

Business Planning Proposals for 2022-27 – opening update and overview

To: Adults and Health committee

Meeting Date: 14 October 2021

From: Wendi Ogle-Welbourn, Executive Director for People and Communities
Jyoti Atri, Director of Public Health
Tom Kelly, Chief Finance Officer

Electoral division(s): ALL

Key decision: No

Outcome: The Committee is asked to consider:

- the current business and budgetary planning position and estimates for 2022-2027
- the principal risks, contingencies and implications facing the Committee and the Council's resources
- draft budget proposals
- the process and next steps for the Council in agreeing a business plan and budget for future years

Recommendation: It is recommended that the Adults and Health Committee;

- a) Note the progress made to date, comments made during the meeting and next steps required to develop the business plan for 2022-2027
- b) Note the impact of COVID-19 on the Council's financial planning
- c) Endorse the budget and savings proposals that are within the remit of the Committee as part of consideration of the Council's overall Business Plan

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1. Purpose and background

- 1.1 The Council's Business Plan sets out how we will spend the resources we have at our disposal to achieve our vision and priorities for Cambridgeshire, and the outcomes we want for people. This paper provides an overview of the updates to the Council's financial position since September 2021 when Committees were provided with an update on the draft Business Plan for 2022-27. The paper sets out the changes to key assumptions impacting financial forecasts, further risks and opportunities and next steps required to balance the budget and agree the Council's Business Plan for 2022-27.
- 1.2 For context, the previous update on business planning provided to committee in September can be found here: [Adults and Health](#)
- 1.3 The update in September showed a budget gap in the first year of the new business plan, 2022/23, that was larger than in the previous business plan. This was due to refreshed estimates of the impact of demand growth on services, and several new service pressures requiring funding.
- 1.4 This update shows the progress that has been made to identify opportunities to re-baseline budgets, make savings, and generate additional income, resulting in progress being made towards closing the budget gap in 2022/23. At the same time, further service pressures and investments are proposed to be funded. The result of these is a budget gap at this stage of £19.5m for 2022/23, and gaps in future years as set out at the end of the table in Section 3.2.

2. Context

- 2.1 On 9 February 2021, Full Council agreed the Business Plan for 2021-2026. This included a balanced budget for the 2021-22 financial year with the use of some one-off funding but contained significant budget gaps for subsequent years as a result of expenditure exceeding funding estimates. These budget gaps (expressed as negative figures) were:

| 2021-22 | 2022-23 | 2023-24 | 2024-25 | 2025-26 |
|---------|---------|---------|---------|---------|
| balance | -£22.2m | -£14.7m | -£15.1m | -£12.0m |

- 2.2 The impacts of COVID-19 on the Council have been unprecedented and the pandemic remains a key factor and uncertainty in planning our strategy and resource deployment over the coming years. The Council continues to take a central role in coordinating the response of public services to try and manage the complex public health situation, impact on vulnerable people, education of our children and young people and economic consequences. Looking ahead we know that challenges remain as the vaccination programme progresses and winter illnesses re-emerge. We are already seeing the impacts of the pandemic on our vulnerable groups as well as those who have become vulnerable as a result of health or economic impact of the pandemic. Longer term there will be significant increases and changes in the pattern of demand for our services alongside the economic aftereffects. The Council is committed to ensuring that communities across Cambridgeshire emerge from the pandemic with resilience and confidence for the opportunities and challenges that face us.

2.3 During 2020-21, the Council received significant additional funding and compensation from government and the NHS in order to effectively respond to the pandemic. Whilst the financial settlement for the response to date has been sufficient, predicting the on-going implications and financial consequences of COVID-19 remains challenging, particularly in terms of the impact on demand for council services. The 2021-26 budget includes estimates for these pressures in 2021-22 and experience of 2021-22 so far suggests these estimates were reasonable as the Council is not forecasting a significant variance against its budget in the current year. These will remain under review as new data is available. Significant pressures are expected in future years beyond 2021-22 and details of how each service's specific demand pressure estimates for 2022-27 have been made are within section 3. It is especially important this year that we keep these estimates under review as circumstances are so changeable over the course of this year.

2.4 Within the current context, the scope for traditional efficiencies has diminished, therefore the development of the Business Plan is focused on a range of more fundamental changes to the way we work. Some of the key themes driving the current thinking are;

- Economic recovery
- Prevention and Early Intervention
- Decentralisation
- Environment & climate emergency
- Social Value

2.5 Besides the pandemic, the other major risks and uncertainties in setting budgets for 2022-27 include the potential for national policy changes, such as reform of social care funding, the need for a multi-year funding settlement from government, the availability and sustainability of supply chains and resources, and changing patterns of demand for our services that has been a longer-term trend. The Council must make its best estimate for the effect of known pressures when setting its budget and retain reserves to mitigate against unquantifiable risks.

3. Financial Overview

3.1 The previous report set out in detail the changes to demand and inflation projections that make up a significant part of the initial budget refresh. We are now in a stage generally of identifying ways to close the budget gap through savings, income generation and budget rebaselining. We will also continue to review funding assumptions as further government announcements or local taxation estimates are made.

3.2 Following the addition of the next round of proposals to partially close the budget gap, as well as further service pressures and investments, the revised budget gap is set out in the table below:

| | £000 | | | | |
|--|---------------|---------------|---------------|---------------|---------------|
| | 2022-23 | 2023-24 | 2024-25 | 2025-26 | 2026-27 |
| Budget gap at September Committees | 23,411 | 16,123 | 17,903 | 14,678 | 14,256 |
| Budget Reviews and Re-baselining | | | | | |
| Budget rebaselining in Adults | -2,405 | | | | |
| Budget rebaselining in Children's | -250 | | | | |
| Inflation and Demand Adjustments | | | | | |
| Staff costs inflation refresh | 331 | 326 | 328 | 327 | 329 |
| Adults demand projection adjustments | -73 | -28 | -29 | -30 | 10 |
| Service Pressures & Investments | | | | | |
| Pressures in Children's Services and Education | -250 | 250 | 732 | | |
| Pressures in Corporate Services | 1,297 | -246 | -5 | -35 | -35 |
| Pressures in Place & Economy | 260 | | -650 | | -1,000 |
| Investments in Adults & Health | 322 | 170 | | | |
| New or Amended Savings | | | | | |
| New savings in Adults & Health | -1,361 | 70 | | | |
| New savings in Communities | -450 | | | | |
| New savings in Corporate Services | -29 | | | | |
| Savings rephasing Children's Services | 46 | -54 | -100 | | |
| Savings rephasing in Adults & Health | 543 | 568 | -51 | 31 | |
| New savings in Place & Economy | -335 | -130 | | | |
| Other changes | | | | | |
| Energy schemes - phasing of spend and income | -938 | 932 | 287 | -18 | -131 |
| Commercial income rephasing & Covid impact | 519 | -99 | -296 | -90 | 57 |
| Changes in funding estimates | -1,157 | 329 | -60 | 1,682 | 484 |
| Revised budget gap at October/November Committees | 19,481 | 18,211 | 18,059 | 16,545 | 13,970 |
| Change in budget gap | -3,930 | 2,088 | 156 | 1,867 | -286 |

- 3.3 More detail about the proposals that make up this table relevant to this committee are set out in section 4 below.
- 3.4 It is important to bear in mind that the lines in the table in 3.2, and the equivalent table presented to the committee in September, only show the changes made compared to the current business plan. In some cases, there were already proposals effecting 2022/23 budgets and beyond in the current business plan. The full set of proposed budget changes for this committee can be found in the attached budget tables at Appendix 1a and Appendix 1b.
- 3.5 There remains a significant budget gap for 2022/23 and in future years. Work is continuing to identify further mitigations, and to review pressures that are already proposed to be funded.

4. Overview of Adults and Health Draft Revenue Programme

- 4.1 This section provides an overview of the savings, investments, or income proposals within the remit of the Committee.
- 4.2 The Committee is asked to comment on these proposals. Further detail and any additional business cases will then come in full to committee in December ready for recommending to Strategy and Resources Committee in January 2022, for consideration as part of the Council's development of the Business Plan for the next five years. Please note that the proposals outlined are still draft at this stage, and it is only at Full Council in February 2022 that proposals are finalised and become the Council's Business Plan.
- 4.3 Draft budget tables are provided in Appendix 1 reflecting proposals developed to date. There are two tables – one for People and Communities including Adults, and a separate table for Public Health.

4.4 Budget Position:

- 4.4.1 The current business plan has a commitment of £4.3m of savings and increased income for 2022/23 for Adults and Health. We have identified additional savings or increased income opportunities of £5.311m for Adults and £228k for Public Health, which has offset some of the forecast non-delivery of 2022/23 savings and increases the overall savings position to £9.4m.
- 4.4.2 However, we have identified £16.7m of pressures and investments for 22/23 as outlined below.

| Pressure / Investment | 2022/23 Amount |
|--|-----------------------|
| Demand and Demography (Ref: A/R3.002 to A/R.3.007) | 10,003 |
| Inflationary Pressures on Care Costs (Ref: A/R.2.002) | 2,080 |
| Impact of National Living Wage on Adult Social Care Contracts (Ref: A/R.4.009) | 3,939 |
| Additional Investments | 651 |
| Total | 16,673 |

- 4.4.3 Further detail on the developed proposals is set out in sections 4.6 and 4.7 and in Appendix 1
- 4.4.4 Adults and health budgets are predominantly demand led and COVID-19 has impacted significantly on services and the future impact is uncertain. The recently announced social care reforms may present additional financial risks for the Council, but the full extent of these is still being understood.

4.5 Joint Administration Priorities

- 4.5.1 Work has been undertaken to explore investment opportunities to deliver on the Joint Administration priorities of:
1. 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.

2. 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.
3. Driving up the quality and dignity of care work and services, integrating the Council’s social value approach; making a major initiative to improve training, career development, pay and conditions for frontline care workers, including a phased implementation of the Real Living Wage.
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 outcomes.
 - a. Step-change to improve services for people.
 - b. Use leverage to make a major shift towards prevention in the system
 - c. Improve health and social care outcomes through a population health management approach
 - d. Assumption is budget neutral, but will continue to review
5. Combating health inequalities based on population health management across all geographies; leading a ‘health in all policies’ approach across the authority and seeking to implement a system wide obesity/healthy weight strategy.

4.5.2 A number of proposals have been identified to progress the joint administration priorities. Of these, work has been completed on the case for increasing support for carers, the detail of which is included in the investment/pressures table at 4.6.2.

4.5.3 There are a number of further opportunities which we are working on, which are listed below and we would welcome comments from the committee on these priorities. The indicative cost of these is up to c. £2.755m in 2022/23 would need to be considered in light of the council’s overall position.

4.5.4 Some of these are one off investments and could be funded from reserves as noted below. Public Health investments will be funded from the Public Health Grant or reserves.

| Investment Area | Description | 22/23 | 23/24 | 24/25 | 25/26 | 26/27 |
|-------------------------|--|-------|-------|-------|-------|--------|
| Happy at Home Expansion | <p>Roll out of the East Cambridgeshire pilot across the county over four years, commencing in 2022/23. One off reserves funding could be used – total requirement £4.45m</p> <p>Happy at Home is an initiative designed to transform the way care and support is commissioned and delivered to older people living at home. It is focused on changing and improving the way care is provided to older people living at home who either receive council funded homecare or may benefit from early help and support to maintain their independence. The aim is to enable older people to remain living happily at home, cared</p> | 996 | - | 233 | - | -1,229 |

| | | | | | | |
|------------------------------|---|-------|-------|-------|------|-----|
| | for by locally based carers, working within their own communities. | | | | | |
| Independent Living Services | <p>(Investment: Capital investment with paybacks over the life of the asset. Savings will be delivered). Revenue investment of £180k in 22/23 and £120k in 24/25 is also needed to support roll out. One off reserves funding could be used – total requirement £300k</p> <p>Enhance the offer to local residents who may have a need for residential and nursing care by developing a tenancy-based model of care: Independent Living Service's (ILS's) specifically support people being able to stay in their own tenancy longer as care can be stepped up as needs increase, unlike residential care where they may need to move to get increased care needs met.</p> <ul style="list-style-type: none"> • In addition to two planned ILS (Rheola and Princess of Wales) proposing three additional sites across Cambridgeshire. • One per year to commence work on in 2022/23 • Each new ILS would take three years to build from the time land is acquired. | 180 | -180 | 120 | -120 | - |
| Expansion of Direct Payments | <ul style="list-style-type: none"> • Additional capacity to accelerate improvement in the uptake of Direct Payments • Investment in an additional system able to maintain robust and user-friendly oversight of the Individual Service Funds; • Development of a short term Personal Assistant Support Service able to bridge the gap between the need for immediate care and support and the recruitment of personal assistant • Additional Contract Management capacity to monitor and quality assure support services being accessed by direct payment and individual service funds as they begin to increase. | 222 | -228 | -32 | -60 | - |
| Real Living Wage | <p>(Investment: £10.166m per annum by 2026/27)</p> <ul style="list-style-type: none"> • Roll out to all Adult Social Care providers commencing in 2022/23. • Two–three-year phasing, based on incremental increases every six months. • Linked to delivering social value in return. | 1,187 | 4,408 | 3,619 | 409 | - |
| Social Care Reform | The Government White Paper "Build Back Better: Our plan for health and social care" | TBC | TBC | TBC | TBC | TBC |

| | | | | | | |
|--|---|--------------|--------------|--------------|------------|---------------|
| | sets out a number of proposed reforms to social care. The reform proposals will potentially introduce additional financial costs and risk to the Local Authority. We await detailed funding proposals before we are able to determine the full implications. | | | | | |
| Total Adults | | 2,585 | 4,000 | 3,940 | 229 | -1,229 |
| Training for Health Impact Assessments | Targeted tackling of health inequalities: One off reserves funding would be required In order to support the JAA priority of health in all policies, training will be commissioned to support the system in understanding the potential health impacts of their policies, services and commissions. Basic training on health impact assessments, their purposes and potential benefits will also be included in the package. | 45 | - | - | - | - |
| Health Impact Assessments | Health in all Policy and Tackling Health Inequalities: Fund for health impact assessments to be established to support the council in understanding the impact of major policy decisions or commissions to inform action to maximise health outcomes and minimise health harms. Applications for the fund will be prioritised according to agreed health and well-being priorities. | 125 | - | - | - | - |
| Total | | 2,755 | 4,000 | 3,940 | 229 | -1,229 |

4.5.4 Capital investment would be required to generate further savings from Independent Living Services. The capital investment required, and associated savings expected are set out below. The schemes are anticipated to pay back the capital investment in full as well as generating revenue savings in future years.

| INDEPENDENT LIVING | AMOUNT £000 2022-23 | AMOUNT£000 2023-24 | AMOUNT£000 2024-25 | AMOUNT£000 2025-26 | AMOUNT£000 2026-27 | AMOUNT£000 2027-28 |
|-----------------------------|---------------------|--------------------|--------------------|--------------------|--------------------|--------------------|
| Capital costs (one off) | 4,387 | 14,062 | 15,454 | 6,247 | - | - |
| Revenue savings (recurrent) | - | - | - | - | -557 | -418 |

4.6 Investment/Pressures:

4.6.1 A number of investment areas have been identified, which equate to £651k of permanent investment in 2022/23, as outlined below and are included in the tables at Appendix 1.

| Budget Table Ref | Investment Area | Description | 22/23 | 23/24 | 24/25 | 25/26 | 26/27 |
|------------------|--|--|-------|-------|-------|-------|-------|
| A/R.4.040 | Learning Disabilities – Young Adults Team | To increase the staffing structure in the Young Adults Team, in order to better manage demand and deliver a safe cost-effective service. This will support us to deliver our statutory duty. Increased capacity in the team will enable cases to be allocated to workers at an appropriate level and eradicate waiting lists. This will result in the safer management and prompt allocation of new cases. | 149 | - | - | - | - |
| A/R.5.006 | Care Home Support Team (Note: current Business Plan removes £120k in 2022-23 which will be deliverable. Change here is new proposal) | The Care Home Support Team was established in response to the pandemic on a temporary two-year basis (funding is already in the MTFS for 22/23. This business case is requesting permanent funding for 23/24 onwards). Since its introduction, it is clear there is a widespread need for providers to be supported to improve practice quality. By supporting care homes where issues or concerns have been identified, the team is able to mitigate potential provider failure, the cost of which can be significant to the Council. | - | 220 | - | - | - |
| A/R.4.041 | Quality and Practice Team | To increase capacity in the Quality Practice Team to ensure we are meeting our statutory responsibilities under the new framework and Care Quality Commission oversight, as outlined in the Governments White Paper on social care. Current capacity in the team is not sufficient to respond to the new changes and ensure compliance. The risk of a poor inspection would be reputationally damaging to the Council, as well as requiring remedial action which could be costly. | 68 | - | - | - | - |
| A/5.010 | Expansion of Enhanced Response Service | Extension of the ERS to deliver earlier intervention, preventing escalation of need and associated cost avoidance. The extension of the service will enable a greater volume of referrals to be responded to where there is an urgent social | 181 | - | - | - | - |

| | | | | | | | |
|--------------|------------------------------|---|------------|------------|----------|----------|----------|
| | | <p>care need. This will include referrals from additional Carelines, GPs and 111 across Cambridgeshire.</p> <p>The current ERS service provides a 24/7 urgent response to calls from alarm receiving centres where someone's telecare alarm has been activated. Typical types of calls that are responded to include non-injured falls, one off personal care and silent calls.</p> <p>This service is expected to deliver a saving, as outlined above.</p> | | | | | |
| A/R.5.010 | Increased Support for Carers | <ul style="list-style-type: none"> • Increase capacity of the Carers Support Service to provide urgent support • Increase capacity of Listening Ear Service to provide counselling, wellbeing and emotional resilience support • Roll-out the Short Breaks for Carers pilot countywide to support the recruitment of volunteers • Specific media campaign to target hidden carers <p>This service would deliver a saving as outlined above.</p> | 253 | -50 | - | - | - |
| Total | | | 651 | 220 | - | - | - |

4.7 Savings and Income

4.7.1 Adults and Health have identified £9.4m of savings and increased income for 2022/23 which can offset this gap, this comprises the following:

- o £3.8m of existing savings in the Business Plan for 2022/23 as outlined in the below table.
- o £5.5m of new opportunities as outlined in the below table.

4.7.2 Existing Reprofiled Savings and Income in the Business Plan

| Budget Table Ref | Saving / Income Opportunity | Description | 22/23 | 23/24 | 24/25 | 25/26 | 26/27 |
|------------------|---|--|-------|-------|-------|-------|-------|
| A/R.6.176 | Adults Positive Challenge Programme | The Preparing for Adulthood Workstream of the Adults Positive Challenge Programme will continue to have an effect by reducing the level of demand on services from young people transitioning into adulthood. *This saving has been increased by £54k in 22/23 and 23/24 | -154 | -154 | - | - | - |
| A/R.6.177 | Cambridgeshire Lifeline Project | The aim of this project is for Cambridgeshire Technology Enabled Care (TEC) to become a Lifeline provider so that the income from the charges to customers funds to provision of the Lifeline service, as well as additional savings. | -10 | -122 | -50 | - | - |
| A/R.6.179 | Mental Health Commissioning | A retender of supported living contracts gives an opportunity to increase capacity and prevent escalation to higher cost services, over several years. | -24 | - | - | - | - |
| A/R.6.180 | Review of commissioning approaches for accommodation-based care | We are exploring alternative models of delivery for residential and nursing care provision, including a tenancy based Independent Living Service model that will deliver savings to the council. *This saving has been reprofiled in line with the timelines for implementation of the first Independent Living Service | - | - | -244 | -162 | - |
| A/R.6.185 | Additional Block Beds – Inflation saving | 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 increases each time new pot placements are commissioned. *This saving has been reprofiled to reflect the number of block beds successfully commissioned in 2021/22 | -390 | -263 | -277 | -291 | - |
| A/R.6.188 | Micro-enterprises support | Transformation funding has been agreed for a new approach to supporting the care market, focusing on using micro- | -133 | - | - | - | - |

| | | | | | | | |
|--------------|---|---|--------------|------------|------------|------------|----------|
| | | enterprises to enable a more local approach to domiciliary care and personal assistants. As well as benefits to an increased local approach and competition, this will result in a lower cost of care overall. | | | | | |
| A/R.7.111 | Client Contributions Policy Changes | The contributions policy for Adults was revised by Adults committee in 2020. This reflects the additional income as reassessments are carried out. | -562 | -164 | - | - | - |
| A/R.7.113 | Learning Disability Partnership (LDP) Pooled Budget | The LDP is a pooled budget with the NHS covering most spend on people with learning disabilities by the Council and NHS in Cambridgeshire. In November 2019, Adults Committee agreed funding for a programme of work to review the relative health and social care needs of people with learning disabilities to establish if the Council and NHS contributions to the pool should be re-baselined. While this work has been delayed by COVID-19 and is now expected to be undertaken in 2021/22, early work on a sample of cases suggests a re-baselining will be in the Council's favour. This line is based on the outcomes of the sample being representative, with some dampening. | -2,574 | - | - | - | - |
| Total | | | 3,847 | 703 | 571 | 453 | - |

4.7.3 New Opportunities Identified

| Budget Table Ref | Saving / Income Opportunity | Description | 22/23 | 23/24 | 24/25 | 25/26 | 26/27 |
|------------------|--|---|--------|-------|-------|-------|-------|
| A/R.1.020 | Older People's budget re-baselining | We were forecasting a significant underspend on the Older People's budget for this financial year as a result of the devastating impact of COVID-19 on older people. This is reflected by a reduction in the baseline budget. | -2,405 | - | - | - | - |
| A/R.6.190 | Unallocated Improved Better Care Fund monies | Contribution from the Improved Better Care Fund to contribute to demand pressures in Adult Social Care in line with the national conditions. | -240 | - | - | - | - |
| A/R.6.191 | Extra Care Tendering | A number of older people's extra care schemes were retendered for in 2021/22 and have delivered | -87 | - | - | - | - |

| | | | | | | | |
|-----------|--|---|------|----|---|---|---|
| | | <p>contractual savings across the following four schemes:</p> <ul style="list-style-type: none"> o Doddington (Fenland) o Jubilee (Fenland) o Park View (Hunts) o Nichols Court (City/South) <p>Savings were not identified in time to be incorporated into the 2021/22 business planning cycle, and so are being included for 2022/23.</p> | | | | | |
| A/R.6.192 | Learning Disability Outreach Service | Increasing the in-house outreach capacity. This will enable more support to be delivered in house at a lower cost to external independent provision. | -50 | - | - | - | - |
| A/R.6.193 | Expansion of Enhanced Response Service | <p>Extension of the ERS to deliver earlier intervention, preventing escalation of need and associated cost avoidance.</p> <p>The extension of the service will enable a greater volume of referrals to be responded to where there is an urgent social care need. This will include referrals from additional Carelines, GPs and 111 across Cambridgeshire.</p> <p>The current ERS service provides a 24/7 urgent response to calls from alarm receiving centres where someone's telecare alarm has been activated. Typical types of calls that are responded to include non-injured falls, one off personal care and silent calls.</p> <p>The service requires further investment as detailed below.</p> | -210 | - | - | - | - |
| A/R.6.194 | Recommissioning of interim respite and reablement beds | Redesign and recommissioning of interim and respite bed provision. This has created a more efficient model. The use of the new, more flexible block bed provision for unplanned respite will result in a reduction of spot purchased respite provision. | -412 | 70 | - | - | - |
| A/R.6.195 | Increased Support for Carers | <ul style="list-style-type: none"> • Increase capacity of the Carers Support Service to provide urgent support • Increase capacity of Listening Ear Service to provide counselling, wellbeing and emotional resilience support • Roll-out the Short Breaks for Carers pilot countywide to support the recruitment of volunteers | -219 | - | - | - | - |

| | | | | | | | |
|---------------------|---|---|--------------|----|---|---|---|
| | | <ul style="list-style-type: none"> Specific media campaign to target hidden carers <p>With better support, carers will be able to maintain their caring role, preventing carer breakdown, and preventing the escalation of someone's care needs.</p> <p>The service requires further investment as detailed below.</p> | | | | | |
| A/R.7.211 | Prisons Grant Underspend | This is an un-ringfenced corporate grant. We have had a consistent level of underspend over prior financial years, and this can be sustained permanently. | -20 | - | - | - | - |
| A/R.7.210 | Uplift in Better Care Fund to meet Adults Pressures | The 2021/22 and 2022/23 Better Care Fund annual uplift. Full allocation to enable us to offset the demand and demography pressures in Adult Social Care in line with the national conditions of the grant. | -1,513 | - | - | - | - |
| A/R.7.112 | ICES Community Equipment pooled budget | The ICES community equipment budget is a pooled budget with the CCG. As part of the re-tendering process, the budget contributions were reviewed, and the health contribution will be increasing for next financial year by £155k per annum. | -155 | | | | |
| Adults Total | | | 5,311 | 70 | - | - | - |
| E/R.6.034 | Demand led Public Health Budgets | 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. | -228 | - | - | - | - |
| Total | | | 5,539 | - | - | - | - |

4.7.4 We are continuing to explore further opportunities for savings and income, including:

- Opportunities for savings and income from Technology Enabled Care and community equipment
- Prevention and early intervention opportunities
- Contractual efficiencies
- Leveraging increased external system investment
- Increased contributions from re-baselining the Learning Disability pooled budget for 2023/24 onwards

5. Next steps

5.1 The high-level timeline for business planning is shown in the table below.

| | |
|---------------------|---|
| October / November | Service Committees provided with an update of the current position along with information about business cases being prepared and their estimated savings or investment |
| November / December | Completed business cases go to committees for consideration |
| January | Strategy and Resources Committee will review the whole draft Business Plan for recommendation to Full Council |
| February | Full Council will consider the draft Business Plan |

6. Alignment with corporate priorities

The purpose of the Business Plan is to consider and deliver the Council's vision and priorities and section 1 of this paper sets out how we aim to provide good public services and achieve better outcomes for communities, whilst also responding to the changing challenges of the pandemic. As the proposals are developed, they will consider the corporate priorities:

- 6.1 Communities at the heart of everything we do
- 6.2 A good quality of life for everyone
- 6.3 Helping our children learn, develop and live life to the full
- 6.4 Cambridgeshire: a well-connected, safe, clean, green environment
- 6.5 Protecting and caring for those who need us

7. Significant Implications

7.1 Resource Implications

The proposals set out the response to the financial context described in section 4 and the need to change our service offer and model to maintain a sustainable budget. The full detail of the financial proposals and impact on budget will be described in the financial tables of the business plan. The proposals will seek to ensure that we make the most effective use of available resources and are delivering the best possible services given the reduced funding.

7.2 Procurement/Contractual/Council Contract Procedure Rules Implications

There are no significant implications for the proposals set out in this report.

7.3 Statutory, Legal and Risk Implications

The proposals set out in this report respond to the statutory duty on the Local Authority to deliver a balanced budget. Cambridgeshire County Council will continue to meet the range of statutory duties for supporting our citizens.

7.4 Equality and Diversity Implications

As the proposals are further developed ready for December service committees, they will include, where required, Equality Impact Assessments that will describe the impact of each proposal, in particular any disproportionate impact on vulnerable, minority and protected groups.

7.5 Engagement and Communications Implications

Our Business Planning proposals are informed by the CCC public consultation and will be discussed with a wide range of partners throughout the process. The feedback from consultation will continue to inform the refinement of proposals. Where this leads to significant amendments to the recommendations a report would be provided to Strategy and Resources Committee.

7.6 Localism and Local Member Involvement

As the proposals develop, we will have detailed conversations with Members about the impact of the proposals on their localities. We are working with members on materials which will help them have conversations with Parish Councils, local residents, the voluntary sector and other groups about where they can make an impact and support us to mitigate the impact of budget reductions.

7.7 Public Health Implications

COVID-19 has had impacts across all aspects of public health and its effect upon Adult Social Care and Public Health Services has been substantial. The proposed savings and investments described in this paper acknowledge and capture the issues. It will be important going forward to ensure that as we move into recovery that these proposals address ongoingly the wide-ranging negative impacts on Public Health.

7.8 Environment and Climate Change Implications on Priority Areas

Any climate and environment implications will vary depending on the detail of each of the proposals. The implications will be completed accordingly within each business case in time for the December committees.

Have the resource implications been cleared by Finance?

Yes

Name of Financial Officer: Justine Hartley

Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the CCC Head of Procurement?

Yes

Name of Officer: Henry Swan

Has the impact on statutory, legal and risk implications been cleared by the Council's Monitoring Officer or LGSS Law?

Yes

Name of Legal Officer: Fiona McMillan

Have the equality and diversity implications been cleared by your Service Contact?

Yes

Name of Officer: Beatrice Brown

Have any engagement and communication implications been cleared by Communications?

Yes

Name of Officer: Matthew Hall / Eleanor Bell

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

Yes

Name of Officer: Julia Turner

Have any Public Health implications been cleared by Public Health?

Yes

Name of Officer: Val Thomas

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

Yes

Name of Officer: Emily Bolton

8. Source Documents

Appendix 1a Budget tables for People and Communities

Appendix 1b Budget tables for Public Health