial opportunities. This resource will work with the Policy, Design and Delivery Team to identify and assess opportunities to help inform future budget proposals.

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

The Service is confident that providing there are no further disruptions related to COVID-19 restrictions/lockdown, and relocation of the Cambridge office to the new Roger Ascham building takes place without significant disruption to services, the income target can be met for the reasons detailed above. The move to Roger Ascham is included within the 'Cambs 2020 Project' Equality Impact Assessment.

As the proposal relates to the council's statutory responsibilities, no other body can undertake this work within Cambridgeshire. If the council decided not to maximise revenue generating opportunities by adding more ceremony slots, some customers would wait for available booking slots, while others would move to local authorities who are able to provide the service within their desired timeframe.

Discussions have taken place with the Policy, Design and Team and support is being provided to review fees and assess the marketing potential of existing services to increase service volume. These areas have been prioritised as they are likely to offer the quickest financial return.

After the above work, the Policy, Design and Team will be assisting with research to identify opportunities for diversification to provide future revenue opportunities. Options identified will be evaluated to assess their viability. The intention is to have a plan in place before the end of the financial year for the roll out of those viable new service offerings. It is expected that this work will identify opportunities that will be implemented over several financial years, the rate and timing of which will be dependent on the evolving Registration Service landscape.

The reason diversification is not included as a solution to the £200k proposal, but an ongoing piece of work is because it is not sufficiently advanced. The Registration Service is still affected by the pandemic and has a major office relocation to plan for hence this proposal relates to the only viable option at present which is a demand-based revenue increase, and the potential to increase fees. More detail on the potential of the latter will be known once the review is complete.

At present, other than the time of a member of the Policy, Design and Delivery Team to work with the service, no additional support is required.

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

Engagement with the Policy, Design, and Delivery Team has taken place. Their input has helped to shape the current proposal in conjunction with the Registration Service, along with the future workstream to explore diversification opportunities.

Regular meetings will be diarised to discuss progress and share findings to maintain momentum.

The service will continue to work closely with its accountant to monitor and assess budget trends, and performance.

The service maintains regular contact with Approved Venues and will not only consult with them on their future service booking requirements but will also provide feedback post a review of their service need, and timescales for when additional capacity will be available. This will be managed through existing network communication channels by the service.

To ensure service users are aware of additional slots available, the council's website will be updated, and service content updated for the councils contact centre. Discussions with the Communications and Policy, Design and Delivery Teams will help identify and implement the most appropriate and effective ways to marketing this additional capacity, and services available in general, thereby maximising income potential.

Service income will be monitored through the monthly budget monitoring process, in conjunction with service bookings, to track service demand volumes and associated income. Comparing previous years outturns in conjunction with current data will enable performance in relation to meeting the income target, which can then be tracked and reported upon. Any significant variances will be identified quickly through this process, enabling consideration of interventions in a timely manner should they be necessary.

In preparation of this, data (both financial and volume based) will be collated to enable performance management from April 2022.

Assuming the fee review identifies fees that can be increased, profiling of the new fees against expected volumes will be undertaken to predict the expected outturn and income uplift. The new fees would be implemented through the council's fee setting process with the intention that they are in place as of the 1st of April 2022.

By February 2022, the service will have identified the expected breakdown of how the £200k will be met through service demand associated to chargeable services and any fee increases.

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Engagement with Policy, Design and Delivery Team (PDDT (Scoping meeting))	27/10/2021	27/10/2021	PDDT / Louise Clover

Demand Management and income monitoring	Nov 21 (monthly)	Ongoing	Louise Clover
Review of fees and charges	Nov 21	Dec 2021	Louise Clover / PDDT
Expected breakdown of 200k identified	Nov 21	Jan 2022	Louise Clover
New Fees and Charges Implemented	Nov 21	April 2022	Louise Clover
Marketing opportunity review undertaken, and outline marketing plan produced	Nov 21	April 2022	PDDT / Louise Clover
Exploration of diversification opportunities, and outline delivery plan produced	Jan 21	March 22	PDDT / Louise Clover

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

The proposal will not have an effect on people with protected characteristics as it is a continuation of existing services. However, there are arrangements already in place to assist should poverty be raised as an issue in respect of fees set, and an Equality Impact Assessment is being developed.

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

Financial Benefits

Increased income of £200k per annum from 2022/23 onwards.

Non-Financial Benefits

The residual and indirect findings from the review process will also likely help ensure we focus our efforts on continuously improving our statutory services.

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Lack of service capacity to conduct the review and action the findings	We have built additional management and business development capacity into the structure	Amber	Adrian Chapman
Inability to identify the required income generating opportunities	Diversification within the service has not been fully explored before, meaning that there are significant opportunities to secure additional income. Anecdotal evidence also suggests there will be a demand, albeit in the short to medium term, for couples to book a second ceremony more aligned to their original, pre-pandemic plans	Amber	Adrian Chapman
Increased government restrictions due to COVID-19	Continuation or reinstatement of control measures currently in place	Amber	Adrian Chapman
Lack of ceremonial room capacity	Temporary facilities will be identified if necessary	Amber	Adrian Chapman

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

Out of scope are any proposals that will lead to a reduction in service levels to the public or that, in any way, affect our statutory obligations.

All other opportunities are in-scope.

Business Planning: Business Case - Savings proposal

Project Title: Communities and Partnerships Efficiencies

Committee: Communities, Social Mobility and Inclusion

2022-23 Savings amount: £250k

Brief Description of proposal:

This proposal describes the approach to be taken across services within the remit of the Communities and Partnerships service directorate to achieve general efficiencies leading to financial savings of £250k per annum. The approach, adopted in the 2021/22 financial year, will be based on a line-by-line review across all budgets to identify regular underspends or over achievement of income, a review of staff turnover savings that can be achieved (ensuring we establish the right balance between savings and the need to fill vacant posts), and a rapid review of any support arrangements in place across linked services to ensure we are maximising efficiency. The primary reason we can repeat the process this year is that the service directorate has increased in size, offering further opportunities.

Date of version: 5 November 2021

BP Reference: A/R.6.291

Business Leads / Sponsors:

Service Director: Communities and Partnerships

Communities and Partnerships Directorate Management Team

1. Please describe what the proposed outcomes are:

Realisation of £250k savings across the service directorate through the identification of further efficiencies and process improvements. This mirrors the approach taken in the 2021/22 financial year, realising £200k of savings, and, as a result of that work, there is a high level of confidence that further efficiencies can be made, not least of all because we were partially disrupted in-year by the impacts on services caused by the pandemic.

The methodology used to achieve this saving will replicate the approach taken in the 2021/22 financial year, as follows:

- Reviewing all budget lines to identify areas of historical underspend or over achievement of income
- Reviewing vacancy savings targets recognising the increased directorate size in recent years
- Reviewing support functions across the directorate
- Identifying cost reductions and further income generating opportunities in the library service

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

The approach proposed in this business case is that successfully used in the 2021/22 financial year. Alongside this, the directorate has grown in size, providing new opportunities to repeat the exercise, as well as to explore further economies of scale by better aligning support arrangements.

The outcome of this review will not impact on front line service delivery or service standards, enabling the directorate to continue to deliver to the Joint Administration's priorities as well as to our statutory obligations. We will ensure that decisions made as part of the review do not adversely impact on another service's work or savings plans, and this will be carefully monitored through our existing communications channels (e.g., Department Management Team meetings) as well as through the budget monitoring processes.

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

This proposal is to carry out a desktop review of budgets line by line. Savings and/or income identified in the review will not impact front line service delivery or service standards, and this will be carefully considered by the Director and his team prior to implementing any recommendations.

Separate to this desktop review, there are likely to be opportunities to explore and implement different ways of delivering services that fall within the remit of the

committee – for example, those that might be improved or have greater impact through a decentralised model. These though will be subject to separate business cases in future months as work on these cross-cutting themes develops.

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

The desktop review of budgets will commence when the 2022/23 draft budgets become available. Ahead of that, the directorate management team have identified key areas of their services where contributions to reach the target by 1 April 2022 can be made (e.g., a significant underspend in our adult skills service).

The directorate's corporate finance team will support the review, as they did in the 2021/22 financial year, and the Director will oversee it, providing appropriate challenge where necessary.

If, as a result of the review, other opportunities to achieve savings or increase income are identified beyond the scope of the review, we will engage directly with services that can support that work (e.g., the Commercial Team, or the Policy, Design and Delivery Team).

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Pre-meet with budget holders to discuss and agree principles	1/11/21	30/11/21	Service Director
Seek Committee approval to proposal	2/12/21	2/12/21	Service Director
Complete desktop review, service by service	3/12/21	February Full Council	Service Director
Complete Equalities Impact Assessments where relevant	3/12/21	February Full Council	Service Director
Implement budget adjustments	1/3/22	31/3/22	Service Director

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

The proposed savings will be achieved through service efficiencies and process improvements. As service reductions of any kind are out of scope, there will be no impact on people with protected characteristics. However, an Equalities Impact Assessment will be completed and kept up to date to ensure no unintended consequences are identified.

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

Financial Benefits

Savings of £250k per annum from 2022/23 onwards.

Non-Financial Benefits

The review will help ensure we deliver support services in the most efficient and effective ways possible. The residual and indirect findings from the review process will also likely help ensure we focus our efforts on doing the best we can to achieve the priorities necessary to improve outcomes for our residents.

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Lack of service capacity to conduct the review and action the findings	We will build on work already underway, and will benefit from much of the work being completed by support functions	Amber	Adrian Chapman
Inability to identify the required savings	Review work started but then halted by the pandemic provides a high level of confidence that the saving can be realised without impacting service delivery	Amber	Adrian Chapman

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

All Communities and Partnership services are in scope, except for the Registration Service (which is subject to a separate business case for increased income), and the Think Communities service (which is subject to a separate business case for investment). Also out of scope are any subsequent proposals that will lead to a reduction in service levels to the public.

Section 4e Communities, Social Mobility and Inclusion

Investment Proposals

Think Communities

Page 121

Business Planning: Business Case – Investment proposal

Project Title: Think Communities

Committee: Communities, Social Mobility and Inclusion

2022-23 Investment amount: £1,354,204

Brief Description of proposal: This proposal seeks to secure the longer-term investment necessary to resource the council's Think Communities service in order to lead the systemic change necessary to achieve significantly improved outcomes for many of our residents. Investment will cover the staffing costs of the service for a further three years, along with a revenue budget to enable rapid delivery of change projects, funding to deliver a mainstreamed Local Covid Support Grant equivalent service, and an extension of the Innovate and Cultivate programme.

Date of version: 23 December 2021

BP Reference: A/R.5.013

Business Leads / Sponsors: Adrian Chapman

1. Please describe what the proposed outcomes are:

This business case for investment sets out proposals to extend the current short-term funding in place to resource the council's Think Communities Service. The Think Communities model was established prior to the pandemic as a means of fostering more effective and equal relationships with our district and city council partners. It is based on the principles of place-based working responding to a shared set of priorities with delivery carried out by the most appropriate organisation.

The hearts and minds process necessary to embed a different way of working was largely completed prior to the start of the pandemic, but it is the pandemic period itself where we saw the full impact of the Think Communities approach at work. Our collective focus shifted towards ensuring our residents and communities, particularly those most vulnerable, received the right support at the right time to protect them from harm. The Think Communities model of working, and the small staff team that operated that model, were at the core of the council's response, coordinating direct contact with mutual aid groups, liaising with parish, town and district councils, engaging with councillors, harnessing the energy of communities to establish or link into innovative projects which supported our residents.

The council has a very small core funded community development team with a primary focus on reactive, targeted or high priority community engagement activity, delivery of the Innovate and Cultivate Fund programme, and leadership of the Against Scams Partnership. In 2019, short term funding was secured, via a business case, from the council's Transformation Fund to expand the staff resource within this service to properly establish the Think Communities team in order that the principles set out in the Think Communities model could be properly tested. The service now operates a staff model which is coterminous with each of our district and city councils, with a place lead officer supported by two community connectors per district/city area. Our staff are working closely and alongside district and city council colleagues, parish and town councils, voluntary, community and faith sector partners, and the broader public sector, including, importantly health and the integrated care partnerships to create shared plans and to implement ways of working that are solutions-focussed and can-do. The place teams are supported by a dedicated communications manager, and business intelligence capacity.

The ways in which we have worked since Think Communities was born, and the experience of the way the service has delivered over the past 18-months, position us well to deliver against many of the vital and urgent priorities set out by the Joint Administration. Securing this investment will extend the current staff team for an additional three years to align to the current term of the Administration, with an accompanying work programme that will focus on:

- Decentralisation and devolution: working collaboratively with district, city and local councils as well as the broader partnership to deliver an ambitious programme that identifies the key challenges within our places. That works systemically with partners to identify solutions, and then implements those

solutions through by developing a framework for decentralising or devolving council services, budget and/or decision making. Central to this outcome will be our continued ability to be able to maintain trusting relationships at all levels in order to build place-based governance arrangements that maximise our opportunity to jointly problem solve, prioritise and take action.

- Addressing social immobility, inequalities and poverty: too many of our residents and communities are facing structural barriers around equity, many don't have the same ability to access opportunities for learning, leisure or financial improvement as others, and educational attainment across our county is inconsistent. There is expansive evidence that shows the correlation between deprivation and poor health, and, despite significant effort over many years, parts of our county still exist with deprivation as one of their defining characteristics. For many, the pandemic has worsened the situation – people who were already struggling financially are now having to make even tougher choices, many people have become financially insecure for the first time in their lives, and the impact on many of our resident's health and wellbeing will be significant for years to come. The Think Communities service will work hand in glove with partners to develop and deliver a social mobility action plan which responds to the individual circumstances in each of our places, building on the work already underway or filling in the gaps where needed. The service will also agree with each service committee a set of outcomes and indicators that support their own priorities and help to ensure we are focussing in the right places at the right time.
- Building community resilience: working closely with all our partners to activate our communities, equipping residents with the tools, confidence, skills and expertise they need to be more resilient, taking greater control over their own outcomes and able to engage with services wherever necessary and at the most local level.

Alongside the extended investment in the staff resource, it is further proposed that investment from the Transformation Fund is made into extending the Innovate and Cultivate Fund, which provides small grants to community groups to deliver transformational projects that contribute to the council's overall priorities and deliver a return or help reduce demand. The Fund has been subject to a formal Member-led review, the outcomes of which will help to ensure it is wholly focussed on meeting the agreed priorities set out by the Joint Administration

Additionally, to support our work around social mobility, inequalities and poverty we are seeking to mainstream the Covid Local Support Grant scheme. This scheme has been funded by government historically and provided school holiday-time vouchers for children and young people eligible for free school meals as well as broader support for households facing immediate hardship. The approach to delivering this in Cambridgeshire has been one of partnership working with a wide range of partners, linking up the support we can provide with district and city council services as well as with advice and other support options. A Direct Award scheme was also set up to give community groups and other public sector partners the ability to provide immediate support with food, fuel, or other essential supplies to those in their community who are experiencing financial hardship, whilst also linking them to longer term support.

This hybrid model of delivery has enabled us to reach those who we may not otherwise have reached, through local networks. We have also seen the benefit of the 'hub' model of working, which at times has included proactive contact to families and individuals (not waiting for them to find/come to us) and helping families and individuals navigate the system to access the support they need, be it debt advice, housing problems or support to self-isolate due to COVID-19. It also recognises the importance of addressing and alleviating the presenting 'symptoms' of poverty by ensuring that people have food on the table, can heat their homes and can access other essential supplies in order to effectively engage with wider opportunities that may increase social mobility through access to good quality education and employment.

The proposed model of support for people facing hardship, now that government funding is no longer available, is to coordinate activity across our partnerships using the Think Communities place teams and the countywide Hub, access separately commissioned support such as that provided through the Cambridgeshire Local Assistance Scheme contract, and provide a small annual budget to each district and city council to provide direct awards to households in need (also retaining a similar budget for our own use). This means the only additional cost is that direct award provision (at £30k per district/city and the same for the county council's use, £180k in total), and funding for a permanent countywide Hub team leader at our P1 grade.

Think Communities 3-year extension costing			
	Year 1	Year 2	Year 3
Place Co-ordinators x 3	154,348	157,435	160,584
Community Connectors x 10	371,464	378,893	386,471
Social Mobility Manager	48,742	49,716	50,711
Information Gateway Officer (of which we pay 70%)	25,748	26,262	26,788
Data Analyst (of which we pay 70%)	36,229	36,954	37,693
Communications Manager (of which we pay 70%)	35,874	36,591	37,323
Transformation and Operational Hub lead	68,057	69,418	70,806
Countywide Hub Team Leader	48,742	49,716	50,711
Subtotal staffing	789,204	956,168	975,292
Mileage	15,000	15,000	15,000
Community Vehicle	20,000	20,000	20,000
Subtotal non staffing	35,000	35,000	35,000
I&C Fund - £350k	350,000	350,000	350,000
Direct award budget - £180k	180,000	180,000	180,000
Total Revenue Funding	1,354,204	1,369,985	1,386,087

As can be seen, the work of the Think Communities service is cross-cutting in nature, with the ability to inform, influence and positively impact on the work of the whole organisation (and beyond), and therefore each service committee. As the service leads the positive changes necessary in our communities, we will see the resultant impacts in improved outcomes across all of our work. As a result, this investment contributes to all of the council's outcomes:

- Communities at the heart of everything we do: is a fundamental principle driving the way in which the service operates. The Think Communities service will extend its reach into the whole organisation and secure its role as the centre of excellence for community work
- A good quality of life for everyone: is central to the outcomes that the Think Communities model seeks to achieve
- Helping our children learn, develop and live life to the full: is an outcome the service will help to achieve through its focus on addressing social immobility and inequalities by ensuring opportunities for work, learning and leisure exist for everyone
- Cambridgeshire: a well-connected, safe, clean, green environment: is an outcome which runs through the core of the Think Communities model – for example, services designed and delivered at the most local level, with opportunities for people to engage within their own communities, creating safer, more resilient places with a reduced need to travel
- Protecting and caring for those who need us: is the ultimate aim of the Think Communities approach, which will develop earlier preventative models that help to keep people safer and healthier for longer, helping to manage the increasing demands in our social care, community safety and broader health systems

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

The Think Communities service is core to the delivery and achievement of many of the Joint Administration's priorities, as described above. However, beyond this, the approach aligns closely to the Integrated Care System model of reformed health care, which takes a place-based and preventative approach first and foremost. Alongside our own officers and relevant staff within district and city councils, we have developed strong relationships across the health system including with social prescribers, partners on both the North and South Integrated Partnerships, and in specialist health teams.

Underpinning the work of the service going forwards is the emerging evidence of impacts caused by the pandemic. The recently published Covid Impact Assessment sets out a wide range of consequences caused directly or indirectly by the pandemic on the health, wellbeing, equalities and mobility of our residents, and provides a baseline from which the service can evidence its impact. This sits alongside key strategic policies and documents, including the economic and skills strategies set by the Combined Authority, district and city council outcomes and business plans, and national government policy on Levelling Up. The government's own social value model criteria sets out the importance of engaging with people from different parts of the community,

how community voice should inform decisions, strategy and projects as well as the Involvement of local stakeholders and users in the design of community-led initiatives.

The pandemic enabled the Think Communities approach to be mobilised at speed – arrangements were stood up swiftly to collaborate meaningfully and practically with our partners, data was shared more easily, decisions were made together, and we shared a focus with our partners on an agreed set of objectives. These behaviours have significantly enhanced, and in many cases improved, our relationship with district and city councils as well as wider system partners, and it is these behaviours that we will replicate as a result of this investment.

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

The county council plays a vital leadership role as an upper tier council in our whole system, leading or shaping positive change, using the collective strength of our data and resources to improve outcomes, and representing our county where relevant at a regional, national and international level. Our core-funded community development resource is not sufficient to reflect this leadership role at a community level, nor can it help to shape the way our officers operate and interact with each other and our partners. For the type of positive change we are seeking to have an effect, we need to lead from within and the longer-term investment in the Think Communities service will help to ensure our community-facing focus is mainstreamed across the whole organisation.

We have benefited from a full year of Transformation funding to test the principles of Think Communities and are building on a now-solid platform having secured the hearts and minds of our partners as well as demonstrating a different way of working. The investment to sustain the approach for a further three years, effectively trusting the approach matched by the positive feedback from partners, will deliver to the urgent aspirations of the council as we emerge from the pandemic.

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

The investment described in this business case will ensure the continuity of the existing staff team and associated resources, meaning that the work the service is delivering against the Joint Administration's priorities will continue unabated. We are at a crucial stage, having developed and agreed comprehensive delivery plans with the Committee and with many of our partners, and the investment will ensure we continue to deliver against those agreements.

The detail of these agreements has been, and will continue to be, worked up in close cooperation with all of our relevant partners, informed by the lived experiences of our residents and by the data and intelligence we all gather. The work of the Think Communities service will be directed wholly to supporting the agreed work programme. The immediate actions to be delivered by the service were those agreed by Committee

in its September meeting, as set out in the Service Director report, and the Decentralisation report, which can both be found at the following links:

- [Service Director Report](#)
- [Decentralisation Report](#)

Governance of the approach will be via the Committee, with partnership oversight achieved through the Place Leads Group, chaired by the Service Director and drawing together senior representatives from all of our district and city councils, health, public health, police, and the councils for voluntary service.

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Extend existing staff contracts	1/4/22	31/3/25	Matt Oliver
Establish Area Committee model	1/5/22	Ongoing	Adrian Chapman
Develop bespoke delivery plans for TC teams linked to area committees	1/5/22	Ongoing	Matt Oliver
Embed new Innovate and Cultivate processes	1/4/22	Ongoing	Matt Oliver
Develop and deliver social mobility strategy	1/4/22	Ongoing	Matt Oliver

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

At the core of the Think Communities model and service is a whole focus on tackling inequalities and social immobility. The approach needs to be seen by other Committees as a vehicle for mitigating the impacts on people with protected characteristics as a consequence of needing to make difficult decisions about services and savings. The approach seeks to better understand the needs of our communities and residents, and work with partners to put in place solutions that address those needs.

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

Financial Benefits

Accurately calculating the direct financial benefits achieved as a result of investment in preventative work is extremely difficult, but we have an abundance of anecdotal and qualitative intelligence which shows that overall financial savings will be achieved if this work is delivered well and if we remain resolute in our effort. Sometimes the impact can be immediate, but often it is seen over a longer period, and securing investment for a further three years is designed to provide the appropriate timeframe to be able to demonstrate this.

If we are to be as efficient and effective in prevention at place level, we have to have a real-time understanding of the projects, programmes, groups, activities, assets and residents which will be our first line of defence. Since we started recording our engagement work in April 2021 the service has made 1100 active contacts, has direct project work ongoing with 47 Local Councils and has made over 100 links across systems to activate community capacity. The work of the service is contributing to the development of Area Profiles to support the system to connect to community assets - [Cambridgeshire Insight – Think Communities](#)

Key internal programmes such as Best Start in Life and the Early Help Strategy are shaping themselves around placed based delivery, the Think Communities Service are embedded into that work and are vital to support coproduction and to activate communities around preventative children's objectives.

Our place Think Communities service has been at the heart of tackling some key shared systems issues such as vaccine confidence with the resource supporting identification of sites for pop up vaccination facilities and community engagement in key areas of low uptake. Since June 2021 over 10,000 people have accessed this targeted provision.

Establishing the hub network across Cambridgeshire with the district and city councils, with the Think Communities principles at the centre of its delivery, has resulted in thousands of vulnerable residents being supported to stay safe and well at home and to access local community-based support, therefore alleviating pressure on statutory services. More recently, through the COVID Local Support Grant over 4,500 families were directly supported by the hub network to address immediate financial concerns in an effort to prevent an escalation in need.

Place coordinators are supporting mutual aid groups with advice and guidance about how to carry on their work after the pandemic to support wider objectives around food poverty and we have supported organisation such as March Baby Bank to expand their operations find additional funding meaning 1,535 families have now benefited from access to essential baby items from this service.

Other examples of our support have seen the development of community warden schemes, setting up of parish hub network meetings and forums, developing inclusive sports opportunities and the creation of a community led village hubs.

It is most likely that financial benefits to the county council will be seen in our social care services, which are already facing increasing and unsustainable financial pressures as a result of increasing demand and insufficient core funding.

However, there will be a range of residual financial benefits, primarily in the form of enabling other services to achieve or exceed income targets (libraries for example, by supporting the separate review of that service to position libraries front and centre in our public service offer), to deliver against core contracts (adult skills for example, by supporting the take-up of learning opportunities from across the population), or to remain within agreed resource envelopes (in highways services for example, by providing more choice and control for residents and partners over our spend priorities).

Non-Financial Benefits

The non-financial benefits which will be delivered as a result of this investment are significant. Addressing the deep-rooted causes of inequality, poverty, and social immobility will improve the social, environmental, health and wellbeing outcomes for our residents, and create the right conditions for them to thrive and succeed wherever they live.

We will understand the baseline position for each of our places and will use that to measure and monitor the impact we're making.

Key non-financial benefits include:

Key Benefit	Measure	Baseline	Target & Timescale
Increased social mobility	Increased employment rates; increased earnings	TBC	TBC – linked to review of KPI's
Reduced deprivation	IMD data	TBC	As above
Local, evidence-led decision making	Volume and value of decisions being made in Area Committees	TBC	As above
Reduced demand in statutory services	Impacts of TC work directly linked to demand profiles	TBC	As above

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
External factors impacting social mobility	Robust, locally developed plans; early intervention activity; cross-council focus facilitated by TC	Red	Adrian Chapman
Limited impact on demand in statutory services	Agreed work programme set by Adults and Children's Committees; regular performance reporting	Red	Adrian Chapman
Limited engagement in Area Committees	Identification of meaningful delegations and decision making; frequent feedback	Amber	Adrian Chapman

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

In scope is the non-core-funded Think Communities resource, meaning that the existing core-funded resource is out of scope.

Section 4f Adults and Health

Savings Proposals

Block bed revised saving	Page 132
Extra Care	Page 136
Learning Disability Outreach	Page 139
Interim and Respite beds	Page 144
Community Equipment Service	Page 150
Domiciliary Care block provision	Page 154
Public Health Demand led savings	Page 159

Business Planning: Business Case - Savings update

Project Title: Reduction in forecasted savings from the 20/21 block bed tender

Committee: Adults & Health Committee

2022-23 Savings: £390,000 (Previously £583,000)

Total savings for each financial year are shown below:

Period	Revised Savings
2022/23	£390,000
2023/24	£263,000
2024/25	£277,000
2025/26	£291,000
Total	£1.221m

Brief Description of proposal:

Revised savings from the 20/21 block bed tender – through commissioning additional block beds, we can reduce the amount of inflation funding needed for residential and nursing care. Block contracts have set uplifts each year, rather than seeing inflationary increase each time new spot places are commissioned.

The original estimate of savings for 2022-23 was £583,000: That saving listed in the 2021/22 Business Plan was based on 810 block beds. However, the tender delivered 240 fewer beds, therefore the saving is reduced from previous figures estimated to the revised amounts above.

Date of version: 16 September 2021

BP Reference: A/R.6.185

Business Leads / Sponsors: Will Patten, Director, People & Communities

1. Please describe what the proposed outcomes are:

The block bed tender in 2020/21 sought to commission an increased number of Council residential and nursing care beds to ensure:

- i) the local care home market remains sustainable in the face of unprecedented pressure caused by the COVID-19 pandemic
- ii) people can continue to access affordable, quality, choice-based care in line with statutory responsibilities under the Care Act 2014
- iii) current shortfalls in Council bed provision are addressed in the long term

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

The commissioning approach behind the block bed tender was endorsed by the Joint Commissioning Board and approved by Adults Committee in 2020/21.

It aligns with the Council's Older People's Accommodation Strategy and its aim to obtain sufficient, affordable care home provision to meet the demands of the local community.

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

Options were considered as part of the approval of the tender process.

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

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Continue to track and report savings	Oct 21	2025/26	Becky Bartram

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

A review has concluded that an Equality Impact Assessment is not required for the purpose of this proposal. The programme is highly supporting to the protected characteristics of age, disability, poverty and rural isolation. It is not anticipated to have any adverse effects upon people with protected characteristics.

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

Financial Benefits

The new block bed contracts awarded in 2020/21 delivered 570 care home beds (562 block + 8 respite beds) across all care types and districts. The block beds will deliver savings, as we normally pay lower rates for block beds than spot purchased beds. Additionally, there is a saving linked to avoided inflation on bed prices. The block bed contract caps annual uplifts at 3%, whereas it is predicted that average spot bed prices will increase at 6.7% per year over the timeframe covered by the business plan.

The saving in the 2021/22 Business Plan was based on 810 block beds. However, the tender delivered 240 fewer beds, therefore the saving is reduced from the figure estimated in the 2021/22 Business Plan.

The saving delivered per bed has also been adjusted, as the block bed contract uses a formula for its uplifts linked to National Living Wage and CPI. Whereas in the 2021/22 Business Plan it was assumed that the uplift paid on the block beds would be at its cap of 3%, the new modelled saving assumes an average 2.3% uplift for 2022/23 in line with formula set out in the contract.

The net impact of these factors is a reduction of £190k in the saving to be delivered in 2022/23.

The revised savings for subsequent years are shown below and equate to a reduction of £772k over the next four years.

Period	2020/21 Savings	Revised Savings
22/23	£583,000	£390,000
23/24	£456,000	£263,000
24/25	£470,000	£277,000
25/26	£484,000	£291,000
Total	£1.993m	£1.221m

Non-Financial Benefits

- Block contracting provides guaranteed income to care homes and so helps maintain market sustainability
- Enables the Council to offer people greater choice and to remain close to their families/community

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Savings figures are affected by the volume and phasing of block bed activations	Activate beds as demand requires.	Green	Leesa Murray
Savings may be affected by surges in demand from subsequent COVID-19 or Flu outbreaks	Track and monitor demand Ensure best utilisation of existing provision Explore other funding sources such as NHS Discharge to Assess monies	Green	Jo Melvin, Caroline Townsend

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

In scope:

- Savings from the 2020/21 block bed tender

Out of scope:

- Savings from other bed types such as interim or respite provision

Business Planning: Business Case – Saving proposal

Project Title: Extra Care savings on retendering

Committee: Adults and Health

2022-23 Savings amount: £87k

Brief Description of proposal:

This is a saving on retendering which has already been secured without impact on service levels.

Date of version: Sept 21 BP Reference: A/R.6.191

Business Leads / Sponsors: Will Patten, Director of Commissioning

1. Please describe what the proposed outcomes are:

A number of Older Peoples extra care schemes were retendered for 2021-2022 and have delivered savings totalling £87k across four schemes:

Doddington (Fenland)	£49,000
Jubilee (Fenland)	£10,555
Nichols Court (City/South)	£16,138
Park View (Hunts)	£11,745

Savings were not identified in time to be incorporated into the 21/22 business planning cycle, but can now be banked.

There has been no adverse impact to delivery of services to Older Peoples clients.

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

N/A

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

N/A

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

No further actions needed

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

No negative effects are anticipated from the re-tendering, however, an Equality Impact Assessment (EqIA) has been developed to ensure CCC's decision-making is inclusive for staff and communities with protected characteristics in line with the Equality Act (2010) and Public Sector Equality Duty (section 149).

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

Financial Benefits

Savings of £87k pa

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

No

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

This is only in relation to the four extra care schemes that were re-tendered, as listed in Section 1.

Business Planning: Business Case – Savings proposal

Project Title: Learning Disability Outreach service

Committee: Adults and Health Committee

2022-23 Savings amount: £50k

Brief Description of proposal:

To increase the Learning Disabilities Partnership (LDP) outreach capacity to offer a lower cost solution for targeted outreach care and support packages. Action is needed now, and stimulating development of new services in this way will generate the much-needed provision to meet population growth forecasts at a cost affordable to the local authority.

Date of version: 9 September 21 BP Reference: A/R.6.192

Business Leads / Sponsors:

Executive Director of Commissioning, People & Communities

1. Please describe what the proposed outcomes are:

This proposal aims to increase the outreach capacity of the service. Work carried out by the service delivers care and support at a lower hourly cost when compared to similar support delivered out outsourced organisations. Consequently, a larger service will deliver high quality service at a lower cost to Cambridgeshire County Council (CCC).

To achieve this, the service will require additional administrative support. This support will help coordinate the work of additional care workers.

This would involve the same approach to recruiting and supporting carers as has been applied to the Shared Lives service. This has been highly successful and will capitalise on the already fit for purpose staff terms of employment contract. LDP will promote across its locality team a pathway where an offer of first refusal is given to the outreach team for new support packages in the community.

The work to implement the expansion of in-house outreach provision and associated resource provision is being conducted in 2021/22 and funded from existing 2021/22 budgets. This means no new investment is required for this business case. This will ensure that the provision is fully operational for 2022/23, enabling delivery of cost avoidance savings.

This proposal aligns with the following corporate priority outcomes:

Communities at the heart of everything we do:

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

A good quality of life for everyone:

- It will offer greater choice, control and care flexibility for those people no longer able to access the community without care and support.

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

The proposal supports CCC's Adult Social Care LDP strategy to help people live with greater levels of independence. The work will build on early consultation conducted with user groups and social care practitioners. Here current users found access to care workers to deliver small packages of care and support beneficial. Sometimes these packages were for a limited period. This provided them with choice and control. Others found the flexibility to change when and where care and support was delivered helped them towards increasing independence.

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

Two options were considered.

1. No change

In this option CCC will continue to pay market rates for outreach services. This means we will forgo the opportunity to increase choice at a lower cost.

2. Expanding Outreach Service to increasing capacity.

Financial modelling shows that with investment LDP's Outreach can supply 1,000 hours of care per month. This additional volume can be delivered at a lower cost when compared to the care market as it does not need to deliver profits and it carries lower overhead costs.

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

Task	When	Who
Standardise work contracts	Q2, 2021/22	Outreach team, HR
Standardised offer to families available	Q3, 2021/22	Outreach team
Recruit co-ordinator and staff	Q4, 2021/22	Outreach team
Guidance information to social work teams	Q4, 2021/22	Project team
Package assessments complete and delivery commenced	Q1, 2022/23	Outreach and brokerage teams
Ramp-up volumes	Q2, 2022/23	Outreach and brokerage teams
Results and benefits audit	Q4, 2022/23	Finance team

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

This will affect people with disabilities and people with eligible social care needs receiving a funded care package. It will also provide a choice to older people without eligible social care needs (self-funders). People will be able to decide when and where care and support is delivered, and how it changes over time. We anticipate this means up to 100 Service Users receiving more care and support.

We expect some positive impacts anticipated from this proposal:

1. Increased market capacity where demand exceeds supply
2. Increased service user choice
3. Option to expand to provide a service to those with autism

There could be negative impacts anticipated from this proposal:

1. Perception of growth of in-house service as it is not subject to open market competition
2. Over stretches line management risking other parts of Shared Lives services

An Equality Impact Assessment (EqIA) has been developed to ensure this proposal is equitable in its aims and delivery and any potential adverse impacts on people with protected characteristics are mitigated against. This is to ensure CCC's decision-making is inclusive for staff and communities with protected characteristics in line with the Equality Act (2010) and Public Sector Equality Duty (section 149).

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

Financial Benefits

The primary financial benefit is £50k saving to the budget in 2022/23

Non-Financial Benefits

Key Benefit	Measure	Baseline	Target & Timescale
Adds capacity to the county.	Number of care hours	NIL	+1,000 per month from month 6-8

Wider benefits include:

Benefits to Service Users

1. Service user choice and flexibility which will mean being able to make decisions without worrying how it will affect their care and support.
2. Improves support towards prevention of long-term care admissions.

Benefits to CCC

1. Potential to meet demand of those with Autism and no LD diagnosis.
2. Opportunity for more integration with day services through having a greater presence in the community.

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
IF external providers challenge the essence of the change then the project will stop, and savings will be delayed.	The packages and method of selecting the in-house provider over external providers is exempt from Public Contracts Regulations 2015.	GREEN	Project team
If families insist on using external providers then scope of available packages reduces.	Parental choice is already part of the decision-making criteria.	GREEN	Social work team
IF external providers generate resistance with partial package awards then the project will slow, and savings will be delayed.	The packages and method of selecting the in-house provider over external providers is exempt from Public Contracts Regulations 2015.	AMBER	Brokerage team
If staff contracts are not fit for purpose (legal and tax) then the project will stop, and savings will be delayed.	Advice from legal has been sought and work is planned within the project.	GREEN	Project team
If people perceive in-house service growth as a retrospective step then CCC reputation will be damaged.	A proactive communications plan will be devised.	AMBER	Project team

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

What is within scope?

1. Outreach service managed under Shared Lives / Cambridge outreach service
2. Possible to target Direct Payment clients
3. Explore license agreements for those in long term shared lives arrangements

What is outside of scope?

1. The rest of in-house services.
2. Residential services
3. Domiciliary care services

Business Planning: Business Case – Savings proposal

Project Title: Interim and Respite Bed Recommissioning

Committee: Adults & Health

2022-23 Savings: £412k

	2022-2023	2023-2024	2024-2025	2025-2026
Total savings	412,000	341,500	341,500	341,500

Brief Description of proposal:

Savings generated from the redesign and recommissioning of interim and respite bed provision in care homes. This has created a more efficient model and therefore generated the Council cashable savings and potential for further cost avoidance.

Date of version: 16 September 21

BP Reference: A/R.6.194

Business Leads / Sponsors: Will Patten, Director of Commissioning

1. Please describe what the proposed outcomes are:

The savings stem from a vision to design a new, integrated care pathway of hospital discharge using a mixture of short-stay beds, reablement, occupational therapy (OT) and domiciliary care packages to increase the number of older people returning home following a hospital admission (and to prevent further hospital admission).

The strategic outcomes sought include:

- Embedding a culture of rebuilding and promoting independence in our commissioned provision
- Reducing movement of people from hospital into long-term residential and nursing care
- Supporting rapid hospital discharge
- Contributing towards the management of demand for long term bed-based care
- Improving efficiency and value for money of commissioned provision

The individual outcomes sought include:

- Increasing individual choice and control by offering a wider choice of placement locations and types
- Personalised support to rebuild independence and make safe a return home is readily available
- Provides easier, flexible access to respite care, improving the council's support offer to informal carers

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

This proposal contributes to Joint Administration Priority 4: Support the move towards integrated health and social care, seeking a clear shift towards prevention and 'early help' vis-a-vis the provision of acute services; with an emphasis on Health and social care

It also aligns with key local strategies including the Council's Recovery & Resilience Framework, All Age Carers Strategy 2018-2022, the Adult Social Care Market Position Statement, and the Older Peoples Accommodation with Care update June 21

The commissioning strategy to transform the Council's Interim and Respite provision aligns with national best practice.

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

The commissioning strategy which led to the savings was developed by commissioners in collaboration with key stakeholders and approved by the Joint Commissioning Board prior to implementation. It has been shared with Health as part of the Discharge to Assess system meetings.

In-house delivery is not currently an option as the Council do not operate any care homes.

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

A significant amount of work is already completed. New respite bed provision commenced on 1 April 2021 following a successful tender. Most interim beds have already been decommissioned with the final four scheduled to end by 26 November 2021.

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Develop data systems and model to track and forecast avoidance of spot respite placements	Oct 21	Jan 21	Becky Bartram, Sarah Croxford, BI
Decommission final Interim beds	Oct 21	Nov 21	Sarah Croxford
Monitor and appraise evidence of need to commission five additional step up/down beds in Cambridgeshire	Sept 21	Dec 21	Alison Bourne
Commission additional 5 step up/down beds (subject to above)	Jan 22	Aug 22	Alison Bourne
Appraise evidence for Occupational Therapist (OT) input into interim placements in block care homes and Extra Care schemes across Cambridgeshire	Oct 21	Dec 21	Alison Bourne, Diana McKay
Implementation of OT input (subject to above)	Jan 22	Mar 22	Diana McKay

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

The redesign of interim and respite bed provision is designed to support older people to remain independent and return safely to their own home wherever possible.

The programme will therefore be highly supporting to the protected characteristics of age, disability, poverty and rural isolation. It is not anticipated to have any adverse effects upon people with protected characteristics, however, an Equality Impact Assessment (EqIA) will be developed to ensure this proposal is equitable in its aims and delivery and any potential adverse impacts on people with protected characteristics are mitigated against. This is to ensure CCC's decision-making is inclusive for staff and communities with protected characteristics in line with the Equality Act (2010) and Public Sector Equality Duty (section 149).

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

Financial Benefits

Cashable Savings:

The decommissioning of existing Interim bed provision is forecast to deliver the following savings, net of reinvestment into a further five step-up/down beds and Occupational Therapy input.

	2022-2023	2023-2024	2024-2025	2025-2026
Decommission all Interim block beds by Nov 2021	-644,000	-644,000	-644,000	-644,000
Invest in 5 x Step Up/Down flats in Extra Care setting	142,000	212,500	212,500	212,500
Additional Occupational Therapy	245,000	245,000	245,000	245,000
Total	-257,000	-186,500	-186,500	-186,500

The reduction of respite beds from 14 to eight has resulted in the following cashable savings

	2022-2023	2023-2024	2024-2025	2025-2026
Decommission 8 x Respite block beds	-155,000	-155,000	-155,000	-155,000

	2022-2023	2023-2024	2024-2025	2025-2026
Total savings	412,000	341,500	341,500	341,500

Cost Avoidance

The use of the new, flexible block bed provision for unplanned respite is likely to result in a reduction of spot purchased respite provision. Early data suggests 205 days of respite bed provision has been met through the new block beds. Further work is needed to establish an accurate model to quantify and accurately forecast the cost avoidance value of this.

Non-Financial Benefits

Social value / Social return on investment:

- Effective interim bed provision enables rapid discharge from hospital and contributes to maintaining good flow in across the health and social care system. This improves hospital care and patient experience for all in the community.
- Occupational therapy input and step-up/down beds will help more people rebuild their independence to return home and avoid unnecessary admission into long term residential care. Accordingly, the health and resilience of frail older people is improved
- Individuals have greater choice and control in the location of their interim placement
- Creates job opportunities in the local care economy, supporting employment and economic growth
- The local supply chain of care homes and home care agencies are developed and grown

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Changes to the proposed commissioning approach or timescales will affect the level of cashable savings	This may be positive and result in further savings. Ensure changes are based on robust evidence of demand and efficacy	Amber	Jo Melvin
Surges in demand may require commissioning of additional provision and therefore affect cashable savings	Track and monitor demand Ensure best utilisation of existing provision Explore other funding sources such as NHS Discharge to Assess monies	Green	Jo Melvin, Caroline Townsend

Carer and Occupational Therapist workforce shortages impacts deliverability and/or increases cost	Engage with providers early to develop pipeline staffing Explore block or incentive arrangements Develop alternative options	Amber	Alison Bourne, Diana MacKay
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8. Scope: What is within scope? What is outside of scope?

In Scope

- Interim and Respite bed provision for older people and adults with physical disabilities
- Proposed development of additional step-up/down beds in Cambridgeshire
- Proposed development of OT input to support hospital discharges back to Extra Care or into interim placement in care homes

Out of scope

- Cost avoidance forecast associated with new block bed provision as this is already built into business planning.

Business Planning: Business Case – Savings

Project Title: Integrated Community Equipment Service

Committee: Adults & Health

2022-23 Savings: £121,000

Brief Description of proposal:

Savings delivered from re-tendering the Integrated Community Equipment Contract.

Date of version: BP Reference: A/R.6.197

Business Leads / Sponsors: Will Patten

1. Please describe what the proposed outcomes are:

Anticipated savings will be delivered on the pooled budget which funds the Integrated Community Equipment Service (ICES). The ICES is commissioned via a Section 75 Partnership Agreement and pooled budget with the Cambridgeshire & Peterborough CCG (Clinical Commissioning Group) and the service contract is delivered by NRS Healthcare.

People will continue to receive health and social care equipment that meets their assessed need. The provision of community equipment enables people to remain as independent as possible in the home of their choice and is a cost-effective offer that supports both the prevention, and long-term care, agendas.

Savings on the pooled budget will be delivered as follows:

	Saving amount	Source of saving
2.	£251,000 (split £121,000 CCC (Cambridgeshire County Council), £130,000 CCG under the new pool shared funding arrangements)	Procurement project and submission of competitively priced bid by the incumbent provider.

These will contribute to the business planning targets for CCC, by delivering a financial recurrent saving of £121,000 in 22/23.

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

Following the outcome of the tender, and confirmation of award to NRS, CCC Finance have undertaken further modelling to identify potential savings, which are modelled on the equipment and activity demand and mix from previous years. Activity prices are set in the new contract, while equipment will be purchased at cost. Where equipment has increased in price above the values submitted in the tender, the higher price has been factored into the savings modelling.

Increased demand for 2022/23 has already been factored into the business plan with the community equipment demand bid of £33k for the council's share of demand. Estimated total increased demand for the pool is estimated at £69k at new contract values.

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

The re-tender of the contract attracted bids from the three market leaders with the incumbent, NRS Healthcare, submitting the most competitively priced bid. The prices

submitted for activity charges (deliveries, collections, repairs, and maintenance) were lower than they are currently.

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

The re-tendering has been undertaken and contract awarded. The anticipated savings will be delivered for 2022-23 with the Section 75 Agreement, and new contract, due to start on 1/4/2022

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

It is not anticipated that this savings proposal will have any negative effects on people with Protected Characteristics. The service is available to all people with an assessed need. This includes all age ranges and service user groups.

However, an Equality Impact Assessment (EqIA) has been developed to ensure this proposal is equitable in its aims and delivery and any potential adverse impacts on people with protected characteristics are mitigated against. This is to ensure CCC's decision-making is inclusive for staff and communities with protected characteristics in line with the Equality Act (2010) and Public Sector Equality Duty (section 149).

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

Financial Benefits

The project will deliver £121,000 of savings in 2022/23, because of the service being re-tendered and awarded to a competitively placed bid by the incumbent provider.

However, the following financial risks with delivering this saving should be noted:

- The savings estimate allows for equipment prices at the tendered price or the current contract price, whichever is higher. There is no provision for further cost increases. There is therefore an inflation risk to the value of this contract if there is inflation in equipment costs between now and date of purchase in 2022/23. We know that equipment prices are particularly high now due to shipping container shortages and the UK's withdrawal from the European Union. We have seen price increases affecting 30% of our equipment spend in 2021/22 with the average price increase being 10.8%. Any future increase, or decrease, in equipment prices would be passed to the Council under the

new contract and may create a future financial pressure. Were we to see similar increases again, the risk would be in the region of £88k for the pool (£42k of this being CCC's share).

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Market forces affecting the sector which may affect product prices – this may present a financial pressure to the Council if further inflation on prices is experienced	<p>Activity prices will not be affected.</p> <p>All products on the contract are reviewed closely by Commissioning and clinical advisors before they are accepted onto the contract</p> <p>Market pressures business case is in development which will factor in inflationary pressures and is due to be presented to RIT (Rapid Implementation Team) for inclusion in business planning. This may offset some of the financial risk.</p>	Amber	Commissioning
Increased demand. Service is demand-led and must respond to system wide pressures – e.g., hospital discharge, prevention of admission to care homes and hospital, lack of home care	Activity is monitored by Commissioning and Contracts and any anticipated pressures on the pooled budget are reported to senior managers	Amber	Commissioning

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

Re-tendering of Integrated Community Equipment Service.

Business Planning: Business Case – Savings proposal

Project Title: Homecare Block Provision Savings Plan

Committee: Adults and Health

2022-23 Savings amount: £236k

	2022/23	2023/24	2024/25	2025/2026
Total savings	-£235,853	-£235,853	-£235,853	-£235,853

Brief Description of proposal:

Outline of savings from the local authority funded block homecare provision, RDT (Rapid Discharge and Transition) (Rapid Discharge and Transition) cars.

Date of version: 2.11.2021 BP Reference: A/R.6.198

Business Leads / Sponsors: Will Patten

1. Please describe what the proposed outcomes are:

This proposal outlines the decommissioning plans of the block homecare provision. 'Homecare' is considered any support service that a person might need in their own home. This may include shopping, meal preparation, support taking medication and meeting their personal care needs. Provision of good quality homecare not only enables the Council to meet its statutory duties under the Care Act 2014, but it is also key to the prevention agenda in that it enables people to remain living independently within their own home for longer.

The availability of homecare services able to respond quickly and in a person-centred way is really important when supporting people to return home to recover on discharge from hospital. This support is currently delivered through two block contracts of homecare hours which allow the Council to meet the needs of service users quickly and effectively. The contracts buy 'blocks' of time to deliver care, so we don't have to spot purchase when we need care urgently, as the capacity is guaranteed and always available for people and family carers who require support. The cars run 7am to 10pm, with two hours down time a day, totalling 91 hours a week, running 365 days a year.

The purchase of block homecare hours allows the Council to source care in the following circumstances:

- To return home from hospital as soon as possible once a person is medically fit.
- To step up care to prevent admission to hospital.
- To provide care for people who are in hard-to-reach areas or to fulfil hard to place packages of care.

However, block hours tend to be more expensive than purchasing individual packages of care as required as the Council must pay for block care hours even if they are not utilised.

As a result of monitoring utilisation data, the Council has identified the need to reduce its current provision by 3 single cars, from 19 single cars, to 16 within the local authority funded RDT (Rapid Discharge and Transition) contract. There are an additional 18 single cars within the IBCF grant funded contract. This is changing to six double up cars and 11 single handed cars from January 2022.

The Council's longer-term plan is to gradually decommission the local authority funded cars, instead meeting the demand through more cost-effective methods, such as:

- Sliding scale of rates with enhanced rates to support rural and hard to reach areas.
- Providers covering specific areas or zones of the county, including rural areas (and in doing so reduce travel and therefore cost and carbon impact)
- Supporting the market in building capacity through recruitment and retention, as well as better rates of pay for care staff

The improvements outlined above will be included in the Council's new specification for domiciliary care in 2023/4 when the Council puts in place a new Dynamic Purchasing System for domiciliary care.

It is important to note several ongoing budgetary risks associated with this saving which are outlined in section 7.

Intended Outcomes:

A good quality of life for everyone – this service supports people to remain independent at home for longer. It also enables people to return home from hospital, should they wish to return home with care rather than residential settings.

Cambridgeshire: A well-connected, safe, clean, green environment – the block car provision is undertaking a green initiative project, including the providers and our own environment team, to begin converting the fleet of cars commissioned to electric vehicles.

Protecting and caring for those who need us – this provision cares for people in their own home and allows them to return home as soon as they are medically fit. Not only do people get reduced delay in going home but the hospital beds are then available for others who need them.

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

This project plan links to the Council's endeavours for efficiencies and better value for money. It also meets carbon impact goals in the green initiative project to convert the fleet of cars to electric vehicles.

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

The decommissioning of the RDT block cars is part of CCC's longer-term plan to improve homecare capacity. This has been endorsed by the Community Board within Adult Social Care Commissioning and will progress through Joint Commissioning Board and Adults Committee in the coming months.

The strategic plan was informed by extensive research with over 30 local authorities and engagement with local homecare providers.

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

The decommissioning of several RDT block cars has already taken place. The timetable below summarises the next steps in implementing CCC's strategic homecare plan, but this will have no direct impact on the savings offered in this business case.

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Utilisation meetings	Jan 2021	Ongoing	Commissioning
CCC (Cambridgeshire County Council) Zoning Pilot	March 2023	September 2024	Commissioning
Pilot review analysis and learning	March 2024	July 2024	Commissioning
CCC new commissioning model	August 2024	October 2024	Commissioning

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

Equality, diversity, and inclusion (EDI) is considered in the tender process for all homecare contracts. Providers are required to develop and provide evidence of EDI policies and procedures.

The homecare block provision supports those living in rural isolation to access homecare support services.

An Equality Impact Assessment (EqIA) has been developed to ensure this proposal is equitable in its aims and delivery and any potential adverse impacts on people with protected characteristics are mitigated against. This is to ensure CCC's decision-making is inclusive for staff and communities with protected characteristics in line with the Equality Act (2010) and Public Sector Equality Duty (section 149).

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

Financial Benefits

The decommissioning of 3 single cars will deliver a financial recurrent saving of £235,853 in 2022/23.

Non-Financial Benefits

The block homecare provision provides support to those being discharged from hospital to return home without delay and free capacity within the hospital. It also supports those living in rural areas.

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

Identifiable budgetary risks

- As a result of market pressures, additional inflationary uplifts have been made to existing block car provision. These costs are not factored into this business case. To mitigate the risk associated with this, a separate market pressures business case is being drafted which will include inflationary pressures within it.
- CCC has commissioned 1 year of additional capacity in response to capacity concerns, system discharge pressures and winter surge demand. NHS funding has been confirmed for the first 6 months of this provision. If NHS funding does not continue and CCC opt to fund the provision for the final 6 months, this will create a pressure to the budget in 22/23.
- The strategic plan for improving homecare capacity will see the introduction of a zoned model with enhanced rates for rural areas in the new CCC DPS. Savings from decommissioning RDT block cars are required to fund the enhanced rates zoned model in the new DPS from 23/24 onwards. Allocation of these as cashable savings in 23/24 onwards is likely to create a budget pressure when the new CCC DPS is introduced in 2024.

General risks

- Providers are seeing increasing workforce pressures which may lead to increasing costs of care to the local authority workforce issues.
- If the homecare model sliding scale of rates cannot address the demand and market gaps for rural and hard to reach areas, then the cars will continue to be necessary
- Demand growth resulting from an increasing older population may also affect the level of savings realisation

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

This business case is in relation to the homecare block provision. The local authority funded (RDT) contract commissioned in June 2019, and the IBCF (Improved Better Care Fund) block provision going live from January 2022.

Business Planning: Business Case proposal

Project Title: Demand led Public Health budgets

Committee: Adult and Health Committee

2022-23 Savings: £328k

Brief Description of proposal:

This business case provides details of underspends and savings from contingency funds.

Date of version: October 2021

BP Reference: E/R.6.034

Business Leads / Sponsors:

Val Thomas

1. Please describe what the proposed outcomes are:

The Public Health ring fenced budget funds a wide range of public health interventions and services. These services have in recent years responded to savings requests through service efficiencies and offering streamlined services.

Public Health business planning for 2022/23 pulls together outstanding underspends across several service areas. These will have minimal disruption as they are demand led services.

In addition, savings are available from contingency and holding funds where the funding is no longer required.

Demand Led Savings:

Chlamydia Screening

Chlamydia screening is commissioned for those aged 15 to 24 as part of the national Chlamydia Screening Programme. Chlamydia is the most common bacterial sexually transmitted infection with sexually active young people being at highest risk. Chlamydia is often asymptomatic, and screening is for early detection to prevent the longer-term health consequences of Pelvic Inflammatory Disease (PID) and infertility. In Cambridgeshire Public Health commissions screening for young people from the Integrated Sexual and Reproductive Health Service, Prevention of Sexual Ill Health Service, GP practices and community pharmacies. Primary care activity (GP practices and community pharmacies) has decreased in recent years resulting in underspends on these budgets. This reflects more online screening services, popular with young people and the strengthening of screening offers through the new Prevention of Sexual Ill Health services. Both the Prevention of Sexual Health Service and Integrated Sexual and Reproductive Health Service have grown and developed their online offers. In addition, national guidance from the national Chlamydia Screening Programme released in June 2021 asked for the screening to focus upon reducing time to test results and treatment, strengthening partner notification and re-testing after treatment. This means that screening in primary care will only be offered proactively to young women. Men will only be offered a test if they have symptoms. Other sexual health services remain unchanged. This reflects the evidence that the harmful effects of chlamydia fall predominantly upon women leading to significant harm to reproductive health and that opportunistic screening of women can effectively reduce these harms.

It is proposed that the Chlamydia Screening Program going forward should:

- In line with national Guidance commissioning of chlamydia screening in primary care should only be for females as screening and early detection and treatment can prevent PID and in the longer-term infertility. Not commissioning screening for males will contribute to any savings.

- The popularity of online services with young people and the greater reach of the Prevention services into vulnerable young people should be the focus for the commissioning of Chlamydia Screening Services with the objective of increasing screening rates. These service options are in demand and are more cost effective than GP commissioned services.

There are national screening targets for the Chlamydia Screening Programme that Cambridgeshire has consistently not met. However, as Figure 1 indicates below that in the East of England all areas except for Peterborough fail to meet their targets.

Figure 1: Chlamydia Detection Rate per 100,000 (15-24 year)

Region	Chlamydia detection rate / 100,000 (aged 15-24)
England	1420
East of England	1339
Bedford	1853
Cambridgeshire	1100
Central Beds	1158
Essex	1100
Hertfordshire	1300
Luton	1643
Norfolk	1468
Peterborough	2459
Southend-on-Sea	1205
Suffolk	1584

The target is based on a certain level of infection in the community and the consistent failure across all areas is thought to be a reflection that infection rates are not high.

Health Checks

The Health Checks Programme is one of the mandatory local authority Public Health services. It is a cardio-vascular health risk assessment that is designed to spot early signs of stroke, kidney disease, heart disease, type 2 diabetes, or dementia. The check identifies ways to lower the risk of these poor health outcomes. There is now substantial evidence for Health Checks reducing the risk of cardio-vascular disease in the population. Public Health commissions GP practices to provide Health Checks. It is essential to work closely with GP practices as they hold the information on those patients aged 40- 74 who are eligible for health check (those not already being treated for a condition) and will follow up with them to refer to lifestyle services or provide clinical interventions if necessary. The Public Health Lifestyle Service is also commissioned to provide outreach health checks which involves it working closely with practices.

Practices are set health check targets every year based on the number of eligible patients. Local GP practices have struggled to meet the targets for several years and the situation has been exacerbated by the COVID-19 pandemic. Public Health is currently discussing activity and alternative models of delivery. This will mean increased activity being channelled through the Lifestyle Service, which is a more cost-effective route, as it is a block contract and often more acceptable to some patients. Although some prefer to receive their health checks at their own practices. Given these factors and the consistent low levels of activity in GP practices savings have been identified from this service area without any risk to outcomes. Figure 2 describes Cambridgeshire's Health Check performance compared to other areas in the region and nationally. Please note because of COVID-19 more recent data is currently not available. It is not anticipated that the savings will affect performance and the current planned developments aim to increase the number of people at risk of cardio-vascular disease being identified early and offered an intervention.

Figure 2: Health Checks – Offered and Received

Region	Cumulative percentage of the population aged 40-74 offered an NHS Health Check who received and NHS Health Check
England	46.5
East of England region	47.9
Bedford	43.2
Cambridgeshire	51.4
Central Beds	49.8
Essex	48.5
Hertfordshire	45.9
Luton	45.5
Norfolk	48.4
Peterborough	51.4
Southend-on-Sea	45.0
Suffolk	46.4
Thurrock	51.8

Stop Smoking Services

Public Health commissions Stop Smoking services from GP practices and community pharmacies (Primary Care) along with the Lifestyle Services. In recent years activity in GP practices and especially community pharmacies have fallen, again exacerbated by the COVID-19 pandemic. During the pandemic the Lifestyle Service offered virtual support for stopping smoking. This had not previously been popular but during lockdown there was a demand for virtual support from smokers referred from Primary Care. This virtual offer along with the Lifestyle Service face to face services has been maintained. Virtual services also offer environmental benefits in reducing the need to travel. Early indications are that demand for the Lifestyle Service Stop Smoking Service

is being maintained whilst we are not seeing any increases in Primary Care activity, especially in community pharmacies. Lifestyle Services also work with vulnerable groups and focus in areas of deprivation where rates of smoking are higher. The Service's block contract along with virtual support for quitting are more cost-effective options.

Stopping smoking is a prevention intervention that has very clear evidence for improving health outcomes. Although there have been reductions in smoking prevalence, rates have remained high in manual occupations and associated with deprivation.

Smoking activity is monitored quarterly through returns to the Department of Health and Social Care as a priority public health area. Currently Cambridgeshire is benchmarked as having a similar smoking prevalence to England. Rates have historically been higher in Fenland, but district level data is currently not available. It should also be noted that because of COVID-19 data no recent data is available. Continuing to offer different more cost-effective options for stopping smoking aims to increase the number of quitters and prevent the associated poor health outcomes from smoking.

Figure 3: Smoking Prevalence in adults

Region	Prevalance of Smoking in Adults [18+] (2019)
England	13.9
East of England	13.7
Bedford	10.8
Cambridgeshire	13.2
Central Beds	13.7
Essex	13.2
Hertfordshire	11.0
Luton	16.8
Norfolk	14.5
Peterborough	18.8
Southend-on-Sea	13.2
Suffolk	16.1
Thurrock	17.5

Contingency Fund

The Contingency Fund was historically set up in anticipation of pressures on specific areas, obesity, stop smoking services, community projects and Traveller health. These issues have not arisen and any pressures going forward will be picked up by reserves, existing budgets or in the case of obesity the additional funding allocated to obesity from the increase in the Public Health Grant.

Holding Account

An excess of funds has been identified in the Public Health holding account that were for planned interventions which have now been superseded and are being funded within existing budgets.

None of these savings are associated with adverse impacts on those with protected characteristics, the environment or health and safety. The expected positive health outcomes are described in the above narrative.

The savings will not impact on service delivery but are part of the development of services that will continue to support the Local Authority's key outcomes of protecting and caring for those who need us, a good quality of life for everyone and communities at the heart of everything. In addition, Public Health services are increasingly responding to the demand for virtual services which support a safe, clean, green environment.

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

The savings and descriptions above support national policy in relation to chlamydia screening, health checks and stop smoking. All three areas are monitored nationally and included in the national Public Health Outcomes Framework, where key public health outcomes are reported.

The savings proposals here reflect the Local Authority's Commercial Strategy that is currently in development. In particular

- maximising value for money from contractual relationships.
- making robust decisions on a consistent basis with evidence and a sound business case
- collaborating with the market and with partners to develop alternative models for greater returns/cost efficiencies.
- maximising use of revenue and assets.

Improving the health and wellbeing of our local communities is central to Public Health services; the savings and the associated developments described above aim to improve outcomes for our communities. It supports the strategic objectives of Children and Young People (CYP) Services through lifestyle services for CYP and their parents and carers. For example, children and young people exposed to smoking in the home can have poorer health outcomes. Chlamydia screening improves the health of young women in the shorter but also longer term. Lifestyle services are key to helping those accessing Adults Social Care stay as healthy as they can be.

There is clear evidence that services for chlamydia screening, health checks and stop smoking, already described above, improve health outcomes. This academic evidence has been rigorously researched and informs national guidance for these programmes.

There had been discussion with practitioners and stakeholders about the services in relation to their development and their information and views are helping to shape service development. The commissioned providers are asked to consult with their service users about existing and any changes to services. This is currently in progress as part of identifying the impact of the COVID-19 pandemic. However, most savings reflect demand and existing service developments.

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

The three main areas where savings will be made are based on demand but there are other factors that have been considered and discussed with providers and stakeholders.

Chlamydia Screening

This has been influenced by national guidance and evidence that calls for less but more targeted activity in primary care to achieve the best outcomes for those most affected. Although activity in primary care has been decreasing over time.

These two factors have been considered and found to support the focus upon sexual health service clinics and virtual services where demand has increased, and the screening is more cost-effective for lower risk potential cases. Whilst ensuring that those at risk of poorer outcomes are targeted.

Health Checks

Some areas have adopted different models for the delivery of health checks that are a mixture of less reliance on GP service delivery or a more blended model with activity or aspects of the health check delivery shared to a greater degree with other providers.

We are piloting a local model this year that will aim to improve activity and quality of service delivery but not increase costs. The savings currently identified represent current low demand.

Stop Smoking

These savings reflect the learning from the pandemic and the acceptability of virtual services. In addition, the increased referrals from primary care to the Lifestyle Service demonstrate a willingness by primary care to shift activity to the Lifestyle Service.

Lifestyle services can offer more flexible services and focus on groups and areas where smoking rates are higher along with its virtual service.

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

These savings have been discussed with finance leads for Public Health and the Director of Public Health.

The proposal does not involve any new projects but there are some elements of re-design of the current services that will support the ongoing delivery of the savings. This redesign of some aspects of primary care delivery have been discussed with the Local Medical Committee and Lifestyle Service provider. There are regular reviews and agreement of service development objectives with providers. Providers are required to ask service users on a regular basis for feedback on services.

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
New budgets for Chlamydia Screening, Health Checks and Stop Smoking services that reflect savings	April 1 2022	ongoing	Val Thomas
Contingency Fund closed	April 1 2022	ongoing	Jyoti Atri
Holding Account closed	April 1 2022	ongoing	Jyoti Atri

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

The proposed savings will have limited effect on those with protected characteristics. They are demand led or were held back for contingency purposes or until needed. These needs have not materialised, and the funding is no longer required. However, there are some service developments that will have impacts on some groups:

Chlamydia Screening - Gender - pregnancy and maternity

The change to the chlamydia Screening Programme will have a positive effect upon the health of women. Those at higher risk of poor health outcomes and services will be targeted in Primary Care to identify infection and minimise risks to reproductive health.

Young People – aged 15-24 - Sexual health, pregnancy, and maternity

There is evidence that the health of young people has been affected by COVID-19. The Chlamydia Screening Programme targets those aged 15-24 years and service providers are being asked to identify any concerns, in particular any mental health issues, that might affect uptake of screening.

In addition, as we emerge from lockdown and its freedoms there are risks in terms of sexual behaviours that could lead to increases in sexually transmitted infections and unplanned pregnancy. The increased focus upon chlamydia screening provides the opportunity for service providers to work with young people to promote safe relationships and behaviours.

Health Checks – deprivation and race

Health Checks are targeted at those aged 40-70 irrespective of any protected characteristics.

However, the closure of GP practices and their limited capacity meant fewer health checks were undertaken during the COVID-19 pandemic. Although the savings arising from health checks should not affect the current service delivery, the pilot services being undertaken this year will aim to deliver more services next year in areas where there are higher cardio-vascular health risks that are linked to deprivation and race.

Stop Smoking Services – deprivation

Stop smoking services target all smokers and this is unaffected by the proposed savings.

There is no clear evidence currently that smoking rates have increased through the pandemic, however decreased access to services despite more virtual services suggest that this could have been the impact

However, the ongoing service developments will continue to target groups and areas, primarily linked to deprivation that are associated with higher rates of smoking.

An Equality Impact Assessment (EqIA) will be developed to ensure this proposal is equitable in its aims and delivery and any potential adverse impacts on people with protected characteristics are mitigated against. This is to ensure CCC's decision-making is inclusive for staff and communities with protected characteristics in line with the Equality Act (2010) and Public Sector Equality Duty (section 149).

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

Financial Benefits

This business case will deliver savings of £328k:

These savings represent low demand and activity

Contingency funding that is no longer required as the interventions have been either re-designed or funded from another source.

Holding account fund that is no longer required as the interventions have been either re-designed or funded from another source.

Savings	Amount	Totals
Stop smoking service:		
GP services includes GP Payments and cost of medicines that are part of stop smoking interventions	£70,000	
Community pharmacy interventions: payments to pharmacists	£25,000	
Miscellaneous Stop Smoking interventions e.g campaigns	£10,000	
Chlamydia Screening:		
Pharmacy services: payments to pharmacists	£5000	
GP services: payments to GPs	£20,000	
Laboratory costs	£40,000	
Health Checks:		
Health Check services: payments to GPs	£50,000	
TOTAL Demand led services		£220,000
Contingency fund for payments to CCG:		
Contract Clinical Governance and Primary Care data processing support	£5000	£5000
Contingency Fund:		
General Childhood Obesity	£2,700	
Small Community Projects	£15,000	
Stop Smoking GP and Pharmacy Services	£17,000	
Traveller Health	£11,300	
TOTAL Contingency Fund		£46,000
Holding Fund Access		£57,000
TOTAL Savings		£328,000

Non-Financial benefits

Key Benefit	Measure	Baseline	Target & Timescale
Chlamydia Screening will target females who are at higher risk.	Number of females screened in GP practices	To be established in 2022/23	Increases over first three years

Long term impact on fertility and mental health services reduced.			
Health Checks targeted to groups and areas where there are higher rates of cardiovascular disease	Number of Health Checks in high-risk groups and areas	To be established at the end 2021/22	Target health checks met by March 31 2024
Stop Smoking Services increases number of quitters amongst targeted high-risk groups which includes pregnant smokers, manual and routine workers, and areas of deprivation	Number of smoking quitters from targeted groups that were treated by the Stop Smoking Services	Number of successful quitters from targeted groups at the end of 2021/22	Targets to be met by the March 31 2024

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Demand for health checks increases	Activity diverted to Lifestyle Service. Negotiate new value for block contract that accommodates increased activity in cost envelope	Amber	Val Thomas
Demand for chlamydia screening increases in GP practices.	Establish referral routes from GP practices for females to the sexual health services for screening and follow up.	Amber	Val Thomas
Demand for Stop Smoking Services increases	Divert activity to Lifestyle Services Negotiate new value for block contract that that accommodates increased activity in cost envelope	Amber	Val Thomas

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

In Scope

- Chlamydia Screening Programme
- Health Checks Programme
- Stop Smoking Services
- Public Health Contingency fund
- Public Health Holding Fund

Out of scope

- All other Public Health Grant funding

Section 4g Adults and Health

Pressures / Investments

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Business Planning: Business Case - Pressure

Project Title: Increased staffing within the Young Adults Team

Committee: Adults and Health Committee

2022-23 Pressure amount: £148,834k

Brief Description of proposal:

To increase the existing staffing structure within the Young Adult's Team, to better manage demand verses capacity, and deliver a safe, cost-effective service.

Date of version: September 2021

BP reference: A/R.4.040

Business Leads / Sponsors: Sasha Long, Head of Service, Disability Social Care 0 – 25 Service

1. Please describe what the proposed outcomes are:

To deliver a safe and cost-effective service, be better placed to manage demand by increasing the existing capacity within the team and to improve outcomes for young people.

The current structure of the Young Adult's Team is as follows:

- 1 WTE Team Manager
- 2 WTE Senior Social Workers
- 6 WTE Social Workers
- 3 WTE Adult Support Coordinators.
- 1 WTE Business Support Assistant.

The proposed structure of the service moving forward:

- 1 WTE Team Manager
- 4 WTE Senior Social Workers
- 6 WTE Social Workers
- 4 WTE Adult Support Coordinators.
- 1 WTE Business Support Assistant.

Implementing the proposed staffing structure as above would enable cases to be allocated to workers at an appropriate level, and to eradicate the need for a 'waiting list.' This would result in the safer management and prompt allocation of new cases being referred through to the team.

The addition of two new Senior Social Workers would enable each to be 'linked' with an LDP (Learning Disabilities Partnership) Team, thus improving working together across the two service areas, streamlining transfer processes and enabling a richer multi-agency consideration of each case under discussion.

The additional Adult Support Coordinator post would provide some much-needed capacity to cover the lower-level cases, thus enabling the Social Workers and Senior Social Workers to dedicate their time and resources to the higher-level cases requiring urgent attention. High level tasks, such as CoP DoLS (Deprivation of Liberty Standards) applications, could be undertaken without delay and the Council would be at reduced risk of drawn-out, costly legal proceedings.

The additional team capacity would enable all team Key Performance Indicators to be consistently adhered to and would support the team in delivering results in line with the PFA (Preparing for Adult) model. It would also free-up the time of the senior members of the team to enable them to focus on staff development, training opportunities, and improving outcomes for the young people the team supports.

Current budget:

Description:	Budget:
Current YAT staffing budget:	£538,508
Required vacancy savings:	£30K
Current forecast for 2021/22 year end position:	Balanced budget.

Conclusion:	No surplus within the current budget and no identified vacancy savings to draw down on.
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Additional Resource Required:

To expand the current team, the service would require funding for: 2 x <i>additional</i> SSW's: £109,926 1 x <i>additional</i> ASCO: £38,908	Total: £148,834
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2. What evidence has been used to support this work, how does this link to any existing strategies / policies?

Context and Rationale for the expansion of the Young Adult's Team.

The Young Adult's Team is part of the Disability Social Care 0-25 Service. This service is responsible for the statutory safeguarding of vulnerable children and young adults with disabilities across Cambridgeshire, as well as the transition of eligible young adults to adult social care, and it is therefore essential that the team have the capacity to do robust assessments, support planning, financial forecasting, and safeguarding investigations.

When the Young Adult's Team was first created, the intention was for the team to have the capacity to undertake early Preparation for Adulthood work with families open to the Children's Disability Teams. The YAT should be getting involved when the young person reaches the age of 16 years, to guide them through the adult assessment including completion of MCA assessments, CoP DoLs as appropriate and the support planning process before the young person was 17.5 years old. The intention was therefore that the family would have an agreed budget and support plan in place well in advance of the young person's 18th birthday, and know exactly what services would be provided, to ease the transition to adulthood, this includes ensuring CHC (Continuing Healthcare Care) and any joint funding has been explored and agreed.

However, due to the current staffing / capacity / demand issues across the Young Adult's Team, the reality is that the team are constantly managing crises for the highest level of cases, whilst the day-to-day tasks are being overlooked. As such, they are unable to get involved with families much before each young adult's 18th birthday. This results in the team being unable to undertake the Preparation for Adulthood work required and there is little opportunity for thoroughly reviewing care packages, 'changing the conversation' with families, or maximising the young adults' strengths / independence. These cases are then being presented to the LDP QA (Quality Assurance) Panel close to the young adult's 18th birthday, with the likelihood being that the care package in place throughout their time with children's services will have to continue for a period, which is costed higher than the adult provisions.

Current caseload pressures:

There are currently 257 cases allocated to the Young Adult's Team, with an additional 85 cases being held on a 'waiting list.' (In ideal circumstances the team would not have a waiting list and all incoming referrals would be allocated immediately, however the team do not currently have the

capacity to do this.) This equates to a total of 342 cases who require support from the service. In addition to this, there are 92 carers who are also open to the team and who receive an assessment and service, with an additional 3 carers on the 'waiting list'. This equates to a total of 95 carers who require support from the service.

Business Intelligence have confirmed that on average there are 9 new referrals to YAT per month, with an average of 7 cases being closed to the team each month. Therefore, the number of cases coming in, are steadily exceeding the number going out.

In addition to this, we have noticed a trend in EHCP's remaining in place for the maximum amount of time (until the young person reaches 25 years of age) due to the increasing number of SEND (Special Educational Needs and Disabilities) Tribunals. As such, cases which would previously have transitioned out of the Young Adult's Team when the young person was around 20 years old, are now remaining open for several additional years.

The Young Adult's Team are allocated a high number of DoLS cases by nature of the fact that many of the 18yr olds who transfer to their team have complex needs. Due to the staffing / capacity pressures within the team, there is currently a backlog of overdue DoLS reviews, and essential DoLS applications are being delayed. These cases cannot transfer to the LDP Locality Teams until this work has been completed, this is impacting on the throughput of cases within the Young Adult's Team, further reducing team capacity.

There are currently several high-risk cases within the team taking a disproportionate amount of time to actively manage and support, including those at those at risk of admission, carer breakdown, placement breakdown and complex legal action.

The Young Adult's Team regularly receive new referrals from the Children's Disability Teams, mainstream Children's Social Care Teams, and external agencies, where the young adult has not been known to Social Care in the past and therefore requires extensive assessment / support planning. With very few cases transferring out of the team, the team's capacity to turn these assessments around in quick timescales has been steadily reduced and these cases often stay on the 'waiting list' for several months as other, more urgent cases must be prioritised.

Most of the annual reviews for young adults being supported by the Young Adult's Team result in changes to care packages (due to their education packages reducing year by year) and re-assessments are therefore required, along with renewed applications to the LDP QA funding panel. The Young Adult's Team consistently present the highest number of cases to the funding panel, evidencing the throughput of the work and the frequently changing nature of their care packages. Therefore, even cases which have been with the team several years still generate a great deal of work on a regular basis. The intent moving forward once JASP (Joint Access and Support Panel) is embedded in CCC (Cambridgeshire County Council) (Cambridgeshire County Council) is that the YAT will only present cases at JASP where there will be robust oversight of all transition cases, however it is a higher number of cases will be deferred if PFA work has not been completed.

Current staffing pressures:

The team is currently comprised of a Team Manager (who should not hold any cases), two Senior Social Workers (who should have a reduced caseload in recognition of their supervisory roles), six Social Workers (including ASYE's who should hold a reduced caseload throughout their

assessment year) and three Adult Support Coordinators (who should have a caseload of less complex cases in recognition of the fact that they are alternatively qualified members of staff.)

However, considering the disproportionately high number of cases open to the team and sitting on the waiting list, the reality is that the TM must actively work several cases, both Senior Social Workers are holding excessively high caseloads, and the Social Worker (including the ASYE's) and ASCO's are all holding more cases than they should, including cases with increasing complexity.

This has resulted in a high turn-over of staff within the team and significant challenges around retainment, with several members of staff citing workload pressures and a lack of capacity as their reason for leaving the service. It has also resulted in the need to employ costly agency staff on a regular basis, to manage vacancies and to respond to gaps when staff leave and there is a delay in new staff joining the service.

As the Young Adult's Team is a frontline safeguarding social work team managing a high level of complexity and risk, it is reasonable to expect the average caseload per role within this team to be as follows:

- Senior Social Workers, up to 15 cases each, to enable them to have enough free time to support less experienced staff, carry out supervisions, provide case oversight.
- Social Workers, up to 20 cases each (so they have the time and capacity to manage complex case issues.)
- ASYE's, up to 18 cases each (so they have the capacity and space to continue their learning and developing their confidence / experience throughout their assessed year.)
- ASCOs, up to 30 less complex cases each (so they can provide a high-quality service to those cases with less complexity but still requiring active support, and oversight / actions as required on those cases which only need to be 'open to review'.)

Based on the current staffing structure, if we were to divide the number of cases allocated to the team (including those on the waiting list) between the current staff, the average caseload would by far exceed that which is considered optimal, manageable, or safe.

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

Disability Social Care 0-25 funding considerations:

The staffing budget for the Young Adult's Team sits within the LDP pooled budget. The Disability Social Care 0-25 Service currently contributes £45,678 towards the staffing budget for the Young Adult's Team, which funds 1 x SW post and 'tops up' the cost of a Senior Practitioner post to make this a full-time position. In exploring the potential expansion of the Young Adult's Team, we have reviewed our staffing budget across the Children's Disability Teams to identify if there are surplus funds / posts which could be transferred to the Young Adult's Team. However, we have concluded that further reductions to the staffing budget are not possible due to the workload held within the children's teams, as follows:

Within our Disability Social Care 0-18 teams, our average caseloads are currently as follows:
Senior Practitioners: 16 cases.

Social Workers: 18 cases.
 ASYE Social Workers: 16 cases.
 Child Practitioners: 14 cases.

In mainstream Children's Social Care teams, the recommended average caseloads are as follows:

Senior Practitioners: Up to 10 cases.
 Social Workers: Between 16-18 cases.
 ASYE Social Workers: Up to 10 cases.
 Child Practitioners: Up to 15 cases.

This indicates that the average caseloads held by the staff in our 0-18 Children's Disability Teams are in line with our mainstream colleagues. We already work flexibly across our service and we are currently using any spare capacity within our Children's Disability Teams to support the Young Adult's Team but the demand on our children's teams is and will continue to increase as restrictions begin to lift post the pandemic and the current support (albeit minimal) cannot be sustained.

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

Task	Start Date	End Date	Overall Responsibility
Business Case to be reviewed and authorised.	9 December 2021		

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

If team capacity remains stretched, the prioritisation of resource relies on intelligence received. Statistically those from difficult to reach / historically excluded groups may not reach out or be advocated for as widely and this could result in inaccurate prioritisation.

An Equality Impact Assessment (EqIA) has been developed to ensure this proposal is equitable in its aims and delivery. This is to ensure CCC's decision-making is inclusive for staff and communities with protected characteristics in line with the Equality Act (2010) and Public Sector Equality Duty (section 149).

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

Financial Benefits

Whilst we recognise the need for financial investment to make this proposal a reality, we believe this is justified considering the savings this will generate for the council, alongside the improvement to the current service delivery, and staff well-being.

Non-financial benefits

This business case sets out the proposal to request funding to enable the expansion of the Young Adults Team within the Disability Social Care 0-25 Service. This additional resource is required so that there is sufficient capacity across the service to manage the demand caused by the steadily increasing number of referrals / open cases, the extended period these cases remain open to the team, and the increased complex case activity (including essential DoLS work) across the team. The current level of demand cannot be safely managed with the current staffing structure in place, or within the current staffing budget. By expanding the Young Adult's Team:

- caseloads would be lower and therefore more manageable
- there would no longer be a need for a waiting list
- the team could undertake thorough Preparation for Adulthood work, achieving savings across the service whilst improving outcomes for the young people we support.

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Ability to Recruit to the additional positions.	Team to promote a Team specific recruitment campaign.	Red	Team Manager

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

In scope is an increase of staff for the Young Adults Team.

Business Planning: Business Case proposal

Project Title: Additional Resource – Quality and Practice Team

Committee: Adults and Health

2022-23 Investment: £68k

Brief Description of proposal:

The request is for permanent investment of £113,042 per annum.

(Approx £68,000 of this from Cambridgeshire County Council and £45,000 being requested from Peterborough City Council) This would be to fund three auditors for the Quality and Practice team to ensure we are meeting our statutory responsibilities in the new assurance framework which will be overseen by the Care Quality Commission inspection.

Date of version: 8 September 21

BP Reference: A/R.4.041

Business Leads / Sponsors: Charlotte Black, Director of Adults and Safeguarding

1. Please describe what the proposed outcomes are:

With the 'Integration and innovation: working together to improve health and social care for all' White Paper, comes the proposal of a new assurance framework for adult social care to be overseen by the Care Quality Commission (CQC) inspection. This will result in increased regulation for adult social care (ASC), and we will need to ensure compliance. Our experience of Ofsted and Children's social care, tells us that non-compliance can lead to costly remedial action being required. The current capacity in the quality and practice team achieves two thematic audits a year. A thematic audit is an in-depth study on a particular area; used to assess the quality of practice and identify themes, risks and areas for learning. The current capacity does not cover auditing of all our statutory responsibilities, nor is it able to give full assurance of our statutory responsibilities.

CQC inspection of ASC will be from April 2022. In addition to this, COVID-19 has had increased demand on resources and pressures to Adult Social Care. Currently, it is even more important that we pay attention to quality and practice. We have a growing vacancy rate, which is compounded by increased demand with staff and managers trying to tackle back logs and deal with more complex cases. We need assurance that our quality is maintained in line with our statutory responsibilities.

As a result, there is a request to fund the cost of three auditors within the team, to assure ourselves we are fulfilling our statutory responsibilities, help prepare reports for CQC inspections and ensure we are proactive in addressing any practice issues/needs. This investment will mitigate the risk of future costs we may incur if remedial actions are needed to ensure CQC compliance following inspections.

This would be split across Peterborough City Council and Cambridgeshire County Council – the team currently is a shared services role and works across the whole service. Cost based on 40% PCC (Peterborough City Council), 60% CCC (Cambridgeshire County Council)

PCC Total cost £45,216.80 per annum

CCC total cost £67,825.20 per annum

To ensure that we can audit our statutory responsibilities and comply with the new assurance framework and CQC inspection requirement, there is a need to increase the number of thematic audits carried out across the service. For a thematic audit on our statutory assessments, to get a viable outcome we would need to complete three times the number of audits the teams are currently able to complete.

Benefits

- Carry out six thematic audits per year
- Increase of four audits to assure we audit our statutory responsibilities
- Free up the senior social workers to improve the timeliness of actions to the findings, implement systemic changes, and supporting operational teams.

The implications from the white paper on health and social care reform, Adult Social Care will come under greater scrutiny and include a new inspection regime from CQC. With increased capacity to carry out audits across all adult services in PCC and CCC we will be more prepared and assured for the inspections.

There is a significant risk if we do not invest and fail on an inspection, that this will incur a high cost to rectify this situation. In addition to this there is likely to be an increase in workload because of the new regulations. If there is increased workload that is related to social care practice, this will be able to be supported by the Quality and Practice Team with additional staffing in post. This will present a challenge to Adults services if there is no additional capacity, with the risk that staff will be diverted from delivering their statutory functions, to support auditing and CQC inspection preparations. We know from Children's inspections that a substantial amount of resource and work is required in relation to an inspection. If there are improvements to be made, such as planning and delivering improvements, setting up an improvement framework and then being reinspected to assure that the improvements have been made, this could result in significant costs to the local authority.

To take this approach an additional 3 x FTE (Full Time Equivalent) equivalent staff members at SO1/SO2 are required to carry out the additional audits.

There are reoccurring themes from thematic audit re: practice standards and legal compliance. This evidences that whilst we are collecting data, we are not able to do enough to change practice and ensure legal compliance year on year.

The new resource would increase the number of themes being audited, giving a more robust thematic audit programme throughout the year helping us to prepare for the new inspection regime.

Additional benefits are that it will increase the capacity of existing staff to work with those teams on development and improving the service. The existing practitioners are skilled social workers and if we release them from completing the audit, they could better use their time to analyse the data and implement the action plans.

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

Measure of benefits

We have in place a system for monitoring our development and improvement in practice. Through the Practice Governance Board smart actions for learning and improvement are agreed and monitored. The Practice Governance Board action plan holds all the learning from various sources and monitors the completion of actions. The managerial audit programme triangulates the evidence of improvement in practice. These established processes will monitor the impact of having the three adult support coordinators allowing the senior social workers to improve our service.

Further evidence of the need of these roles can be found in section one of this report.

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

As mentioned in section One, this is currently the only viable option to meet this need, and doing nothing would result in high levels of risk. There is not the capacity in other service areas to support this function and the team does not currently have the capacity to undertake this work.

This role and function sit within the current team. It is best placed, as it builds on current workload, skills, and capabilities of the service. The team are skilled in data collection, thematic audits, audit reports and supporting action plans because of audits. However, the additional regulations will create additional workload which we do not have the staff capacity to complete within the service as it is currently.

This needs to be an internal audit and support function, due to the nature of the work that will be required and any sensitivities around this. If we do not begin to plan, assure our work, and improve where required, it would be unlikely that PCC/CCC would meet the regulation standards, though we do not yet know what these are. Where we have completed thematic audits on our statutory functions, there are always areas for improvement, some of these are very simple to support to rectify with an action plan. However, there are some areas for improvement where we have significantly failed in fulfilling our statutory responsibilities and there has been a requirement for a large amount of work to support practice improvement. There is therefore a risk to the department's reputation and financial risk if we must undertake remedial action. There is no choice regarding the inspections and regulations as these are nationally mandated.

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

The next steps would be to advertise the posts and recruit into them within 12 weeks. This would then enable us to draw up a more robust thematic audit programme which would cover all our statutory responsibilities and enable the department to have an action plan in place, where we fall below expected standards. This will be beneficial when we get to the CQC auditing processes.

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

A review has concluded that an Equality Impact Assessment is not required for the purpose of this business case. No negative impacts have been identified, however doing nothing could result in some residents with protected characteristics being affected negatively.

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

Financial Benefits

Without the increase in audit capacity, there are several financial risks facing the authority. By recruiting additional officers to the Quality and Practice Team, we are taking preventative measures to ensure that the authority does not have to incur unnecessary spending.

Risks

- Delay in understanding risk across the department
- Gathering the evidence without the capacity to action the learning and service improvement
- Organisational risk, - Human rights, poor practice, Safeguarding, Local Government Ombudsman. The cost from an LGO findings can be £100 to £1,000 unless it is an exceptional case. The highest payment made in the last year has been £1800. This does not include the cost of any loss of service which can be any amount. The highest to CCC has been £85k. Time wise on average 3 senior managers input per LGO complaint at 20 hours each.
- Financial – LGO, Legal challenge, over commissioning of services, increased crisis management – not picking up areas of concern early enough, resource from Q&P team being used in the wrong areas.
- There is a risk of damages being awarded where we have been in breach of our statutory responsibilities, however this is difficult to quantify. A case was brought to court in 2021 whereby Haringey had unlawfully deprived an individual of their liberty. They were required to pay £143,000 in damages. This covered an eight-year period which equates to £17,825 per year. They did not dispute the services provided or the placement the individual was in. This would usually be covered by insurance, however, is a significant claim.
- There is also a financial risk of remedial action. For instance, if we are found to be lacking in a specific area and this requires additional resources. It is again hard to quantify this as it could be that we would need five additional workers for a six-month period or less work force for a greater period etc.

However, the on-costs of one social worker for 12 months are £44,659 which rises significantly if we needed to recruit locum practitioners.

The implications from the white paper on health and social care reform mean that Adult Social Care will come under greater scrutiny and include a new inspection regime from CQC. With increased capacity to carry out audits across all adult services in PCC and CCC we will be more prepared and assured for the inspections.

There are reoccurring themes from thematic audit re: practice standards and legal compliance. This evidences that whilst we are collecting data, we are not able to do enough to change practice and ensure legal compliance year on year. There is a risk that we could face financial penalties from CQC if we are not fulfilling/able to evidence we are fulfilling our statutory responsibilities.

Non-Financial Benefits

Benefits

- Audit is a useful tool providing the evidence of areas of practice improvement
- Increased audit activity – we can review more areas across the service
- Increase re-audit capacity to measure the impact of actions taken to improve practice.
- Increased capacity for SSW to implement the learning
- Review previous audits to see patterns of change/improvement etc.

The increase in capacity x3 auditors will give

- Assured statistical viability to the evidence from the audits
- Capacity to increase the amounts of thematic audits completed in the year
- Increase the capacity to collate the data.

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

- Risks that the department does not fully understand the regulations and what will be audited.
- Risks of delayed recruitment if we cannot fulfil the posts
- Financial risk of remedial action if we do not act (as detailed above in financial benefits section)
- Risk of reputational damage if we do not act.

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

The Policy and Practice Team – to increase the number of auditors by three.

With the 'Integration and innovation: working together to improve health and social care for all' White Paper comes the proposal for CQC inspection of adult social care which will give greater visibility of our statutory work. The current capacity in the quality and practice team achieves two thematic audits a year. The current capacity does not achieve statistical viability nor cover auditing all our statutory responsibilities. The current resource does not give full assurance of our statutory responsibilities.

As a result, there is a request to fund the cost of 3 auditors within the team, to assure ourselves we are fulfilling our statutory responsibilities, help prepare reports for CQC inspections and ensure we are proactive in addressing any practice issues/needs. This role and function sit within the current team. So, this is where best placed, as builds on current workload, skills, and capabilities in that service. They are well versed in data collection, thematic audits, audit reports and supporting action plans a result of audits.

Business Planning: Business Case – Investment proposal

Project Title: Care Home Support Team

Committee: Adults and Health

2022-23 Investment amount: N/A (already budgeted)

2023-24 Investment amount: £220k

Brief Description of proposal:

This proposal is to agree permanent funding for the Care Home Support Team which is currently funded for two years. Current end date April 2023.

The annual cost of the Care Home Support Team is £220k (74%) for CCC (Cambridgeshire County Council) and £77k (26%) for PCC (Peterborough City Council)

The cost is already budgeted into the MTFS (Medium Term Financial Strategy) for 2021/22 and 2022/23 as a temporary investment.

This business case is asking for permanent investment from 2023/24 onwards of

CCC: 220k per annum

PCC: 77k per annum

Whilst this service will not deliver a saving, it is mitigating a financial risk of up to £542k per annum to the Council.

Date of version: October 2021

BP Reference: A/R.5.006

Business Leads / Sponsors: Charlotte Black, Director of Adults and Safeguarding

1. Please describe what the proposed outcomes are:

This proposal links to the CCC outcomes “A good quality of life for everyone” and “Protecting and caring for those who need us.”

The Care Home Support Team (CHST) is currently funded for two years. This business case sets out the need for this team to be made permanent. The cost of this team is already budgeted for in financial years 2021/22 and 2022/2023, so annual investment needs to be factored in from 2023/24 onwards.

The team stemmed from experiences during the COVID-19 pandemic in which there were a small, but significant number of care homes, which required focussed input from both contract management and operational staff to address quality and practice issues. This presented several risks to both councils in terms of quality of care for care home residents, provider failure and potential reputational damage. The CHST is aimed at enhancing the support already provided by the contract monitoring team. It is an additional, flexible, and intensive support service where there are practice concerns. CHST have the in depth and practical knowledge required to build a partnership with care homes to improve standards in residential and nursing homes as well as learning disability supported living providers.

It is clear from the support already provided by CHST that there is a widespread need for providers to be supported to improve practice quality. Care providers tend to either be unaware of what improvement is required or lack the knowledge to drive that improvement forward.

The role of CHST

- Completing a period of observational visits in the care setting to best understand how it operates daily.
- Talking to residents, their family, and staff to gather their concerns and provide advice and reassurance
- Ensuring care and support documentation is up to date and meets the needs of all, including the self-funding residents and is proportionate to ensure agency staff and others can understand how to meet resident's needs.
- Supporting adherence to Mental Capacity Act and Deprivation of Liberty Safeguards statutory duties across the home
- Liaising with the safeguarding teams as appropriate and supporting the care home to understand their safeguarding duties and what documentation they should have.
- Identifying opportunities for use of technology to support practice throughout the home as opposed to a resident-by-resident basis (particularly applicable for larger homes)
- Work alongside home management to ensure they understand what is required and can take the changes forward positively, utilising systems theory, strengths-

based practice, social learning theory, crisis intervention theories and others as appropriate.

- Support homes to ensure meaningful activities are taking place for all residents
- Ensuring good risk assessments and that the home is taking a preventative approach
- Facilitating meaningful interactions with other professionals to aid in building a support network around the provider to improve quality of care
- Where required, working with key CCC/PCC internal teams and senior managers, to identify where improvements in our support and interaction with providers can be beneficial in contributing to improved outcomes for the residents.

Please see the attached report of CHST work to evidence the scale of input for homes so far.

The care settings supported by CHST so far have needed on average eight separate visits to support improvements. Team members tend to be in a home for most of the day either observing or supporting care homes in implementing changes. This input takes time as the manager and carers require the dedicated time of a social worker to support with changes to practice. Additionally, observations of the home require seeing the home at all times of the day so the home manager can be provided with an effective assessment and understand the practice areas which require development. Once practical support has been provided, CHST will review those settings at 3, 6, and 9 month intervals to ensure these changes have been maintained. Furthermore, additional input will be needed at the review periods to reinforce learning and to also notice any further areas requiring improvement. Again, the same method will be applied of providing the dedicated time to support change. To illustrate the time commitment through one example, the maximum visits for one care home so far have been 19 separate visits.

It is vital to have social workers providing the practice support to homes as an enhancement of the contract monitoring support they already receive. Social workers have the practical experience of completing the tasks that care providers are required to do and as such can role model the tasks to aid in supporting practical application of the knowledge that formal training provides them. Many providers only complete e-learning and this does not provide them enough knowledge to apply to practice. At a time when providers have limited resources, the practice knowledge, and skills that social workers can share is invaluable in driving improvement in quality. Social Workers are experienced in application of legislation to practice and supporting individuals who have complex needs. Social workers are used to working within theory, models and approaches of practice and can share that knowledge with providers. The different perspective that social workers will have allows for us to work alongside our contract monitoring colleagues to provide a complimentary and enriched support service for providers.

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

Out of the 28 Care Homes CHST have been working with in the first three months, CHST highlighted practice concerns in 17 of these where they had not been found by the contract monitoring team or CCG (Clinical Commissioning Group) quality support team. This is not a negative but evidences the importance of different teams to support care providers to ensure holistic support. We have provided practice support (in partnership with contracts who provided support for contractual concerns) to two providers in the first three months who were providers of concern. These providers would not have been able to improve practice standards without the team's support. The concern relating to these providers was not new and no progress or change had been seen previously. It is reasonable to assume therefore that, based on the level of poor practice prior to our support, these homes could have been considered unsafe to continue to place individuals and we would have needed to move current funded residents to new placements and led to provider failure. These two homes were part of small individual owned companies which did not have access to the same resources as the bigger national and regional companies. Therefore, to solely inform them of what is requiring development does not result in them being able to resource the support to drive change. The consequences of this could mean that the provider fails, and the local authority incurs the financial and non-financial impact of this (as described below). Therefore, the local authority having the CHST to provide the practice support reduces the risks and means increased likelihood of improved outcomes.

Provider failure:

An example of the financial and reputational risk to the councils is reflected in provider failure. If a care home fails due to quality or financial sustainability, placements must be suspended, and home closure is a risk. This did occur in 2019 when a care home had to be closed and residents supported to move to alternative placements. This specific care home had already had placements suspended and intensive input provided. A social worker from the operational team was re-deployed for 6 weeks to work with the home and there was intensive support from contract management as well as several senior management individuals. It provides a real example of the cost of this failure.

Cost to the council:

At the time of closure there were only 8 residents left who the council funded.

Key cost implications of this were:

£785.19 – weekly increase in funding in total for the 8 residents due to moving placement.

£10,000 – for a consultant, the local authority funded to support the home for 2 months for 2.5 days a week

£40, 942.05 – total annual cost to the council for this provider failure.

£122,826.15 – utilising the above figures this would be the approximate increase in spending over 3 years (average time a person spends in a care home)

There were only a small number of residents left in this home by the time it closed. If we consider the two homes who were provider of concern already this year, that CHST has been involved with to improve practice, we can consider the potential cost mitigated based on the above example.

The two homes we supported had an average of 40 residents. Both had a large proportion of local authority funded residents; an average of 25 local authority funded residents in each of these homes.

Therefore, the potential annual cost mitigated following the joint support from CHST and contract monitoring for these homes was: £255,887.81 per year.

We have bigger homes within Cambridgeshire and Peterborough, the most beds in one home are 158 and the average occupancy is 50. Therefore, cost avoidance can potentially be significant.

We are now approaching 6 months of the team being in place and we are currently working with 3 further providers that are on the cusp of becoming providers of concern. 2 are nursing homes and 1 is a supported living provider with multiple provisions. All have concerns relating to practice, so we are taking an intensive, preventative approach in collaboration with contracts, aiming to improve practice standards. All homes are ones considered as having historical ongoing issues.

If we take these figures, we can mitigate further potential cost. Collectively the three homes have a bed occupancy of 150. If we considered there could be a 62.5% occupancy rate (same percentage applied to the 2 other providers of concern) that results in a potential impact of moving 93 individuals. When applying the same weekly cost increase of finding new placements, as above, that is a potential cost of:

£9127.83 per week

£475,951.14 per annum

£1,427,853.41 over 3 years (it should be noted that learning disability providers cost far higher than residential or nursing homes for older people and those individuals tend to remain in those placements for a significant period of their life. We have used the figures based on older people providers so the proportion relevant to the supported living provider has the potential for far higher cost implication).

This, therefore, equates to 5 homes so far that realistically could result in provider failure in one year without intensive practice support.

This is a total potential cost mitigated of £731,838.95 annually across both Councils.

It is important to note that following COVID, costs of managing a home have increased so the likelihood of failure is much higher. With the costs going up it is reasonable to suggest that this will mean care providers, especially the smaller independent ones, will not be able to access as effective training. This is another reason the CHST will be

imperative in supporting homes to continue to operate and ensure quality of care at the same time.

The provider failure case study also evidences an additional non-financial impact.

- A social worker from the operational teams was supporting the home for 6 weeks which impacted capacity in those teams and meant less statutory tasks were being completed for individuals. Social workers have 20-25 individuals to support at any one time so to take a social worker from the team for a significant period has a detrimental impact on the operational team.
- There were key individuals from senior management involved in this provider failure so to have a dedicated team involved to support the homes relevant to practice also lessens the impact on their capacity
- Distress to residents was a significant impact.
- Reputational damage
- Loss of bed capacity in an already stretched market

Complaints

11% of formal complaints responded to by the local authority in 2020-2021 were primarily about the provision of care delivered by care homes. This is an increase compared to the 2019-2020 period. 65% of these were about expected standards of care not being met. This was a significant increase of 28% compared to the previous reporting year. While some of these complaints were relating specifically to COVID, this does not mean they were not indicative of practice as concerns around restrictions is relevant to practice. The service needs to ensure guidance is upheld but that individuals' human rights are still central to decision making as well as the individual's wellbeing is held as priority. In particular, this requires a robust understanding of the Mental Capacity Act 2005, which we know is a development need across providers.

Over the last 2 years, for Cambridgeshire, there have been 10 adult social care complaints investigated by the local government ombudsmen and 6 of these related to the standard of care provided by the care homes commissioned by the local authority. The recommendation was for the local authority to work with the providers to improve their practice in areas such as record keeping, safeguarding and staff practice knowledge.

The CHST is addressing the recommendations by the ombudsmen which is vital as to not address this recommendation leads to reputational damage and has financial implications for the local authority.

Current example of CHST input

Case study:

CHST got involved with a care home during their COVID outbreak and upon visiting it was clear that practice standards were poor. CHST and the contract monitoring team took a collaborative approach in supporting the home to improve standards of care.

CHST have supported this home for several months to improve their practice and have done this through a process of role modelling good practice and improving documentation. Had CHST not been in place this home would have been expected to make changes independently but without the knowledge and skill to do so. The probability is that this would have led to prolonged and increasing concern and consequently continued suspensions of much needed placements. This is additionally evidenced by the fact that the contract monitoring team had repeatedly had concerns about this home and sustained improvements had not been seen. Had this home failed we would have been looking at a significant financial impact for the council due to moving residents, lack of bed capacity and reputational damage as well as resident distress due to moving to new homes.

Feedback from providers so far

'I am glad that I asked for the care home support team to get involved with parts of our home, as I was at one point very insecure about what are we doing right, are we doing enough, are our support plans sufficient, are our MCA what they should be? The feedback I am getting is not only constructive but also accompanied by support of finding a solution if something does not work as well as we would like. Working with Lucy has also given me the encouragement to go through our support plans with a different point of view and applying the approaches we discussed. '

D also said she would like to pass her thanks on to whoever created the care home support team.

When asked if the manager would have seen improvement without CHST, response have been:

'Not around MCA's no Steffi was very helpful and knowledgeable and gave us the knowledge and confidence to do MCA's and record them right now'

K 'does not feel that the improved practice would have been achieved without the intervention'

'I believe Leigh's involvement has made us take a more person-centred approach. The work would have been done but not to such high standard.'

'100% useful - It's easy to get complacent and even though we always strive to be better, there is nothing like having fresh eyes with different experience to get new ideas and discuss different options and outcomes.

'I had no idea of some of the areas we needed to improve on, I didn't think about TEC to be less restrictive, we didn't think about amending our admission checklist and our care plans, MCAs and risk assessments have 100% improved, we wouldn't have done this without the support'

CHST can evidence the widespread need across Cambridgeshire and Peterborough for this team, as evidenced above.

The lack of retention of staff and managers in care homes, the regular changes to practice guidance, the pressures on care homes with less resources and the increasing population of people who require care settings, as well as the ever-present reality of COVID all indicate that support will continuously be needed. 2 years does not result in the local authority being able to sustain and have assurance of quality and practice across the provider market.

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

Previous options have been:

Operational teams

Social workers from operational teams have been asked to provide intensive support to care homes to improve practice. This has been in the context of crisis when there are critical concerns about the safety and wellbeing of residents. However, it is clear operational teams cannot provide the level of support that care homes and supported living require for practice improvement. The support to care homes needs to be available without compromising other statutory work. Historically, social workers have been utilised from operational teams to assist care homes who require intensive practice support, which then has an impact on capacity in operational teams where there is already demand and pressure. It also means that homes cannot get longer term support to promote sustained improvement as the social workers are only able to be re-deployed for short amounts of time.

All social care input to care homes from operational teams is on an individual resident basis. PCC and CCC have a statutory duty to review the needs and care arrangements of all residents on at least an annual basis, and this takes place more frequently where a resident has significantly changing needs. Meeting the statutory duty to undertake Care Act reviews is a challenge in Cambridgeshire and Peterborough as these scheduled planned reviews are deprioritised to respond to urgent unplanned changes in service user circumstances or in response to provider failure. As with all Councils we struggle to complete regular reviews within 12 months, with the average number of days a review is overdue being 90 (3 months). Reviews of care home residents although important are balanced against the need to ensure that people in their own homes can live safe and independent lives.

Given the pressures experienced in covering the requirements of the reviews in a timely way it is not possible for the current workforce to also provide additional support for care homes as set out in this business case.

Contract monitoring team:

The contract monitoring team previously have been monitoring aspects of practice and including practice issues within an action plan if they have noticed something missing or incomplete. However, they do not have the knowledge and experience, as social workers do, that would enable them to proactively support change and development in

a home. This has linked with the historic approach of calling upon the support of the operational teams in a crisis however this lacks a preventative approach and as outlined above is not sustainable for the operational teams. Additionally, the contract monitoring team do not have the resource within the team to provide the intensive support providers require. Therefore, this is not seen as a viable option.

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

CHST have continued to develop the framework in which the support is delivered to care homes and continue to gain feedback as to its effectiveness. There will be ongoing reporting of what has been achieved by this team.

Demand is high for this level of support as the team now have a waiting list of homes that require support. As stated above, this team is funded until April 2023, but the business case is requesting permanent funding from that point onwards.

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

The CHST supports care providers in enhancing their practice during a time where the COVID-19 pandemic has had a significant impact on older people and people with a diagnosis of a learning disability. We work with care homes to ensure that individuals who live in these settings have their human rights protected and promote that their wellbeing needs to be considered alongside the infection control protocols that need to be in place. As a team we promote equality and diversity within care settings and ensure the settings consider how best to support individuals' intersectionality.

A review has concluded that an Equality Impact Assessment (EqIA) is not required for the purpose of this proposal, however there would be benefit in one being developed to ensure the service is equitable in its aims and delivery and any potential adverse impacts on people with protected characteristics are mitigated against.

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

Financial benefits are evidenced above.

Non-financial benefits to providers having support to improve practice:

- Increased wellbeing and quality of life for residents
- Increased application of Technology Enabled Care (TEC) to support delivery of care in care homes which can also aid in a reduction of 1:1 funding.
- Reduction in delayed transfers of care because care homes are more confident in managing risk and seeking support from specialist staff in the CCG, community health services and the Councils. This also provides assurances that care homes are more confident in supporting residents with more complex needs.
- Increase in care homes taking a preventative approach which can reduce incidents which can lead to increased needs e.g. falls.
- Better documentation which can support the CHC (Continuing Healthcare Care) process which can have a positive impact for the councils.
- Reduced risk of LGO finding fault and judicial review and reputational damage to the sector and the LAs (Local authorities) as commissioners
- Enhanced support that contract monitoring team already provides for providers at risk of failure due to their practice

A significant benefit of having a team of social workers supporting providers is the added knowledge to a multi-disciplinary, collaborative approach. Not only is this about the CHST and contract monitoring team working together but also for the service to work with public health colleagues. Working closely with the CCG quality support team as well as colleagues in the medication optimisation team has been invaluable in creating a robust and supportive system around the providers across Cambridgeshire and Peterborough. We additionally work to link providers with the relevant professionals across CPFT (Cambridgeshire and Peterborough NHS Foundation Trust) (Cambridgeshire and Peterborough NHS Foundation Trust) and primary health. We have linked with the CPFT Safeguarding nurse to look at effective ways to share intelligence about homes to ensure we are aware of concerns across the various organisations to aid in focusing our resources on the right homes and enabling us to effectively risk assess.

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

This approach relies on the cooperation of care homes and the ability to recruit the right staff. We are currently in a staffing crisis in social care and this will have an impact in terms of sustainability of the intervention. However, this also means an increased risk of practice standards declining and therefore increases the need for support to be available. A number of risks have been identified above detailing the risks associated with not acting.

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

With the five social workers in this team, support can be provided to nursing, residential and supported living providers. A waiting list is currently in operation, so this team does need to prioritise intervention based on risk. The team needs to ensure the intensive support to providers is possible and not impact this detrimentally by taking on too much work at one time. With the current number of social workers in the team there is no scope to provide this support to domiciliary care, day centres or any other setting the council commissions to provide support to individuals across Cambridgeshire and Peterborough. If this were required, the team would require a larger resource.

Business Planning: Business Case – Investment / Savings

Project Title: Expansion of the Enhanced Response Service

Committee: Adults and Health

2022-23 Investment amount: £181k

Permanent annual investment of £180,509 and net saving of £29.3k
(Cambridgeshire County Council)

Cost avoidance saving - £209,798 per annum

Brief Description of proposal:

Extension of the Enhanced Response Service to deliver earlier intervention, preventing escalation of need and associated cost avoidance

Date of version: 23 November 2021 BP Reference: A/R.5.009

Business Leads / Sponsors: Charlotte Black, Director of Adults and Safeguarding

1. Please describe what the proposed outcomes are:

To extend the remit of the Enhanced Response Service (ERS) for Cambridgeshire to respond to additional Carelines and to provide a short term urgent social care package across 24/7 at the request of GPs and 111.

This proposal has been developed to assist the Council in meeting the requirement to provide urgent social care within a two-hour target time.

Strategic fit

- Supports health and social care recovery to a new business as usual after the pandemic
- Supports 'Think TEC (Technology Enabled Care) first' approach
- Investment in prevention and early intervention
- Think Community
- Linked to the Lifeline and telecare service provisions and business cases for the increasing referrals to Technology Enabled Care Services

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

The recent growth and investment of the Technology Enabled Care Services (TECS) needs to be matched with a growth in the Enhanced Response Service to ensure a comprehensive preventative offering. The provision of technology needs to be matched with a person response to meet the wide range of unpredictable needs that helps people to continue living at home safely and give informal carers peace of mind.

GPs have voiced the need for accessible urgent social care support available 24/7 particularly where GPs are involved in front of house admission avoidance and Herts Urgent Care who provide 111 services.

Cambridgeshire County Council currently funds £734K for the existing ERS since 2017 and intends to maintain this commitment. Additional investment of £180,509 per annum is required to expand the service provision.

Current Enhanced Response Service Provision in Cambridgeshire

The Enhanced Response Service (ERS) was established in Cambridgeshire during 2017 to provide a mobile person response for telecare activations where no informal carer was available. The service operates 24/7 with two vehicles within the boundaries of Cambridgeshire and is entirely funded by Cambridgeshire County Council. Prior to this service all calls from Alarm Receiving Centres were sent to Ambulance Service

when family are not able to respond. The existing service is already contributing to avoiding ambulance calls.

The typical types of calls that ERS responds to includes:

- Non injured falls: for assistance with moving and handling to get up from the floor
- One off personal care: diarrhoea, vomiting, anxiety, incontinence.
- Silent calls: activations where the Alarm Receiving Centre cannot speak with the alarm holder. A number of these are people who have fallen but are out of voice/hearing range of the Lifeline.

ERS is responding to on average 508 calls a month (range 383-625) and current provision is at capacity.

- 32% of calls are for falls
- 31% for silent calls
- 23% for personal care
- 6% for anxiety
- 8% other

ERS responds to calls from seven Alarm Receiving Centres that have the greatest number of alarm holders in Cambridgeshire

- Astraline (new) 8%
- Tunstall 14%
- North Herts Careline 14%
- Cross Keys Homes 40%
- Sanctuary 365 4%
- Centra Pulse/Doro 13%
- Appello 1%

ERS also takes calls from the Ambulance service if someone has dialled 999 but is not a medical emergency, and from the Council's Emergency Duty Team. Ambulance calls 4% average 19 calls a month.

ERS receives approximately 1-2 calls from the 111 helpline a month. ERS has a few individual arrangements to respond to the call centres for Housing Associations with small numbers of sheltered units in Cambridgeshire (8 Housing Associations with 820 units). ERS will attend for people in their own homes, sheltered accommodation and in the event of a fall will attend Extra Care Schemes.

ERS is regulated by CQC (Care Quality Commission) and is currently rated as good. ERS can escalate their calls to other services if they identify any concerns during their visit. ERS data shows that ERS called the following services:

- 5.5% Ambulance
- 0.6% Police – access to property, aggression
- 0.7% GP – medical review and medication review
- 0.8% to JET and Out of hours District Nursing – skin tears, wounds, urine test, catheter issues, pressure areas

The roles of ERS and Joint Emergency Team (JET) are distinct and different. ERS response is staff with social care skills and is relevant for people who continue to have recurrent falls despite all intrinsic and extrinsic risk factors being optimised. ERS will make onward referrals to other preventative and early intervention services relevant to that individual's circumstances. ERS does refer to JET and Out of Hours district nurses skin tears, wounds, urine test and pressure area concerns.

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

Extension of ERS provision

This proposal is to extend the remit of ERS to respond to urgent requests for adult social care from 111, Ambulance Service, GPs, District Nurses, EDT, acute hospital's turnaround services. Urgent social care would be for very short periods such as overnight, weekend or bank holiday provision and until a Reablement or Care Provider can pick up the care or the person can manage independently. There would need to be an exit arrangement in place prior to ERS accepting a referral for short term social care.

Referrals would be made by telephone only so that ERS can immediately inform the referrer whether they have the capacity to assist or not. The expectation is that the extended service could respond within an average of three hours of a referral. Referrals would be prioritised according to the presenting situation, so less urgent situations may wait longer than three hours.

This urgent social care service would be fully integrated with the existing ERS provisions of responding to telecare activations and assistance following a fall.

There are benefits for integrating the urgent social care and responding to alarm activations is that it gives maximum flexibility of responding in a timely manner, coverage of the whole geography and minimising down time for staff.

The extension of service provision included in this proposal is:

- To respond to additional Alarm Receiving Centres such as Lifeline 24 that has 1,300 customers and Age UK/PPP Taking Care that has around 900 customers
- Urgent short-term social care provision needed at request of GPs, District Nurses, Ambulance and 111 to prevent hospital admission where appropriate
- Urgent short-term social care provision to support rapid hospital discharges, prevent hospital admissions and prevent carer breakdown

The proposal is to increase current ERS provision by having one additional vehicle with two staff covering three shifts to operate across 24 hours a day.

Proposed Activity Levels

Estimation of call out rate based on population over 75 years (population stats for 2019)

	Cambridgeshire
Population over 75yrs	57,528
Calls per annum	6,079 (actual)
Calls per month	508 (actual)

Proposed increase in activity levels per month

Monthly activity split

	Cambridgeshire
Lifeline calls	85
Urgent social care	80
	165

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

The proposal is to increase provision of having one additional vehicle with two staff covering three shifts to operate across 24 hours a day. The next steps would be to recruit the staff required for the additional vehicle operating 24/7. This service is operational now although not yet at full capacity. It has temporary funding for the extension agreed with CCG in September 2021. However, the temporary funding will end March 2022. The request is for continuation of the extended service from April onwards.

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

This will have a positive impact on all people with protected characteristics, with a greater level of service provision to respond to urgent social care needs.

However, an Equality Impact Assessment (EqIA) will be developed to ensure this proposal is equitable in its aims and delivery and any potential adverse impacts on people with protected characteristics are mitigated against. This is to ensure CCC's decision-making is inclusive for staff and communities with protected characteristics in line with the Equality Act (2010) and Public Sector Equality Duty (section 149).

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

The Adults Positive Challenge Programme demonstrated cost savings for social care over the past two years in TECS and ERS. Although savings have been attributed to TECS a significant proportion is due to ERS in Cambridgeshire too. TECS received an investment of £327,414 for staffing and equipment over the two years. There was no corresponding investment in ERS although there has been an increase in ERS activity over these two years.

Cambridgeshire APC (Adults Positive Challenge) demonstrated £9.6 million savings over the last two years

	2019-20	2020-21
Cambridgeshire cost saving	£5,980,582	£3,663,863

Cost saving postponement of care

The modelling used in Cambridgeshire demonstrates that TECS and ERS can postpone the start of domiciliary care by 14.41 weeks and the start of a care home placement by 11.58 weeks. This is based on actual data accumulated over the past three years.

Cambridgeshire could cover their proportion of the costs by postponing 51 out of 1263 new individuals with domiciliary care packages and 23 out of 419 new care home placements. For Cambridgeshire to avoid double counting savings from the 2020-21 baseline ERS would have to take on responding to Lifeline 24 and PPP as new Alarm Receiving Centres. If stretch targets were agreed of 60 domiciliary care and 25 care home placements postponed this would deliver a net saving of £29.3K.

The rationale for the figures above considers:

- The increased activity in ERS year on year (except for the Covid year) shows that there is demand for the service. This is reinforced by the fact that there can be times when ERS cannot accept all the calls that come in at the same time.
- The robust calculator used for tracking savings in TECS and ERS established in the Adult's Positive Challenge (APC) programme
- The positive feedback on the difference that informal carers and alarm holders give on having ERS responding means that it has significantly reduced their anxiety and demand for domiciliary care. Similarly, where ERS makes multiple responses for some customers this is postponing the decision to move to a care home.
- Having ERS means that more people are agreeable to having a Lifeline – evidenced by the higher-than-expected recruitment rate for the Lifeline Service. More people with Lifelines and ERS increases the numbers of people postponing domiciliary care.
- Increased access to ERS urgent social care for up to 72 hours for GPs and primary care, 111, Transfers of Care, Reablement, Ambulance, Emergency Duty Team prevents a crisis in the community and escalation to a hospital admission. Most domiciliary care packages and care home placements commence after a hospital admission.

Benefits in quality-of-service provision

Although TECS and ERS cannot prevent people having falls, these services do prevent the complications of having a long lie. The complications of having a long lie after a fall are pressure sores, rhabdomyolysis, pneumonia, hypothermia, dehydration, shock and even death. Generally, ERS has a quicker response time than a low category Ambulance call for non-injury falls, minimising the complications of a long lie. A long lie can often lead to a hospital admission and discharge to a care home placement or large care package. This is supported by evidence from research¹.

¹ *Fleming J, Inability to get up after falling, subsequent time on floor and summoning help: prospective study in people over 90. BMJ 208, 337, a2227

Benefits for social care:

- Support for 111 option 3 to access an immediate adult social care response that operates 24/7
- Support for the Emergency Duty Team who can allocate calls to ERS especially out of hours
- Long term support for those who have a Lifeline with sensors and ERS. This is particularly relevant for those who live alone and have unstable conditions and need practical assistance on an unpredictable and irregular basis.
- Helping to maintain peoples' independence, wellbeing, and confidence to remain living at home, thus postponing the need for a move to sheltered, extra care or care placement.
- Helping to postpone the need for a regular care package by successfully meeting peoples' unpredictable needs.

Benefits for informal carers:

- Rapid access to personal care for the cared for person in an urgent short term or one-off situation giving the informal carer peace of mind if they are unable to continue their caring role. ERS can be part of the carer's 'What If' plan.
- Informal carers who may not be available to respond because they are at work or on holiday or unable to leave their home overnight to respond to a telecare activation, for example, if they are a single parent
- Informal carers who may be too frail themselves to assist with moving and handling for getting up from the floor.
- Provides peace of mind for family that live at a distance that their relative can easily summon help 24/7 and they will receive a skilled person response when it is needed.
- Some customers do not have any informal contacts they can nominate ERS to respond, and they would benefit from having a Lifeline and being able to summon help whenever it is needed. Having ERS enables more people to benefit from having a Lifeline and increases the uptake of this preventative offering.

There are also operational benefits for the extension to ERS:

- ERS already operates over 24 hours while most other care providers operate over extended daytime hours
- ERS has continued to operate throughout the Covid pandemic

*Tinetti ME, Lui W, Claus EB, Predictors, and prognosis of inability to get up after falls among elderly persons. JAMA, 1993,269(1), 65,70

- ERS has a culture of enablement and making onward referrals to other prevention and early intervention services.
- ERS has a single telephone number for taking calls that is accessible 24 hours a day
- ERS has access to any relevant social care history on Mosaic. This is especially useful when responding to silent calls or for access difficulties establishing that the person is at home and not on respite or admitted to hospital
- ERS has good processes in place to access Reablement and if needed an assessment for social care. Any history from the urgent ERS visits would be available on Mosaic to inform any statutory assessment, review, or period of Reablement.
- Greater flexibility, capacity, geographical coverage, and robustness for business continuity with the existing ERS provision rather than a stand-alone commissioned service.

The combination of having a Lifeline and the Enhanced Response Service can meet unpredictable and ad hoc needs for care and support is one of the main services that postpones the need for health and social care services. It enables people to continue living in their own home longer with confidence that help is available as and when they need it. These services provide reassurance and peace of mind to the person and their informal carers.

People with Lifelines reduce demand on both health and social care. Informal carers respond to around 85% of activations when alarm holders are needing assistance thus avoiding calls to both health and social care.

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

Risk	Mitigation	RAG	Overall responsibility
1. Difficulty recruiting staff with suitable experience in care, especially to cover night shifts	Plan an effective social media campaign to attract applicants. Plan a thorough induction and shadowing with experienced staff. Consider secondments from current teams to new team.	Green	ERS
2. Time needed to recruit the Alarm Receiving Centres into using ERS is likely to be 3-6 months to meet all the GDPR requirements	Support ARCs with prepared template Information Sharing Agreements and template letters to send to their existing Customers informing	Green	ERS

	them of the new mobile responding service. Prepared presentations to Call Operators of ARC to implement use of new service.		
3. Level of activity does not reach the numbers in the business case. No demand modelling data available to estimate the numbers of requests for urgent social care.	Demand modelling for Lifelines has been based on activity levels shown in the existing ERS and applied it proportionately by population size. Communication strategy for launch of service with internal staff groups and targeted external agencies. Manage expectations of managers that numbers will be slow to build up at start of service.	Green	ERS
4. Urgent social care is a new and distinct service offering that is different from responding to Lifeline activations. No systems currently in place to capture data	Implementation plan is inclusive of setting up recording systems in Mosaic for urgent social care and that Business Intelligence include these in the Inform reports. Lifeline activations captured in Mosaic	Green	ERS

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

In scope is extending the remit of the Enhanced Response Service to extend the availability of the service and capacity.

Business Planning: Business Case proposal

Project Title: Expanding Support for Informal Carers

Committee: Adults and Health Committee

2022-23 Investment amount: £253k

(£273,420 would be recurrent costs required after the first year). There is the potential to re-invest £70k of savings already made against the Carers Direct Payment budget into this proposal. This would reduce the overall investment requirement to £253,420 in Year 1 and £203,420 thereafter.

Brief Description of proposal:

This proposal seeks investment into a range of areas which will provide a range of additional support to carers, over and above the current commissioned and operational support services. Some of these services are jointly funded alongside NHS Partners and enable carers to identify their support needs, better manage their own wellbeing and maintain their caring role for longer delaying the need for individuals requiring higher cost and longer-term adult social care.

Date of version: 23 November 2021

BP Reference: A/R.5.010

Business Leads / Sponsors: Will Patten, Director of Commissioning

1. Please describe what the proposed outcomes are:

The Care Act 2014 defines a carer as someone who helps another person, usually a relative or friend, in their day-to-day life. This is different from someone who provides care professionally or through a voluntary organisation.

Carers are valuable to our society but providing care can have an impact on carers in terms of their own health, education, ability to remain employed, relationships and social life. The Care Act 2014 requires local authorities to take a preventative approach in providing support to a wider group of carers. It also introduced the right of carers to have a statutory assessment to identify their need for support and where those needs meet the national eligibility criteria, to receive support to meet those needs from the local authority.

Estimates from the 2011 census data indicate there were over 60,000 carers in Cambridgeshire. Although most are adults, there are 4,208 carers in Cambridgeshire who are under the age of 25. Research tells us that the number of family and unpaid carers who provide care and regular support to another individual will increase over the next ten to fifteen years. This is largely because people are living longer, so we expect to see this number to have grown when the 2021 Census Data is released in March 2022.

This proposal seeks investment into a range of areas which will provide a range of additional support to carers, over and above the current commissioned and operational support services. Some of these services are jointly funded alongside NHS Partners and enable carers to identify their support needs, better manage their own wellbeing and maintain their caring role for longer delaying the need for individuals requiring higher cost and longer-term adult social care.

The areas of investment outlined below will deliver the following outcomes to support informal carers in the caring role:

- Short-term formal care can be provided in an emergency preventing the need for more costly interventions
- Carers are more resilient and can maintain their caring role
- Carers can take a break from their caring role to support their own wellbeing
- More Carers are identified and able to access sources of support

These outcomes will be achieved through investment in the following areas:

- a. Our commissioned carer support provider has reported an increase in activations of emergency support over and above their capacity to respond. This led to an increase in support provided by the council's Emergency Response Service. By increasing the capacity of the carers support provider, they will be able to provide urgent support to service users in an emergency as part of a preventative, contingency planning approach to meet rising demand.

- b. The Listening Ear Service provides counselling, wellbeing, and emotional resilience support to enable carers to maintain their caring role and prevent breakdown. There is currently a significant waiting list for this service indicating that demand is exceeding capacity. By increasing capacity of the Listening Ear Service, the waiting list will be reduced, and carers will receive the support they need which could avoid carer breakdown and a potential care and support package.
- c. To maintain their wellbeing, it is recognised that carers can take a break from their caring role and do something that they enjoy. This can help to prevent carer breakdown. A successful pilot saw volunteers providing company for the person being cared for to allow the carer to take a short break. To enable countywide roll-out of Short Breaks for Carers, support for the recruitment of volunteers is requested.
- d. Building on recommendations from a successful social media campaign earlier this year, a further, specific media campaign that targets hidden carers, promotes the support and resources available for carers is proposed. Analytics will identify the impact as well as the number of people reached. Data from our commissioned providers can be measured to monitor if hidden carers are seeking support.

All the above aligns to Council priorities; protecting and care for those who need us, ensuring a good quality of life for everyone and placing communities at the heart of everything we do. Through volunteer programmes and community-based offers such as the Short Breaks for Carers there will be increased social value through this proposal which will increase community cohesion through volunteer led services, links to community assets and support local economies.

The proposals which require on-going investment build on work that is currently being carried out through the Council's commissioned provider affording an opportunity to expand either capacity or geographical coverage. The structures are in place for these proposed activities to be quickly rolled out and link to the preventative support that is already offered through the providers contracted service and provide a better route to successful delivery of the proposed outcomes than delivery through the Council's own operational structures.

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

Strategy

The proposal directly links to the All-Age Carers Strategy 2018-2022, developed by Cambridgeshire and Peterborough Local Authorities and the Clinical Commissioning Group, and will meet the following key strategic intentions outlined in the strategy:

Strategic Intention 2: Early identification of all carers

Strategic Intention 3: Access to information, advice, and support

Strategic Intention 4: Carers work/training/education – life balance

Strategic Intention 6: Reduced breakdown of care at home

Consideration of In-House Provision

The Council also strengthened their approach to support for Carers and their statutory duties under the Care Act by establishing the Carers Support Team in 2008. In 2019 the responsibility to carry out Statutory Carer Assessments for Carers not known to Adult Social Care as well as providing support and signposting for this cohort of carers was brought back in-house. This had previously been carried out by commissioned providers but bringing this service in-house, linked with Adult Early Help and compliant delivery to the Care Act duties.

The preventative element of the service continues to be delivered as a commissioned services as this approach brings with it a level of flexibility and well-established links into a wide range of services and approaches within local communities. It also offers best value for money.

Performance and Impact

The work undertaken to improve support for carers has had a positive impact on both local and regional performance. Regionally, the approach Cambridgeshire has taken within this area has attracted positive attention and we regularly engage with other local authorities to share our experience and approach. This is evidenced from regional comparison information which indicates the number of carers assessed and/or reviewed within Cambridgeshire has increased from 180 to 556 between 2019/20 and 2020/21. We currently rank second highest in the region behind Essex.

Work was undertaken through the Adults Positive Challenge programme to focus on support for carers. The workstream looked at both operational and commissioned services and the programme of work supported progress towards achieving the following outcomes:

1. Carers can balance their caring roles and maintain their desired quality of life
2. Staff have the knowledge and ability to have the right conversations with carers, and direct carers towards the right level of support to meet their needs
3. Carers have access to the right tools and information to enable them to manage their health and wellbeing and support them to maintain their caring role
4. The right community-based support is available to carers across all client groups
5. All carer reviews are in date

In addition to this, we have reduced the level of spending on one-off Direct Payments through re-directing carers to alternative support to achieve better outcomes than a limited monetary sum. The carers' direct payment budget delivered an £80k saving on a £150k budget in 2020/21. Prior to 20/21 this budget had already made savings of £516k, with £466k of this being made permanent through budget reductions.

Feedback from carers themselves has also been positive and some key examples have been included below:

“I felt that I was the one that mattered as all other contact with other groups/agencies were focused solely on my husband whom I care for.”

“The advice and help I received... helped me to see that it wasn't wrong of me to want time for myself. Discussed ways of helping me cope with being full time carer to my wife and still manage to enjoy life whilst not having to feel depressed and alone but also be refreshed - ready for the challenges ahead”

Whilst Cambridgeshire have achieved significant outcomes through the work undertaken to improve support for carers, recent findings from national reports following the COVID-19 pandemic highlight there is still more work to do.

Firstly, work is needed to ensure carers are considered effectively as part of developing hospital discharge processes. A national survey undertaken by Carers UK in relation to Discharge to Assess Hospital processes indicated that over half of carers providing significant care were not involved in decisions about discharge, most carers were not assessed, and two thirds did not feel listened to about their willingness and ability to care.¹

In addition, COVID-19 has had a disproportionate impact with carers with surveys revealing that 81% of carers are providing more care than they had before lockdown, with 78% reporting the needs of the person they are caring for have increased. 58% of carers have also seen their physical health impacted by caring through the pandemic, while 64% said their mental health has worsened.²

This highlights the importance of continuing to improve and expand upon our Carers Support offer.

3. Has an options and feasibility study been undertaken?

Please explain what options have been considered.

The following papers by various support agencies provides evidence on what works for supporting carers:

- [Spotlight on a Carers Journey - National Development Team for Inclusion](#)
- [Assessing Carers Needs: A Guide – Skills for Care and The Carers Trust](#)
- [Supporting Young Carers and Their Families – The Children's Society](#)

Cambridgeshire recognises that a preventative approach is key to supporting carers and this forms a central part of our approach to adult social care. We recognise the important role carers play and have proactively established approaches which enable early identification of the needs of carers and how the council and commissioned services can maximise the physical and mental wellbeing of carers.

To date, we have focused on the following areas:

¹ [21 09 10 Carers Trust carers-experiences-of-hospital-discharge-report-2021.pdf](#)

² [Caring Behind Closed Doors - Carers UK](#)

- Ensuring carers are identified early, and that meaningful conversations are carried out, thereby preventing carers from reaching crisis point and breakdown.
- Ensuring carers have access to information, tools, and support to enable them to manage their health and wellbeing and support them to maintain their caring role
- Ensuring support is available in the wider community, from commissioned services and, where required, from the Council to enable carers to balance their caring roles and maintain their desired quality of life
- Identification of and engagement with 'hidden carers' who are people who undertake a caring role and do not necessarily relate to the label of 'carer' but nevertheless may require or benefit from some support.

A range of activities have been undertaken to make improvements in support for carer across these areas. These have been highlighted below:

- Strengthening conversation with carers - We have delivered a new approach where carers are supported flexibly with a variety of support opportunities. The use of strengths-based conversations has been key to this approach.
- Commissioning an All-Age Carers Support Service – The new service commenced in August 2020 and provides support to a range of carers of all ages across three providers. The new service improved consistency, with emphasis on local needs and ease of access for local carers. It provides a range of support activities which aim to increase the early identification of carers, provide support to help carers, including Young Carers, to maintain their caring role and to prevent carer breakdown. The service also provides support to carers, who are unable to carry out their caring role due to an emergency for up to 72 hours.
- Young Carers – The council, working with its commissioned provider, Centre 33, is focusing on several initiatives to support Young Carers. Centre 33 is working with mental health services around support for Young Carers who are supporting family members with eating disorders, a caring role which has significantly increased during the pandemic. Carer Champions are being rolled out within schools to improve recognition and support of Young Carers within the school environment. 16+ Transitions Assessment and Support has been developed to ensure a smooth transition from young to adult caring responsibilities and is being viewed as an example of best practice in other local authorities who are keen to implement similar systems
- Sharing Best Practice and Awareness Raising - A range of activities are undertaken within this area. Key examples include development of a Carers Brochure to highlight good practice to adult social care practitioners; active participation in Carers Week annually including radio announcements and other published materials. We recently ran a hidden carers campaign to seek to direct people towards available support, information, and advice.
- Think Communities - Carers are a key priority under the Think Communities programme. A short break for carers pilot is currently being delivered by Caring Together. Work is underway to achieve the Carers Employer tick for Cambridgeshire County Council indicating we are an employer of people with a caring responsibility. The Community Engagement Vehicle is in regular use

across all the districts and the team are refining their approach to feedback key themes and community support ideas in relation to carers.

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

To achieve the elements contained within the proposal there are several actions which will need to be taken. There have already been discussions with the relevant internal teams and commissioned providers who would be responsible for the delivery of the outcomes. The stakeholders involved include:

- Caring Together – commissioned provider of Carer Services
- Think Communities
- Communications Team
- Adults Positive Challenge Carers Workstream – Operations, Contracts, Commissioning, Finance and Business Intelligence

There will also be opportunities to link with the work being carried out under the Happy at Home programme as well as health partners through Primary Care Networks within each of the localities seeking opportunities to pool funding and resources wherever possible. The current pilot for Short Breaks for Carers is jointly funded with the Primary Care Network (PCN) in East Cambridgeshire and further opportunities would be explored with PCNs in other localities to determine their priority areas and the potential for investment into this area of support thus reducing the Council's overall contribution.

To deliver against the proposal, the following activities will be undertaken:

Activity/Task	Responsible	Timescale
Recruitment and training of 3 FTE additional workers to support response to contingency plans	Caring Together	Within 4 months
Recruitment of 1FTE counsellor to increase capacity of Listening Ear Service	Caring Together	Within 4 months
Recruitment and training of Volunteer Co-ordinator for each Locality to support delivery of Short Breaks for Carers	Caring Together	Within 4 months
Campaign to recruit volunteers in each locality to deliver short breaks for carers	Caring Together/Think Communities	Within 6 months
Training and support of volunteers to deliver short breaks for carers	Caring Together	Within 8 months

Hidden Carers Media Campaign (potential to link to winter campaigns)	Comms Team	To start within 6-8 weeks
Awareness raising of support available	Comms Team/Caring Together/Think Communities/Operational Teams	Throughout
Analytics of media campaign success	Comms Team/Caring Together	Following Media Campaign

Commissioners will commission the services outlined directly from the current provider under a variation to existing arrangements. The Carers Workstream will oversee the delivery of the additional support/areas of investment. The actions required will be incorporated into the Carers Action Plan and will be monitored against indicators of success to ensure the activity meets the required outcomes.

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

A carer is anyone, including both children and adults who looks after a family member, partner or friend who needs help because of their illness, frailty, disability, a mental health problem or an addiction and cannot cope without their support. Therefore, the expansion of the Carers Support could actively be supporting any of the following protected characteristics:

- Age
- Disability
- Pregnancy and maternity
- Poverty
- Rural Isolation
- Race
- Sexual orientation
- Gender-reassignment (including intersex, transgender and non-binary people)
- Religion
- Marriage and civil partnership

An Equality Impact Assessment has been developed to ensure that this proposal is equitable in its aims and delivery.

6. What financial and non-financial benefits are there and how will you measure the performance of these? Are there any dis-

benefits? These **MUST** include how this will benefit the wider internal and external system.

The total investment required to carry out all the activities outlined in the proposal is £323,420 in year 1 and then £273,420 recurrently. The investment required for each of the individual elements is shown below:

Investment Opportunity	Year 1 Investment	Recurrent Investment
Additional 24/7 provider capacity (3 FTE rapid responders) to support contingency planning	£185,000	£150,000
Additional capacity (x1 FTE qualified counsellor) to support Listening Ear Service	£50,000	£50,000
Roll-out of Short Breaks for Carers	£73,420	£73,420
Media Campaign to target hidden carers	£15,000	-
Total Investment	£323,420	£273,420
Offset Amount	(£70,000)	(£70,000)
Investment Required	£253,420	£203,420

Of the investment identified above £273,420 would be recurrent costs required after the first year.

There is the potential to re-invest £70k of savings already made against the Carers Direct Payment budget into this proposal. This would reduce the overall investment requirement to £253,420 in Year 1 and £203,420 thereafter.

Financial Benefits

Financial benefits can be summarised under the following areas:

Economic Contribution of Informal Carers

Using Census data relating to the provision of unpaid care Carers UK and Leeds University estimated that, nationally, Carers make an economic contribution of £134 billion per year. They also estimated the value of Carers' contribution by local authority; looking at the number of Carers and estimating the cost of replacement care for the hours they provide. In Cambridgeshire and Peterborough, the value of Carers contribution in 2011 was estimated at £955 million.

Cost Avoidance

Analysis of care and support plans indicates that, with better support, carers can maintain their caring role. A snapshot capturing the impact of current practice in operational teams indicated cost avoidance of ~£2.4k per week for the interventions implemented during the snapshot period (1 month). Were we to assume that the snapshot month were typical of all months and that an intervention can prevent the need for escalation of someone's care needs for 3 months, we could say that current practice delivers preventative savings of ~£375k per year. In addition to this, our internal Carers Support Team supports carers caring for individuals not known to

adult social care and helps to prevent the requirement for statutory services. Our externally commissioned carer support providers also contribute to maintaining people within a caring role and avoided cost to the local authority.

Projected Cost Avoidance Savings	Cost Avoidance
Benefits of supporting carers to maintain their caring role through a preventative and are therefore not known to the Council	£210,000*
Benefits of increasing capacity to support carers in an emergency as part of an established contingency plan	£9143**
Total Projected Cost Avoidance:	~£219,143 per annum

*Caveat: Initial Estimate: Further work is required to verify this assumption using an agreed methodology and drawing on information from commissioned providers, Carers Support Team and Adult Social Care data to determine care packages resulting from carer breakdown.

**Caveat: Currently only 1 quarter of data available so cost avoidance analysis is based on limited information over a short period of time

Costs to ASC – Emergency Support

Increasing the capacity of the commissioned provider to deal with emergency situations and provide support for up to 72 hours as part of a carers contingency plan can also provide avoided cost to the Local Authority. Currently only two activations of contingency plans can be dealt with simultaneously. There are 3692 What If (contingency) plans registered with the provider, 120 new plans were registered in the first quarter of 21/22 and this provision continues to be seen as an important part of planning for emergencies with carers.

In Q1 of 21/22 44 emergency plans were activated and 50% of these plans did not have any nominated contacts (family/friends) who could support the cared for person as part of the response to the emergency. Eight (15%) plans could not be responded to within the quarter due to the lack of provider capacity.

Using verified proxies³ for the cost of formal interventions (e.g. respite or care packages required to support and safeguard should the informal carer not be available), there could be a potential £2285.82 in Q1 of avoided cost; annually this would amount to £9143.28. However, we currently have only had Quarter 1 of 21/22 data available which provides information across the summer months, and we can make a reasonable assumption that there is likely to be a higher incidence of emergency support required for carers over the coming winter period.

A further cost avoidance rationale can be applied through ensuring that better support for carers of individuals not yet known to Adult Social Care will delay the requirement for commissioned formal care. Using an average cost of care of £350 per week and an assumption that at least 60 carers will be able to maintain their

³ (source: Innovate and Cultivate Adult Social Care Costings)

caring role by 10 weeks, delaying the need for adult social care a cost avoidance figure of £210,000 can be applied. This is a small number of carers based on over 700 active carers seeking support from Caring Together, the commissioned provider, in Q1 of 21/22. Further work is required to verify this assumption using an agreed methodology and drawing on information from commissioned providers, Carers Support Team and Adult Social Care data to determine care packages resulting from carer breakdown.

Non-Financial Benefits

Further non-financial benefits can also be attributed to the proposal through the delivery of additional support to carers.

Opportunity	Benefits
Additional provider capacity to support contingency planning	<ul style="list-style-type: none"> • Meet increased demand • Maximise the use of contingency plans • Prevent carer breakdown • Reduce need for temporary care packages, hospital admission or reablement
Additional capacity to support Listening Ear Service	<ul style="list-style-type: none"> • Reduce waiting list for support • Prevent carer breakdown through earlier intervention • Prevent carer/cared for from requiring statutory intervention
Roll-out of Short Breaks for Carers	<ul style="list-style-type: none"> • Flexible option for carers to take a break from their caring role on a regular basis • Initial positive feedback from Carers accessing the pilot service in East Cambs
Media Campaign to target hidden carers	<ul style="list-style-type: none"> • Previous campaign successful in reaching a wide audience and increasing awareness • Can be targeted to increase awareness and support offered over acute period of winter pressures

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Additional provider capacity to support contingency planning - Demand does not increase and resource is not used	Flexible approach to recruitment and use of resources. Continue to promote the use of What If plans	Amber	Commissioning/Provider

Additional capacity to support Listening Ear Service - Only anecdotal evidence of impact available at this stage	Provider to gather further evidence of impact Continue to monitor the outcomes delivered as programme progresses	Amber	Commissioning/Provider
Roll-out of Short Breaks for Carers - Reliance on volunteers to meet demand	Engagement with local college/HE/communities to recruit volunteers Targeted campaigns in each Locality	Red	Think Communities/Provider
Roll-out of Short Breaks for Carers - Evidence of impact of pilot in East Cambs not yet available	Provider to gather further evidence of impact Continue to monitor the outcomes delivered as programme progresses	Amber	Commissioning/Provider
Media Campaign to target hidden carers - Final report from previous campaign not yet available	Midpoint Analytics from previous campaign available Ensure final report is circulated	Green	Communications Team
Media Campaign to target hidden carers - Clear analytics required to measure impact	Clear analytics and impact measurements to be defined at the outset of the campaign	Amber	Communications Team/Think Communities/Provider

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

The following interventions are in scope for the proposed investment:

- Additional provider capacity to support ability to respond to contingency plans
- Additional capacity to support Listening Ear Service
- Roll out of short breaks for carers
- Media campaign to target hidden carers

Outside of scope are the following areas:

- Activities of the commissioned provider as defined by their service specification
- Actions identified under the Carers Action Plan as part of the Adults Positive Challenge Programme or Think Communities delivery
- Support for Carers through Carers Assessments and Carer Conversations

Business Planning: Business Case – Investment proposal

Project Title: Implementation of the Real Living Wage

Committee: Adults and Health Committee

2022-23 Investment amount: £1,187,000

Brief Description of proposal:

Implementation of the Real Living Wage to Adult Social Care staff which will include both internal council staff and third-party providers. This will commence in 2022/23 and will be phased in over a 2–3-year period. To ensure that we do this in an equitable way across the market, we are proposing to roll out incremental increases every six months to close the gap from the current rates to the Real Living Wage over a two-year period.

The total permanent investment required on a Business Planning basis is forecast as below:

2022/23	2023/24	2024/25	2025/26	2026/27
1,187k	4,408k	3,619k	409k	543k

Date of version: 23 November 21 BP Reference: A/R.5.011

Business Leads / Sponsors: Will Patten, Director of Commissioning

1. Please describe what the proposed outcomes are:

The Real Living Wage is a minimum income standard which is based on what people need to earn to maintain an acceptable standard of living within the UK. It is calculated on an annual basis by an independent body called the Living Wage Foundation which is made up of leading living wage employers, trade unions and academic partners amongst others. The current Real Living Wage Rate is £9.50 per hour.

Delivery of the Real Living Wage is expected to achieve the following outcomes against the Councils key priorities:

- **Protecting and caring for those who need us**
For some time now the adult social care workforce has struggled to increase capacity in line with the growth in demand for services. This impacts on the quality of services received the level of choice and control people can exercise in identifying services to meet their support needs and the cost of services to the Council. Recruitment and retention challenges are a major contributing factor to this due to comparatively low wages, high levels of competition from other sectors and lack of an established and formalised career pathway. Investing in the sector through ensuring the workforce is paid the Real Living Wage will help to tackle these issues and facilitate growth within the sector.
- **Ensuring a good quality of life for everyone through addressing a key cause of local social mobility challenges**
As a major local employer and purchaser of services, the Council can choose to play a significant role in addressing social mobility challenges experienced amongst the lowest paid workforce in helping to safeguard this workforce from in-work poverty and ensure they are able to live a healthy life, particularly important given the high cost of living within Cambridgeshire.
- **Communities at the heart of everything we do**
An increase in wages will inevitably lead to an increase in spending activity boosting the local economy and community. This will not only have economic advantages but will also have a positive impact on community cohesion and engagement with adult social care, linking to the placed based and think communities' approach.

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

Strategies and Policy

Introduction of the Real Living Wage forms a key priority of the new joint administration within Cambridgeshire who are seeking to drive up the quality and dignity of care work and services, integrating the Council's social value approach as well as improve training, career development, pay and conditions for frontline care workers. This includes a phased implementation of the Real Living Wage.

As an organisation, the Council are also actively exploring new and more sustainable approaches to meeting growing demand for adult social care services. This includes development of more localised, placed based approaches evident through Adult Social Care and Think Communities priorities. The aim is to improve the quality, efficiency and sustainability of adult social care provision whilst also giving people receiving support maximum choice and control over who and how it is delivered. This will ensure they are enabled to remain as independent as possible for longer. However, the impact of these approaches will be limited if workforce capacity to implement and deliver them is restricted. The Real Living Wage could help to address this challenge.

Alignment with Existing Projects

The Real Living Wage could also positively align and impact on several specific projects currently being progressed including development of a placed based home care model, roll out of the 'happy at home' pilot which is looking at different approaches to delivering support in local communities, as well as increasing direct payments and individual service funds which require an active personal assistant workforce to be available.

Evidence and Feedback

Skills for Care – Scope and Workforce

The latest Skills for Care workforce statistics indicate that there were an estimated 15,000 jobs in adult social care in Cambridgeshire, split between local authorities (7%), independent sector providers (87%) and jobs working for direct payment recipients (6%). Skills for Care estimate that 8,600 of these jobs are direct care workers, often in receipt of the lowest salaries. As of March 2020, this data indicated that Care Workers within the Eastern Region were paid an average rate of £8.73 per hour. This is 77p per hour lower than that Real Living Wage.

Skills for Care estimate that the staff turnover rate in Cambridgeshire was 36.6%, which was higher than the regional average of 32.9% and higher than England, at 31.9%. Pay differentials was identified as one of the main reasons for high turnover. Implementing the Real Living Wage could therefore have a positive impact on capacity as well as recruitment and retention.

The Real Living – Research on Impact

The Real Living Wage Foundation have undertaken a survey of all organisations currently accredited for roll out of the Real Living Wage:

- 93% of those surveyed reported they had gained as a business after becoming a Real Living Wage employer.
- 86% of respondents reported that Living Wage accreditation had enhanced their organisation's general reputation as an employer.
- 8% of large employers also reported that following accreditation staff motivation was increased.

Further evidence and statistics can be found here: [The Living Wage is Good for Business | Living Wage Foundation](#)

Feedback

Locally, the Council are aware from our interactions and engagement with providers that recruitment and retention challenges are increasing across the market. This often

results in increased use of agency staff and lack of continuity and consistency for those receiving services. The EU Exit and salaries offered within other sectors has a major impact on this.

Feedback from other Local Authorities who have implemented the Real Living Wage has been positive, advising it has:

- Helped to support the market during the COVID-19 pandemic to attract and retain staff within the sector, and to recognise the valuable work undertaken by the social care workforce during the pandemic.
- Improvement in the quality of services and motivation of the workforce
- Improvement in recruitment and retention within and across sectors, including better quality applicants being received by providers
- Improved supplier relations

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

Several options for implementing the Real Living Wage have been considered and outlined within the table below:

Option Description	Advantages	Disadvantages	Investment
1. Real Living Wage Accreditation	<ul style="list-style-type: none"> Positive reputational impact associated with accreditation and support from the Living Wage Foundation to roll out approach Full realisation of benefits outlined above The Council can undertake a light touch review of third-party contracts within the first 12 months to determine level of investment required and implement the changes with a voluntary scheme with providers. 	<ul style="list-style-type: none"> Significant investment in both services and capacity to implement required within 2-3 years. Neighbouring Councils and local health partners may not engage in the approach limiting impact. This could impact on the cost of care from self-funders. Providers will need to fund differential pay increases to retain staff who are on higher grades. 	<p>Estimated Initial Total: £8,501,000</p> <p>Estimated upfront investment of £8m spread over a 2–3-year period for adult social care. Further investment will be required to service future annual inflation against the real living wage*</p> <p>In addition to this a £501k investment in capacity over the 3- year period would be required to implement the approach. This includes on cost and inflation.</p>
2. Internal roll out of the Real Living Wage to Council employed staff and third-party providers over a 4–5-year period with Real Living Wage Accreditation being explored later	<ul style="list-style-type: none"> Benefits associated with the Real Living Wage will be immediately applied to direct employees of the Council Spreading the cost of implementing the Real Living Wage would have a positive impact on cashflow and the management of pressure. The Council can undertake a detailed review of third-party contracts within the first 12 months to determine level of investment required and link the investments to when contracts are naturally renewed. Work can be undertaken with neighbouring Councils and local health partner to seek engagement prior to accreditation 	<ul style="list-style-type: none"> No accreditation or support from the Living Wage Foundation to roll out approach within the first 2-3 years. Benefits will take longer to realise. Investment in additional capacity to implement will be required over a longer period. Providers will need to fund differential pay increases to retain staff who are on higher grades. 	<p>Estimated Initial Total: £8,568,000</p> <p>Estimated upfront investment of £8m spread over a 4-5year period for adult social care. Further investment will be required to service future annual inflation against the real living wage*</p> <p>In addition to this a £568k investment in capacity over the 5- year period would be required to implement the approach. This includes on cost and inflation.</p>

	<ul style="list-style-type: none"> Marketing of the approach being undertaken will still have a positive reputational impact even without immediate accreditation 		
3. Maintenance of the Real Living Wage to Council employed staff only - no Real Living Wage Accreditation	<ul style="list-style-type: none"> Benefits associated with the Real Living Wage will be immediately applied to direct employees of the Council by implementing supplement payments No additional investment required from Adult Social Care. Can be implemented within short timescales. 	<ul style="list-style-type: none"> Benefits outlined will not be fully realised Limited reputation impact as will only be applied internally No accreditation or support from the Living Wage Foundation This will not challenge or address the nationally agreed pay scale 	£25k investment has been ringfenced by the Council. Nil impact within Adult Social Care Budgets.
4. Maintenance of the Real Living Wage to Council employed staff and third-party contracts for Adult Social Care only - no Real Living Wage Accreditation	<ul style="list-style-type: none"> Benefits associated with the Real Living Wage will be immediately applied to direct employees of the Council Limit investment required from the Council as a whole Partial achievement of benefits outlined above, particularly in relation to recruitment and retention 	<ul style="list-style-type: none"> No accreditation or support from the Living Wage Foundation Significant investment from adult social care in both services and capacity to implement required within 2-3 years Neighbouring Councils and local health partners may not engage in the approach limiting impact. This could impact on the cost of care from self-funders. Providers will need to fund differential pay increases to retain staff who are on higher grades. Implementing the Real Living Wage within adult social care alone could create inequity across the range of sectors supported by the Council Benefits outlined will not be fully realised Limited reputational impact 	Same as Option 1 with no additional investment required from the outstanding areas of spend within the Council

*Over the past 10 years the gap between National Living Wage and Real Living Wage has narrowed, with NLW (National Living Wage) increasing by 4.1% per year on average and RLW increasing by 3.1% per year on average. If this move towards convergence continues then after the initial investment to implement the Real Living Wage, the subsequent additional investment each year to maintain RLW will be less than the annual increase in budget to maintain NLW rates.

It has been recommended that Option 4 is progressed, but with a phased implementation to manage the level of investment required commencing in 2022/23 and phasing this over a two-to-three-year period. To ensure that we do this in an equitable way across the market, we are proposing to roll out incremental increases every six months to close the gap from the current rates to the Real Living Wage. The level of investment proposed includes the additional commissioning/contract management resource to do this as highlighted within the table above.

Whilst this option will not provide the Council with immediate accreditation from the Real Living Wage Foundation, adult social care services make up 33% of total spend including schools and will still therefore have a significant impact on outcomes. This will also enable the Council to evaluate the impact of delivering the Real Living Wage, including consideration of social value to inform approaches taken across the remainder of the Council.

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

To implement this approach a targeted Project Group will need to be established and attended by Contract Management, Commissioning, Finance, commissioners of health services and a Project Manager from the BID (Business Improvement & Development) Team. The project scope, plan and market engagement activities will need to be developed. This will ensure that there is a clear and costed action plan in place with associated governance, market engagement and risks/issues accounted for.

To enable this to take place, recruitment to additional capacity will need to be progressed as a priority.

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Recruit to additional posts	December 2021	April 2022	Commissioning/ Contract Management
Identify BID Project Management Capacity	December 2021	April 2022	Commissioning/ Contract Management
Establish Project Group and Confirm Membership	January 2022	April 2022	Project Manager
Complete Project Plan and Management Documentation	April 2022	May 2022	Project Group and Project Manager
Agree Social Value Portal Measures to be adopted	April 2022	May 2022	Project Group and Project Manager

Develop Market Engagement Plan	April 2022	June 2022	Project Group and Project Manager
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A costed schedule for roll out of the Real Living Wage to all adult social care providers will need to be developed as part of the project plan by September 2022 for implementation.

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

This proposal will apply to all adult social care services which cover all protected characteristics. Implementation of the Real Living Wage will have a positive impact on the adult social care workforce currently earning below the current Real Living Wage standard of £9.50 per hour and in doing so could increase their social mobility, quality of living and ability to continue undertaking their role.

Improved retention rates of the adult social care workforce could in turn lead to a positive impact on those in receipt of care, with experienced staff and better continuity of care.

An Equality Impact Assessment (EqIA) has been developed to ensure this proposal is equitable in its aims and delivery and any potential adverse impacts on people with protected characteristics are mitigated against. This is to ensure CCC's decision-making is inclusive for staff and communities with protected characteristics in line with the Equality Act (2010) and Public Sector Equality Duty (section 149).

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

Financial Benefits

The Council currently spend just over £193m on adult social care provision. A substantial proportion of this spend funds services which operate using a lower-than-average paid workforce who often receive the National Living Wage rather than Real Living Wage. Increasing the income for this cohort will increase their economic activity generally but this cannot be quantified at this stage and will not result in a direct return to the Council.

The project group will aim to work with procurement and the market to identify measures of social value that could potentially produce a social value return on investment as part of the process.

Non-Financial Benefits

However, there are significant non-financial benefits to both the Council and individuals who receive adult social care services:

- **Improved recruitment and retention**
Allowing providers to expand capacity to meet growing demand. It will enable the Council to work with health partners and adult social care providers to create a 'career in care' which is more attractive and creates longevity – less people waiting for domiciliary care, increase in the number of people supported by Personal Assistants through Direct Payments, reduction in the use of agency staff and staff turnover across care settings as well as the creation of employment opportunities.
- **Social Value**
As a major employer and commissioner of services, the Council can positively impact on in-work poverty and social mobility challenges often arising amongst the lowest paid segments of the adult social care workforce. This will not only improve the quality of their lives but will increase their spending levels in turn boosting local communities and economy. This is particularly important given the inflated cost of living within Cambridgeshire. The commitment to use the Real Living Wage will also stimulate the development of smaller, more local enterprises which will have a similar impact – local increase in microenterprises and small businesses, identified TOMS from the Social Value Portal.

Examples of this include:

- **Improved health and wellbeing:** Low income has been found to have a direct impact on the conditions into which we are born, grow, live, work and age – which result in unfair and unjust inequalities in length and quality of life. Addressing income levels so they reflect the cost of living rather than surviving has a positive impact on this. It enables people to become more active, to undertake and become more productive in employment, it enables parents to access more opportunities for their children thereby improving the quality of their life.
- **Wider economic value:** At a basic level, the Real Living Wage enables people to engage to wider communities and leisure activities like going out for dinner, joining community groups, classes and or support. It enables them the space to consider alternative training or business opportunities. Coupled with the right support, this could not only result in increased development of small business contributing to wider community outcomes and priorities but has economic benefits too. Research undertaken by an Independent Think Tank called the Smith Institute has identified that if 25% of low paid workers were moved to National Living Wage this would produce a return of £1.5bn to the local economy.¹

¹ [The Living Wage Dividend: maximising the local economic benefits of paying a living wage](#)

- **Quality Improvement**

Research has shown improved motivation and morale amongst employees ². This is critical when delivery adult social care services to people who are often at the most vulnerable stages of their lives – Reduction in quality concerns across various categories, improvement in local CQC (Care Quality Commission) Ratings.

- **Positive Reputational Impact**

Positive reputational impact through enabling the Council to promote our status as a Real Living Wage employer for adult social care services and encouraging wider changes through procurement of services. This is also likely to improve relations between the Council and the local employers.

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Recruitment to additional capacity required to implement the Real Living Wage delaying implementation	Commence recruitment process prior to the start of the financial year	Amber	Commissioning and Contract Management
Implementing the Real Living Wage could erode the pay differentials between staffing grades if the higher grades do not receive a proportionate increase. This could impact on financial projections and assumptions used	Early audit of ASC independent sector provider salaries and robust engagement with the market	Amber	Project Group
At present, more specialist services within areas such as Children's Social Care and Learning Disabilities attract staff through offering wages over and above the national living wage. Implementing the Real Living Wage across the sector could lead to staff leaving to work in other, less challenging areas	Close contract monitoring and communication with these services to monitor risk throughout the phased roll out	Amber	Project Group

² Henry E, Nash D and Hann D, The Living Wage Employer Experience, Cardiff: University of Cardiff (2017), <https://www.cardiff.ac.uk/news/view/722069-employer-experienceof-the-living-wage>

unless their wages increase accordingly			
May generate a counter response from other competing employers locally	Monitor closely to assess the risk	Amber	Project Group
Feedback from other Councils has indicated reluctance from some providers to engage due to the work they undertake with other Councils and NHS Partners not engaged in rolling out the Real Living Wage. This means we cannot mandate this in contracts.	Engage with health partners and the market to understand whether this is a risk from the outset,	Amber	Project Group

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

This proposal covers the application of the Real Living Wage to all Adult Social Care Services delivered both through the Council and by third party contractors. Any other service delivered or commissioned by the Council falls outside the scope of this project.

Business Planning: Business Case – Investment proposal

Project Title: Health Impact Assessment Fund Proposal

Committee: Adults and Health Committee

2022-23 Investment request: £125,000
(Plus £45,000 non recurrent)

Brief Description of proposal:

The use of Health impact assessment (HIA) is a systematic approach to identifying differential health impacts of proposed and implemented policies, programmes, and projects within a democratic, equitable, sustainable and ethical framework. It identifies both positive and negative health impacts so that the positive health effects can be maximised, and the negative impacts minimised within an affected community.

It is proposed to set up a £125k annual fund for department directors to use to carry out Health Impact Assessments on specific policies or programmes, through external resource or training of existing staff to carry out the HIA.

It is anticipated that approximately five HIAs will be completed per year, depending on the type of HIA undertaken (rapid, intermediate or comprehensive).

A further £45k will be used to support training across the system on the determinants of health, the role that all can play in improving health outcomes and on health impact assessments.

Date of version: 21/09/2021

BP Reference: E/R.5.007

Business Leads / Sponsors: Jyoti Atri / Emmeline Watkins

1. Please describe what the proposed outcomes are:

Health impact assessment (HIA) is a systematic approach to identifying differential health impacts of proposed and implemented policies, programmes, and projects within a democratic, equitable, sustainable and ethical framework.

This allows the identification of both positive and negative health impacts of policies and programmes enabling that the positive health effects can be maximised, and the negative impacts minimised within an affected community.

The proposed fund will ensure that key policies and programmes address the corporate priorities of:

- A good quality of life for everyone
- Helping our children learn, develop and live life to the full
- Communities at the heart of everything we do
- Cambridgeshire: A well-connected, safe, clean, green environment

It uses a range of structured and evaluated sources of evidence that includes public and other stakeholders' perceptions and experiences as well as public health, epidemiological, toxicological, and medical knowledge (dependant on the level of Health Impact Assessment undertaken).

HIA's follow a standard approach using eight core steps:

- Screening (screening which projects, policies etc. would benefit from an HIA)
- Scoping (scoping out the areas to be addressed within the HIA)
- Baseline (setting a baseline of the current health profile of the population affected by the programme / policy)
- Community Involvement (key community and other stakeholders are engaged to feed in their experience of the project or policy)
- Evidence an analysis (a systematic review of the potential impacts including the significance of the impacts, the magnitude of the impacts and any differential impacts between groups and individuals)
- Mitigation (suggested measures for reducing negative impacts and enhancing positive impacts)
- Final report (a final report summarising the steps taken, the findings, and any mitigation measures, and future monitoring)
- Monitoring (monitoring the impacts post implementation)

HIAs help to deliver better and improved policy, programme, and project outcomes that enhances community and societal health and wellbeing.

They can either be used:

- as an analysis tool to forecast the potential negative and positive health impacts
- as a participation tool that can help residents, local community groups and other stakeholders be involved in the design of a programme / policy

- as a project management tool that can help to structure the development and implementation of policies, programmes, projects and services
- as an evaluation tool to monitor the achievement of stated objectives, outputs and outcomes or those policies, programmes, projects and services

Usually, a HIA will involve a combination of all four.

HIAs can be done on policies, programmes, and projects at the:

- beginning (i.e. during the development or pre-development stage of a programme / policy formation etc.), known as a prospective HIA;
- middle (i.e. during the implementation stage of a programme / policy), known as a concurrent HIA,
- end (i.e. at the operation or closure stage to look back and evaluate) known as a retrospective HIA.

HIAs vary in complexity and speed and are classed as rapid, intermediate or comprehensive HIAs.

Health impact assessments assess the potential impact of programmes on outcomes for those with protected characteristics as well as any environmental issues that may impact on health such as air quality.

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

The action plan for the Joint Administration Agreement section highlights a need to develop and implement “a clear action plan to deliver “health in all policies” including criteria for evaluating policies”.

This paper outlines the background to Health Impact Assessments (HIA) as a way of evaluating policies and proposals to deliver a range of HIA's and an approximation of the costs.

Health impact assessment is a globally recognised approach used to judge the potential health effects of a policy, programme or project on a population, particularly on vulnerable or disadvantaged groups.

Therefore, this approach will support both the Health and Wellbeing Strategy as well as the Integrated Care System Strategic framework in improving health and reducing inequalities.

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

It is proposed to set up “fund” for department directors to use to carry out Health Impact Assessments on specific policies or programmes. This fund could be used to either “buy in” an external resource to carry out HIAs or to train existing staff to carry out HIAs,

this is dependent on the capacity of the department to release staff both for training and subsequent HIA assessments. On average, HIAs take about two to three months to complete so the option to buy in external consultants to undertake HIAs may be preferable, but it may not be sustainable in the longer term if HIAs are to be used for all significant projects and / or policies, it may be more cost effective to “grow our own” resource inhouse.

Each department director will need to screen which policies / programmes would benefit from a HIA, and then decide the level of HIA needed (Rapid, Intermediate, or Comprehensive). Public Health could produce a framework and guidance for this.

It is anticipated that five HIAs will be completed per year, this will flex depending on the type of HIA undertaken i.e. if more comprehensive HIAs are undertaken fewer than five will be possible, if more rapid HIAs are undertaken more than five may be possible.

Costs to undertake Health Impact Assessments is hard to ascertain due to the varied nature and scope of HIAs, so approximate costs for consultants to produce Environmental Impact Assessments has been used as a proxy.

Generally costs vary from a day rate of £1,400.00 for high grade technical input, to a total project cost of £25,000.00 for an assessment which takes three months. Therefore, it is proposed that a budget of £125,000.00 is allocated for the fund which would enable a mix of a small number of comprehensive HIAs and several rapid HIAs.

As HIAs are underpinned by a comprehensive set of public health data there may be additional demands on the Public Health Intelligence and Business Intelligence teams to supply or signpost any consultants appointed to sources of data.

The recurrent budget of £125,000.00 is based on a number of assumptions:

- The costs of HIAs are comparable with Environmental Impact Assessment reviews.
- The Council will need to prioritise which programmes / policies need an HIA Undertaken and in which order (to manage the budget if HIA costs exceed the average cost of £25K).
- There is capacity within Public Health, Public Health Intelligence, Business intelligence to support the fund and any appointed consultants.

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

The fund will be flexible as to approach and therefore resource could be to buy in external capacity or train existing staff. The process of a health impact assessment specifically includes community and stakeholder involvement through the process.

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
HIA fund agreed	9 December 2021	8 February 2022	Jyoti Atri
PH to provide framework/guidance on selecting policies / programmes that would benefit from HIA and level	Q3 2021/22	Q4 2021/22	Emmeline Watkins
Work with Corporate directors to screen which policies / programmes	Q4 2021/22	Q4 2021/22	Emmeline Watkins
Prioritisation of programmes and decision as to internal / external resource	Q4 2021/22	Q1 2022/23	Jyoti Atri
Training to be commissioned	Q4 2021/22	Q4 2021/22	Iain Green
Training to be delivered	Q1 2022/23	Q4 2022/23	Iain Green

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

When a service puts forward a project or policy, an Equality Impact Assessment (EqIA) will need to be carried out. The HIA methodology includes evidence from public perceptions and experiences, and protected groups will also be included in this:

Health impact assessment is a globally recognised approach used to judge the potential health effects of a policy, programme or project on a population, particularly on vulnerable or disadvantaged groups and therefore should improve health impacts and outcomes for individuals with protected characteristics, those living in poverty and in rural isolation.

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

Financial Benefits

This HIA fund ensures that key policies / programmes maximise short and long-term health benefits for our population and don't unintentionally worsen health inequalities. Those benefits may not be seen specifically by the council or achieve any direct savings

Non-Financial Benefits

The project will contribute to identification of social value in programmes / projects where they can indirectly benefit health. Health impact assessments also assess the potential impact of programmes on environmental issues that may impact on health such as air quality and co-benefits to the environment can be significant enabling the potential to deliver on both health and environmental ambitions and improving value for money.

Success measures will need to be dependent on the projects / programmes identified.

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
PH leadership capacity challenges due to COVID-19	Use of COMF funded staff to support COVID-19 response where possible with increased return to BAU planned for substantive staff	Amber	JA
System capacity challenges due to COVID-19 and lack of ability to carry out HIA internally	Option to use external resource to carry out HAI	Green	IG/Director for policy/programme

Non delivery of the project means that large policies / programmes could unintentionally worsen health outcomes and increase health inequalities and internal skill set around Health Impact Assessments is not developed

Assumptions: costs of HIA are comparable to environmental impact assessment reviews. If incorrect, fewer HIAs will be carried out

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

Any policy programmes or projects can identified by the relevant director. However, it is anticipated that through this fund, approximately five HIAs will be completed per year, depending on the type of HIA undertaken (rapid, intermediate or comprehensive).

Public Health will provide framework/guidance on selecting policies / programmes that would benefit from HIA and level of HIA.

Section 4h Adults and Health

Temporary Funding Proposals

Independent Living Services	Page 237
Care Together	Page 244
Expansion of Direct Payments	Page 256

Business Planning: Business Case – Investment / Savings

Project Title: Independent Living Services - Huntingdonshire

Committee: Adults and Health

2022-23 Investment amount: £180k

2024-25 Investment amount: £70k

Savings amount: £114k pa from 2025/26

The following one-off revenue investment amounts will be needed, it is proposed that these be funded from reserves. This business case does not require any capital investment.

	Capital and revenue flow in £000s						
	2022/23	2023/24	2024/25	2025/26	2026/27	2027/28	Total
Capital	0	0	0	0	0	0	0
Revenue	180	0	70	0	0	0	250

The proposal is scheduled for savings to flow from the year after the opening of the new services as shown below.

	Building volumes (in units) and savings flow (in £000s)						
	2022/23	2023/24	2024/25	2025/26	2026/27	2027/28	Total
Volume				48			48
Savings				114			114

Brief Description of proposal:

To commission and open 48 new tenancy-based flats within Cambridgeshire, thereby increasing residential and nursing care capacity for older people wishing to remain living independently. Specifically, this supports people being able to stay in their own tenancy for longer, given care can be stepped up as needs increase, unlike residential care where they may need to move to get increased care needs met. Stimulating development of new services in this way will generate the much-needed provision to meet population growth forecasts and do so at a cost affordable to the local authority.

Date of version: December 21 BP Reference: A/R.5.015 & A/R.6.199

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

1. Please describe what the proposed outcomes are:

To commission and open 48 new tenancy-based flats within Cambridgeshire, thereby increasing residential and nursing care capacity for older people wishing to remain living independently. Specifically, this supports people being able to stay in their own tenancy for longer, given care can be stepped up as needs increase, unlike residential care where they may need to move to get increased care needs met.

The proposals link to the following corporate outcomes:

Communities at the heart of everything we do:

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

A good quality of life for everyone:

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

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

- The specification will reflect a very high level of renewable energy generated onsite compared to the alternative services in the care sector. Consequently, it will reduce carbon emissions. The proposal is expected to benefit public health by reducing future harms from climate change. Initial estimates predict the new service will prevent CO2e emissions.

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

The proposal supports CCC's Adult Social Care Older People strategy to help people live with greater levels of independence. The work will build on early consultation carried out with user groups, providers, and social care practitioners. The work also takes account of the growth in older people population and their expectation of more choice and control of services. The information collected was from industry recognised sources such as Laing and Buisson market reports used across health and social care. This adds to information and ideas collected from district councils, industry experts and Council Members.

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

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

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

There are two broad approaches to implementing a new ILS (Independent Living Service):

- the 'make model' option. Here CCC will have overall control and responsibility for funding, designing, and building an ILS. This level of control is common practice across the CCC in long-term capital programmes; and
- the 'buy-model' option. Here the private service providers would be commissioned to build ILS services in Cambridgeshire. We would contract flats within the ILS.

CCC's preferred approach is for it to finance and construct CCC's own service of this type. However, commissioning in services is also explored to assure CCC does not miss high quality and innovative services from private providers. This also benefits from sharing risk in the marketplace.

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

We will continue to monitor the factors which led to this mixed model approach. Factors include government policy to social care funding, older people's preferences, land and building costs. Should circumstances change CCC may look to change the mix.

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

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

broader set of benefits expected from the ILS programme will be defined for the outline business case stage.

We will use a structured approach to programme management applying the Cabinet Office's recommended methodology for the delivery of projects and programmes. We shall also apply the construction industry standard RIBA Plan of Work to organise the process of briefing, designing, preparing, and submitting planning application, constructing, and operating building programmes.

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

High Level Timetable

This work will be phased with each of the 1 scheme working to the same major tasks.

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

The proposal is scheduled for one new 'buy' service opening in 2024/25. The locations will depend upon the suitability of land and planning permission.

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

This will affect older people with eligible social care needs receiving a funded care package. It will also provide a choice to older people without eligible social care needs (self-funders).

The proposal is to meet people's care needs whilst maximising their independence. The care model focusses on building on people's existing strengths, their natural support networks, the use of technology and new care models to meet needs. The proposal does deliver new care services for older people to move into. It might therefore

represent a small risk model to current living arrangements when needs increase. Decisions about the best care setting for an individual will always be made in the best interests of service users with social workers acting to identify the most appropriate care plan and making judgements about the level of independence and support required.

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

An Equality Impact Assessment has been developed which provides further detail.

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

Financial Benefits

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

Key Benefit	Measure	Baseline	Target & Timescale
Cost avoidance (Buy projects)	ASC Budget	£0.9m pa	£0.14m pa phased over the programme period

Non-Financial Benefits

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

Key Benefit	Measure	Baseline	Target & Timescale
Increase in people living independently	Number of older people	NIL	48 people phased over the programme period
Reduce environmental harm	Amount of CO2 or equivalent in emissions	NIL	40 tCO2e pa phased over the programme period
Increase care worker jobs	Care worker numbers	NIL	45 jobs phased over the programme period

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

The proposal has identified a range of risks. Some of them are areas the project team can work on to reduce the uncertainties of the risk impact. There are others which will require help from across the Adult Social Care directorate and the Council as a whole. The table below lists the key risks.

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
IF Covid-19 restriction policies continue THEN there will be delays to the project.	Re-arrange work plans to continue making progress and return to Covid-19 affected work at a more suitable time.	GREEN	Programme Team
IF suitable land cannot be found THEN there will be delays to the project.	Review CCC's land stock and maintain engagement with district councils about potential land use.	AMBER	Programme Team
IF construction industry inflation rises rapidly THEN the project will cost more to deliver.	Explore ways to use different materials to offset the rises in prices	AMBER	Governance Board
IF the DWP (Department for Working and Pensions) change the criteria agreed for Housing Benefit payments for ILS THEN the programme benefits will be reduced.	Maintain engagement with district councils to remain aware of benefits regulations	GREEN	Corporate Management
IF the Cabinet Office change to Public Contracts Regulations 2015 THEN the	Contribute to government consultation about the new	GREEN	Corporate Management

programme benefits will be increased. But no benefits are expected in the near term.	laws. Maintain a watching brief.		
IF the DHSC (Department for Health and Social Care) change the Adult Social Care funding policy THEN the programme benefits will be increased. But no benefits are expected in the near term.	Maintain engagement with government alongside LGA (Local Government Association) and ADASS (Association of Directors of Adult Social Services)	AMBER	Corporate Management

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

ILS will focus on those people with high needs (usually but not exclusively aged 65+) who want to retain their independence but can no longer live in their own home. Individuals below the age of 65, for example those with early onset of dementia, would also be supported within ILS. The proposal does not describe community-based service or specialist service such as mental health service.

Business Planning: Business Case – Investment Proposal

Project Title: Care Together programme expansion

Committee

Adults & Health Committee

2022-23 Investment amount:

£689k

The total investment amount for the four year period would be approx. £2.915m as detailed in the table below. This could be funded from one off reserves.

	2022/23	2023/24	2024/25	2025/26
Place-based Commissioning resource to implement Care Together across the County over 4 years (staffing)	£311,549	£317,779	£388,752	£396,528
Seed funding to commission place-based volunteer & community assets, mutual aid, and social enterprises	£150,000	£125,000	£100,000	£100,000
Introduction of holistic, outcome-based homecare for all new & existing homecare clients in East Cambridgeshire, prior to countywide roll out in new Homecare Dynamic Purchasing System (DPS) in 2024	£47,000	£47,000	£-	£-
Expansion of Community Catalysts to develop microenterprises across the county over 4 years	£180,000	£245,000	£250,000	£255,000
Total	£688,549	£734,779	£738,752	£751,528

Grand Total = £2,913,608

NB – Expansion of ISFs (Individual Service Funds) has been included in the Direct Payment business case

Brief Description of proposal:

Implementation of the Care Together programme across the County over a four year period. This will improve the range of care and support available to older people in the community to meet population growth forecasts and do so at a cost affordable to the local authority.

Date of version: 2/11/2021

BP Reference: N/A

Business Leads / Sponsors:

Will Pattern, Director, People & Communities

1. Please describe what the proposed outcomes are:

The Care Together programme will transform the way care and support is commissioned and delivered to older people living at home. Introducing a place-based approach to commissioning, it will improve homecare provision and develop a wider range of care and support in the local community to support more older people maintain their independence and live happily at home for longer.

East Cambridgeshire is the early adopter site, currently in the planning and design phase. Implementation is scheduled for March 2022 for 2 years with an accompanying independent evaluation.

The investment will enable a transition to place-based commissioning and thus implementation of Care Together across the whole county by providing additional commissioning capacity and seed funding to develop more volunteer and community-led support and micro-enterprise.

The investment request comprises of four elements which are summarised in the table:

Request	What will it do?	Impact	Enablers
Place-based Commissioning resource	Provide the staffing resource necessary to implement a place-based approach to commissioning, enabling the implementation of Care Together across the county and improve the range and accessibility of care and support for older people living in the community.	Successful implementation of Care Together, bringing together partners and communities to increase the range of care and support available for older people in the local community.	Growth of Think Communities and development of Integrated Neighbourhoods through the Integrated Care System will support the transition to place-based commissioning.
Seed funding to commission place-based volunteer & community assets, mutual aid, and social enterprises	It will be used by commissioners to <ul style="list-style-type: none"> fund the expansion of existing volunteer and community assets e.g., expand member only meal service to all older people in the community support the continuation of mutual aid groups create new voluntary and community support and social enterprise 	Existing community assets are sustained, and new ones developed. Innovative community-owned businesses are developed contributing to economic growth. Overall, community-based services are better placed to support the growing number of older people.	In return for funding to pay the Real Living Wage, care providers will be expected to provide social value by supporting the growth and development voluntary, community, and social enterprises in the community.
Introduction of holistic, outcome based	Pay council-funded home care providers to deliver a more personalised and outcome-based approach,	Council-funded homecare will move from 'time and task' model to a	Introduction of Independent Service Funds to the existing homecare market will

homecare for all new & existing homecare clients in East Cambridgeshire prior to countywide roll out in new Homecare DPS in 2024	ensuring service users are well connected into their local community, are no longer isolated or lonely and have the aids and equipment needed to maintain independence and wellbeing	personalised, comprehensive approach which considers a person's wellbeing. People's experience of council funded homecare will improve as will their quality of life as they remain connected within their community	support the transition to a more outcome-based model as they give people greater choice on how their funding is spent. The recommissioning of the Homecare DPS (the framework through which the council 'buys' homecare from local providers) in 2024 will introduce more localised care delivery through a zone-based model and make holistic, outcome focused homecare the standard for all council-funded service users.
Expansion of Community Catalysts to support and develop microenterprises across the county over 4 years	Fund business mentors known as Community Catalysts to work across each district, promoting microenterprises as a business or career and supporting individuals to set up and maintain their microenterprise over time.	People are supported to set up a care-based microenterprise who may not otherwise know how to do so. The number of microenterprises that provide care and support in the local community is increased and it is becomes easier to find the right support, whether privately or council funded.	Introduction of Independent Service Funds will offer a new, easier way for people to purchase their care from a much wider range of care providers and microenterprises.

The Care Together programme seeks to deliver 3 strategic outcomes:

(I) Introduction of place-based commissioning

The additional staffing resource will enable the Council to make the transition to a place-based approach to commissioning. This means future services will be designed and commissioned around the specific challenges and community resources of a given area rather than the traditional countywide 'one size fits all' approach. It will result in a greater focus on the development of local community provision and how the community can better support itself whilst ensuring the right services are in place to meet the specific needs of a community.

Older people, communities, professionals, and organisations will play an active role in place-based commissioning, designing, and shaping what future services will look and feel like in their local area based upon their current experiences. Working more closely with voluntary and community groups and partners in the Integrated Neighbourhoods, it

will also facilitate a more localised approach to delivery, with local teams working directly in the community. Integrated Neighbourhoods are emerging 'place-based' areas in which local GPs (Primary Care Networks) come together with local partners from social care, education, voluntary and community groups and local residents to work in partnership to develop local services based around local needs.

(ii) Improve the homecare offer available to local people

Existing Council funded homecare is based around short visits to deliver personal care (known as time and task model) and is limited in choice, flexibility, and personalisation. It can involve a lot of travel for carers and the lack of time to deliver personalised care and support contributes to the challenge of retaining good carers.

The investment will improve the homecare offer available to local people. It will enable the Council to work with providers over time to develop a more localised model of homecare in which carers live and work in their local community, travel less and are empowered to deliver a person-centred service focused on individual wishes, aspirations, and wellbeing needs. It will also create a wider range of homecare providers, supporting local people to establish their own micro enterprises offering care and support. It will also introduce new ways for people to choose their own care and support through an Individual Support Fund. Together, these innovations will improve the quality of experience of people receiving Council funded homecare and make care work a more attractive employment or business opportunity.

(iii) Develop a better range of care and support in the community to promote independence and delay demand for long term health and social care services

The Care Together programme has ambitions to join-up local health, social care, and community/voluntary services in the local area to make it much easier (and less stigmatising) to find early help and support. Better integration will also reduce duplication of services and make better use of resources.

Implementation of the Care Together programme will deliver the following specific outcomes in terms of service provision and service user experience. It will also include an independent evaluation to measure the social return on investment and the impact upon individuals, the Council and other partners

Outcomes for individuals/community:

Individuals will benefit from a more personalised homecare offer which reduces social isolation, improves wellbeing, and promotes maintenance of independence alongside personal care
The care workforce will benefit from new and improved ways of working; an ability to work locally, travel less and spend more time providing quality care and support
Creation of micro-enterprises will promote local economic growth through new employment opportunities and increase choice for those needing care
Introduction of Independent Service Funds will make it easier for older people to have a personal budget and choose how it is spent it

Local people will find it easier to access support through a 'local offer' which coordinates health, social care, and voluntary/community services. A strong preventative focus (e.g., assistive technology and falls prevention) will promote independence and early help, reaching out to older people in the community to proactively offer early help before a crisis or before things become too much.

Local people will benefit from a growth of community-based services which older people report they need to remain living independently (e.g., services or enterprises offering companionship, support with laundry, housework, garden and home maintenance and shopping)
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2. What evidence has been used to support this work, how does this link to any existing strategies/policies?

An Evidence Review completed by Public Health concluded that frequent, multi-agency support for older people in the community and a range of support interventions for carers are the most effective ways to prevent admission into long term residential care.

The Neighbourhood Cares Evaluation demonstrated the value of place-based approaches in supporting people living in the community.

Experience of the Covid Hubs demonstrated the positive impact greater coordination between local communities, health and social care services can have in supporting older people living in the community.

The Oxford Brookes University Institute of Public Care report 'Reducing Older People's Need for Care: Exploring Risk Factors for Loss of Independence' has shaped thinking on key intervention points in which to deliver early intervention and prevention activities.

The Care Together programme also aligns with the following strategic priorities and plans:

Joint Administration priorities

- Move from delivering social care through an overly focused emphasis on commissioning of care agencies, towards one of empowering people and communities using new models based on delivery at neighbourhood level and through new models of governance, including more 'in-house' provision.
- Protect and enhance choice and control by service users, adopting a rights-based approach to service delivery and the concept of independent living, expanding opportunities for use of direct payments, individual budgets, and personal assistants.

Alignment with key strategies including the Council's Recovery & Resilience Framework, All Age Carers Strategy 2018 to 2022.

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

A business case for investment in the early adopter site in East Cambridgeshire was endorsed by Adults Committee and General Purposes Committee in late 2020/early 2021. In addition to delivering the outcomes for individuals and communities summarised in section 1 above, the initial business case outlined the potential return on investment for the Council in terms of preventing and delaying demand for long term adult social care and increasing the amount of affordable care and support available to the Council.

A feasibility and independent evaluation scheme are under way in East Cambridgeshire to provide an evidence base for this methodology moving forward.

Phase 1 Care Together programme is expected to deploy in March 2022 with the evaluation result expect in spring/summer 2024.

The option of in-house homecare provision was considered but excluded due to prohibitive costs. Initial market research suggested double the current level hourly rate paid by the Council. However, other models of homecare provision will be explored such as social enterprises and community interest companies/partnerships.

Other options considered by Adults & Health Committee include those shown in the table below:

Option	Description	Timescales	Risk/Benefit Summary
1. Continue in East Cambridgeshire only	Allow original approach to continue and evaluation on Care Together programme to be completed	Completion estimates: March 2024	<ul style="list-style-type: none"> No additional cost East Cambridgeshire benefits from service changes made but other districts do not Limits social and financial return on investment
2. Rollout County wide following evaluation	Care Together programme early adopter site runs as planned in East Cambridgeshire until 2024. Subject to favourable evaluation findings, roll out across remaining 4 districts over a minimum 2-year period	Evaluation Outcome– August 2024 Approvals for additional resource - Dec 2024 Recruitment – April 2025 Commence - May 2025 Complete - May 2027 (earliest)	<ul style="list-style-type: none"> Slower to implement but progresses based on robust evidence of impact and social return on investment Requires significant investment in project capacity Business case for investment will offer more accurate costings and timescales as it will be based on learning from the first site Avoids risk of additional investment into a programme which does not deliver value for money Allows time for health system to embed Integrated Care System
3. Rollout County wide subject to evaluation, plus improved integration of teams	Expand Care Together programme across all districts subject to favourable evaluation of early adopter site. Alongside this, further develop more integrated practices across health and social care teams through the Integrated Care System	Evaluation Outcome– August 2024 Approvals for additional resource - Dec 2024 Recruitment – April 2025 Commence - May 2025 Complete - May 2029 If this progressed without completion of the independent evaluation, the completion date reduces to 2026.	<ul style="list-style-type: none"> As Option 2 Capitalises on integration appetite and agenda to join up Adult Social Care, Adult Early Help, and primary care around a neighbourhood under the Integrated Care System Unclear if timescales will align to and pace of Integrated Care System and Integrated Neighbourhoods development Complex, large-scale transformation carrying with it increased risk of delivery within timescales set If progress prior to evaluation there is a risk of investment into an untested programme which may not deliver desired impact and value for money
4. Rollout County wide without waiting for evaluation plus Neighbourhood Cares social care staffing model	Expand Care Together programme across all districts without waiting for evaluation <u>and</u> transform operational social work teams and Adult Early Help into neighbourhood facing teams as per model in Neighbourhood Cares Pilot. Given scale of transformation 4 years is more realistic.	As outlined within Option 4	<ul style="list-style-type: none"> Implements roll out 3 years sooner than Option 2 Significant investment in project capacity required to deliver Significant risk of investment into an untested programme which may not deliver desired impact and value for money (Care Together programme) Benefits realisation associated with Neighbourhood Cares Model Highest cost of all options due to staffing: population rations associated with Neighbourhood Cares Model - may not be affordable and staffing may not be available

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

The next steps for the Council will be to expand roll out of the Care Together programme to the remaining 4 districts now without waiting for independent evaluation over four years

High Level Timetable

Task	Start Date	End Date	Dependency
Approval for additional resource	September 2021	March 2022	Approvals for spend and recruitment
Undertake expanded asset mapping for areas outside East Cams	March 2022	July 2022	
Expand Business Mentors (Community Catalyst) Support outside East Cams	March 2022	-	
Recruitment	March 2022	Aug/Sep 2022	
Commence Roll Out to other districts	August 2022	August 2026	Successful recruitment
Complete Programme	August 2026		

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

The Care Together programme methodology is designed to support older people to remain independent and supported within their own home.

The programme will therefore be highly supporting to people with the protected characteristics of age, disability, poverty and rural isolation. Furthermore, a more personalised approach to care will also bring benefits for members of BAME (Black and Minority Ethnic) communities.

An Equality Impact Assessment (EqIA) has been developed to ensure this proposal is equitable in its aims and delivery and any potential adverse impacts on people with protected characteristics are mitigated against. This is to ensure CCC's decision making is inclusive for staff and communities with protected characteristics.

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

Nationally, there is a lack of evidence which demonstrates return on investment of adult social care interventions. What limited evidence is available focuses on returns for the health system.

As per the original business case (September 2020), through the creation and development of an early adopter site, the programme seeks to generate sustainable, affordable commissioning and delivery models supported by clear evidence of cost avoidance and return on investment.

Independent evaluation of the early adopter site will confirm the financial and non-financial benefits of the programme and assess its success in meeting its strategic aims. Therefore, the potential or anticipated benefits of the Care Together programme are outlined below.

Financial Benefits

The programme is intended to deliver benefits in terms of demand management and reducing the level of demand budget that needs to be factored into the medium term financial plan, rather than cashable savings through cost reduction.

Care Together programme has strong potential to generate Return on Investment (ROI) for the council in several areas outlined below and the independent evaluation will provide evidence of this.

Principle areas of anticipated financial benefit:

1. Admission into long term residential care is delayed due to better integrated community support and enhanced homecare offer
2. Demand for long term health and social care is delayed due to easier access to early help and support
3. The council is able to meet more demand for the same expenditure as a result of growth in voluntary and community support for older people
4. Growth in micro-enterprises will diversify the homecare market and provide the council with affordable capacity to meet forecasted growth in demand
5. Evidence-based Council commissioned services will provide better value for money and demonstrate a clear impact or return on investment
6. Reduce duplication of provision commissioned by multiple partners (e.g. similar services commissioned by both health and social care)

Non-Financial Benefits

The Care Together programme has significant social return on investment potential which should be considered;

- Improvement in individual outcomes (reduced social isolation, improved wellbeing, fewer falls etc)
- Improvement in quality and service user experience of council funded homecare
- Progresses a place-based and integrated approach to commissioning and service delivery amongst health, social care, local communities, and the voluntary sector
- Supports and stimulates development of community organisations, social enterprise, and mutual aid
- A diverse range of care and support available in the community that is easier to navigate and offers greater flexibility and choice
- Contributes to improvements in care workforce opportunities and retention
- Economic growth and job creation because of creation of micro and social enterprises
- Rewards innovation and enterprise
- Supports the reduction in carbon emissions by maximising local support and reducing unnecessary travel
- Enables the contributions of local citizens in coproducing informal care and support
- Empowers local communities to be self-reliant and take on some responsibility for supporting its older citizens

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Risk of investment into an untested programme which may not deliver desired impact and value for money	To mitigate this, we would need to wait until our evidence has been assessed in 2024	Amber	Adults & Health Committee
Health system may not have resources to engage as they prioritise set up of Integrated Care System during this time	We would need to plan carefully with our health colleagues to reduce to impact of delays.	Amber	Service Director, People & Communities
Acceleration of the programme to all parts of the county will require significant additional	Ensure other Council departments have capacity to support	Red	Service Director, People & Communities

Council resources to deliver successfully	roll out and factor into programme planning		
Internal and democratic approval for additional resource requests (and subsequent recruitment) will add several months to all options.	Ensure high level milestones included approval timescales. Recruiting for resources would need to commence as soon as funding is made available or preferably in advance	Green	Service Director, People & Communities
Recruitment challenges may also cause delay in implementation	Recruiting for resources would need to commence as soon as funding is made available or preferably in advance	Red	Service Director, People & Communities
The impact of the programme will be reduced if there is limited engagement from health as it focuses on its transformation into an Integrated Care System	We would need to plan carefully with our health colleagues to reduce to impact of delays.	Amber	Service Director, People & Communities

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

In scope:

Planning, design, and implementation of Care Together programme for older people in Huntingdonshire, Cambridge City, Fenland and South Cambridgeshire.

Forecasted investments required as part of the above including:

- Place-based commissioning resource (staffing)
- Seed funding to commission place-based volunteer/community infrastructure, mutual aid, and social enterprises in response to the needs and resources of that specific locality
- Introduction of Care Together programme Holistic Homecare
- Expansion of Community Catalysts to identify and support the setup and maintenance of micro-enterprises in each district
- Care Workforce Skills Development – to establish a Council led programme to support the development of a homecare workforce skilled in specialist and

complex care to better meet the future needs of an ageing population. This will include support for providers to branch out into specialist care and for voluntary and community organisations to progress into delivery of CQC (Care Quality Commission) regulated activities

Expansion of Individual Service Funds, although within scope of Care Together programme, has been included in the Direct Payments business case.

Out of scope:

Community based provision for adults with learning disabilities (this will be developed as part of the joint vision for the Learning Disability Partnership)

Business Planning: Business Case – Investment / savings

Project Title: Expansion of Direct Payments and Individual Service Funds

Committee: Adults & Health Committee

2022-23 Investment Request: £222k

Brief Description of proposal:

Direct Payments and Individual Service Funds (ISFs) are key to supporting people to live as independently as possible within their local communities. One off reserve funding would be required for 2022-23 and savings would be made from 2023/24

Date of version: 15 September 2021

BP Reference: N/A

Business Leads / Sponsors: Will Pattern, Director, People & Communities

1. Please describe what the proposed outcomes are:

As a result of the proposed investment, we will:

- Increase the proportion of people, with eligible care needs, who are on self-directed support, giving them greater choice and control.
- Co-produce personalised solutions that work for individuals.
- Strengthen local community support networks.
- Increase Social Value by improving long-term wellbeing and resilience of individuals and communities through personalisation of care and support planning and engagement with local communities.
- Work in an integrated manner with health under the Care Together programme.
- Generate a positive impact for individuals by supporting them to do the things they want to do in the place they want to do them, with the people/provider of their choice.

This will be achieved by:

- Increasing the local supply of Personal Assistants available in communities to meet the care and support needs of people with a Direct Payment without increasing carbon footprint from long travel times.
- Addressing any issues or delays within existing processes and practice guidance to support Social Care Teams in using Direct Payments and Individual Service Funds.
- Developing guidance hourly rates for Direct Payments to reduce current variation and ensure that rates calculated as part of the personal budget are reflective of local market rates for services.
- Developing Individual Service Funds for people who would like to exercise more choice and control in purchasing their support but would like support from another organisation to do this.

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

A snapshot taken at the first quarter of 2021/22 indicated that 901 adults within Cambridgeshire use a Direct Payment to purchase their care and support – 45% of direct payments are used to support adults with a Learning Disability and/or Autism, 32% for adults with a physical disability, 19% for older people and 4% falling under the category of 'other'.

The latest information enabling a national comparison was published in 2019/20 and this indicated that 23% of people with eligible social care needs in Cambridgeshire were in receipt of a Direct Payment against a national average of 28%. Regional data from 2020/21 suggests that the number of Direct Payments used within Cambridgeshire had

slightly decreased to 21.3% against a regional average of 27%, partly due to the pandemic.

Best practice suggests that the use of Individual Service Funds is a key part of a council's 'self-directed support' offer.

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

The direct payment and Individual service Funds schemes are operational in other areas and have proven benefits, including better outcomes for people and more cost-effective services for Local Authorities. Therefore, we have not carried out a feasibility study as evidence is available nationally and locally. See [Self directed support \(connecttosupport.org\)](https://connecttosupport.org/); [self-directed-support.pdf \(scie.org.uk\)](https://scie.org.uk/) for papers on the benefits of self-directed services.

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

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Define an action plan with strong oversight	March 22	July 22	Direct Payment Board
Gain engagement and buy in from across the system to prioritise self-directed support	August 21	Ongoing	Direct Payment Board
Recruitment of new capacity in Programme Management and Contract Management	Jan 2022	Apr/May 2022	Human Resources
Sourcing and Implementing new Personal Assistant resources to cover duration of Direct Payment set-up.	April 2022	Aug/Sept 2022	Human Resources
Monitor impact with ambitious Key Performance Indicators	April 2022	Ongoing	Commissioning
Reduce lead times between referral and receipt of the Direct Payment.	April 2022	July 2022	Adults Finance Team / Commissioning / People Plus
Improve flow from interim care and support into Direct Payments or Independent Service Funds.	April 2022	Ongoing	Operations
Access Business Intelligence data for evidence-based decision-making	April 2022	Ongoing	Commissioning

Engage in more co-production with people who receive self-directed support services to ensure the services they want are available locally	April 2022	Ongoing	Commissioning
Integrate with Health colleagues and the new Integrated Care Systems	August 2021	Ongoing	Commissioning
Encourage the development of community enterprise and mutual aid within the social care sector	August 2021	July 2023	Commissioning

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

The intention is to increase the uptake of direct payments or Independent Service Funds in all these protected characteristics groups and so this proposal is expected to have a positive impact on all groups. No adverse impact is anticipated.

Other programmes such as Care Together are working to increase the options for those living in rural areas. Increasing Direct payments and Individual Service Funds in these areas will therefore benefit both programmes.

An Equality Impact Assessment (EqIA) has been developed to ensure this proposal is equitable in its aims and delivery and any potential adverse impacts on people with protected characteristics are mitigated against. This is to ensure CCC's decision-making is inclusive for staff and communities with protected characteristics in line with the Equality Act (2010) and Public Sector Equality Duty (section 149).

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

The following investment areas have been identified as key to support the expansion of this provision:

- programme management capacity to fully implement the strategy and vision
- care and support planning software
- set up an in-house personal assistant support service to deliver personalised bridging care immediately after referral, while a long-term personal assistant is recruited
- Contract management capacity to ensure robust oversight and monitoring of self-directed service contracts

Summary investment requested

	22/23 £000s	23/24 £000s	24/25 £000s	25/26 £000s
Programme Management Capacity	205	0	0	0
Care & Support Planning Tool	4.45	4.45	4.45	4.45
In-House Interim personal assistant service	150	150	150	150
Contract Management Capacity	97	97	97	97
TOTAL COST	456.45	251.45	251.45	251.45
Direct Payment Clawbacks	234.117	257.529	283.281	311.610
Investment Required	222.333	-6.079	-32.281	-60.160

Financial Benefits

Financial benefits derived from Direct payments are normally found in clawbacks of unused funds.

The table below shows our clawback analysis of the previous four years. The increased clawback seen for 2020-21 is due to the COVID-19 pandemic, therefore we are forecasting an 8% clawback from c. 50% of clients using the scheme.

Quarter						
Values	Year	Q1	Q2	Q3	Q4	Grand Total
	2017-18	358,442	451,925	461,680	315,600	1,587,646
	2018-19	377,815	451,178	371,315	342,062	1,542,371
	2019-20	283,905	283,905	316,820	437,243	1,483,243
	2020-21	505,666	564,885	665,929	604,694	2,341,173
No. Of Clawbacks	2017-18	118	165	153	126	562
	2018-19	130	134	114	137	515
	2019-20	80	110	125	147	462
	2020-21	127	146	159	128	560
Total Sum of Amount		1,525,827	1,784,808	1,936,167	1,707,631	6,954,433
Total Count of Id		455	555	551	538	2099

The aim of this business case is to increase direct payment activity by c. 10% per annum, so it is reasonable to assume that clawbacks would increase at 10% per annum in line with this. The clawbacks will be utilised to offset some of the cost of the investment required.

Non-Financial Benefits

- Accelerate progress and improvement through the Direct Payment Board
- Delivery of improved options and outcomes for people

- Compliance with The Care Act (2014) re. Offer of Individual Service Funds
- Ambassadorship / Championing of self-directed support options with capacity to become in-house expert who can provide training and mentoring.

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

Risk	Mitigation	RAG (should the risk occur)
Ability to recruit to these positions in a timely manner	Many of the individuals responsible for implementing actions above are already employed by the Council. However, extra resource dedicated to self-directed services would enable better and more timely results against targets.	Amber
Lead time between referral and first Direct Payment	Project will be working to significantly reduce waiting times between referral and first payment prior to expanding the payments scheme to ensure wait times are minimised.	Amber
Lack of support for interim-only care arrangements while Direct Payment is set up	Temporary care measure will be put in place with contracted providers to ensure support is always available	Red
Systems (Mosaic/Liquid Logic) make it difficult to communicate with specific cohorts e.g., Direct Payment clients with Personal Assistants.	We will work with IT and our supplier to see how we can actively improve communications and transition between systems	Amber
Personal assistant availability is time-sensitive, changing from one week to the next; Personal Assistant register has some gaps in specific geographical areas.	The Care Together project is working to increase availability in these areas through microenterprise initiatives.	Amber
Difficulty in unifying the way data is collected and stored makes comparisons across	Work is ongoing within these systems to unify how this data is stored and used.	Amber

both local authorities and across age groups difficult.		
There may be resistance from some teams to new ways of working e.g., Independent Service Funds.	A program of information and training has been initiated to mitigate any resistance to new ways of working.	Amber
Set up an in-house Personal Assistant support service to deliver care immediately after referral while a long-term Personal Assistant is recruited	Through Market Testing will be completed to assess the viability of this service prior to initiation.	Amber

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

In scope:

All Council funded forms of Self-Directed Support (Direct Payments and Individual Service Funds) are in scope.

Out of scope:

Continuing Health Care (CHC) and Personal Health Budgets - responsibility for these is with the NHS.

Section 4i Adults and Health

Capital Investment Proposals

Independent Living Services (new builds) Page 264

Business Planning: Business Case – Investment / Savings

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

Committee:

Adult and Health

2022-23 Revenue Investment amount: N/A

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

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

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

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

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

Brief Description of proposal:

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

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

Date of version: 09/09/21

BP Reference: N/A

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

1. Please describe what the proposed outcomes are:

Communities at the heart of everything we do:

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

A good quality of life for everyone:

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

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

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

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

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

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

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

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

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

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

- (Independent Living Services). This level of control is frequent practice across the CCC in long-term capital programmes; and
- the 'buy-model' option. Here the private service providers would be commissioned to build ILS services in Cambridgeshire. We would contract flats within the ILS.

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

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

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

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

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

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

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

High Level Timetable

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

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

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

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

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

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

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

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

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

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

A more detailed Community (Equality) Impact Assessment has now been developed for this proposal.

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

Financial Benefits

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

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

Non-Financial Benefits

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

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

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

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

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

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

programme benefits will be increased. But no benefits are expected in the near term.			
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8. Scope: What is within scope? What is outside of scope?

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

Section 4j Highways and Transport

Savings Proposals

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Review & re-baselining P&E income	Page 284
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Business Planning: Business Case proposal

Project Title: Traffic Management - Review of network in terms charges, enforcement and powers

Committee: Highways and Transport

2022-23 Savings / Income amount: -£300k

2023-24 Savings / Income amount : -£130K

Brief description of proposal: This includes a review of the following:

Existing powers:

- Review of the strategy for bus lanes / bus gates county wide
- Review on street parking policy and operations

Future powers:

- Explore opportunities for Civil Parking Enforcement (CPE), enactment of part 6 of the Traffic Management Act (moving traffic offences) and pavement parking restrictions
- City Access (potential demand management / environmental management)

Date of version: 25/10/2021

BP Reference: B/R.7.100
B/R.7.101

Business Leads / Sponsors:

David Allatt

1. Please describe what the proposed outcomes are:

The proposal is to undertake a review of existing powers and explore how future powers may generate additional revenue through charges, as well as realising other corporate aims.

Existing powers include:

Bus lanes / Bus Gates

- Protect public transport journey time and attractiveness
- Revenue surplus

On Street Parking Policy

- Encourage more sustainable travel choices
- Influence demand for car parking and nature of use
- Revenue surplus

Potential Future Powers include:

Civil Parking Enforcement:

This concerns Civil Parking Enforcement in the Fenland, Huntingdonshire, and South Cambridgeshire districts, as well as Cambridge City. This power would allow the authority to effectively manage and enforce on and off-street parking areas to prevent inconsiderate parking, improve access, support local economies and business and contributes to the Council's overarching environmental objective to reduce congestion and improve air quality.

Traffic Management Act Part 6:

This concerns congestion and network management. These powers would give the authority more control over vehicle movements at key intersections which will result in a greater level of resilience of the transport network. Illegal movements at key junctions have significant impact on the flow of traffic and at present there is no consequence for those undertaking this illegal action. The enforcement of these movements would reduce the occurrence, and therefore allow more consistent and efficient management of signal strategies and queuing traffic.

The Greater Cambridge Partnership (GCP) City Access (potential demand management / environmental management):

This will create a more attractive environment for buses, and non-motorised users to travel effectively. Beyond being a potentially significant revenue source, in doing this, the authority can tackle air quality and carbon emissions, as well as positive health and wellbeing.

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

The work has been identified as a key priority by the Joint Administration. The Joint Administration Agreement states the following:

‘We will focus on modal shift to encourage more residents out of cars, along with infrastructure development, the encouragement of sustainable travel, and securing safe routes and connections for pedestrians and cyclists.’

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

This business case focuses on (i) utilising existing County powers to better effect, and (ii) harnessing new powers to support enhanced network management. The County is therefore best placed to deliver these initiatives.

The Greater Cambridge Partnership (GCP) is leading the City Access work. County will need to work closely with the GCP – engagement is ongoing in this regard to best shape the approach.

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

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Bus Lanes	Linked to CPE		CCC
Parking Policy:			CCC
Full review of charges and tidy up anomalies in the City during FY 22/23	FY 22/23		
implement		April 23	
Soham Station analysis	Sep 21	Oct 21	
Station opening –	Dec 21		

CPE:			CCC
Draft Agency Agreements (AA)	Oct 21	Jan 22	
Approval of AA	Feb 22	Jun 22	
Commence review of existing signs, lines and TROs	Mar 22	May 22	
Draft application for Civil Enforcement area in districts	Feb 21	Sep 22	
Raise purchase order and commission remedial works	Jun 22	Aug 22	
Commence remedial works	Sep 22	Sep 23	
Application submitted to Department of Transport (DfT)	Oct 22		
DfT review and parliamentary process	Oct 22	Mar 23	
Statutory consultation process	Apr 23	Jun 23	
Designation order created and CPE brought into effect	Oct 23		
TMA Part 6:			CCC
EoI to DfT	August 21	August 21	
Develop proposal	August 21	Nov 22	
Consult	Jan 22		
Designation orders	March 22		
City Access:			GCP

GCP consultation and strategic business case	Oct 21	Dec 21	
Consultation on preferred scheme	Jun 22	Jul 22	
Implementation	Jan 23	Dec 23	

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

Two Equality Impact Assessments have been developed - one for parking charges and one for bus gates. These will be reviewed and updated as each project progresses.

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

Financial Benefits

Review of the strategy for bus lanes / bus gates county wide:

The strategy would be in line with the Local Transport Plan to prioritise public transport, while also restricting car use (or making it a less attractive option). For sites outside Cambridge City we need to wait until CPE is implemented (see timescales above) . In Huntingdonshire and South Cambridgeshire, there are a few sites where County could do bus lane / bus gate enforcement and we are building into the CPE agency agreements that bus lane / bus gates enforcement remains with County.

New possible sites for bus lanes / bus gates include Madingley Road and Victoria Avenue. As these two are already in Cambridge City we can proceed more swiftly. An indicative surplus income figures for the two sites would be £120K PA for both sites (Cameras as per above)

Costs would be needed for set up:

- Civils for both sites including signs and lines £30K (subject to site visits, target costs etc)
- Traffic Regulation Orders (TROs) £2K - Total £70K to install both sites

Other potential sites for bus lanes/bus gates include:

- Exploring opportunities with GCP regarding funding for Victoria Avenue. This location is outside the existing Special Enforcement Area
- Cambourne bus gate on to Bourn Road. It is anticipated that developers would fund the set up of this bus gate.

- Longstanton / Northstowe at Park and Ride site. This would be funded from local development.
- Huntingdon Road, Girton (SCDC). It should be noted that this bus lane would need funding.

It is too early to give an income figure for the sites outside Cambridge as it is dependent on CPE being introduced. They are unlikely to be high, and some may not cover running costs.

Review on street parking policy and operations:

For the 2021/22 financial year, the interim traffic management proposal to impact on demand increase in charges will lead to potential increase in surplus of £200K. For the 2022/23 financial year we will do a full review of charges and tidy up anomalies in the city due to be implemented by April 2023 (i.e. without the need for infrastructure investment). This however does need to be carried out in-line with the GCP's parking strategy which may impact on income if more parking is taken out for other kinds of infrastructure (e.g. cycle lanes). There is potential for increased income from parking of £150k (Year 1). It should be noted that this assumes significant on-street parking assets are not removed in favour of cycling projects.

Future powers:

It is proposed the authority explore opportunities for Civil Parking Enforcement, enactment of part 6 of the Traffic Management Act (moving traffic offences) and pavement/layby parking restrictions. Enforcement of layby CPE will run at a deficit in the other districts but costs to be met by Districts / GCP so should be net zero to CCC and opens up opportunities for bus gate and moving traffic enforcement.

Regarding moving traffic enforcement, it is proposed this is trialled in Cambridge City and then reviewed in further detail to build a more detailed business case for it. Use of this power needs to evidence where there is a congestion / safety problem and that the costs will be covered by income from fines. At this stage it is difficult to predict surplus income. However somewhere busy (e.g. the centre of Cambridge) is likely to be closer to £100k per annum surplus income. Up-front funding would be needed to undertake this analysis and then put the sites in. There is the potential for GCP funding for these set up costs.

Regarding pavement parking, the service is still awaiting further details from DfT. It is therefore difficult to put an income figure against this power at this stage.

Regarding city Access (potential demand management / environmental management) congestion or air quality charging scheme, it is dependent on the nature of the scheme pursued. There is opportunity for significant revenue generation, but discussions will be required in terms of how this is spent.

Non-Financial Benefits

Key Benefit	Measure	Baseline	Target & Timescale
Improved traffic management	Reduced congestion	Current traffic levels	TBD as part of the review
Improvements to public transport	Bus journey times	Current bus journey times in Cambridge	TBD as part of the review
Improved air quality	Air quality data	TBD as part of the review	

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Public and political resistance to more penalties	Effective comms strategy	Amber	CCC / GCP

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

The specific powers available for review are set out in Section 1.

Business Planning: Business Case – Savings proposal

Project Title: Highways Service Delivery Efficiencies

Committee: Highways & Transport

2022-23 Savings amount: £110k

Proposal: Improvements in Highway service delivery through improved resource planning and works scheduling, together with a review of the operational delivery of services to identify future efficiencies. This will include the development of greater integration with our supply chain partners, scheduling works and planning programmes of work.

Date of version: 05/11/21

BP Reference: B/R.6.220

Business Leads / Sponsors: Emma Murden

1. Please describe what the proposed outcomes are:

The proposal ties in to the following CCC outcomes:

- Communities at the heart of everything we do
- A good quality of life for everyone
- Cambridgeshire: A well-connected, safe, clean, green environment
- Protecting and caring for those who need us

There is an opportunity to identify business efficiencies in planning and scheduling work. Avoiding duplication will achieve business efficiencies in scheme development, as well as construction, and will result in a positive impact on budgets. Through the Highways Services Contract we can jointly achieve this through better business processes, sharing information and integrated IT systems with the service provider Milestone.

This proposal forms part of the business savings identified in the contract, which will be rolled out collaboratively. However as new opportunities arise, we can improve existing processes. This is largely dependent upon the implementation of the IT systems by both the Client and Service Provider.

It is anticipated that the key outcomes of the proposal will include a more efficient and responsive highway service, less disruption on the network and resources being more aligned to where they are needed. Operational needs will be better served with improved planning and resource allocation, and we have already seen contract efficiencies in this area. Savings can also be achieved by bringing forward efficiencies in combined use of road space, rather than doubling over the same areas. It is also anticipated that more significant operational efficiencies could be achieved in the longer term through greater integrated working with Milestone.

By developing integrated teams to reduce duplication and combine schemes not into budget areas but rather as a holistic corridor scheme which includes all expenditure and delivery, this proposal reduces the amount of resources required for CCC and also reduces the disruption to the travelling public. There is also the added benefit of cost efficiencies where there is sufficient flexibility in budgets to move money into the year it is required and combine spend, which again may lead to savings. The proposal will also result in a reduced carbon footprint due to less duplication and fewer journeys.

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

Well Managed Highways is national Code of Practice and by changing our ways of working, we will be enhancing our adherence to these guidelines. The proposal also reflects the Highway Operational Standards document which outlines highways asset management policies. The proposal aligns to the organisation's business strategy by delivering a better service through better processes and systems, while

simultaneously offering the service delivered on the ground to be more streamlined and efficient. In addition, the proposal delivers services to agreed budgets and delivers value for money by not duplicating work or unnecessary resources, for projects and programmes of work within the service.

The efficiencies will deliver savings as this is a known business model and the need to avoid any unnecessary costs with service delivery to achieve the desired outcomes is straightforward. Feedback from stakeholders confirms improved service delivery, in a timely and cost-effective way.

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

This initiative needs to be delivered in collaboration with the strategic supply chain partner for delivering the Highway Service, Milestone. As such, a partnership approach is essential to deliver these outcomes. However, it should be noted that there are opportunities to avoid duplication and double counting on costs internally too. This will be achieved through improved project management, planning and scheduling resources and works, thereby reducing person marking and the costs involved.

The core advantage of this initiative therefore is that it offers better value for money, customer care and avoids duplication for all three elements of this proposal. Our supply chain partner has been engaged as part of this process, as these opportunities are not achievable without them. However, further review and challenge for both CCC and Milestone will continue to identify further opportunities for efficiencies.

This initiative should be understood as the start of the process of achieving on-going efficiencies. The various options available for the different parts of end to end Highway Delivery will be better understood once the business modelling commences, and businesses are engaged in achieving this.

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

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Reduce resource allocation to work; by smart allocation of people resources to deliver programmes of	April 2022	Ongoing	Cambridgeshire Highways

work in an integrated way.			
Smart planning and scheduling, through the whole project lifecycle. Including use of POWA (project management online tool) and Project Management principles through the contract.	April 2022	Ongoing	Cambridgeshire Highways

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

It is anticipated that the proposal would have no impact on people with protected characteristics, however an EqlA will be completed as work progresses to ensure that proposals are inclusive for staff / communities with protected characteristics that may be affected.

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

Financial Benefits

Smart planning and scheduling

This will be achieved through bringing forward efficiencies in the combined use of road space and avoiding duplication, improved work planning and service integration.

Non-Financial Benefits

Key Benefit	Measure	Baseline	Target & Timescale
Less disruption to the travelling public, combining works wherever possible.	Less road space booked and coordination of resources to deliver the desired outcomes.	Exiting KPI monitors booking road space and noncompliance.	Annual going forward

Better resource allocation to the public.	Better customer care, less unnecessary touch points with our service. First point of contact can assist and respond.	Customer Reporting Notifications	Annual Reporting
Less duplication at a cost	More service for the budget	Productivity and budget allocation	Y1 and benchmarking previous years
Communication improvements to the travelling public on programmes of work and delivery timescales	Planned works shared in a proactive way.	SharePoint and info available on the website.	Y1 and ongoing.

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Rollout	Early engagement	Amber	Cambridgeshire Highways
Savings not achieved	Tracking throughout the year	Amber	Cambridgeshire Highways
Systems and processes aligned	Check compatibility and system integration, organisational governance	Amber	Cambridgeshire Highways, IT

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

Only the Highway Term Service Contract is in scope for this business case.

However, if a full Project Management Office was in operation it could potentially be achieved across more contracts (throughout P&E and any associated Cambridgeshire County Council departments) through joint delivery.

Business Planning: Business Case – Income

Project Title: Review and re-baselining of Place & Economy Income

Committee: Highways and Transport

2022-23 Income Amount: -£500k

2023-24 income amount -£400k

2024-25 income amount -£250k

Brief Description of proposal:

Place & Economy (P&E) as a directorate, generates many income streams associated with the services it provides. These will be reviewed, to ensure the income is maximised whilst adhering to any conditions applied to the income generated.

This will involve re-baselining the income streams to capture how our business within the county has evolved.

Whilst reflecting on these changes we anticipate there is further income to be secured. Initially we would expect additional income of £500k across the directorate in 2022/23 as the changes are implemented. This will reduce to £400k per annum for 2023/24 & to £250k per annum from 2024/25.

Date of version: 5 November 2021

BP Reference: B/R.7.102

Business Leads / Sponsors: David Allatt

1. Please describe what the proposed outcomes are:

The P&E directorate will undertake a comprehensive review of its income streams, mindful of the respective conditions associated with said income. The review will focus on ensuring that income is appropriately maximised.

Initially we would expect additional income of £500k across the directorate in 2022/23 as the changes are implemented. This will reduce to £400k per annum for 2023/24 and to £250k per annum from 2024/25.

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

The Place and Economy directorate is responsible for a wide range of services, including:

- Road safety
- Traffic management
- Street lighting
- Guided Busway
- Transport
- Minerals and waste
- Energy
- Waste management
- Highways maintenance

In providing these services, the directorate generates a range of income sources. This document sets out that a review will be undertaken to ensure that income is maximised, where appropriate within the directorate.

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

The option of 'do nothing' was considered, which would naturally result in no net change on income.

Through review, we anticipate additional income of £500k across the directorate in 2022/23 as the changes are implemented. This will reduce to £400k per annum for 2023/24 & to £250k per annum from 2024/25.

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

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Review initiated	Late 2021	Early 2022	Steve Cox
Implementation	Early 2022	Ongoing	See above

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

We do not anticipate the review to have a disproportionate impact on people with protected characteristics, but this will be considered as part of the review and a full EqlA (Equality Impact Assessment) is being developed.

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

The benefits of this proposal are solely financial as set out above. Increasing income levels will mean that a higher percentage of the costs associated with providing the service will be covered, and therefore prevent service reductions within P&E.

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

N/A

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

This proposal relates only to income across P&E

Business Planning: Business Case proposal

Project Title: Recycle asphalt, aggregates and gully waste

Committee: Highways & Transport

2022-23 Savings amount: -£15k

2023-24 Savings -£20k

Brief Description of proposal:

Reduce waste to refuse through recycling aggregates and gully waste and reuse the products back in the highway service.

Date of version: 14 September 2021

BP Reference: B/R.6.215

Business Leads / Sponsors: Emma Murden

1. Please describe what the proposed outcomes are:

This proposal is centred around efficiencies in recycling by reducing waste to refuse through recycling aggregates and gully waste, and then reusing the products back in the highway service. To facilitate this kind of recycling in the depots, there will be costings around licenses and depot refurbishment; these are currently being undertaken. Core options are for a large scale recycling centre on a new site or alternatively a smaller scale opportunity within an existing depot.

This proposal links to a variety of CCC outcomes, including:

- Communities at the heart of everything we do
- A good quality of life for everyone
- Helping our children learn, develop and live life to the full
- Cambridgeshire: A well-connected, safe, clean, green environment
- Protecting and caring for those who need us

In addition to delivering financial savings, this initiative ties into CCC's overarching strategies to reduce its carbon footprint, and further utilising a source of renewable materials that can be reused at reduced costs, with less haulage overall. It is hoped that if successful, then this model could be rolled out to other service providers and this opportunity may open new markets to CCC's services in the private sector.

There will be environmental or climate change outcomes, these are currently being assessed and an outline measure can be seen in the table calculations attached in the appendix.

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

Recycling supports national, local, and business policies for reducing the carbon footprint and reduction of using virgin aggregates. The proposal meets the Environment Strategy and the administrations broader objectives for the Highways service. Furthermore, it meets the Environment and Climate Change Strategy for the reduction in the carbon footprint of the service and CCC's overall business. The proposal aligns with feedback from stakeholders and communities telling us that they would like to see a greener service, at less cost but still as effective.

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

At this stage, the scale of the project can be varied. It is suggested that small facilities are trialled initially with a view this fits with a wider scale depot rationalisation. This small facility option incurs less of a cost but also only allows for less production, whereas the larger scheme, while costing £2m, has the potential to bring about more business and better margins, should the smaller hired set up be a success. Discussions are ongoing

with our Service providers in terms of how we can deliver such a project. This project will be delivered jointly with our strategic partners for the highway service, Milestone. Insourcing is not an option at this stage.

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

There are a number of detailed business cases due to be developed by CCC and the strategic service provider as outlined below. Milestone, the Highways Contractor has introduced similar facilities elsewhere and are working in partnership with us on this project. Other teams that will be involved with the process include the Commercial Team who will be able to monitor the business case and ensure that the proposal continues to provide value, as well as Environment Team and Finance.

Stakeholders and partners will be able to monitor the progress of this proposal via the current Highway Services Contract governance through Joint Management Team and Board. Members and then the local teams (including Property and Communities) will then be involved.

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Gully waste recycling	Summer 2022	Ongoing	CCC
Aggregate recycling – small scale	Summer 2022	Ongoing	CCC
Aggregate recycling – large scale	Summer 2023/4	Ongoing	CCC

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

It is anticipated there will be no impact on people with protected characteristics including poverty and rural isolation from these proposed changes. However, an EqlA will be carried out before the scheme proceeds, to ensure proposals are equitable.

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

Financial Benefits include:

- Gully waste reduction costs reduce by £15 per tonne, that equates to approx. £12,285 per annum savings.
- Asphalt, stone, and aggregate recycling CCC currently produce 9982 tonnes a year, 5000t could produce savings of £106,000 and 48 tCO₂e. Costs of a small-scale facility would be beneficial, and a larger commercial set up could be costs if the small-scale facility is successful in an existing depot and there is a greater demand for the service.
- The marketplace may be more attractive with the recent material shortages and increasing costs of materials by 10-20%, therefore a smaller facility may be the preferred option, in the short term and developed if demand out stretches production.
- Asphalt and aggregate recycling smaller scale costs are currently being assessed. But it could generate £21,200, in Year 2 after setting up costs.
- The project is likely to generate an a saving of approx. £10-30k in the first year and depending on the scale of project will affect the savings, accordingly, going forward.

Non-Financial Benefits

Summary of non-financial benefits is tabled below.

Key Benefit	Measure	Baseline	Target & Timescale
Carbon reduction – gully waste	tCO ₂ e	2 based on CCC current tonnage	4 per 1000 t.
Carbon reduction – asphalt/ aggregate recycling	tCO ₂ e	48 +	Per 5000 t

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Not getting the consents required to run the facility from the Environment Agency	Work with them on setting up the facility	Amber	CCC
Not sufficient supply for demand	Look for other sources	Green	CCC

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

For the purposes of this business case, the proposal covers the Highway Services Contract only. However, the scheme could potentially be rolled out to other contracts (e.g waste), from other contractors in Cambridgeshire if similar savings and benefits could be realised.

Business Planning: Business Case – Savings proposal

Project Title: Review Street Lighting service requirements

Committee: Highways and Transport

2022-23 Savings amount: -£10k

Brief Description of proposal:

Review Street Lighting service requirement, firstly reducing the frequency of night time inspections (scouting) during the winter months, ensuring a consistent frequency of inspections throughout the year.

The on-going review will look to identify opportunities to modify lighting regimes to reflect environmental priorities.

Date of version: October 2021

BP Reference: B/R.6.216

Business Leads / Sponsors: Alan Hitch/ Emma Murden

1. Please describe what the proposed outcomes are:

This proposal recommends changing the frequencies of the current night time street light outage detection inspections. Currently, they are inspected every fourteen days during winter (October to March inclusive) and every twenty-eight days during summer (April to September inclusive). The proposal recommends that scouting be carried out every twenty-eight days throughout the year (January to December), thereby delivering a saving of £10k per annum.

This proposal is made as the performance indicators for the street lighting maintenance performance (LP3 Percentage of Lighting Points not working as planned) have consistently shown that the required target of 99% of streets lights to be working, has been consistently met and we do not believe that changing the scouting frequencies will alter this level of performance.

The proposal also involves a review of the street lighting dimming regime for street lights owned by the County Council. This would include reviewing the current dimming regimes as detailed in County Councils Street lighting policy to look at the possibility of additional dimming for residential areas and areas with low night time usage (commercial areas etc). It must be noted that whilst changes to the dimming regimes of our street lights which are controlled by the central management system (CMS) can be changed remotely, those which are not controlled by the CMS system (majority of village locations and smaller communities) would have to be changed by an engineer physically visiting the light with the associated cost linked to this activity having to be paid. Further information is provided in the table below:

Road Type	Dimming Regime/Lighting Levels
Traffic Routes	Dimmed between the hours of 20:00 and 00:00 by one (1) lighting class (20%) to give 80% light output and then dimmed between 00:00 and 06:00 by two (2) lighting Classes (40%) to give 60% light output
Residential/Public Areas	Dimmed between the hours of 22:00 and 06:00 by 40% Lamp light output to give 60% light output

In addition to delivering cost savings, any agreed dimming regime could significantly reduce the authority's energy usage, which would create both energy savings and carbon savings. This review will include the consideration of LED replacement programme and part night lighting for street lighting assets across Cambridgeshire.

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

The replacement proposal targets our street lighting lanterns which use the most energy per lantern.

The replacement proposal covers street lighting lanterns that are primarily located on traffic routes and so their replacement with white light LED lanterns would improve the lighting on these roads from a road user perspective.

The replacement of the selected high-pressure sodium (SON) lanterns, which as noted above, will be primarily located on traffic routes, will result in fewer required planned maintenance visits by our service provider Balfour Beatty Living Places (BBLP) as lamp changes will not be required, and fewer fault visits as LED lanterns are significantly more reliable than conventional lanterns. Fewer maintenance visits on traffic routes also results in less exposure to risk for our operatives and fewer vehicle journeys which helps with our carbon reduction aims.

The replacement proposal would also look to include the lighting controls of the lanterns and where possible look to include central management system (CMS) controls, which would enable the lanterns to be controlled remotely and, in the future, possibly be controlled dynamically so that the road could be lit in line with the actual traffic usage at any given time.

A caveat to note is that there is a current risk with regards to material costs rising significantly for street lighting equipment and materials (Street lighting lanterns, Street Lighting columns and associated materials).

The proposed change to LED lanterns will result in a significant reduction in carbon emissions and energy usage, which would assist in reducing the County Councils carbon footprint in line with its climate change and environment strategy.

This proposed project has used evidence from the previous LED replacement project that was completed in December 2018 which included replacing 3,635 inefficient street lighting lanterns with LED lanterns. This project significantly reduced energy consumption for the upgraded streetlights saving 743,961 kWh per year whilst also improving the lighting provision. Feedback from residents in the areas where the new LED lanterns were installed was very positive.

As noted in the point above, the County Council replaced 3,635 inefficient street lighting lanterns with LED lanterns in 2018, with feedback received from the residents in the areas where the LED lanterns were installed being very positive, informing us that they were pleased that the new lanterns have been installed. We have also received a number of requests from residents asking when LED lanterns will be fitted to their roads in areas near to where the new LED lanterns were installed.

3. Has an options and feasibility study been undertaken?

Please explain what options have been considered.

The proposed street lighting service requirements review is the only option being proposed and this review would be carried out by the County Councils highway commissioning team. Doing nothing would result in opportunities for financial savings and energy improvement to be missed.

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

The outline plan would be to carry out the proposed street lighting service requirements review and compile findings into possible options to be considered for consultation and, if agreed, future implementation.

The project leads for this proposal will be Emma Murden and Alan Hitch, responsible for Highway Contracts and Commissioning in CCC Project Delivery. Scouting is currently provided by the service provider under the private finance initiative (PFI) contract so will be negotiated with them. It is anticipated that the Commercial team involvement will be explored in more detail as the project progresses. Given the nature of the proposal, a stakeholder communication plan will be developed as the proposal is progressed based on options selected for implementation.

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

There is, at present, no identified impacts on people with protected characteristics including poverty and rural isolation from these proposed changes. There could be some impact in less frequent scouting of the lights, but this is unlikely, and we will work with stakeholders to ensure that we can be quickly notified if any street lights fail. An EqIA will be developed to ensure we comply with our Public Sector Equality Duty and mitigate against any adverse risks to people with protected characteristics in our communities.

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

Financial Benefits

1. The review of the scouting regime will deliver a £10k per annum saving

2. The replacement LEDs saving of £325k per annum in year 10 (following the payback period) may be achieved in less time if it can be incorporated as part of the routine maintenance replace programme over the next four years.

Non-Financial Benefits

1. The replacement proposal targets the street lighting lanterns that we have that use the most energy per lantern.
2. The replacement proposal covers street lighting lanterns that are primarily located on traffic routes and so their replacement with white light LED lanterns would improve the lighting on these roads from a road user perspective.
3. The replacement of the selected SON lanterns, which, as noted above, will be primarily located on traffic routes, will result in fewer required planned maintenance visits by BBLP as lamp changes will not be required. It will also result in fewer fault visits as LED lanterns are significantly more reliable than conventional lanterns. Fewer maintenance visits on traffic routes also results in less exposure to risk for our operatives and fewer vehicle journeys which helps with our carbon reduction aims.
4. The LED replacement proposal would also seek to include the lighting controls of the lanterns and, where possible, look to include CMS controls, which would enable the lanterns to be controlled remotely. In the future, these could possibly be controlled dynamically so that the road could be lit in line with the actual traffic usage at any given time.

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

There is a current risk with regards to material costs rising significantly for street lighting equipment and materials (Street lighting lanterns, Street Lighting columns and associated materials) which could affect the overall cost of the proposal to introduce a small LED replacement programme for the most inefficient lights.

The risk of not changing the most inefficient street lighting lanterns to LED lanterns is that energy costs continue to rise and in turn the street lighting energy expenditure continues to rise also.

As far as a reduction in scouting is concerned, there may be a perception of an impact on community safety as the public will need to report faulty lights if there is an issue before the next monthly check, this would be the same level of service as currently in the summer months. However, if the level of lighting were to decrease if there was part night lighting, this would need a full community safety audit working with the District councils and Police before any lighting services were reduced.

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

The following elements are within the scope of the proposal:

- Street lighting dimming regime review for street lights owned by the County Council or partial part night lighting introduced.
- Investigate viability and associated costs to change the frequencies of the current night time street light outage detection inspections from the current frequency, provided by the service provider under the PFI contract.
- Develop/investigate proposal to introduce a small LED replacement programme for the most inefficient lights, approx. 9000 units with the suggested rollout to be part of the maintenance regime over a four-year period.

The following elements are out of scope for the proposal:

- Future smart technology and dynamic lighting, part night lighting or similar lighting regime.

Section 4k Highways and Transport

Pressures / Investment Proposals

Place & Economy Restructure Page 299

County input to Nationally Significant
Infrastructure Projects, and Transport Works Page 304
Act Orders

Business Planning: Business Case – Pressure

Project Title: Place & Economy Restructure

Committee: Highways & Transport / and
Environment & Green Investment

2022-23 Investment request: £260k pa

Brief Description of proposal:

JMT agreed the restructure of Place & Economy (P&E) senior management structure which is currently being recruited to. It has been agreed that the in-year costs (2021/22) will be met using existing funds but the ongoing costs (£260K pa) need addressing through Business Planning.

This business case requests £260k to fund the additional costs of the new agreed structure. The existing revenue and capital funding will continue to fund the structure but this £260k is required to fund the net increase.

Date of version: 23 September 21 BP Reference: B/R.4.015

Business Leads / Sponsors: Steve Cox

1. Please describe what the proposed outcomes are:

The Place & Economy (P&E) Directorate is responsible for many of the enablers of growth across the county, and supporting prosperity by delivering services which keep residents and businesses moving efficiently and safely. As the central focus for Cambridgeshire's place-based services, the work of P&E is crucial in achieving the Council's overall aim of making Cambridgeshire a great place to call home and accomplishing the four core priorities of:

- Developing the local economy for the benefit of all
- Helping people to live independent and healthy lives
- Supporting and protecting vulnerable people
- Climate change and sustainability

The landscape that the County Council is working within has changed significantly in recent years with the introduction of the Greater Cambridge City Deal in 2015 now managed by the Greater Cambridge Partnership (GCP) and the Mayoral Combined Authority in 2017 (CPCA). In addition, most of CCC's senior management team until recently have been engaged in shared roles with Peterborough City Council (PCC), including the Executive Director for Place & Economy and the Service Director for Highways & Transport.

In March, our JMT (Joint Management Team) agreed to a proposed new structure for P&E Management. In order to drive forward the aspirations described above and to achieve the ambitions set out for P&E and the drivers for a new senior management structure, the following changes were agreed:

1. Deletion of the existing Service Director post
2. Deletion of Assistant Director Highways & Assistant Director Infrastructure & Growth posts
3. Creation of a new Director for Highways & Transportation that is 100% focussed on CCC
4. Three new Assistant Director roles:
 - a. Assistant Director Highways Maintenance: focussed on maintaining our existing highways asset
 - b. Assistant Director Transport & Strategy: focussed on longer term strategy, development and getting the best out of our network
 - c. Assistant Director Project Delivery: focussed on commissioning and project delivery of the schemes and initiatives we are tasked to deliver. This will also include ensuring we get the best out of our supply chain partners and stronger relationship management with GCP and CPCA.

All the posts have now been recruited to, and senior management within P&E is fully in place with the task of ensuring that the new management structure works for the service. Moving forward there will be a need to fund the additional costs of the new agreed structure. The existing revenue and capital funding will continue to fund the structure but £260k is required to fund the net increase.

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

During the Summer and Autumn of 2020 an internal review of Highway Capital Delivery was commissioned to understand the effectiveness of capital programme management and the overall control environment. It included a detailed review of several key schemes. That work was completed in October 2020. It concluded that a significant programme of work was being delivered across the Major Infrastructure Delivery (MID) team with a large number of complex and high profile schemes.

The review underlined the need for stronger early concept and design work, a greater understanding of risk and improved budget setting. There are a number of components that team leaders and managers are already seeking to re-shape and enhance service delivery within P&E; together these will create a stronger and more transparent control environment. Once implemented and operational across H&T projects, the service can realise overarching governance, project assurance, and greater control including programme, risk and cost control. It is in the context of this review that a revised management structure was settled upon.

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

The proposed restructure went through various iterations before it went out to consultation and was further developed to reflect the consultation feedback. This structure was felt to be the most appropriate to deliver the objectives mentioned above.

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

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Recruitment to all posts	In process	TBC	Steve Cox
Recruitment of Director	Sue Proctor started on 1 November 2021		Steve Cox
Assistant Director appointments	One AD started on 1/9/21. The second will start on 23/11/21. New AD for Growth, Environment and Planning started on 1/7/21	23/11/21	Steve Cox

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

It is not anticipated that this restructure will have effects on people with protected characteristics. An Equality Impact Assessment was developed and this will be reviewed and updated for this iteration of the restructure. The EqlA was completed before the restructure commenced to ensure we adhered to our Public Sector Equality Duty.

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

The revised senior management structure will:

- Provide robust and resilient leadership for the future goals of the Place and Economy directorate;
- Better align functions within Place & Economy to build cohesion and resilience
- Ensure accountability rests at the right level in the organisation through clearly articulated roles and responsibilities;
- Simplify structures so our staff are closer to the customers that they are serving;
- Look for opportunities to commercialise and take appropriate risks by putting in place supportive systems and processes that enable and facilitate service delivery

Financial Costs

The restructure will result in an additional £260k being needed per year to fund the new roles outlined above.

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Risk of not being able to recruit to roles.	N/A All roles have now been recruited to	Green	Steve Cox
Risk of not being able to retain managers	Working closely with managers and being proactive about addressing problems as and when they arise	Amber	Steve Cox

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

Only the roles above (listed in section 1) are impacted by the proposals and are in scope.

Business Planning: Business Case – Investment proposal

Project Title: County input to Nationally Significant Infrastructure Projects, and Transport Works Act Orders

Committee: Highways and Transport

2022-23 Pressure / Investment: £147k

Brief Description of proposal:

The investment is towards the County Council's technical input and planning representation on a programme of massive infrastructure schemes – specifically, those considered 'Nationally Significant', or those requiring a 'Transport and Works Act Order'.

Technical resource is required to negotiate favourable outcomes from the consenting of 'nationally significant', and other substantial third-party infrastructure projects affecting Cambridgeshire.

These large projects have substantial inherent risks, so it is vital that the County is properly resourced to mitigate these risks, by

- (i) Pre-application involvement in shaping the projects
- (ii) Securing comprehensive mitigation as part of any planning consent, through appropriate legal agreement

By investing now, we could prevent significant future costs/risks.

Date of version: 25/10/2021

BP Reference: B/R.4.016

Business Leads / Sponsors: David Allatt / Gareth Blackett

1. Please describe what the proposed outcomes are:

This business case seeks investment towards the County Council's technical input on the shaping and consenting of a programme of 20 massive third-party transport and energy schemes. We are obliged to be involved in these because (i) it is a statutory duty and (ii) they present broad and significant risks if not properly planned.

The primary purpose of this input is to prevent these projects from causing significant future financial and reputational damage to the County Council. For example, the most recent Nationally Significant Infrastructure Proposal (NSIP) to be delivered in Cambridgeshire was the A14, and this has led to a substantial County maintenance liability due to damage caused to local assets during construction. It is important that lessons are learnt and that on future NSIPs, the County deploys resource to negotiate appropriate legal agreements/protective provisions to avoid similar liabilities.

The projects in the programme of massive schemes fall into two categories, both of which require a special planning consent, involving a public inquiry:

- Nationally Significant Infrastructure Proposals - are major infrastructure proposals (such as very large energy or transport projects) that bypass normal local planning requirements and are instead given planning consent by a Development Consent Order (DCO) issued by the Planning Inspectorate / Secretary of State.
- Transport and Works Act Orders (TWAOs) - these function similarly for rail, tramway and guided bus infrastructure projects

The consenting process for these scheme types is resource intensive, and the public inquiries are a statutory duty on the Council. The County Council has never faced such a large number of these schemes at once. It is vital that input is resourced to tackle the associated risks:

- County must ensure that the infrastructure is properly designed in line with appropriate safety, engineering and sustainability standards.
- County must ensure that appropriate mitigation is secured through the planning process to ensure that any severe impacts on local communities or local networks are addressed as part of the project.
- Some schemes include a statutory requirement for adoption of new local assets: the County must ensure that these are of appropriate standard, and that long term maintenance costs are externalised.
- County input is a statutory requirement, so it is essential that appropriate technical input is resourced

Input is required from the County Council across the following teams and specialisms:

Function	County Council	District
Project Delivery		
Transport Strategy & Network Management	Non-Motorised User and Rights of Way Cycling Traffic Management Local Plan Policy Transport strategy Road Safety Traffic Modelling Business Case Legal	
Highway Maintenance	Highway Design Highway Lighting Highway Structures De-trunking and assets	
Planning, Growth & Environment	Biodiversity and Ecology Cultural Heritage Minerals and Waste Flood and drainage Archaeology Public Health	Air Quality Noise/Vibration Land Contamination Landscaping and Trees Economy Ecology
Climate Change & Energy Services	Climate and Carbon	
Connecting Cambridgeshire	Connecting Cambridgeshire	

Funding County Input into the Process

Wherever possible, the County seeks to recover its costs in resourcing this technical input. This is dealt with through Planning Performance Agreements where the pre-application advice is charged for. However, the statutory aspect of consents cannot always be recovered, and it is that element that is the focus of the business case.

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

The County Council has learnt significant lessons from the A14 NSIP, which resulted in a substantial maintenance liability on the County Council. It is recognised that the County must resource technical input to future major infrastructure projects to appropriately de-risk these schemes and maximise their value to Cambridgeshire communities.

Costs of Consent Input: Case Study – A428

Taking the A428 (at the live examination stage) as an example:

National Highways is proposing to upgrade the route between the Black Cat roundabout and Caxton Gibbet roundabout with a new 10-mile dual carriageway and associated junction improvements, including major engineering works to improve the Black Cat roundabout. The scheme aims to improve journeys by road between Milton Keynes and Cambridge, bringing communities together and supporting long term growth in the region.

The costs to date this financial year split between external technical support, internal support and legal support is £147k to date (£54k of which is internal staff time).

Funding contributions from Huntingdonshire and Greater Cambridge partners have been agreed in principle (£49k per local authority) for this period. This would leave CCC's contribution of up to £49k. Future exposure on the A428 consent is assumed on a pro rata basis to year end. This would be a total additional £147k to year end, of which £49K would be unrecovered CCC costs.

22/23 Consent Costs

The following consents, which make up the estimated £147k, are expected in 22/23:

Consent	Status	Planning Performance Agreement
East/West Rail	CCC engagement on EIA	Cost cover for engagement & evaluation only
CSET TWAO	CCC agree to promote TWAO	Officer time
Ely Capacity Enhancements	Phase 2 pt.2 consultation	£40K
MVV Energy	Initiation	TBC
A47	Pre-examination	TBC
OxCam	Spatial framework consultation	TBC
Cambridge South Station	Statement of Common Ground between CCC/GCP and Network Rail	£13K invoiced 20/21
Sunnica Solar Farm	DCO preparation	TBC

The County is required to feed into these through the following stages:

Stage	Action Required
Pre-notification	Investment planning, business case, strategic planning, options appraisals, development plan allocations, early engagement with stakeholders
Pre-application	Preparation of the DCO application – environmental impact assessment, non-standard stat consultation and on-going engagement, drafting DCO and supporting documents
Acceptance	Assessment by the Planning Inspectorate (PINS) of whether the application is of a satisfactory standard to be examined and whether the promoter has met its pre-application duties.
Pre-examination	Preparation for examination including opportunity for anyone to registers as an 'interested party' to be involved and to make their initial representations, and publication of timetable.
Examination	Inquisitorial examination of the application, led by Examining Inspectors at PINS
Recommendation	Preparation of recommendation report by PINS Examining Inspectors
Decision	Decision by Secretary of State
Post Decision	If consented, implementation, subject to judicial reviews

The proposal supports the CCC Business Plan priorities as follows

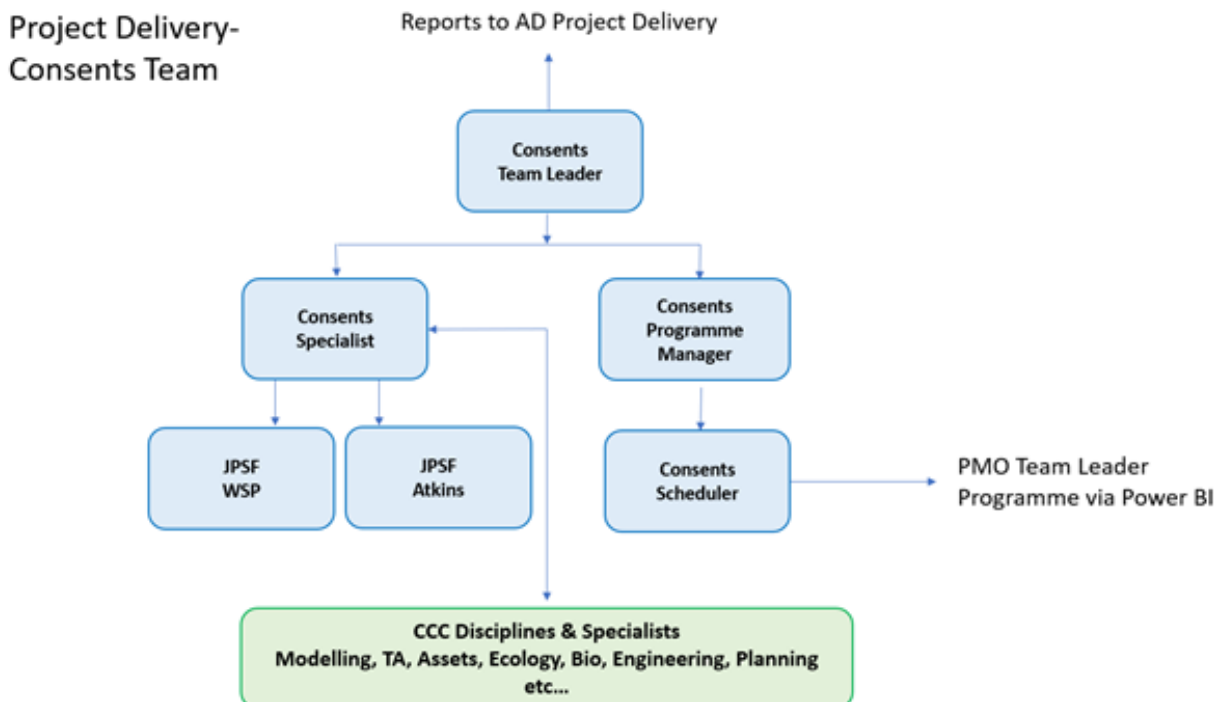
- A good quality of life for everyone
- Thriving places for people to live
- Zero Carbon emissions for Cambridgeshire by 2050

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

Ultimately the consenting of NSIPs/TWAO's is a statutory duty, and failure to input effectively presents significant risks in terms of being unable to effectively mitigate the local impact (and associated network risks/liabilities).

Programming the Consents

The County Council have established a Consents Team to (i) prepare a programme for County input into the 20 consents, (ii) negotiate funding agreements with the project promoters to recover County costs where appropriate.



Resourcing Individual Consents within the Programme

This business case is focused on resource for the County input to the projects within the programme. There is a need to draw from internal technical resource and to draw on specialist external advice where appropriate.

The lack of local resource to input into the growing number of NSIPs is acknowledged nationally. The Planning Inspectorate have convened a working group to reform the current regulations.

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

County Council input to the programme will be coordinated by the Consents Team, drawing upon the relevant internal expertise from County Council technical leads.

1. The outline list of projects is outlined below which sets out the timescales of each project in the consents programme
2. The Consents Programme has been co-designed with colleagues responsible for the management of individual projects, as well as project promoters. This includes the GCP, the Combined Authority, District Council colleagues, county council staff, external professional services (where necessary) and scheme promoters (as appropriate)

There is a Consents Programme Board that meets monthly and includes representation by a range of CCC teams.

Task	Start date	End Date (of consent stage)	Overall responsibility
East/West Rail	2021	2024	Network Rail
CSET	2021	2022	GCP/CCC
Ely Rail Enhancements	2020	2024	Network Rail
MVV	2021	2023	
A47	2021	2023	National Highways
OxCam	2021	2023	
Cambridge South Station	2021	2022	Network Rail
Sunnica Solar Farm	2021	2023	Sunnica Ltd (Tribus Energy and PS renewables)

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

Advice to date indicates that as the promoters of the consents are legally required to complete EqlAs, it may not be necessary for CCC (Cambridgeshire County Council) to duplicate the process. However, each project within the Consents Programme will be reviewed to see if a County Council EqlA is required. Place and Economy and have been working with Pathfinder Legal Services for legal advice on CCCs Public Sector Equality Duty and the EqlA process in partnership projects.

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

Financial Benefits

The financial benefits are predicated on the avoidance of future liabilities on the County. While little data is available, evidence from the A14 project indicates that (unfunded) work conducted by the Public Rights of Way team avoided c.£100K worth of costs due to deviations from the standard specification by the consent promoter.

It is important that lessons are learnt from the A14, which resulted in a substantial maintenance liability on the County Council, due to damage caused to local assets during construction

Non-Financial Benefits

Key Benefit	Measure	Baseline	Target & Timescale
Reduced reputational risk	No. of complaints	TBC	-10% per project per annum

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Non compliance with statutory consents processes	Centralised Programme Plan	Red	Gareth Blackett
Insufficient capacity and capability	Consents resource management plan	Amber	Gareth Blackett

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

Please see the Consents programme outlined in Section 4

Section 4I Environment & Green Investment

Pressures / Investment proposals

Place & Economy Restructure Page 313

Biodiversity Enhancements Page 318

Community Flood Action Programme Page 325

Business Planning: Business Case – Pressure

Project Title: Place & Economy Restructure

Committee: Highways & Transport / and
Environment & Green Investment

2022-23 Investment request: £260k pa

Brief Description of proposal:

JMT agreed the restructure of Place & Economy (P&E) senior management structure which is currently being recruited to. It has been agreed that the in-year costs (2021/22) will be met using existing funds but the ongoing costs (£260K pa) need addressing through Business Planning.

This business case requests £260k to fund the additional costs of the new agreed structure. The existing revenue and capital funding will continue to fund the structure but this £260k is required to fund the net increase.

Date of version: 23 September 21 BP Reference: B/R.4.015

Business Leads / Sponsors: Steve Cox

1. Please describe what the proposed outcomes are:

The Place & Economy (P&E) Directorate is responsible for many of the enablers of growth across the county, and supporting prosperity by delivering services which keep residents and businesses moving efficiently and safely. As the central focus for Cambridgeshire's place-based services, the work of P&E is crucial in achieving the Council's overall aim of making Cambridgeshire a great place to call home and accomplishing the four core priorities of:

- Developing the local economy for the benefit of all
- Helping people to live independent and healthy lives
- Supporting and protecting vulnerable people
- Climate change and sustainability

The landscape that the County Council is working within has changed significantly in recent years with the introduction of the Greater Cambridge City Deal in 2015 now managed by the Greater Cambridge Partnership (GCP) and the Mayoral Combined Authority in 2017 (CPCA). In addition, most of CCC's senior management team until recently have been engaged in shared roles with Peterborough City Council (PCC), including the Executive Director for Place & Economy and the Service Director for Highways & Transport.

In March, our JMT (Joint Management Team) agreed to a proposed new structure for P&E Management. In order to drive forward the aspirations described above and to achieve the ambitions set out for P&E and the drivers for a new senior management structure, the following changes were agreed:

1. Deletion of the existing Service Director post
2. Deletion of Assistant Director Highways & Assistant Director Infrastructure & Growth posts
3. Creation of a new Director for Highways & Transportation that is 100% focussed on CCC
4. Three new Assistant Director roles:
 - a. Assistant Director Highways Maintenance: focussed on maintaining our existing highways asset
 - b. Assistant Director Transport & Strategy: focussed on longer term strategy, development and getting the best out of our network
 - c. Assistant Director Project Delivery: focussed on commissioning and project delivery of the schemes and initiatives we are tasked to deliver. This will also include ensuring we get the best out of our supply chain partners and stronger relationship management with GCP and CPCA.

All the posts have now been recruited to, and senior management within P&E is fully in place with the task of ensuring that the new management structure works for the service. Moving forward there will be a need to fund the additional costs of the new agreed structure. The existing revenue and capital funding will continue to fund the structure but £260k is required to fund the net increase.

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

During the Summer and Autumn of 2020 an internal review of Highway Capital Delivery was commissioned to understand the effectiveness of capital programme management and the overall control environment. It included a detailed review of several key schemes. That work was completed in October 2020. It concluded that a significant programme of work was being delivered across the Major Infrastructure Delivery (MID) team with a large number of complex and high profile schemes.

The review underlined the need for stronger early concept and design work, a greater understanding of risk and improved budget setting. There are a number of components that team leaders and managers are already seeking to re-shape and enhance service delivery within P&E; together these will create a stronger and more transparent control environment. Once implemented and operational across H&T projects, the service can realise overarching governance, project assurance, and greater control including programme, risk and cost control. It is in the context of this review that a revised management structure was settled upon.

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

The proposed restructure went through various iterations before it went out to consultation and was further developed to reflect the consultation feedback. This structure was felt to be the most appropriate to deliver the objectives mentioned above.

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

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Recruitment to all posts	In process	TBC	Steve Cox
Recruitment of Director	Sue Proctor started on 1 November 2021		Steve Cox
Assistant Director appointments	One AD started on 1/9/21. The second will start on 23/11/21. New AD for Growth, Environment and Planning started on 1/7/21	23/11/21	Steve Cox

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

It is not anticipated that this restructure will have effects on people with protected characteristics. An Equality Impact Assessment was developed and this will be reviewed and updated for this iteration of the restructure. The EqlA was completed before the restructure commenced to ensure we adhered to our Public Sector Equality Duty.

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

The revised senior management structure will:

- Provide robust and resilient leadership for the future goals of the Place and Economy directorate;
- Better align functions within Place & Economy to build cohesion and resilience
- Ensure accountability rests at the right level in the organisation through clearly articulated roles and responsibilities;
- Simplify structures so our staff are closer to the customers that they are serving;
- Look for opportunities to commercialise and take appropriate risks by putting in place supportive systems and processes that enable and facilitate service delivery

Financial Costs

The restructure will result in an additional £260k being needed per year to fund the new roles outlined above.

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Risk of not being able to recruit to roles.	N/A All roles have now been recruited to	Green	Steve Cox
Risk of not being able to retain managers	Working closely with managers and being proactive about addressing problems as and when they arise	Amber	Steve Cox

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

Only the roles above (listed in section 1) are impacted by the proposals and are in scope.

Business Planning: Business Case – Investment proposal

Project Title: County Biodiversity Enhancements

Committee: Environment & Green Investment

2022-23 Investment amount: £105k

Brief Description of proposal:

To develop the actions required for the biodiversity commitments within the Climate Change & Environment Strategy and to ensure the best biodiversity and natural capital benefits are gained from Cambridgeshire County Council (CCC) owned public assets.

This is a request for additional budget of £105,000 for 2022/3 to develop a programme for further delivery beyond 2023, estimated at £145,000 per annum.

Date of version: 24 November 2021

BP Reference: B/R.5.110

Business Leads / Sponsors: Quinton Carroll / Cllrs Dupre & Gay

1. Please describe what the proposed outcomes are:

Cambridgeshire County Council (CCC) has made strong commitments towards biodiversity and the environment within the Climate Change & Environment Strategy (CCES) and the Joint Administration Agreement (JAA) commitments on areas such as 'Doubling Nature'.

Understanding and improving our biodiversity will:

- Increase the quality of our public open space.
- Increase the value of our natural capital account.
- Provide the target for hitting 20% biodiversity net gain.
- Help us understand the opportunities for net gain credits.
- Give the baseline for understanding habitats and environs for proactive creation and management.

In the CCES, biodiversity sits at the core of at least 10 objectives in all three areas (Mitigation, Adaptation and Natural Capital).

This project is critical for the CCC outcomes for communities, quality of life and the environment:

- Communities at the heart of everything we do
- A good quality of life for everyone
- Cambridgeshire: A well-connected, safe, clean, green environment

The JAA has biodiversity at the 'heart of the Council's work' and to 'look for other ways to promote biodiversity and increase Cambridgeshire's natural capital'. (Priority 1).

The service has already attracted some 'in year' additional core funding for biodiversity that is allowing for urgent works on our accessible local nature reserves and heritage sites, the commencement of information gathering for strategy work and extra staffing capacity to deliver these. This funding request is to continue with this increase in resources, site work and further strategy development.

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

Biodiversity and natural capital are central to the government's Environment Act, that recently received Royal Assent. This will increase the council's statutory obligations under biodiversity/ecology and introduce the principle of mandatory biodiversity net gain and local nature recovery strategies.

The council's Climate Change & Environment Strategy contains ambitions and headline targets for biodiversity, in particular achieving a 20% biodiversity net gain target and more generally 'Doubling Nature'. However we need to understand how to best to deliver this, building on the biodiversity baseline audit due to commence in early 2022.

These principles are also key to the Environment Framework developed for the OxCam Arc, where creating a greener environment enhances nature and increases natural capital/ecosystem services is core.

The Council is already undertaking work within its rural estate on some of these areas, but our partners are concerned about our continuing capacity to meet our commitments and take on the challenges to come.

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

There are many operators and agencies working on biodiversity and natural capital, and we already work closely with Natural Cambridgeshire and others; for example we are working with the Wildlife Trust on undertaking a biodiversity baseline assessment of our land.

However, these are our own commitments and obligations and whilst we can and do work with others, our position as a county wide body with statutory obligations and a large estate means we are better acting as a leader not a follower and to define our actions for the next few years accordingly.

This request follows on from the funding recently granted for within this financial year and forms part of a longer term proposal for delivering biodiversity outcomes in the council as set out below. The increase in biodiversity officer resource and site maintenance/repairs works remains throughout as permanent items for revenue funding, but additional revenue requests vary by year. Alternatives to deliver this work such as the use of consultants would be considerably more expensive than the proposals set out below (including the resource to project manage and review their work programme), and wider Council services such as officers in the communications team to support the delivery of this specialist workstream and promote its benefits are already being used, which ensures that the best value for money for the public purse is being sought as set out below:

The proposed programme is as follows:

2021/2 (already agreed):

Increased officer hours in biodiversity team	£19,000
Increased site works budget	£40,000
Biodiversity Baseline Audit	£50,000
Total	£109,000

This work will set the baseline for what comes below insofar as the baseline audit will inform and guide the council's next steps for doubling nature and will grow the team's capacity in this area.

2022/3 (estimate):

Maintained biodiversity officer hours	£45,000
Maintained site works budget	£25,000
Additional Biodiversity Officer Hours	£25,000
Policy Development Advice/Consultancy	£10,000
Total	£105,000

The main focus for 2022/3 will be the development of a biodiversity strategy and maintaining the sites and other works commenced in 2021/2. This will form the basis of a further bid for the delivery of the five year strategy. We are keeping core functions within our own establishment but the strategy development will require specific expertise and input that may be better sourced via external partners or consultancies.

Development of the strategy will require a diverse skillset around a core discipline of preparing environmental policy, with specific reference to biodiversity and land management. Even so it will likely require specific consultancy and advice, especially around areas such as natural capital accounting and green prescribing. It is unlikely that one person will have the full skillset or capacity to do this work so we are budgeting for additional officer hours plus a small consultancy/commissioning budget.

An alternative would be to request a consultancy to prepare the entire strategy on our behalf, but this is not recommended for several reasons. Strategies prepared in this way are more difficult to embed within the organisation and are rarely cost effective to produce in the first place. Our approach also allows us to keep some knowledge and skills in house to help future proof any updates.

2022/3 (estimate):

Maintained biodiversity officer hours	£70,000
Maintained site works budget	£25,000
Biodiversity Strategy Delivery	£50,000
Policy Development Advice/Consultancy	£10,000
Total	£145,000 p/a

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

Our next steps will be to reassess the CCES ambitions and objectives, considering emerging developments such as ELMS (Environmental Land Management Schemes), Local Nature Recovery Strategies, Future Parks Delivery Models and emerging other projects including:

- The proposed county land use mapping exercise proposed by the Food, Farming & Countryside Commission.

- Natural Capital assessments/opportunity mapping produced by Water Resources East, OxCam and the Future Parks Accelerator.
- Emerging Green Infrastructure Mapping tools developed by Natural England
- Mapping of environment opportunity areas

An Environmental Policy Officer post will be required from 2022/3 onwards to start that work and for the development of a biodiversity plan for the county to be implemented 2023-2028.

This has been discussed with the Assistant Director of Climate Change and Energy Services, the Assistant Director of Planning, Growth and Environment, elected Members and the Chief Finance Officer.

High Level Timetable

Task/Item	2021/2	2022/3	2023 onwards	
Additional Biodiversity Staffing Resource				
Additional Site Maintenance Budget				
Biodiversity Audit				
Additional Environmental Policy Resource				
Develop Biodiversity and Natural Capital Strategy				
Deliver Strategy				

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

An Equality Impact Screening has been carried out for this proposal. Enhanced open spaces can provide mental and physical health benefits by providing calm and natural environments. The government is currently running 'green social prescribing' pilots with NHS England and others where health professionals refer patients to nature-based interventions and activities such as local walking for health or community garden schemes. This is on the back of an increasing awareness during the pandemic of the importance of access to open space and the inequality of open space in value and quality, with poorer areas being worse in this respect than wealthier ones. This work potentially will allow the county to 'level up' access to nature and open space.

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

Financial Benefits

There are limited direct financial benefits definable at this stage. The use of ecosystem services and natural capital accounting is still under development. Similarly the market for biodiversity net gain credits is still to be defined, but this work will allow us to take advantage of these income streams at the earliest opportunity,

There are significant savings to be had to other council and public services through green social prescribing (above).

Non-Financial Benefits

Key Benefit	Measure	Baseline	Target & Timescale
Improved biodiversity	Surveys	Currently being assessed	Doubled by 2040
Increased ecosystem services (e.g. natural flood risk management)	Natural capital	Tbc	Tbc
Improved quality of life for residents	Surveys	Tbc	Tbc

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

The council will miss or delay the opportunity to engage with a newly emerging way of valuing nature and the wider environment and miss targets/commitments made.

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Not doubling nature	This project	Red	QMC
Failure to meet CCES targets	This project	Red	QMC

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

Biodiversity and natural capital enhancement is increasingly being seen as core to wellbeing, resources and the climate/nature emergencies. Our work will originally focus on council owned assets but will broaden out to work with partners and stakeholders across the county including (but not limited to) CPCA (Cambridge & Peterborough Combined Authority), Water Resources East, Natural Cambridgeshire, Fens Water Partnership and the OxCam Arc.

Business Planning: Business Case – Investment proposal

Project Title: Community Flood Action Programme

Committee: Environment & Green Investment

2022-23 Investment amount: £75k

Brief Description of proposal:

To continue the Community Flood Action Programme (CFAP) beyond 2021/2.

The total funding request is for £150,000 (other £75k of which would be temporary funding) that will add to the sums carried forward from this year to allow the programme to continue.

After 2022/3, the programme can continue to operate at a reduced level.

Date of version: 5/11/21

BP Reference: B/R.5.111

Business Leads / Sponsors: Quinton Carroll/Hilary Ellis

1. Please describe what the proposed outcomes are:

The CFAP is a multi-faceted piece of work developed to support Cambridgeshire's communities to manage and respond to flooding threats. It covers the following:

- Creation, training and support for flood action groups.
- Creation of a 'one-stop shop' website for flood risk advice and guidance.
- Mapping of watercourses throughout the County.
- Development and publication of riparian maintenance guidance and support.
- Offering of financial support towards remedial watercourse works where they meet defined criteria.
- Development and implementation of an improved reporting system for flooding and watercourse issues.
- Advice to residents on protecting their homes.

These areas of work were identified as being of most in need for development after the flooding in December 2020 and a programme commenced April 2021 with one year's funding. The primary focus of the first year has been working with communities to develop and train flood groups to aid local resilience whilst gathering information and intelligence on the location of watercourses throughout the county. The team is also working on developing the new reporting tool which can identify where watercourses are in need of repair or maintenance. By extending the programme into a second year (and onwards) we can nurture the strong working relationships we have already built with various community groups, along with creating new relationships in communities with a history of poor engagement, or no engagement at all. We will be able to use the information gathered from the communities to address watercourse blockage and maintenance issues through engagement with flood groups, our powers under the Land Drainage Act 1991 and a continuation of riparian grants (where necessary). As outlined in the initial scope of the programme, we wish to develop a robust watercourse enforcement policy which would put us in league with only a handful of Lead Local Flood Authorities (LLFAs) across the country and to be proactive in delivering our statutory obligations as a LLFA.

As LLFA we have the following statutory functions that are relevant to this investment:

- Prepare a local flood risk management strategy with other bodies and communities: CFAP is a key element of our community engagement and partnership with the district councils
- Enforce obligations to maintain flow in and repair watercourses: the proposed work on enforcement will enable us to discharge this more effectively
- Maintain a Register of Assets

The main outcome of extending the programme will be better prepared and resilient communities that in turn will enable us to be more effective in the delivery of our statutory functions. The investment made in 2021/2 has given us a 'head start' but further investment at a reduced level will embed the outcomes further within the county.

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

CFAP has been developed in partnership with district councils, the Local Resilience Forum and the other Risk Management Authorities such as the Environment Agency, Anglian Water and Internal Drainage Boards (IDBs).

Flooding is an increasing issue in the county, and with climate change impacting rainfall patterns we are likely to be seeing increased large scale rainfall events in the future, meaning that our communities need to be better prepared.

As Lead Local Flood Authority, the council's actions are underpinned by the Local Flood Risk Management Strategy (LFRMS). This has recently been updated and is currently out for public consultation. Page 95 of the Strategy reads:

"The Community Flood Action Programme is anticipated to generate new materials for this purpose and new connections with communities to make residents more aware. After the CFAP is completed the ongoing communication with communities will continue as business as usual to build on awareness of risk and responsibilities."

CFAP directly implements Objective 3 – *'Helping Cambridgeshire's Citizens to manage their own risk'* and especially Objective 3.3 - *'Offer support & advice on responsibility for flooding and potential solutions'*.

The CFAP itself is Action 3.5 in the LFRMS Action Plan. As a result of this connection to the LFRMS, it has been agreed that the Equality Impact Assessment undertaken for the Strategy will apply to this business case.

Joint research by the Environment Agency and Defra (R&D Technical Report SC040033/SR3, 2005) highlights the importance of authorities maintaining relationships with community flood groups in order to prevent a number of negative perceptions including the neglect of victims' psycho-social needs, anxiety within the community, and economic blighting (e.g. falls in house prices). However, this research also found that communities that have been involved in decision making will have begun to 'own' their flood risk environment and will develop a sense of trust towards facilitators. Therefore, by maintaining effective community engagement, many of these negative perceptions will not arise or will be easier to manage.

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

CFAP is a response to flood events. CCC is the lead local flood authority, and thus investigates flooding incidents, which makes us best placed to understand how best to support communities. However, the programme is very much a partnership approach with other councils and agencies. If we cease the programme in March 2022 we risk a loss of trust/relationship with communities and a loss of information flow between those communities and the risk management authorities (primarily the County Council but

also other councils and agencies). This in turn risks the County Council being unaware of flood risk issues and therefore unable to take action to reduce the risk.

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

Many of the outcomes for CFAP are in already development for implementation this year, but two aspects in particular would benefit from ongoing support. These are support for Community Flood Action Groups and riparian maintenance grants with an extra emphasis on riparian enforcement.

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Continued work establishing community flood groups working with Environment Agency and District Councils	01/04/2022	31/03/2023	Q Carroll / H Ellis
Review of flood reporting tool and improvement works	01/04/2022	30/06/2022	Q Carroll / H Ellis
Review of website and improvement works	01/07/2022	30/09/2022	Q Carroll / H Ellis
Review of flood risk data and continued data enrichment works	01/04/2022	31/03/2023	Q Carroll / H Ellis
Watercourse enforcement policy development	01/07/2022	31/03/2023	Q Carroll / H Ellis

Beyond 2022/3, the programme can continue with the support of one officer to work with flood groups and support enforcement, plus a small ongoing grant fund for occasional or emergency riparian maintenance.

2022/3

Officer Support (2 FTE)	£100,000
Enforcement Policy Development (incl. legal input)	£30,000
Website reviews, licencing and improvements	£20,000
Total	£150,000

2023 onwards

Officer Support (1 FTE)	£50,000
Riparian Maintenance/Enforcement	£30,000
Total	£80,000

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

Flooding affects everybody in the community but one of the key elements of a community flood plan is to understand who is most vulnerable and thus to be a priority for support, such as the elderly or in medical need. It is understood that flooding disproportionately impacts the most vulnerable in our society. The CFAP provides assistance to communities to develop their flood plan and can share the knowledge and experience between the groups across Cambridgeshire.

It is known that smaller rural communities often feel they are isolated in terms of flood risk support, particularly as much of the funding criteria is weighted heavily towards the number of properties protected. Due to the nature of the villages being small, this is often difficult to demonstrate. The CFAP provides the ability to demonstrate the County Council is committed to working with all communities.

It has been agreed that the Equality Impact Assessment undertaken for the Strategy will apply to this business case.

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

Financial Benefits

A county that is better prepared for flooding and has better managed flood assets will see savings generally. Residents and businesses in particular will benefit from fewer costs and problems created by flooding such as business interruption, staff absences, damage to perishable goods and crops, damage to property and assets, decrease in serviceable areas, impacts on reputation etc.

Nationally, the Environment Agency estimate that flood defences and flood risk management reduced the overall economic costs of flooding between November 2019 and March 2020 from £2.4bn to £333mn across England. The Association of British Insurers (ABI) calculate that flooding events incur an average claim per household of £32,000¹. Throughout December/January 2020/1, there were 310 reported incidents of flooded houses, so a total cost approaching £10m. This does not take into account other disruption, such as threats to infrastructure, hospitals, care homes etc, where the costs of emergency responses can be disproportionate. For example, officers are aware that the December flooding threatened a COVID-19 vaccine distribution point.

¹ <https://www.abi.org.uk/news/news-articles/2020/03/insurance-pay-outs-to-help-customers-recover-from-storms-ciara-and-dennis-set-to-top-360-million/>

Furthermore, the council itself will likely benefit from more autonomy within the community with regard to flood risk management. With better informed communities we are likely to see better asset management and in turn, reduced flood risk, fewer significant incidents of flooding and fewer investigations.

Key Benefit	Measure	Baseline	Target & Timescale
Riparian fault reports	Number of reported incidents	Tbc	
Enforcement Actions	Number of cases	Tbc	
Section 19 reports identifying faulty riparian watercourses	Number of identified incidents	Tbc	

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

By not extending CFAP we have a real risk that the benefits created in its first year will be lost, especially around community engagement/support. We know that building a network takes time, and the more support given at the outset the more likely it is to embed and become self-supporting. In addition, given the complexity of setting up community groups, particularly where towns and larger villages are concerned, by not extending CFAP we could see a number of groups in important areas not receiving the support they require to make the most impact from a flood risk perspective. Furthermore, we risk the LLFA falling behind those of our neighbouring counties who have recently set up similar innovative schemes.

Flooding is a high-profile matter for the county and as Lead Local Flood Authority (LLFA) we may have serious reputational risks by not being seen to support residents.

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Increased flooding caused by riparian watercourses	Focus attention on maintenance and enforcement	Red	Q Carroll / H Ellis
Lack of overview of surface water drainage networks in the county	Map and monitor watercourses; use flood groups and parish councils to monitor	Red	Q Carroll / H Ellis
Lack of confidence by public, agencies and	Take leadership role	Amber	Q Carroll / H Ellis

other councils in role of LLFA			
Failure to discharge statutory functions as LLFA	Be visible and proactive in fulfilling statutory functions	Red	Q Carroll / H Ellis

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

As LLFA our main responsibility is towards surface water flooding. Other assets, such as rivers, drains and sewage systems are within scope of other agencies and companies. However, the combined effect of flooding impacts all these interests.

Section 4m Environment & Green Investment

Temporary Funding proposals

Active Parks Page 333

Managing Climate Risk Page 358

Business Planning: Business Case – Investment proposal

Project Title: 'Active Parks' unit

Committee: Environment & Green Investment

2022-23 Investment amount: £40k

Brief Description of proposal:

To investigate establishing an Active Parks Unit within the County Council (alongside Public Health, Think Communities, and Environment) as a first concrete step in realising the benefits that parks can have to help tackle the linked challenges of public health, climate change, and biodiversity.

Date of version: 7 December 2021 BP Reference: N/A

Business Leads / Sponsors: Quinton Carroll

1. Please describe what the proposed outcomes are

Introduction

The COVID-19 pandemic has undoubtedly changed the way we live our lives now and for the foreseeable future. During the 'lock down' parks became the only public open spaces where millions of people could exercise, relax and meet others for the limited periods allowed. At the time these spaces were quite rightly championed by politicians and scientists alike as key to maintaining people's physical and mental health as evidenced by numerous studies over many years. Many people used their local parks for the first time during the 'lock down' and as restrictions were eased parks became busier than they had ever been previously and continue to be so. Not only has the pandemic changed the relationship between people and their local parks for ever it has underlined the multiple and proven benefits these spaces provide for health and wellbeing as well as the environment.

As we move from managing the pandemic to implementing a COVID-19 Response and Green Recovery, there is an opportunity across Cambridgeshire and Peterborough for a resilient recovery that tackles the linked challenges of public health, climate change, and biodiversity.

The two-year Future Parks Accelerator (FPA) is a programme sponsored by Cambridgeshire County Council, Peterborough City Council, all the District Councils, Nene Parks Trust and the Local Nature Partnership. The programme commenced in the autumn of 2019 and had only just started when the first 'lock down' came. For an ambitious programme that aimed to closely involve partners and stakeholders across Cambridgeshire and Peterborough the limitations on engagement as a result of the pandemic were, and continue to be, acutely felt. This was never more so for involving health colleagues who were, and continue to be, at the forefront of tackling the pandemic. Health and wellbeing and the benefits provided by parks and green spaces remain at the heart of the project and this particular business case, however the FPA programme now runs to March next year and there are other related projects that remain to be completed.

This business case presents the case for establishing an Active Parks Unit within the County Council (alongside Public Health, Think Communities and Environment) as a first concrete step in realising the benefits parks can help tackle the linked challenges of public health, climate change, and biodiversity. The case remains a 'work in progress' as the Future Parks Accelerator programme will not be fully complete until next year, however the evidence presented here is sufficient to support the case for investment.

This business case sets out the case for an Active Parks Unit as part of securing the legacy of the Cambridgeshire and Peterborough Future Parks Accelerator Project. Establishing an Active Parks Unit will enable Cambridgeshire County Council and partners to realise the 'added value' benefits of parks and green spaces for local communities including maximising their health and wellbeing benefits, the opportunities for restoring nature and for strengthening community resilience and community organisations.

The Vision

The Cambridgeshire and Peterborough Future Parks Accelerator is a two-year programme aimed at establishing joined up vision and sustainable future for parks and green spaces in Cambridgeshire and Peterborough. It is part of a national programme involving nine local authorities funded by the National Lottery Heritage Fund, the National Trust and the Department for Levelling up, Housing and Communities aimed at exploring innovative approaches creating a sustainable future for the UK's urban parks and green spaces. The outputs from this work have shaped the guiding principles that informed this business case.

The Future Parks Accelerator Outputs and Principles

Cambridgeshire and Peterborough Future Parks programme is delivered in two phases, the first phase was a co-design phase whereby we engaged with a wide variety of stakeholders across several workstreams to explore the opportunities to sustainably manage parks and green spaces across the County and Peterborough.

Having undertaken this work, Cambridgeshire and Peterborough Future Parks Accelerator is now in the second phase of the programmes delivery, the Transition Phase. The aim of this second phase of work is to use what we have learnt during the co-design phase to develop an approach to sustainably management parks and green spaces at a County and Peterborough scale. What has emerged is a delivery model that respects local diversity and independence but seeks to realise the added value benefits of parks and green spaces.

In preparing the foundations to realise this vision the Cambridgeshire and Peterborough Future Parks Accelerator has three clear guiding principles based on the outputs of extensive stakeholder and partner engagement. These are illustrated below.

Figure 1 FPA Principles and Programme Outputs



Firstly, establishing arrangements for Collective Leadership across Cambridgeshire and Peterborough for all parks and green spaces that is truly collaborative across partners; secondly designing a Model for Delivery that will secure the 'added value' benefits of parks but respect local diversity in provision and operations; and thirdly preparing a Plan for Open Space that connects partners in a flexible way but recognises parks as key infrastructure across Cambridgeshire and Peterborough and helps secure new sources of finance.

The Outcomes

Applying these guiding principles helps ensure the outputs of the project are aimed at using parks and green spaces more effectively to help achieve a range of longer term outcomes including:-

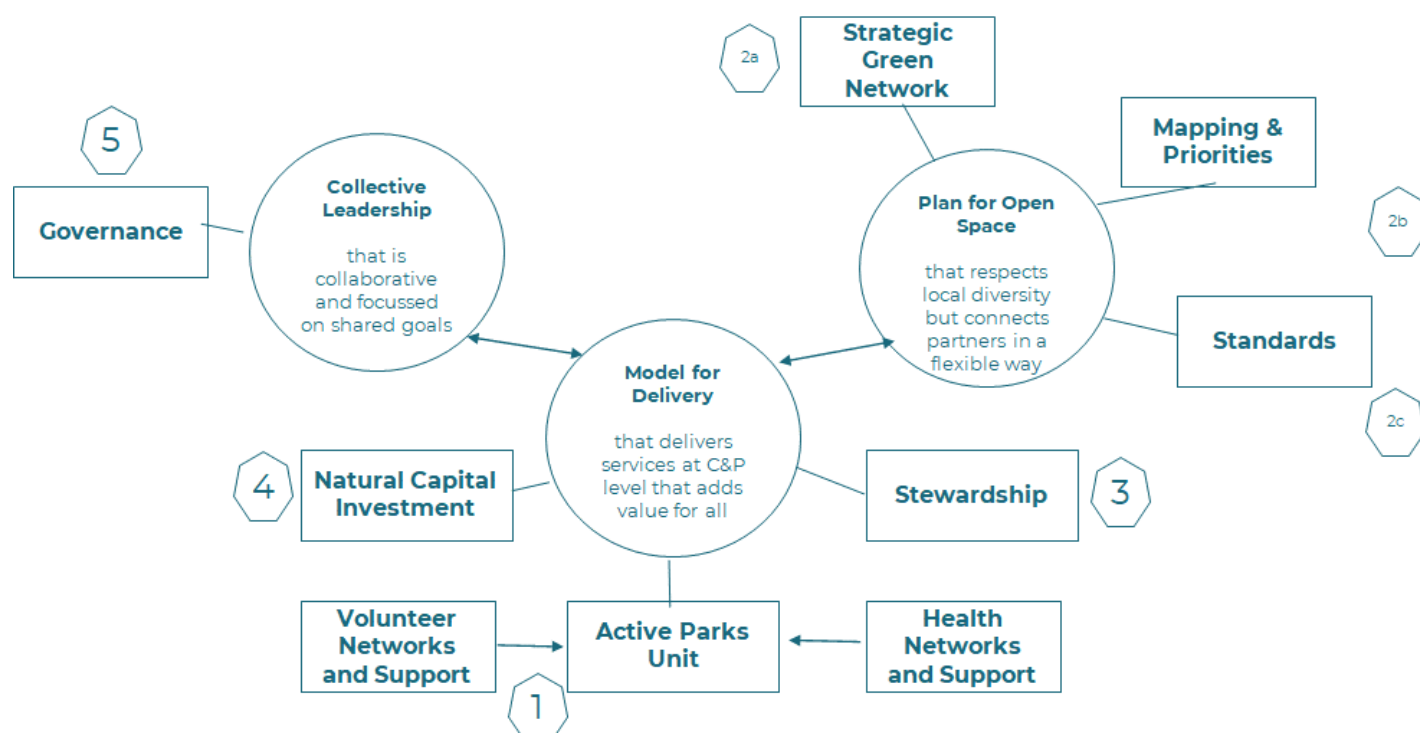
- improved physical and mental health;
- more nature restoration;
- strengthened community resilience;
- reduced carbon emissions;
- improved air quality;
- greater private and philanthropic investment into parks and green spaces and the wider landscape; and
- collective, co-operative and collaborative leadership across Cambridgeshire and Peterborough including statutory and non-statutory partners.

The project is entering its last six months, with much work still to do, and is now seeking to establish arrangements for securing its legacy and the foundations for achieving its long term aims (as envisaged by the County and its partners in the original bid). This Business Case is focussed on one element of the emerging Model for Delivery namely the Active Parks Unit that will be charged with realising the benefits of parks and green spaces for local communities.

The Future Parks Accelerator Projects

The diagram below illustrates the other on-going project areas and their relationship to the principles and the Active Parks Unit. The Volunteer and Health projects will create the supporting networks and tools for the new unit to work with.

Figure 1 FPA Programme Outputs and Main Project Areas



Securing the Benefits of Parks - The Active Parks Unit Proposition

The new Active Parks Unit will be focussed on securing the 'added value' benefits of parks and green spaces. It will respect local diversity in provision but work closely with local parks operations and stakeholders to activate parks and green spaces to achieve specific outcomes related to health and well-being, community resilience and nature restoration.

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

Building the Evidence Base

Stakeholder Engagement

Over the last year the project has undertaken an extensive stakeholder engagement and co-design exercise working with hundreds of public, private and voluntary sector organisations and different communities across Cambridgeshire and Peterborough. It has worked closely with elected members from all the Districts, Peterborough City Council, Cambridgeshire and Peterborough Combined Authority and Cambridgeshire County Councillors through this process and has had oversight and direction from an Executive Board with representatives from all partners including the Local Nature Partnership and Nene Park Trust. This process set the priorities and principles for shaping the legacy of the Programme, including the Active Parks Unit as reflected in this Business Case.

As part of this work, we conducted a large-scale stakeholder engagement exercise with a focus on the following objectives: developing a shared vision and common cause among partners, working collaboratively, building interest, capacity, and capability in volunteering, understanding aspirations of green space provision among new communities, and realising the health and wellbeing benefits of parks and green spaces.

There is substantial national and local evidence to be drawn on that demonstrates how parks can help tackle the linked challenges of public health, climate change, and biodiversity and how the contributions of parks can be valued to support better decision making. The evidence this Business Case draws on is given at Appendix A.

National Evidence

England is suffering a health crisis with diabetes, obesity, dementia and mental health issues rising unevenly across the population. Faced with these challenges, as well as those from Covid-19, there is an increasing focus not just on treating conditions, but also on prevention. This is reflected in the local objectives of partners across Cambridgeshire and Peterborough. Changing lifestyles and increasing healthy behaviours particularly physical activity, is seen as critical in helping people live more independent lives for longer. There is recognition across the health sector that outdoor activity can be an alternative or positive complement to other treatments. This applies to mental as well as physical health conditions and can be supported by green social prescribing, which involves referring patients to take part in environment and nature-based activities, such as, walking and cycling, community gardening, food-growing projects and practical conservation tasks such as tree planting.

Living in greener urban areas is associated with lower probabilities of cardiovascular disease, obesity, diabetes, asthma hospitalisation, mental distress, and ultimately mortality, among adults; and lower risks of obesity and myopia in children. Greater quantities of neighbourhood nature are also associated with better self-reported health, and subjective wellbeing in adults, and improved birth outcomes, and cognitive development, in children.

Evidence that people in more affluent social groups generally visit the natural environment much more often than less affluent groups including some black and minority ethnic groups and those with a disability or long-term illness is well established. Often economically disadvantaged communities who have poorer health and educational outcomes do not have access to good quality natural green or blue spaces close to where they live or work.

The challenges for tackling childhood obesity vary across local authority areas, but many face common issues such as proliferation of fast-food outlets on the high streets and near schools; less active travel; limited access to green spaces and physical activity. These factors create an environment that makes it harder for children and their families to make healthy choices, particularly in some of our most deprived areas. It is recognised that green space is linked to greater levels of physical activity and associated health benefits. A study on obesity in a number of European countries found that people living in areas with large amounts of green space were 3 times as likely to be physically active than people living in areas where there is little green space. Parks and green space can increase life expectancy and reduce health inequality and are associated with opportunities for physical exercise and activity through organised sports or informal activity such as walking, cycling, running or children's active play and by increasing active travel through safe green corridors.

Parks also create important opportunities to bring people together and reduce isolation. They can help refugees and migrants build a sense of belonging in new communities. But they can also amplify social divisions and groups may exclude themselves from green spaces if they feel the space is dominated by one particular group (for example, if a park is overwhelmingly used by young people) or if they feel unsafe (for example, when a space is poorly maintained or attracts antisocial behaviour). They also provide opportunities for community engagement and local residents value the chance to be involved in designing and improving their green spaces (e.g. through volunteering). Community gardening offers new residents the chance to build social connections. Children appreciate the opportunity to have their say on park improvements. Schemes to include young people in the care of green spaces can enhance their personal development and increase their environmental awareness.

Nearly two thirds of people (63%) in England reported visiting green and natural spaces in the year to March 2021. Nearly all people (94%) felt spending time outdoors was good for their physical health and a similar number (92%) said spending time outdoors was good for their mental health. The vast majority of these types of visit (78%) are to urban parks, green spaces, playing fields and countryside parks. The importance of green space has been highlighted by COVID-19. A majority of the public now say that they appreciate green space more since social distancing (53%) and that protecting local green spaces should be a higher priority when lockdown ends (63%).

Local Evidence

Whilst Cambridgeshire and Peterborough is generally healthy compared to the rest of England there are significant inequalities within the area and areas of concern particularly in respect of the behavioural risk factors to good health like physical activity and obesity. Peterborough and Fenland are significantly worse than the rest of England on these measures. Between 1 in 3 and 1 in 4 primary aged school children in Peterborough and Cambridgeshire are obese. Childhood obesity is not just a problem in Cambridgeshire - in Peterborough, Cambridgeshire, the rate is even higher, with 23.2 per cent of children in Year 6 and 11 per cent of children in Reception classed as obese. Over 40,000 people in our area have Type 2 Diabetes. Over one third of adults in Fenland (33%) are physically inactive. The proportion in Peterborough (29%) and East Cambridgeshire (29%) is only just less than this.

9% of people in Cambridgeshire and Peterborough Mental Health suffer from depression – this increases to 11% in Fenland.

Most residents in Cambridgeshire and Peterborough said they visit their local park or green spaces to socialise (46%), relax (50%), exercise (57%), spend time with children and families (52%), and see nature (52%). Nearly all residents asked (95%) said that investment in green space and nature recovery should be a priority in light of COVID19.

Huntingdonshire's consultation to support their Healthy Open Place Strategy (2020) reported that 38% of people were using parks more; 21% said they had not visited a park/open space since lockdown; and 35% reported using them less. Further more 75% value their spaces more, 92% believe these spaces make them happy, and 59% believe these spaces bring communities together.

Between 2010 and 2016 most people in Cambridgeshire (54%) engaged with nature in an urban park, country park or playing field with the vast majority (84%) engaging in this way in urban centres like Peterborough. This pattern proportion is likely to have increased in recent years if it reflects national trends.

The FPA Co-design phase brought together a wide range of stakeholders from both the Volunteering and Health and Wellbeing sector to discuss COVID-19, the effect on parks and green spaces use, and how these spaces could be used to support response and recovery. Key themes from these sessions included:

- Increased demand on spaces
- The need for more information and education to support and harness the newfound connections to parks to improve health and wellbeing
- Balancing access and use between people and nature

In Huntingdonshire stakeholders highlighted that the deprived and inactive communities that are most likely to benefit from the district's network of parks, green spaces, and play areas are the least likely to use them. Community engagement with people from deprived communities illustrated a need to break through the perceptions that "parks are not for me" and show clear benefits to families and individuals of using these spaces.

The quality of green spaces has a stronger bearing on health outcomes than quantity, and there is evidence that disadvantaged groups appear to gain a larger health benefit

and have reduced socioeconomic-related inequalities in health when living in greener communities. There is a sizeable body of research that underlines the importance of creating more, bigger, better and joined-up green spaces, especially near to where people live, and to address inequalities.

Cambridgeshire and Peterborough are areas of contrasting health and wealth, with significant inequality experienced by large areas of Fenland and Peterborough, and pockets across the rest of the region. COVID-19 has highlighted and exacerbated these inequalities, with more deprived areas experiencing a greater impact from the pandemic. The CAPCCG Health Inequalities Strategy (2020)²⁷ focusses on a number of key objectives, with Guiding Principle 4.4 pledging to 'partner with other organisations to take a place-based approach to address social determinants of health'. This is of particular interest in terms of collaboration and taking a joined-up approach to tackling inequalities using parks and green spaces as the vehicle to achieving improved outcomes for communities.

Alignment with Key Objectives

Aligning Partner Objectives Across Cambridgeshire and Peterborough:

Working across partners, and informed by the extensive engagement process, the following broad objectives arise for the legacy of the FPA project and provide some key priorities for the Active Parks Unit.

- Improving health and wellbeing
- Building community resilience
- Nature restoration
- Contributing to tackling climate change
- Creating strong governance and partnership arrangements that support shared priorities across Cambridge and Peterborough, respect diversity in local operational service delivery and encourage greater decentralisation of service delivery over time.

Alignment with County Council Key Objectives:

These objectives are shared with all partners and support key strategies of the County Council including the central themes of Covid Recovery, for individuals and communities, and tackling the climate emergency. Furthermore, the legacy proposals for Cambridgeshire and Peterborough FPA, and the creation of the Active Parks unit in particular, will support the following CCC objectives to:

CCC Objective	FPA Legacy supports delivery...	Active Parks Unit Objective
<ul style="list-style-type: none"> • put climate change and biodiversity at the heart of the Council's work 	<ul style="list-style-type: none"> • by enabling nature restoration in parks 	YES
<ul style="list-style-type: none"> • promote biodiversity and increase Cambridgeshire's natural capital 	<ul style="list-style-type: none"> • by enabling nature restoration in parks and promoting parks as key infrastructure in the wider landscape 	YES

<ul style="list-style-type: none"> • create opportunity, promote diversity and do all we can to foster inclusion across the county 	<ul style="list-style-type: none"> • by building the capacity of parks community groups to engage with their communities and help maintain their parks 	YES
<ul style="list-style-type: none"> • encourage and participate in place-based partnerships with District Councils 	<ul style="list-style-type: none"> • by further developing the elected member governance arrangements that oversee the work of FPA into an exemplar of multi-tiered, place based partnership working 	
<ul style="list-style-type: none"> • adopt a 'health in all policies' approach 	<ul style="list-style-type: none"> • by co-ordinating the provision of green prescribing programme across parks and activating and animating parks for community benefit 	YES
<ul style="list-style-type: none"> • encourage more residents out of their cars, along with infrastructure development, the encouragement of sustainable travel, and securing safe routes and connections for pedestrians and cyclists 	<ul style="list-style-type: none"> • by mapping parks as key infrastructure alongside sustainable travel routes to encourage greater use and participation 	
<ul style="list-style-type: none"> • form strong and positive partnerships as members of the Combined Authority and the Greater Cambridge Partnership in the areas of public health, climate change, public transport and sustainable homes. 	<ul style="list-style-type: none"> • by further developing the elected member governance arrangements that oversee the work of FPA into an exemplar of multi-tiered, place based and partnership working 	YES

The aims of the Future Parks Legacy will be to support the Cambridgeshire and Peterborough COVID-19 Response and the approach to a Green Recovery. COVID-19 case numbers have been disproportionately higher in areas where people have least access to parks and green spaces such as areas of socio-economic deprivation and high-density housing.

Finally, the Peer Challenge Action Plan contains a recommendation for the County to “embrace the opportunity to reset, clarify and rebuild the different roles for the Combined Authority, the Greater Cambridges Partnership, Cambridgeshire County Council and District Councils in place shaping and place delivery, and take the lead where appropriate”. The agreed response recognises that “partnerships across the Cambridgeshire system are deepening already, with improved relationships and a clearer route to delivery of shared objectives”.

Securing the Benefits of Parks – The Partnership Proposition

The District Councils, Peterborough City Council and other partners invest over £10m per annum in maintaining public parks and green spaces. COVID19 shone a light on the value of parks and green spaces and the benefits they can provide for local communities (estimated to be circa £375m per annum). However, these benefits can only be secured and maximised by better and more co-ordinated action by partners with responsibility for health, the environment and community resilience, like the County

Council, and deepened partnership working with between the County and all the Districts and PCC.

The involvement and support of all the Districts, Peterborough City Council and Cambridgeshire County Council for the Cambridgeshire and Peterborough FPA is a key output of the project and demonstrates the collective and collaborative leadership approach required for effective place shaping. The Future Parks Legacy now provides an opportunity for the County, with its partners, to move from 'Place Shaping' to 'Place delivery' and continue this collective and collaborative approach. This involves orchestrating activity on parks and green spaces across Cambridgeshire and Peterborough to realise the opportunities for creating and securing the proven benefits of parks and the social and environmental value that they support.

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

Developing Options

The project adopted a mission-oriented project approach that used challenges to stimulate innovation across sectors and communities of interest. This is shown at Appendix B. Through a number of Task and Finish Groups, made up of a range of partners and interests from the public, private and voluntary sectors, workshops were held that tested a range of Cambridgeshire and Peterborough wide options for funding and operating parks; setting standards for parks; engaging with stakeholders for parks; and options for addressing the green space implications of housing growth in the County. These workshops resulted in the selection of preferred options for each challenge as follows:

Group and Commissioned Reports	Preferred Options established through Co-Design process
<p>Funding and Operating Model Group</p> <p>Project Opportunity and Options Assessment Report for Cambridgeshire and Peterborough Future Parks Accelerator - Finance Earth</p> <p>Work on-going in designing Model for Delivery</p>	<ul style="list-style-type: none"> • "Added value" services at to be delivered at Cambridgeshire and Peterborough scale respecting diverse local operating models and avoiding duplication • Approach to Natural Capital Investment with partners via the creation of a single Environment Fund/Doubling Nature Fund to enable private and philanthropic investment • Single approach to Enterprise Investment across Cambridgeshire and Peterborough
<p>Mapping and Standards Group</p> <p>Cambridgeshire open space mapping & standards summary report https://cambsfutureparks.org.uk/wp-content/uploads/2021/06/cambridgeshire-open-space-mapping-and-standards.pdf </p>	<ul style="list-style-type: none"> • No single Open Space Standard across Cambridgeshire and Peterborough • The creation of a Cambridgeshire and Peterborough map of all parks and green space and a whole Landscape approach to determining parks priorities
<p>Stakeholder Engagement Group</p>	<ul style="list-style-type: none"> • Better sharing of information to improve connectivity, identifying key contacts,

<p>Realising the health and wellbeing benefits of public open spaces report for future parks accelerator</p> <p>Building interest, capacity and capability in volunteering report for future parks accelerator</p>	<p>with a central hub and network across health and volunteering.</p> <ul style="list-style-type: none"> • Creation, co-ordination and management of green prescribing an health related programmes using parks and green spaces to support health outcomes • Creation, co-ordination and management of networks of parks community groups across Cambridgeshire and Peterborough to build capacity to support health and community resilience outcomes
<p>Growth and Development Group</p> <p>Work on-going</p>	<ul style="list-style-type: none"> • Single approach to Natural Capital mapping and priority setting for Cambridgeshire and Peterborough • Best practice approach to Stewardship of new green spaces • Single portal for access to all-natural capital mapping for all stakeholders across Cambridgeshire and Peterborough

The above exercise was the Co-Design phase of the project and has resulted in five key functions requiring development for the legacy:

- An Active Parks Unit providing services supporting health, nature restoration, community resilience and climate change (which this Business Case addresses)
- Planning and mapping green space and natural capital
- Natural capital investment and fundraising
- Stewardship of new green spaces
- Governance arrangements to support the above that reflect the partners involved including Cambridgeshire County Council, Peterborough City Council, all the Districts, Cambridgeshire and Peterborough Combined Authority and the Local Nature Partnership.

This Business Case relates to the first element of the FPA Legacy the creation of a unit to support parks services for health, nature restoration, parks community and voluntary organisation support and support of carbon reduction. Its relationship to the other elements of the legacy are yet to be defined.

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

Incubating the Active Parks Unit

Establishing the Active Parks Unit is the key step in securing the legacy of the project. The units focus on health, environmental and community resilience outcomes directly complements and supports Cambridgeshire County Council functions and services overseen by the Adults and Public Health Committee, the Communities, Social Mobility and Inclusion Committee and the Environment and Green Investment Committee. The

detailed services proposed, are described in Appendix C, will be designed to complement existing service delivery and ensure the health and wellbeing, nature and community benefits of parks are realised for local people.

Outline Financial Contributions from Cambridgeshire County Council

The proposed funding for piloting the first year of the Active Parks Unit is given below. How the funding for years 2 and 3 will be subject to negotiation during the pilot year. Work on the business model is on-going but the first draft of a potential staffing structure and costs is given at Appendix D. The business model of the unit is being developed by the FPA Project Team including representatives from all the Districts, Peterborough City Council and Cambridgeshire County Council including specific input from Community Connectors from the Think Communities Team.

Figure 2 Funding of the Active Parks Unit for 2022/23

Partner Contributions Under Consideration	2022/23	2023/24	2024/25
	Pilot Year	To be agreed	
C&P Combined Authority	£75,000		
Cambridgeshire CC	£40,000		
Peterborough CC	£5,000		
Districts x 5	£25,000		
Future Parks Accelerator	£55,000		
Running Costs Pilot Year	£200,000		

Year 1 is a pilot year that will enable partners to incubate the model within County Council structures to ensure maximum synergy with Public Heath, Think Communities and Environmental Services.

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

Key branches of service delivery for the Active Parks Unit will be as follows:

- Mapping and opportunity identification – Providing a centralised view of parks and green spaces and related activities.
- Programme development and support – Development, curation and animation of resources that can be repeatedly used throughout the Districts and Peterborough City. In the long term, provide strategic and programme development support.
- Asset and community-based support – Community-focused delivery of on the ground support to individuals, groups, and communities seeking to utilise parks and green spaces.

The main functions and related outcomes are illustrated below. More details of the functions are given at Appendix C.

Figure 3 Main functions of the Active Parks Unit

Cambridgeshire & Peterborough “Active Parks” Unit



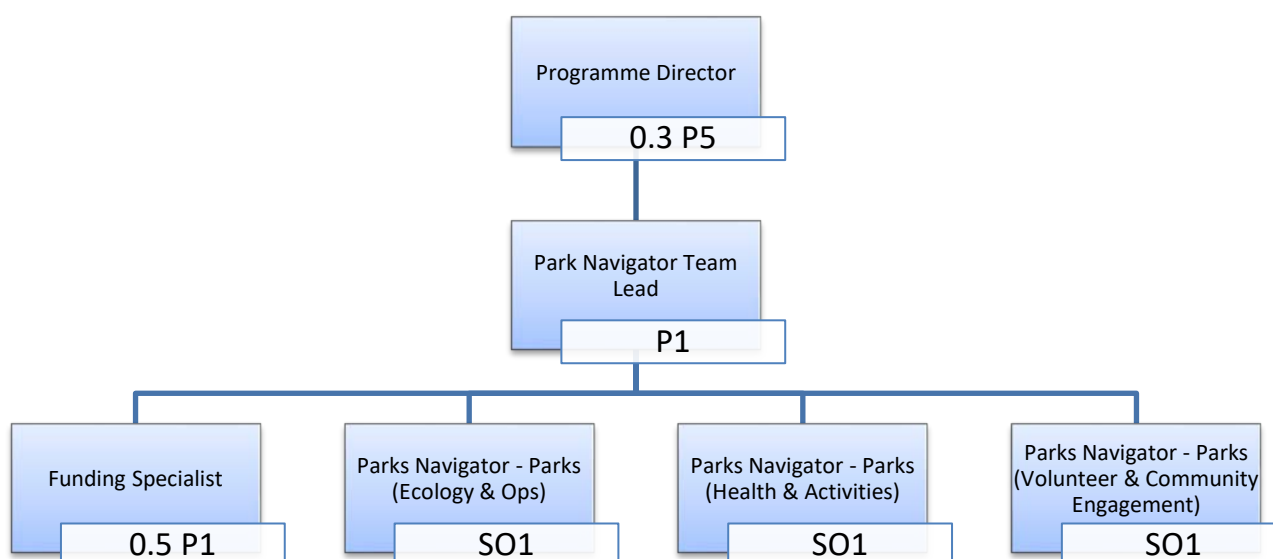
Outline Business Case

Initial Purpose and Structure of the Active Parks Unit

Mission of the Active Parks Unit will be to realise the benefits of parks and green spaces for local communities by activating and animating these spaces. This will be achieved by working closely with local parks operations teams.

The proposed structure of the Active Parks Unit is as follows:

Figure 4 Proposed Structure of the Active Parks Unit



The purpose of the Parks Navigator will be to work across local partners to create and deliver a programme of work to increase the park's local communities' engagement with and use of their parks. This could include delivering nature activities, health initiatives, community engagement and developing the parks into a community hub for the neighbourhood. The detailed costs of the Active Parks Unit are given in Appendix D.

Outcomes and Outputs

The project has assembled a strong evidence base of the location, quality and accessibility of parks and green space and their spatial relationship to deprivation; health inequalities; housing and population growth; and related natural capital features. From this work it will be possible to identify and prioritise interventions across parks aimed at directly addressing health inequalities in key locations such as Peterborough and Fenland, restoring nature within parks where opportunities arise as identified through natural capital mapping, tackling climate change by providing tree planting opportunities and building the capacity of parks related community groups growing the number of volunteers and boosting their capacity to help maintain and operate parks. Again, this will be directed at those local communities with the highest level of deprivation and reporting the worst health outcomes.

Detailed mapping work continues to identify areas of deficient green space and links to inequality as well as identify those green spaces that can deliver multiple benefits.

The Active Parks Unit will seek to deliver the following outputs in Phase 1. These are still under development as part of the Business Model work.

Figure 5 Active Parks Unit Outputs and Outcomes

First Draft Outputs and Outcomes – To be further developed			
Service	Output	Outcome	Measures
Overall Outcome/Impact - Nature Recovery			
Champion Nature recovery for parks and green spaces	Advocacy, communication of successful projects restoring nature in parks and green spaces, engagement with the LNP.	Increased nature restoration projects in parks and green spaces.	<ul style="list-style-type: none"> No. Of nature restoration projects in parks and green spaces. Impact measurement: m2 of land restored for nature Biodiversity change
Signpost activities & identify opportunities for nature restoration in parks and green spaces at the community scale.	Opportunities, to deliver nature-based activities in parks and green spaces identified. Volunteer numbers	Volunteers capacity in delivering nature-based activities in parks and green spaces. Increase number of nature restoration projects in parks and green spaces. Long-term outcome to increase the biodiversity in parks and green spaces and steer traffic away from	<ul style="list-style-type: none"> No. Of nature restoration projects in parks and green spaces (delivered by volunteer and community groups) No. Volunteer and community groups with Nature recovery plans in parks and green spaces. Impact assessment: change in the state of nature in parks and

First Draft Outputs and Outcomes – To be further developed			
Service	Output	Outcome	Measures
		sensitive sites, such as SSSI.	green spaces with nature recovery plans after 2 years. • Biodiversity change
Overall Outcome/Impact – Strengthened Community Resilience			
Co-ordinate, maintain and market database of volunteer groups and opportunities	Increased volunteering activity and capacity across Cambridgeshire and Peterborough	Better skills match for volunteers or groups depending on their needs leading to better learning and increased capacity.	• No. Volunteer groups engaged with the Volunteer network (attend at least one event a year) • No. Volunteers taking part in capacity building skills matching service sub-categorised by a) Receiving support, b) delivering support, c) both • Database will also provide a baseline for Volunteer participation rate in parks and green spaces (no. Volunteers / 1,000 population) • No. Volunteer groups per park / green space
Volunteer / group skills matching	A programme in which Volunteer groups are matched with individual volunteers or other groups with a particular area of knowledge, expertise or experience.	An increase in capacity and capabilities in volunteer groups, without significantly increasing the capacity burden onto Local Authority parks managers.	• No. Volunteers taking part in capacity building skills matching service sub-categorised by a) Receiving support, b) delivering support, c) both
Parks Forum set up and co-ordination	Volunteer groups across Cambridgeshire and Peterborough are connected to share best practice case studies, current activities and future aspirations.	Opportunities for collaborative working to deliver activities at scale identified and perused.	No. Volunteer groups engaged with the Volunteer network (attend at least one event a year)

First Draft Outputs and Outcomes – To be further developed			
Service	Output	Outcome	Measures
Funding options development for Volunteers	Volunteers are supported through the process of accessing funds – such as grant funding applications and/or crowd funding. Increased funds available	Increase resource injection into volunteer and community groups. Increase delivery of activities in parks and green spaces.	<ul style="list-style-type: none"> No. Of successful funding bids Value of external funding secured
Overall Outcome/Impact – Improve Health and Well Being			
Manage a database of health-based organisations and activities delivered in parks and green spaces.	Increased take up of social prescribing via signposting health-based opportunities in parks and green spaces to providers and commissioners.	Better access to services provided in parks and green spaces that contribute to better health and wellbeing.	<ul style="list-style-type: none"> No. Of referrals / participation rate No. Individuals accessing health-based services in parks and green spaces Survey data: Self-reported level of health and wellbeing
Develop support materials to new PCNs (primary care networks)	Link patients and social prescribers with appropriate green space. Promotion of parks and green spaces for health and wellbeing. Promotion of specific parks where facilities and activities are appropriate for green prescribing activities.	Improved accessibility of parks and green spaces for people with health conditions and disabilities.	<ul style="list-style-type: none"> No. Projects / strategic interventions in areas of deprivation and health inequalities. Baseline – Jim Roquette data No. Of health-based activities taking place in parks and green spaces Participation rate of health-based activities in parks and green spaces. Sub-categorised by target group. (Per 1,000 population for example or by number of 'referrals')
Set standards & benchmarks for delivery of health-related activities in parks and green spaces.	Consistent delivery of health-related activities in parks and green spaces,	Improved self-reported health and wellbeing among targeted groups.	<ul style="list-style-type: none"> Quality of health-based interventions in parks and green spaces (I.e., do these

First Draft Outputs and Outcomes – To be further developed			
Service	Output	Outcome	Measures
	ensuring a minimum standard quality of care.		<p>activities meet the standards we set)</p> <ul style="list-style-type: none"> Survey data: Self-reported level of health and wellbeing
Marketing support, particularly hard to target groups	Promotion of parks and green spaces for health and wellbeing. Delivery marketing campaigns & messages that reach members of the public / subgroups with low park usage.	<p>Increased use of parks and green spaces by target groups.</p> <p>Increase number of target groups engaging in health and wellbeing activities in parks and green spaces.</p>	<ul style="list-style-type: none"> Participation rate of health-based activities in parks and green spaces. Sub-categorised by target group (per 1,000 population or by number of 'referrals')
Health network animation	Engagement with public health representatives and parks practitioners to enable a more joined up approach to the delivery of health-based activities in parks and green spaces.	Increased number of health-based activities in parks and green spaces.	<ul style="list-style-type: none"> Attendance rate to events No. Of health-based activities taking place in parks and green spaces Impact assessment: where actions followed up
Go-to resource for getting support to deliver health and wellbeing activities	<p>Park's Navigator will be able to respond to enquiries by signposting or connecting social prescribers, parks practitioners or volunteer / community groups to necessary contact for the delivery of health-based activities in parks and green spaces.</p> <p>Support to scale up some of the</p>	<p>A more coordinated, joint-up approach to the delivery of health and wellbeing activities in parks and green spaces.</p> <p>A reduction in barriers to delivering health and wellbeing activities in parks and green spaces</p> <p>Higher standard of service for the delivery of health-related activities in parks and green spaces.</p>	<ul style="list-style-type: none"> Attendance rate to events / participation rate (I.e., percentage of people subscribed to a volunteer network who engage in activities) Impact assessment: where actions followed up and no. of joint / partnership projects perused Survey data Quality of health-based interventions in parks and green spaces (I.e., do these

First Draft Outputs and Outcomes – To be further developed			
Service	Output	Outcome	Measures
	smaller organisations that are currently providing green social prescribing activities, or signpost to other capacity-building programmes as appropriate.		activities meet the standards we set)
Local capacity building and scale-up support for the delivery of health and wellbeing activities in parks and green spaces	Support to scale up some of the smaller organisations that are currently providing green social prescribing activities Critical friend to business planning, connecting initiatives to funding, matching complementary organisations to fill gaps in capabilities and block barriers to services	Higher standard of service for the delivery of health-related activities in parks and green spaces. Quality assurance of sites and activities delivering health and wellbeing activities in parks and green spaces Public health representatives and social prescribers are better able to run health-based activities in parks and green spaces. New services and/or services unlocked for underserved populations are developed through smart coordination of existing activities	<ul style="list-style-type: none"> • Quality of health-based interventions in parks and green spaces (I.e., do these activities meet the standards we set) • Survey data • No. Of health-based activities taking place in parks and green spaces

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

The Value of Parks

Parks as public goods deliver positive economic externalities in the form of better physical and mental health, reduced carbon and improved air quality. They are a feature natural capital that supports social and economic activity. These benefits flow from ecosystem services and these can be measured as benefits that would be lost if a

green space were removed or changed – or the benefits gained by providing a new parks or greenspace. This approach to valuing the benefits of parks is called Natural Capital Accounting and is now a recognised approach to valuing non-financial benefits in the HMT Green Book.

National Evidence

The Wellbeing Value associated with the frequent use of local parks and green spaces is worth £34 billion a year, and parks and green spaces are estimated to save the NHS around £111 million per year based solely on a reduction in GP visits and excluding any additional savings from prescribing or referrals.

For every £1 spent on parks in England an estimated £7 in additional value is generated for the health and wellbeing of local people and the local environment. Parks provide natural benefits to the communities valued at £6.6bn annually including £2bn of avoided health costs. These benefits are worth £140 per year for every urban resident. Parks are a really smart low cost investment in civic infrastructure. But these returns are not the only reason for places to invest in parks.

Local Evidence

Applying this approach in Cambridgeshire & Peterborough parks provide benefits worth £375m per year in benefits (or £25 per visit) made up of physical and mental health benefit, amenity value and carbon sequestration. The vast proportion of this is received in mental and physical wellbeing benefits which account for £317 million per year of value across Cambridge and Peterborough. This is physical health benefits of per visit £7 and mental wellbeing benefits per visit £14.

It is estimated that for every £1 spent on maintaining parks and green spaces across Cambridgeshire & Peterborough over £40 are received in benefits making parks a smart investment.

Small greenspaces are a vital source of value for urban residents in densely populated areas, creating nearly twice as much value per hectare as the largest greenspaces which tend to be located in less densely populated areas.

Going forward, increasing the frequency of greenspaces and the level of physical activity in these spaces could unlock even greater value from existing parks.

Figure 6 Measuring the Benefits of Parks

Key Benefit	Measure	Baseline	Target & Timescale
Mental Health	Natural Capital value	To be assessed	Increasing values of three years by increasing visits and accessibility
Physical Health	Natural Capital value	To be assessed	Increasing values of three years by increasing visits and accessibility
Carbon Sequestration	Natural Capital value	To be assessed	Increasing values of three years by increasing vegetation, canopy

Key Benefit	Measure	Baseline	Target & Timescale
			cover and tree planting etc
Amenity Value	Natural Capital value	To be assessed	Increasing values of three years by increasing visits and accessibility

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

The major risk is that if the council (with CPCA) do not take the initiative to incubate this project then it will not happen and therefore the benefits to nature, community and residents will not take place and they will not get the benefits of green spaces.

A further risk lies in the rapid growth and development of the county. A key factor of FPA is understanding the delivery of new green spaces as a result of development, and with the demands of new local plans and the OxCam Arc there is a poor-quality open space with all the associated failings that can bring.

A further risk is lack of engagement by the operators of public green spaces. However, all partners have been engaged with the FPA to date and this proposed model does not impact on the autonomy of those operators, instead bringing shared/added benefits.

There is also considerable reputational risk for the Council if the outputs of the FPA Project are not taken up. The National FPA Programme is designed to enable public sector partners to innovate and create new solutions to sustaining and improving parks and green spaces. The particular theme for the C&P FPA Programme was partnership and multi-tiered working and this is also a strong theme for the new administration. If the legacy of the FPA Project is not secured an opportunity for demonstrating innovation in this key area will be lost.

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

In scope - publicly owned/accessible parks and green spaces across Cambridgeshire and Peterborough.

Out of scope – Nat Cap Investment, mapping and info, stewardship, governance

Out of scope – Cambridgeshire County Council's farm estates.

Appendix A - Supporting Evidence

Health and GI - Natural England A Rapid Scoping Review of Health and Wellbeing Evidence for the Framework of Green Infrastructure Standards NEER015 <http://publications.naturalengland.org.uk/publication/4799558023643136>

Healthy New Towns Programme - NHS Putting Health into Place. <https://www.england.nhs.uk/ourwork/innovation/healthy-new-towns/#:~:text=Covers%20developing%20preventative%20and%20integrated,integrated%20and%20high%2Dquality%20services.>

Promoting healthy weight in children young people and families - Public Health England - [Promoting healthy weight in children, young people and families - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

Improving access to green spaces Public Health England - [Improving access to greenspace: 2020 review \(publishing.service.gov.uk\)](http://publishing.service.gov.uk)

Why should we invest in parks? National Heritage Lottery Fund <https://www.heritagefund.org.uk/publications/parks-people-why-should-we-invest-parks#:~:text=Parks%20investment%20helps%20to%20reduce,do%20not%20usually%20use%20parks.>

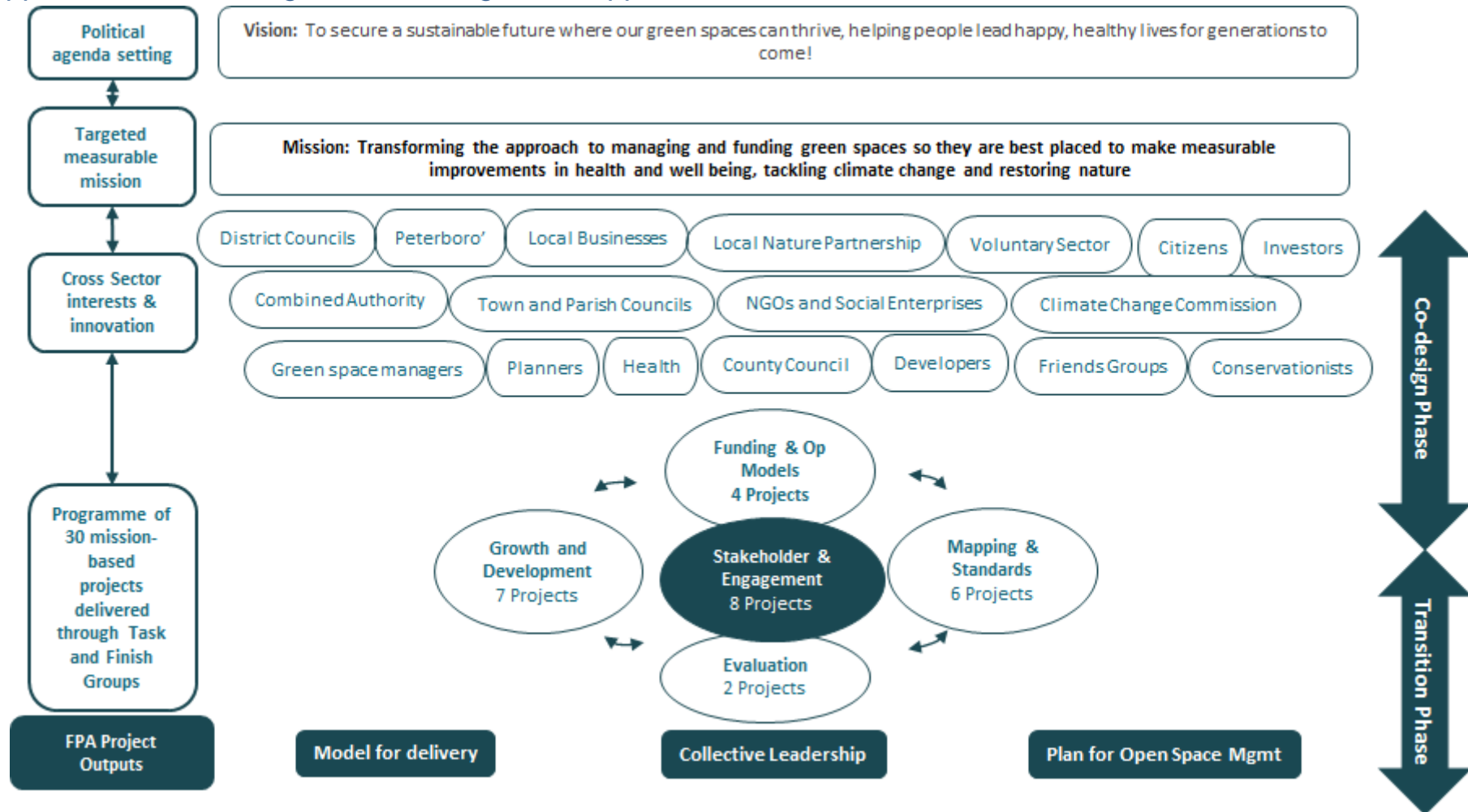
Stakeholder Engagement Workstream Project 4 NEW COMMUNITIES <https://cambsfutureparks.org.uk/wp-content/uploads/2021/08/cp-future-Parks-cew-communities-report-July-2021.pdf>

CAMBRIDGESHIRE OPEN SPACE MAPPING & STANDARDS SUMMARY REPORT <https://cambsfutureparks.org.uk/wp-content/uploads/2021/06/cambridgeshire-open-space-mapping-and-standards.pdf>

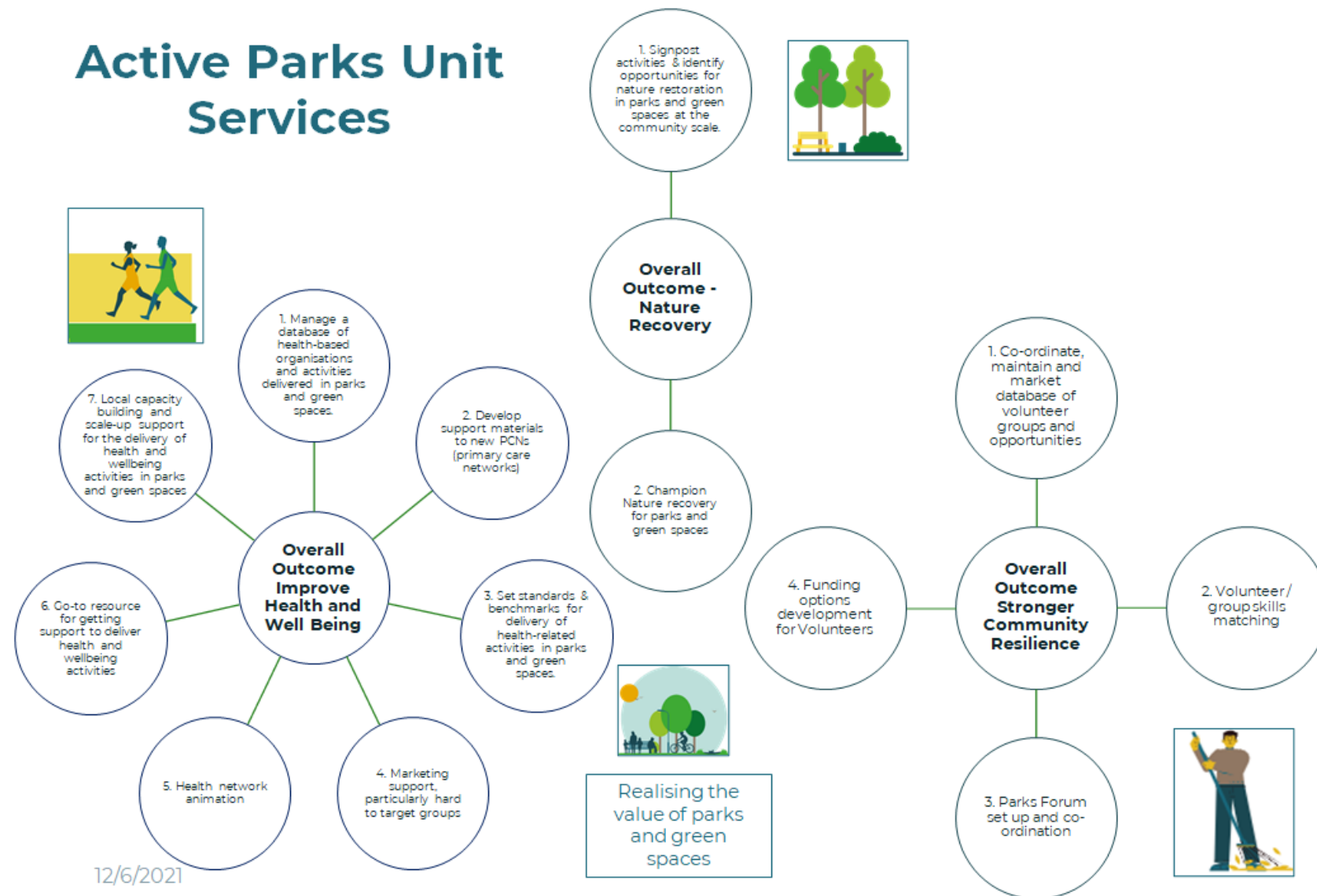
Project Opportunity and Options Assessment Report for Cambridgeshire and Peterborough Future Parks Accelerator Finance Earth

Stakeholder Engagement Workstream Project 5 Realising the health and wellbeing benefits of parks and public open spaces

Appendix B - FPA Programme Management Approach



Appendix C – Active Parks Unit functions and services



Appendix D – Active Parks Unit – Phase1 Staffing Structure

Role	# FTE	Pay Grade	Salary (Unweighted)		Reporting to
Programme Director	0.3	P5	£58,893	£17,668	Governance model for Parks Unit
Funding Specialist	0.5	P1	£33,816	£16,908	Programme Director
Park Navigator Team Lead	1	P1	£33,816	£33,816	Programme Director
Parks Navigator - Parks (Ecology & Ops)	1	S01	£27,741	£27,741	Park Navigator Team Lead
Parks Navigator - Parks (Health)	1	S01	£27,741	£27,741	Park Navigator Team Lead
Parks Navigator - Parks (Volunteers)	1	S01	£27,741	£27,741	Park Navigator Team Lead
				£151,615	
Weighting factor, benefits, NICS	30%			£45,484	Personnel costs
				£197,099	

Business Planning: Business Case – Investment proposal

Project Title: Managing Climate Risk

Committee: Environment & Green Investment

2022-23 Investment amount: £340k

2023-24 Investment amount: £260k

2024-25 Investment amount: £50k

Brief Description of proposal:

To reduce organisational and area-based carbon emissions to avoid future costs associated with climate change impacts; and to support delivery of the Climate Change and Environment Strategy which is currently under review.

Date of version: 22 November 2021

BP Reference: N/A

Business Leads / Sponsors: Sheryl French

1. Please describe what the proposed outcomes are:

This proposal supports the following Cambridgeshire County Council outcomes:

- Cambridgeshire: A well-connected, safe, clean, green environment
- A good quality of life for everyone
- Communities at the heart of everything we do

The proposal covers:

(i). Local Area Energy Planning (LAEP)

To create a spatial representation of Cambridgeshire's current energy system and future energy requirements to strategically plan what and where energy infrastructure is needed to get net zero. Undertaking this work will benefit Cambridgeshire and the Council as it will provide opportunities for the Council to use its buildings and land assets to host or support energy projects to achieve net-zero place making and commercial benefits. The Plan will identify green energy generation and distribution opportunities, retrofitting of existing buildings and set out the strategic partnerships and scale of funding that will be needed to deliver the change to a smart energy system.

(ii) Cambridgeshire Decarbonisation Fund.

Engage partners and businesses in the development of a detailed business case for a Fund which will invest in local carbon off-setting projects and sell carbon credits to support businesses and communities to decarbonise. This Fund will look to accelerate carbon avoidance, invest in carbon removal and invest locally in projects to manage hard-to-treat carbon emissions. The Fund will support SMEs (small to medium enterprises) and large businesses to reduce carbon emissions first and offer local carbon offsets for hard-to-treat carbon reductions. This brings businesses and communities together in a shared effort to decarbonise and will drive down emissions faster than they would otherwise. The Swaffham Prior Community Heat Project will be taken through the carbon credit accretional process to allow carbon credits for this project to be sold to start the process.

(iii). Climate change and energy services team.

Revenue funding to support the development and delivery of capital funded energy and low carbon projects. This will cover project costs including communications, setting up and managing retail functions for energy sales e.g. Swaffham Prior Community Heat Project and marketing of power and heat products such as power purchase agreements for local consumers.

(iv). Supporting growth and communities.

Technical carbon and climate inputs are required to support the Council's input on planning applications, local plan development, Nationally Significant Infrastructure

projects, advising on new and existing procurements to set carbon footprints for supply chain and advising members. In addition, Government has set up a range of decarbonisation funds (22 grant pots currently available) to apply for funding. Increasingly these require greater levels of specialist input on carbon and climate.

The outcomes from the 2022/23 interventions are listed below:

(i) A Local Area Energy Plan (LAEP):

- Engage stakeholders and partners in the scoping and development of a LAEP
- Agree the strategic framework for Cambridgeshire to develop a future smart energy system at lowest cost for our communities and businesses
- identify how Council buildings and assets can facilitate low carbon place making by becoming anchor loads, or for hosting energy infrastructure
- Identify which Council buildings and assets can be developed for energy projects to develop commercial returns
- Identify how to integrate existing energy investments and projects into a wider smart energy system for Cambridgeshire

(ii) A Cambridgeshire Decarbonisation Fund and business advisory service will:

- Support SME's to understand their carbon footprints and make plans for decarbonisation
- Collaborate with Cambridgeshire businesses on opportunities for carbon offsetting locally for hard-to-treat carbon emissions
- Collaborate with communities and partners to develop a pipeline of low carbon projects that cut carbon emissions locally
- Attract investment into decarbonisation projects in Cambridgeshire to deliver faster and deeper reductions to emissions than otherwise
- Invest in local carbon avoidance and removal to provide confidence that emissions are reduced and verified
- Accredited Swaffham Prior Community Heat Project to sell carbon credits as a first project

(iii) The Energy Team is currently delivering a £100 million investment programme into capital projects covering school and building retrofits, solar farms, district heating and smart energy grids. On average 15% of relevant staffing costs can not be fully capitalised. For new projects e.g. Swaffham Prior Community Heat Project, revenue costs for retail and sales function need to be covered.

The outcome from this investment will be carbon footprint reductions for schools, community and the Council.

(iv) Additional specialist carbon and climate skills to support the development of a data framework for carbon for the Council to inform decisions; assess planning applications; assess procurements and to apply for decarbonisation funding. Government has a range of decarbonisation funds and competitions to apply for to help the Council and communities reduce carbon emissions

The outcome from this investment will be carbon reductions from growth, reductions of scope 3 emissions and inward investment from successful decarbonisation competitions and grants.

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

Nationally, Government has set a target of 78% reduction of CO2e emissions by 2035 and net zero emissions by 2050.

The Council's Climate Change and Environment Strategy and targets are under review. Below is a list of the existing climate mitigation targets for the Council and its communities.

Existing Targets

- Reduce the council's scopes 1 and 2 by 50% (compared to 2018 levels) by 2023. (retain as interim target to the proposed target)
- All buildings we own and occupy to be fossil-fuel free and all car and van fleet to be electric by 2025
- Reduce the council's scope 3 by 50.4% (compared to 2018 levels) by 2030
- By 2030, sign up to a shared target with partners and the community to deliver 50.4% GHG emissions reductions by 2030 for Cambridgeshire (based on 2018 baseline)
- Net zero carbon for Cambridgeshire by 2050 (area target)
- All council directorates to implement measures to ensure their services are adapted to climate change by 2025
- 100% of Council strategies include policies that tackle Climate Change and provide natural capital enhancement by 2023
- Deliver 20% biodiversity net-gain across all Council property, land projects and wildlife site by 2050

The JAA (Joint Administration Agreement) action plan has committed to the Review of the Climate Change and Environment Strategy and its completion by December 2021 to inform business plan proposals. The JAA action plan also includes the development of a Net Zero Programme and Resource Strategy to inform the Medium term Finance Strategy by March 2022. The latter will inform the 2023/24 business planning process and this business case is providing the interim 2022/23 interventions that are needed to continue to build skills, plans, mechanisms and attract funding for delivery.

The interventions are to support the JAA ambitions to put climate and nature at the heart of decision making. This means alignment with the new Corporate Framework and triple bottom line accounting, as well as supporting the decentralisation agenda that includes Think Communities and Happy at Home. The interventions are also supporting the COVID-19 Green recovery Plan 2020 and will inform the Council's Commercial, Investment and Asset Management Strategies.

(i) Local Area Energy Planning has been developed by the Energy Systems Catapult (ESC) funded by Government and its toolkit has been tested by three Local Authorities. The proposal is to use the ESC or equivalent toolkit and then use the information and evidence to compete for government funding to support delivery of these decarbonisation plans.

(ii) The Cambridgeshire Decarbonisation fund is in its second year of development with CUSPE researchers. The output from 2021/22 research will provide the fund model and strategic case. A detailed business case in collaboration with businesses and partners will then be developed to generate buy-in and commitment to the Fund. Already SME's are asking the Council for this type of fund and support for decarbonisation of their businesses.

(iii) and (iv) The Council reports annually on its carbon footprint for scope 1, 2 and 3 emissions and the annual carbon footprint for Cambridgeshire. The projects for schools and CCC buildings are reducing the Council's direct carbon footprint and the larger projects are reducing emissions more broadly for Cambridgeshire. However, to increase the pace and scale of emission reductions the Council needs to use its policy levers and powers to design out emissions from growth, support supply chain emissions reductions and attract investment into decarbonisation projects locally.

Stakeholder engagement

During October and November 2021, three webinars were held engaging with the community, businesses and partners. The key messages include:

- Align ambitions with partners and businesses to create greater impact
- Lead by example
- Support communities and businesses to decarbonise
- Provide data and evidence to inform decisions and wider engagement

In addition:

- A large number of parish councils in Cambridgeshire have declared climate emergencies and are looking to make a difference. However, a lot of the place making mechanisms such as infrastructure are in the remit of others. [Climate change \(nalc.gov.uk\)](https://www.nalc.gov.uk)
- Young people have sent messages via the pre lockdown Climate Strikes . [Young people resume global climate strikes calling for urgent action | School climate strikes | The Guardian](https://www.theguardian.com/environment/2021/nov/18/young-people-resume-global-climate-strikes-calling-for-urgent-action)
- Cambridge University climate risk report for Cambridgeshire highlights the impacts on our communities. [Preliminary report on climate risk in the Cambs Peterborough region 2020-2099_final.pdf \(hubspotusercontent40.net\)](https://www.hubspotusercontent40.net/Peterborough-region-2020-2099-final.pdf)
- Key businesses in Cambridgeshire are pledging to become net zero businesses.
- <https://www.cisl.cam.ac.uk/news/blog/why-the-transition-to-net-zero-is-business-business>
- <https://www.cambridgeindependent.co.uk/business/arm-commits-to-achieving-net-zero-carbon-by-2030-9147684/>

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

The review of the Climate Change and Environment Strategy is underway and engagement with Members, management teams, partners and stakeholders has taken place during October – November 2021. The Steer from the cross-part workshop with Councillors on 5 October and webinar on 12 October include:

- (i) Whole organisation engagement and delivery of targets
- (ii) Wider engagement and support for communities and businesses
- (iii) Alignment with partners and
- (iv) identifying the mechanisms and strategic partnerships to deliver at scale

Presentations given on the review of the Climate Change and Environment Strategy (that were undertaken during September – November 2021) also included internal management teams, the Greater Cambridge Partnership Officer Management Team; Lead Officers on Climate at the Cambridgeshire and Peterborough Combined Authority (CPCA) and a presentation to the Officer Climate Working Group (3rd November 2021).

Specific work on Local Area Energy Planning and Cambridgeshire Decarbonisation Fund has been underway since 2020/21 and has engaged with teams in Business Intelligence as well as with district Council and CPCA partners. Intervention (iii), revenue funding for the Energy team has been discussed with the Director of Resources and identified for inclusion in this business case.

Deliverability

The Council has been building skills and knowledge since 2014 on energy infrastructure, the energy market and how to develop and deliver energy projects and retrofits for decarbonisation. This skill building was designed as a result of a 'Carbon Assessment of the Long Term Delivery Plan' undertaken by Cambridgeshire Horizons in 2009/10 that showed Cambridgeshire's growth agenda adding significant carbon footprint to Cambridgeshire. The strategic intervention to build skills and capacities has resulted in the current £100Million energy programme of living lab projects. However, it is now timely to build on this work and scope a more coherent plan for the local area for both energy and decarbonisation.

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

The following steps are needed:

- ✓ Complete the Cambridgeshire University Science and Policy Exchange (CUSPE) Projects on heat zones (for Local Area Energy Planning) and Cambridgeshire Decarbonisation Fund by January 2022.

- ✓ Work with partners and the CPCA to discuss LAEP with a view to scope what is needed and set up a Strategic Board to oversee the development of the LAEP and the Cambridgeshire Decarbonisation Fund. Engage with the Energy System Catapult, Eastern New Energy to scope the work programmes, undertake stakeholder mapping. April- September 2022
- ✓ Commission phase 1 of the evidence base for the LAEP and the detailed business case for the Cambridgeshire Decarbonisation Fund and engage with and get the buy-in from stakeholders/partners Sept 2022- March 2023
- ✓ Map the wider landscape of funding, investment, bonds, grants, competitions, developer contributions, economic incentives, green levies, finance instruments to facilitate the above. March 2023- September 2023.
- ✓ Set up communications, marketing and sales functions to promote and commercialise energy projects April 2022- March 2024
- ✓ Bring forward skills and capacities to inform work on the Local Government Associations low carbon procurement toolkit for supply chain, a carbon data framework for the Council, government funding etc. April 2022- March 2024

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Complete CUSPE projects	July 2021	January 2022	Sheryl French and Dan Quantrill
Convene Strategic Board and scope work programme for LAEP and CDF	April 2022	September 2022	TBC
Commission phase 1 of the evidence bases for the LAEP and CDF	September 2022	March 2023	Strategic Board
Set up marketing, sales and comms function for energy projects and recruit new skills and capacity planning and inward investment etc	April 2022	March 2024	Sheryl French

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

The most vulnerable in society will suffer the biggest consequences of climate impacts unless interventions are in place to moderate impacts. Delivering change into rural

communities costs more and it is important this work advocates for the vulnerable and the rural communities to prevent them getting left behind and falling into poverty.

An Equality Impact Screening has been completed for this proposal and, if the budget is approved, the impact will be assessed across the three different aspects of the bid as the projects are scoped.

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

Financial Benefits

Cost avoidance:

The Council's carbon emissions in 2019/20 across scopes 1,2 and 3 were estimated at 206,579 tonnes CO₂e. BEIS has published its central scenario carbon price for 2021 @ £245 per tonne to inform policy assessments. If the Council does nothing to reduce its carbon emissions, the risk value of these carbon emissions in today's price undiscounted is @ £50+million.

BEIS forecasts an increase in the per tonne price of carbon over time. If nothing is done to reduce the Council's carbon footprint the Council's risk increases as a result of (i) increased costs for fossil fuels (ii) tighter regulation on carbon emissions reducing asset values for assets with high emissions. This could result in reduced rents or additional investments to mitigate emissions in the future.

Wider society will pick up costs from climate impacts. Overheating, droughts and flooding could increase costs for maintaining roads and infrastructures and this could impact the health of our communities creating greater burdens on the NHS. If flooding events become more prevalent, Insurance companies will increase premiums and or choose not to insure companies/homes in areas of flood risk vulnerability. Other key areas of risk are agriculture and nature – the impacts of both water, (flood and drought) as well as loss of nature (e.g. for pollination, soil health) will reduce land productivity.

Key Benefit	Measure	Baseline	Target & Timescale
CO ₂ e reductions to limit temperature	Carbon footprint organisation	2018 baseline	Net Zero by 2030 scope 1 and 2,

rise and climate impacts	and Carbon footprint area	2017 baseline	50% reduction on scope 3 by 2030 Net zero by 2045
Air quality improvements	Via Local Authority Air Quality Strategies	2021 baseline	
Support for Cambridgeshire businesses to adjust to new product development and changes	£invested in carbon credits as part of the Cambridgeshire Fund		£ invested in local projects to reduce carbon emissions
Infrastructure planning for low carbon places		No LAEP in place No heat zones in place	LAEP plan in place and heat zones

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

Risk	Mitigation	RAG (should the risk occur)	Overall Responsibility
Delivery risk: Insufficient net zero skills in the Council to lead and support the delivery of carbon reductions	Initial skills gaps and capacity identified and included in the business plan for 2022/23	Amber	Executive Director Place and Economy and Assistant Director of Climate Change and Energy Services
Delivery Risk: Delays to getting the right strategic and resourcing framework for Net-Zero	The Review of the CCES is underway to identify 'interim' investment funding in the business plan 2022/23. A detailed resourcing strategy for net zero will inform	Green	As above and

	the 2023/24 business planning process.		
<p>Risks of not acting:</p> <p>Greater resource pressures from higher energy bills,</p> <p>More community demands on services e.g.flood risk;</p> <p>Greater spend on repairing and maintaining infrastructure</p> <p>Less inward investment to the community</p> <p>Reputation as not leading by example having declared a climate emergency</p> <p>Opportunity to benefit commercially from a green recovery and transition diminishes</p> <p>Regulatory change results in more costs to the Council</p>	Local Area Energy planning; building retrofit plans	Green	As above

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

Potential capital/revenue requirements total £340,000 on staff and consultancy on capital and revenue schemes. Please see table below.

Invest to Save (avoiding future carbon costs and climate impacts)	2022/23	2023/24	2024/25	CO2e reductions @£245t/CO2e price in 2021	TOTAL
Local Area Energy Planning	£80,000	£80,000	£80,000	Estimate 3.6 MtCo2e reductions by 2045 equivalent value of + £1 billion	£240,000
Cambridgeshire Decarbonisation Fund	£80,000	To be reviewed	-	TBC	£80,000
Revenue support for marketing, sales, comms for energy projects	£120,000	£120,000	£70,000	Cumulative contractual savings of 100,000 tCO2e from 2017-2021 on current investments valued at £24.5M and more forecast from 2021-2025	£310,000
Support for growth and Communities	£60,000	£60,000	To be reviewed	TBC	£120,000
TOTAL	£340,000	£260,000	£150,000	CO2e reductions	£750,000

Section 4n Strategy and Resources

Savings and Income Proposals

Members Allowances	Page 370
County Farms / agricultural rent	Page 374
Review of staff structure	Page 378

Business Planning: Business Case proposal

Project Title: Members' Allowances

Committee: Strategy and Resources

2022-23 Savings amount: £40k

Brief Description of proposal:

No Member may receive more than one special responsibility allowance. Savings could be made where Members are appointed to two roles as they are only eligible to receive one special responsibility allowance.

Date of version: 15 Sep 2021

BP Reference: C/R.6.105

Business Leads / Sponsors:

Michelle Rowe

1. Please describe what the proposed outcomes are:

With Members in their current roles, savings could be made from the Members' Allowance budget.

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

Members' Allowances are recommended by an Independent Remuneration Panel and then approved by the Council. As set out in the Constitution, allowances comprise the following information:

Special Responsibility

Group Leaders and Deputy SRAs (Special Responsibility Allowance)

Leader of the Council	£31,704
Deputy Leader of the Council	£20,608
Leader of the main opposition	£10,462
Leader of the minor opposition x 2	£6,340
Total	£69,114*

The Leaders of the Labour and Independent Groups will not receive the Leader of the minor opposition allowances as they are part of the Joint Administration and therefore the Labour Leader receives one allowance as Deputy Leader of the Council and the Leader of the Independent Group receives one allowance as Chair of Communities, Social Mobility and Inclusion Committee.

*The total which will actually be claimed is therefore £62,774 rather than the £69,114 total as above.

Policy and Service Committees

Policy and Service Committee Chairs x 5	£18,372
Policy and Service Committee Vice-Chairs x 5	£7,927
Total	£131,495

Other Committees

Audit and Accounts Committee Chair	£7,926
Pension Fund Committee Chair	£7,926
Planning Committee Chair	£7,926
Total	£23,778

Combined Authority Appointments

Combined Authority Board Member	£3,170
Combined Authority Overview & Scrutiny Committee x 2	£1,585
Combined Authority Audit and Governance Committee	£1,585
Total	£7,925*

The Leader will not receive the Combined Authority Board allowance as they can only receive one allowance. The Council's representative on the Audit and Governance Committee is also the Chair of Audit and Accounts Committee so the same rule applies.

Fostering Panel Member to receive £140 per day or £70 per half day

*Total which will actually be claimed is therefore £3,170 rather than the £7,925 total above

The allowances for the Chair and Vice-Chair of Council are not part of the Members' Allowances Scheme and are funded from a separate budget managed by the Chief Executive's office. However, the payments are taken out of the Members' Allowances budget during the financial year. The Chair of Council receives £10,462 and the Vice-Chair of Council receives £3,170. Total for Chair and Vice-Chair is £13,632.

Special Responsibility Allowance Total including the allowances for the Chair and Vice Chair of Council is £234,849 (This does not include the Fostering Panel)

Basic Allowance

£10,568 x 61

£644,648

At the start of the financial year, the following budget figures were set for Basic and Special Responsibility Allowance budgets of £629,215 and £311,075 respectively totalling £940,290.

The changes set out above proposed by the Independent Remuneration Panel and approved by Council total £879,497.

To that figure you need to add £1,000 which is the Independent Persons allowance.

The total is therefore £880,497.

(This includes the allowance to the Chair and Vice-Chair of Council, but does not include the Fostering Panel, which is claimed for as and when the member sits on the panel. It also applies the one member one SRA rule).

Once the national local government pay award is confirmed this will be applied and backdated to these allowances from 10th May 2021. The local government employers first offer was an increase of 1.5%, however, this has been rejected by the staff side and further consideration is pending. We would expect that the uplift will be not less than 1.5% equating to an additional £13,192 across the allowances set out in this report.

The total budget figure is therefore £880,497. However, the pay award for next year needs to be added which is approximately £13,192. Total is £893,689.

There will also be a need to claim £6,432 from next year to offset the pressure to the Chair and Chair's fund. Total is therefore £900,121.

The original budget was set at £940,290 so this would give a saving of £40,169.

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

N/A

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

We will need to await the outcome of the national local government pay award in order to confirm the savings amount that has been estimated.

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

N/A The savings figures are simply related to current procedures and circumstances in the allowances that Members can receive.

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

Financial Benefits

Potential savings of £40,169

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

It is important to note the following:

- Members cannot claim two special responsibility allowances, but if a new Member is appointed it becomes a new cost and so figures could be different to the current position.
- Co-opted Members can claim a Financial Loss Allowance which is a £50 flat fee per half day attended.
- Members can claim a Child and Dependant Carer's Allowance
- The Independent Remuneration Panel (IRP) want CCC to have a policy to support parental leave, which is going to Council on 9 November 2021
- Allowances are increased annually in line with the percentage increase in staff salaries
- The IRP is to undertake a review of the allowances for the new Policy and Service Committee Chairs and Vice-Chairs in twelve to eighteen months' time.

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

The savings relate to Members' Allowances only.

Business Planning: Business Case proposal

Project Title: County Farms / Agricultural Rent

Committee: Strategy & Resources

Income / savings amount: £252k

Increase in income expected between 2021-22 and 2022-23 is £252k

Brief Description of proposal:

10% uplift in rent expected from October 2021- September 2022

2.5% annual uplift from Oct 2022

Date of version: 25/10/2021 BP Reference: C/R.7.120 [and C/R.7.151]

Business Leads / Sponsors: John Nash Rural Asset Manager

1. Please describe what the proposed outcomes are:

Agricultural legislation enables review of rents every 3 years with 12 months notice required.

With 98% of this year's rent reviews completed (44 holdings) Cambridgeshire County Council has increased the passing rent by an average of 16.39%. [There were some big increases this year to play catch up due to earlier internal resource restrictions]

Further, relets to existing tenants and new lettings (31 in total start date October 2021) has resulted in an increase of 16% on the passing rent.

Review of commercial lettings have also increased over 100% (one is subject to contract but with heads of terms agreed on a vacant property) .

These are very good results in the current climate and see a circa 9% increase across the rural portfolio as a whole. The changes are implemented for the agricultural year effective from October and so span two financial periods. Looking ahead to next October we have served rent review notices on 40 holdings (rent roll £400,000) where we believe there is a realistic opportunity to increase rents.

The figures at the top of this business case reflect those numbers apportioned to the relevant financial year.

There remains the possibility that tenants may serve notice on us for rent reductions moving forward.

Further ahead 2.5% is a place marker for future business planning across the portfolio and is a realistic reflection of the uncertainty in agriculture.

New BP			
	Farm rents	Covid Commercial Impairment	TOTAL Income Budget
Base	-£4,705,000.00		-£4,705,000.00
21/22	-£290,000.00	£205,000.00	-£4,790,000.00
22/23	-£45,769.02	-£205,000.00	-£5,040,769.02
23/24	-£126,019.23		-£5,166,788.24
24/25	-£129,169.71		-£5,295,957.95
25/26	-£132,398.95		-£5,428,356.90
26/27	-£135,708.92		-£5,564,065.82

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

Unlike commercial rents, agricultural rents are not subject to specified increases using RPI (Retail Price Index) formulae. Forecasting currently is particularly difficult due to uncertainty surrounding significant influences in farming – grain prices affected by uncertainty of world grain stocks due to climatic influences (flood and drought), increasing cost of inputs due to world shortages and cost of production (e.g fertiliser and diesel) as well as reducing subsidy payments in the UK. As such, the rent review process is specialised and can vary enormously year to year due to world markets.

The work is underpinned by the County Farms Strategy and overseen by the County Farms Member Reference Group. Minor consultancy support has been provided from a firm of Agricultural Surveyors, for more complex cases.

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

The alternative to this proposal would be for the Council to not implement or delay rent reviews, meaning the Council would forego income due under the Farm Business Tenancies agreed.

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

The next steps are to agree the proposal for BP 2022-23 and minimum of 2.5% annually thereafter. We are also exploring opportunities from biodiversity net gain further ahead.

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

It is not anticipated that the proposal will have effects on people with protected characteristics as we are following a standard commercial process.

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

Financial Benefits

- Monitoring achievement of expected rent levels/yield compared to target set
- 2.5% uplift in rents on an annual basis from Oct 2022-2023 as a planning tool

There are entries in the tables adjusted as follows:

Covid Impairment: improved by -£292k [C/R.7.151]

Income growth: reduced by +£130k [C/R.7.120]

Net improvement to business plan 2021-26 = **-£162k**

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

A key risk is that with uncertainty in the agricultural sector due to the UK Brexit and changes in subsidies and uncertain world markets, rents may well reduce rather than increase. In such a situation, ongoing capital investment into the estate may be required and associated with improvement charges.

It should be noted there is no mitigation against external influences.

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

It should be noted that the County's agricultural estates only are in scope for this rent review.

Business Planning: Business Case proposal

Project Title: Reviewing Staff Structure

Committee:

Strategy & Resources

2022-23 Savings amount:

£100k

Financial Breakdown:

	2022-23 £000	2023-24 £000	2024-25 £000	2025-26 £000	2026-27 £000	Total £000	One off/ Permanent?
Savings/ Income	£100	£100				£200	Permanent
Investments							
Pressures							

Brief Description of proposal:

Undertake a review and potential redesign of the current senior leadership structure for Cambridgeshire County Council under the leadership of the new Chief Executive. This is in response to the Peer Review and to align to the council priorities.

Date of version: 16 December 2021

BP Reference: C/R.6.107

Business Leads / Sponsors: Amanda Askham

1. Please describe what the proposed outcomes are:

A senior management structure that is aligned to council priorities, addresses the areas identified in the recent Peer Review and provides opportunities for cost savings over the next two financial years.

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

A review will be undertaken to identify opportunities for efficiency taking into account the following evidence:

- Peer Review recommendations
- CCC corporate priorities
- Changes in headcount which may have resulted in a top-heavy management structure which could be leaner and more efficient as well as removing cost.
- The exploration of the potential options of a new structure could require a significant shift in how the Directors work as well as a cultural change.

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

No

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

High Level Timetable

Task	Start Date	End Date	Overall Responsibility
Scope of review confirmed	June 2022		Stephen Moir
Review undertaken	June 2022		Stephen Moir
Full Business Case developed	June 2022	July 2022	Stephen Moir
Implementation	July 2022		Stephen Moir

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

There is likely to be an impact to those officers in posts which will be in scope of the review. The review will include the Equalities Impact Assessment (EqIA) to help inform the review findings and recommendations. The EqIA will be refreshed as the proposal and full business case is developed.

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

Financial Benefits

- Potential cost savings due to a reduction in the number or scale of posts, this will be identified in the full business case.

Non-Financial Benefits

- These will be identified as part of the review.

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

The review will identify any risks and mitigating actions.

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

Posts in scope include Joint Management Team leadership and supporting roles

Business Planning: Business Case proposal

Project Title: Reviewing Staff Structure

Committee:

Strategy & Resources

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