



**ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE**  
**18 JANUARY 2021**

**JOINT REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES**  
**AND THE DIRECTOR OF CORPORATE RESOURCES**

**MEDIUM TERM FINANCIAL STRATEGY 2021/22–2024/25**

**Purpose of Report**

1. The purpose of this report is to:
  - a) Provide information on the proposed 2021/22-2024/25 Medium Term Financial Strategy (MTFS) as it relates to the Adults and Communities Department;
  - b) Ask members of the Committee to consider any issues as part of the consultation process and make any recommendations to the Scrutiny Commission and the Cabinet accordingly.

**Policy Framework and Previous Decisions**

2. The County Council agreed the current MTFS in February 2020. This was the subject of a comprehensive review and revision in light of the current economic circumstances.

**Background**

3. The draft MTFS for 2021/22–2024/25 was set out in the report considered by the Cabinet on 15 December 2020, a copy of which has been circulated to all Members of the County Council. This report highlights the implications for the Adults and Communities Department.
4. Reports such as this one are being presented to the relevant Overview and Scrutiny Committees. The views of this Committee will be reported to the Scrutiny Commission on 25 January 2021. The Cabinet will consider the results of the scrutiny process on 5 February 2021 before recommending a MTFS, including a budget and capital programme for 2021/22 to the County Council on 17 February 2021.

**Service Transformation**

5. The Council's Adults and Communities Department currently has an Adult Social Care Vision and Strategy, '*Delivering Wellbeing and Opportunity in Leicestershire: Adults and Communities Department Ambitions and Strategy for 2020–2024*', which demonstrates how the Department will contribute to all five of the Authority's Strategic Plan outcomes.

6. The Strategy builds on the previous adult social care, adult learning and communities and wellbeing service strategies. It recognises the value of more closely bringing together all the Department's work since it is fundamental to the Council's role in promoting wellbeing. The ambition at the heart of the strategy is to improve wellbeing for the people and communities of Leicestershire including their levels of happiness, prosperity and satisfaction with life, along with their sense of meaning, purpose and connection. It also sets out other ambitions for the Department including:
  - Improved customer experience and satisfaction;
  - Providing high quality information and advice;
  - Promoting wellbeing through universal services;
  - Building a flexible, talented, motivated workforce, including apprentices;
  - Investment in social care accommodation;
  - Seamless transition from children to adult services;
  - Promoting independence;
  - Improved use of technology;
  - Working effectively with partners.
7. The design and delivery of services will continue to be based on the "right" model, i.e. the right people (those who are at risk or need support to maximise their independence) are receiving the right services, at the right time, in the right place and the Council is working with the right partners.
8. At the same time, the Care Act 2014 places a duty on local authorities to integrate services with Health and other partners, both at an operational level and in respect to strategy and commissioning, in order to deliver joined up high quality services. The NHS Long Term Plan Better Care Together Programme and the development of Integrated Care Systems will provide a framework to develop new models of care across Leicestershire.
9. The draft Growth and Savings for the 2021 MTFS (2021/22-2024/25) reflect the changes in demand for services and the transformation in delivery of services to achieve the vision of the Adult Social Care Strategy.

### **Proposed Revenue Budget**

10. The table below summarises the proposed 2021/22 revenue budget and provisional budgets for the next three years. The proposed 2021/22 revenue budget detail is shown in Appendix A.

	2021/22 £'000	2022/23 £'000	2023/24 £'000	2024/25 £'000
Original prior year budget	143,083	151,432	152,157	153,977
Budget Transfers and Adjustments	8,274			
<b>Sub total</b>	<b>151,357</b>	<b>151,432</b>	<b>152,157</b>	<b>153,977</b>
Add proposed growth (Appendix B)	3,470	2,915	2,980	3,480
Less proposed savings (Appendix C)	(3,395)	(2,190)	(1,160)	(1,310)
<b>Proposed/Provisional net budget</b>	<b>151,432</b>	<b>152,157</b>	<b>153,977</b>	<b>156,147</b>

11. Detailed service budgets have been compiled on the basis of no pay or price inflation, a central contingency will be held which will be allocated to services as necessary.
12. The total gross proposed budget for 2021/22 is £241.647m with contributions from grants, health transfers and service user contributions projected of £98.564m. The proposed net budget for 2021/22 totals £151.432m and is distributed as follows:

<b>Net Budget 2021/22</b>		
Demand Led Commissioned Services	£123.8m	81.8%
Direct Services		
	£16.2m	10.7%
Care Pathway –Older Adults/Mental Health	£12.9m	8.6%
Care Pathway – Learning Disabilities	£4.4m	2.9%
Strategic Services		
	£5.2m	3.4%
Early Intervention & Prevention	£2.1m	1.4%
Department Senior Management	£0.8m	0.5%
Better Care Fund Contribution	(£19.2m)	(12.7%)
Communities & Wellbeing	£5.2m	3.4%
<b>Department Total</b>	<b>£151,4m</b>	<b>100.0%</b>

### **Other Changes and Transfers**

13. A number of budget transfers (totalling a net increase of £8.3m) were made through the 2020/21 financial year and are now adjusted for in the updated original budget. These transfers are:
- £1.4m for pay and pension inflation transferred from the central inflation contingency;
  - £6.2m for price inflation (including residential fee review);
  - £0.7m transfers from other departments.

14. Growth and savings have been categorised in the appendices under the following classification:
  - \* item unchanged from previous MTFS;
  - \*\* item included in the previous MTFS, but amendments have been made;
  - No stars new item.
15. This star rating is included in the descriptions set out for growth and savings below.
16. Savings are highlighted as “Eff” or “SR” dependent on whether the saving is seen as an efficiency or a service reduction or a mixture of both. “Inc” denotes those savings that are funding related or to generate more income.

## Growth

17. The proposed growth reflects changes in demand for services such as increased numbers of service users, increases in the level of individual need, and number of high cost care packages, and changes in types of service. This amounts to £13m over the next four years. The growth requirement for each service area was adjusted as part of the MTFs process to the level of service users seen in 2020/21 (prior to the Covid-19 pandemic). As in previous years, the profile of service users and their care needs are constantly changing which may impact on the services commissioned. Overall demand led expenditure totals c£180m.
18. There are a number of demand management activities which include regular oversight of high cost packages, a scheme of delegation which manages level of spend and accountability at all levels across the service, benchmarking against national population statistics and regular budget monitoring. The management team also maintains oversight of the sustainability of the care provider market including impact of changes in demand for care homes and home care. All these actions aim to validate and mitigate future growth requirements.
19. The total growth required is £3.5m for 2021/22 and £12.8m over the next four years in total. The budget increases are outlined below and summarised in Appendix B to the report.

**\*\*G7 Older People demand – £2,070,000 2021/22 rising to £8,010,000 by 2024/25**

20. People aged over 65 account for the majority of the Department's care expenditure. This financial growth is required to meet the increasing numbers of older people with eligible needs as well as the increasing acuity of service users. Future changes in demand are initially estimated using historic trends to produce a baseline forecast of the likely number and average cost of service users. During 2020/21, there have been significant changes in demand due to the impacts of the Covid-19 pandemic, for example there has been an increase to the average number of home care hours provided and changes to the hospital discharge guidance and process which have caused an increase in the number of funded service users, some of whom would normally pay for their own care. The NHS has been funding all service users discharged from hospital since March. However, from September this arrangement only covers up to the first six weeks. The ongoing review of 1,500 service users and a lack of policy direction from the end of March 2021 makes it difficult to identify any ongoing costs that the Council will need to cover. It is anticipated that the increase in additional needs will continue. This growth is primarily to meet the expected increase in service users based on the projected national demographic growth in future years which is around 2%.

**\*\*G8 Learning Disability demand – £500,000 2021/22 rising to £2,250,000 by 2024/25**

21. The level of Learning Disability support required is growing mainly due to costs of care packages for known service users transferring from Children's services to Adult's services (around 100 per annum), increasing levels of additional needs, and high cost placements. Future changes in demand are initially estimated using historic trends to produce a baseline forecast of the likely number and average cost of service users. Due to the Covid-19 pandemic, the baseline number of service users is based on the month of February 2020 and costs based on the prices in

August 2020. The transfer of people from hospital placements to the community continues to take place, however the exact cost to the Authority of these Transforming Care clients is difficult to predict. There is currently a significant increase in the numbers of social care placements in Children's services which may impact on Adult's services in the long term, but this cannot be quantified. This assumes the continuation of the Independent Living Fund of £1.1m.

**\*\* G9 Mental Health demand – £350,000 2021/22 rising to £1,505,000 by 2024/25**

22. It is anticipated that the increase in additional needs will continue after the Covid-19 pandemic and there may be an increase in service users which cannot be quantified yet. This growth is primarily to meet the expected increase in service users based on the projected national demographic growth in future years.

**\*\*G10 Physical Disabilities demand – £280,000 2021/22 rising to £810,000 by 2024/25**

23. During 2020/21, the number of service users has slightly increased and this trend is expected to continue.

**G11 Market Premia costs – £270,000 2021/22 onwards**

24. This has been identified as additional costs due to having to pay market premia to attract key social workers when recruiting and to retain existing workers across all areas of the Department.

**Savings**

25. Details of proposed savings are set out in Appendix C and total £3.4m in 2021/22 and £8.1m over the next four years in total.

**Adult Social Care**

**\*\*AC1 (Inc) Increased Income - £100,000 saving 2021/22 rising to £400,000 in 2024/25**

26. Department for Work and Pensions increases in benefits payments should provide additional chargeable income. It is anticipated that income from older people will rise faster than inflation as a result of the protection of over 65s benefits by the Government. This should help to maintain income levels in line with the target and will mitigate the impact of potential reductions in the income from under 65s. Monitoring of income levels continue, with levels for 2020/21 being below target due to the impact of the Covid-19 pandemic but the annual benefit increases were applied for 2020/21.

**\*\*AC2(Eff) Social Care Investment Plan - reduced cost of care – £25,000 saving 2021/22 rising to £275,000 2024/25 onwards**

27. The first 'Place to Live/Social Care Investment Plan' (SCIP) project is the development of properties which will deliver annual social care savings of £275,000 pa plus net rental income (included in Corporate Resources property savings). It is anticipated that the SCIP will deliver 68 supported living units per year from 2020/21 to 2022/23. However, the savings for the first 180 supported living accommodation moves delivered by SCIP schemes or able to be otherwise commissioned from the

private sector (up to £860k annual saving/cost avoidance) have already been included within the Target Operating Model (TOM) Working Age Adult (WAA) accommodation savings. In order to ensure no double-counting of these savings, it appears prudent not to build in any savings for supported living schemes at this time. At present, savings delivered by SCIP supported living schemes are achieving higher per-week cost avoidance than has been modelled through the TOM accommodation targets (£130 per week actual against £92 per week modelled) but this may be accounted for as TOM over-delivery. Additional savings are expected to be added to this savings line in future years as development of a specialist dementia facility and extra care schemes are progressed. Subject to scheme approval, these savings are anticipated towards the back end of the MTF5 (probably full year from 2024/25 onwards).

\*\*AC3 (Inc) – Increased Better Care Fund Income - £500,000 saving 2021/22 onwards

28. Additional income from the annual uplift on the protected social care element of the Better Care Fund (BCF).

\*\*AC4 (Eff) - Implementation of revised operating model (TOM) - £2,000,000 saving 2021/22 rising to £3,000,000 in 2024/25

29. The TOM programme has been successfully implemented across the Department and approved as delivering the anticipated financial benefits by formally measuring the results achieved prior to the Covid-19 pandemic. This was achieved by working in partnership with external partner Newton Europe. These financial benefits fall between the “Target” and “Stretch” ranges proposed during the original Diagnostic. The TOM Programme is on track to deliver in the region of £9m cashable savings £5m of which is on track to be delivered in 2020 despite the impact of the Covid-19 pandemic on working practices. The remaining £4m of savings will be delivered through £3m of further new ways of working savings identified here and £600k of establishment savings. Further work is being undertaken following on from the implementation of the TOM to deliver the final savings over the next four years such as further reducing double handed care, moves into lower cost accommodation and capacity requirements. This will be supported by an ongoing focus on continuous improvement across the Care Pathway, built into TOM ways of working.

New AC5 (Eff) - Implementation of Digital Assistive Technology to Service Users (Technology Enabled Care -TEC) – £250,000 saving 2021/22 rising to £2,000,000 in 2024/25

30. Savings in the size of care and support packages by developing a range of IT and digital solutions that can be used to support service user outcomes across the care pathway. It includes assistive technology, aids and adaptations, telecare and telehealth. Implementation is expected to include the commissioning of a strategic partner to transform and deliver a new approach to care technology, expected to commence in 2021/22. A Diagnostic has been commissioned through Hampshire County Council to understand the potential benefits of increasing the use of care technology in the Care Pathway. This looked at the Invest to Save financial business case and found a positive financial benefit to increasing the use of care technology through expected reductions in the overall cost of care and support packages for existing and new service users. The Diagnostic suggests a net benefit over five years of between £2-5m (majority expected in the form of cost avoidance) from an

incremental cost of £4.1 million. Additional staffing is likely to be required to drive forward work across the Department in order to maximise pace and subsequent benefits. Costs for this staffing to support implementation will be in addition to incremental costs included in the Diagnostic. Based on similar structures at Hampshire County Council this may require a team costing up to £400k per annum as the programme expands.

31. A saving at the lower end of the diagnostic findings has been assumed in the interests of prudence. A full business case is expected to be presented to the Cabinet in February 2021 seeking a decision to progress with the commissioning of a strategic partner to provide a managed technology service.

\*\*AC6 (Eff) - Review of High Cost Placements (Working Age Adults) £50,000 saving 2021/22 rising to £300,000 in 2024/25

32. The review of the placements is also looking at the remaining savings being delivered through reducing accommodation costs, setting clear goals as part of a progression model to reduce staffing costs and ensuring that Assistive Technology equipment is integral to the placement.

AC7(Eff) - Establishment Review – £400,000 saving 2021/22 rising to £600,000 in 2024/25

33. A review of the Department's staffing establishment following the implementation of the TOM programme, new ways of working, and the learning from the Covid-19 pandemic, commencing with the Home Care Assessment and Reablement Team (HART) service during 2020 and 2021. HART savings of approximately £400k anticipated from April 2021 following implementation of a HR Action Plan.

AC8 (Eff) - Digital Self-Serve Financial Assessments – £100,000 saving 2022/23 onwards

34. A review of the service user financial assessments process with the aim of digitalising and improving service user assessment processes. The savings is an estimate of reduced transactional and staffing costs, together with potential increased income. Work is underway to investigate opportunities for digitising existing processes which aims to implement new ways of working during 2021/22.

AC9 (Eff) - Review of Mental Health Pathway – £500,000 saving 2022/23 onwards

35. A review of the mental health care pathway including a progression model to reduce residential costs and other support. Many working age adults with mental health as their primary need are being placed in residential care due to a lack of alternatives. Evidence suggests there is a cohort of mental health clients waiting for suitable accommodation options that will enable them to step down from residential care placements and hospital stays. At the end of June 2020, there were circa 120 mental health clients assessed to be suitable for their own accommodation or supported living, and a very small number of available placements. Increasing the provision of floating support (support provided in people's own homes and only in place for as long as needed, in other provision the support is linked to specific accommodation and therefore the person has to move once they no longer need the support) to assist in facilitating step down from hospitals and residential care into supported living and own tenancies is expected to save in the region of £500k through reduced



residential costs. Initial investment in year one to develop floating support capacity will offset any savings achieved in 2021/22.

AC10 (Eff) - Review of Transitions Placements – £120,000 saving 2022/23 rising to £240,000 in 2024/25

36. As part of the Defining Children’s Services for the Future Programme with an external partner there will be a review of the decision making on transitions placements which in the longer term will reduce the size of packages as children transfer to adult services.

### **Communities and Wellbeing**

\*\* AC11 (Eff/SR) Implementation of revised service for communities and wellbeing - £70,000 saving 2021/22 rising to £140,000 in 2022/23

37. Implementation of a revised service for Communities and Wellbeing. The new structure for the Communities and Wellbeing Service became operational in July 2020. The remainder of the savings will be found through efficiencies and through reducing operating costs.

### **Savings under development**

38. The following area is being developed to meet future savings targets.

#### Social Care Investment Plan (SCIP) [formerly ‘Place to Live’]

39. The most significant cost in adult social care is for residential placements. The overall strategic goal is to reduce the numbers of people placed in residential care and increase the number supported in community settings. Part of the solution to increasing the supply of community accommodation is by implementing the SCIP.
40. Since October 2019, eight properties have been secured which will offer 56 units of accommodation to working age adults who have mental health needs and/or a learning disability or young people in transition from Children and Family Services to Adults and Communities. Three sites are operational at the time of writing – Brookfield in Great Glen where 20 individual flats have been developed, a two-bedroom house for two individuals and a three-bedroom house for two individuals, one of whom requires overnight support. The remaining five properties are having minor or major works completed on them and all will be brought into occupation between January and mid-April 2021. The properties developed are enabling individuals to move on from residential care settings or avoid entering these environments and reducing out of area placements, typically high cost, for the Transitions cohort.
41. Investment options being investigated include:
- Direct financial/asset investment by the Council to develop more accommodation with support capacity , for example, extra care housing, supported living or residential care services.

- A partnership with a care and/or accommodation provider could both increase capacity to deliver a more sustainable market whilst at the same time reduce average care costs.
42. For the majority of provision, the Council proposes to use a range of flexible frameworks to identify the most suitable provider to deliver the care and support but will consider delivering the care directly as an option when developing outline business cases for new schemes.
43. This £10m capital was made available on an invest to save basis as it will generate significant revenue savings in care and support costs in the medium to long term. The details of the mechanism for linking the capital investment and revenue saving elements are currently being worked through.

## **Health and Social Care Integration**

### **National Policy Context**

44. Health and social care integration continues to be a top priority for both the County Council and its NHS partners. Developing effective ways to co-ordinate care and integrate services around the person and provide more of this care in community settings are seen nationally and locally as key to improving outcomes and ensuring high quality and sustainable services for the future.

### **Better Care Fund (BCF)**

45. The Council has received funding from the NHS through the BCF since 2014/15 in line with levels determined by the Government. The BCF's purpose is to help the Council finance the delivery and transformation of integrated health and care services to the residents of Leicestershire, in conjunction with NHS partners.
46. The Leicestershire BCF pooled budget is comprised of a number of sources of funds (see table below), with the largest component sourced from Clinical Commissioning Groups (CCGs) budgets. The amount each CCG contributes to its local BCF pooled budget is mandated by NHS England and known as the annual "minimum allocation".
47. In the Spring budget of 2017, the Government made a non-recurrent, national grant allocation of £2bn, covering the three-year period 2017/18–2019/20. This along with ongoing funding announced in the Autumn 2015 spending review, is known as the improved Better Care Fund (iBCF). The iBCF is allocated to local authorities, specifically to meet social care need, assist with alleviating pressures on the NHS, with emphasis on improving hospital discharge, and stabilising the social care provider market.
48. In the Autumn Budget 2018 an announcement was made that additional funding of £240m nationally for Winter Pressures funding would be available. From 2019/20 this has been incorporated into the BCF Plan.
49. Better Care Fund Policy and Guidance is issued during each planning period, setting out the national conditions and requiring a detailed submission of spending plans to NHS England and NHS Improvement. BCF Plans may be for one year or multiple years.

Better Care Fund Plan 2020/21 and 2021/22- 2023/24

50. Given the pressures due to the pandemic, the BCF 2020/21 Policy and Guidance was initially delayed allowing priority to be given to continuity of provision, social care capacity and system resilience. On 3 December 2020, the Government issued a BCF Policy Statement to confirm that formal BCF plans would not have to be submitted to NHS England and NHS Improvement for approval in 2020-21. Health and Wellbeing Boards, however, are required to ensure that use of the mandatory funding contributions (CCG minimum contribution, iBCF grant and the Disabled Facilities Grant) has been agreed in writing, and that the national conditions are met.
51. As part of the Spending Review 2020 it was confirmed that the Government remains committed to the integration of health and social care and that the BCF will continue into 2021/22. The NHS contribution to adult social care will increase by 5.3% in line with the NHS Long Term Plan Settlement. The Better Care Fund Policy Framework and Planning Requirements for 2021/22 will be published in early 2021.
52. The Review also confirmed that the iBCF grant and Disabled Facilities Grant will continue in 2021/22 and be maintained at its current levels.
53. The Government has indicated that the BCF policy is likely to continue for a further three years through to 2023/24, although the content of the policy framework over this period is not yet determined.
54. The national conditions set by the Government for 2020/21 are:
  - Plans covering all mandatory funding contributions have been agreed by Health and Wellbeing Board areas and minimum contributions are pooled in a Section 75 agreement (an agreement made under Section 75 of the NHS Act 2006).
  - The contribution to social care from the CCG via the BCF is agreed and meets or exceeds the minimum expectation.
  - Spend on CCG commissioned out of hospital services meets or exceeds the minimum ringfence.
  - CCGs and local authorities confirm compliance with the above conditions to their Health and Wellbeing Boards.
55. Due to the cancellation of several meetings of the Health and Wellbeing Board (HWB) as a result of the Covid-19 pandemic, members were provided with a report which sought approval for the interim BCF Expenditure Plan for 2020/21. Those who responded supported the plans and therefore the Chief Executive of the County Council, under delegated powers, approved the interim 2020/21 Expenditure Plan. The final BCF expenditure plan for 2020/21 will be taken to the HWB on 28 January 2021 in accordance with the national conditions.

56. BCF funding for Leicestershire in 2020/21 is summarised in the table below:

	2020/21 £m
CCG Minimum Allocation	41.4
IBCF - Autumn 2015 review	11.4
IBCF (additional adult social care allocation) - Spring 2017 Budget	3.4
IBCF (Winter Pressures)	2.4
Disabled Facilities Grant	4.4
Total BCF Plan	62.9

57. £19m of the CCG minimum allocation into the BCF is used to sustain adult social care services. The national conditions of the BCF require a certain level of expenditure to be allocated for this purpose. This funding has been crucial in ensuring the Council can maintain a balanced budget, while ensuring that some of its most vulnerable users are protected; unnecessary hospital admissions are avoided; and the good performance on delayed transfers of care from hospital is maintained.
58. In addition to the required level of funding for sustaining social care service provision, a further £6m of Leicestershire's BCF funding has been allocated for social care commissioned services in 2020/21. These services are aimed at improving carers' health and wellbeing, safeguarding, mental health discharge, dementia support and crisis response.
59. Any reduction in this funding would place additional pressure on the Council's MTFS, and without BCF funding there is a real risk that the Council would not be able to manage demand or take forward the wider integration agenda. This is also a key consideration for senior officers when negotiating with CCG colleagues as part of the BCF Refresh.

### **Other External Influences**

60. There are a number of areas of funding that influence the achievability of the MTFS for the Department. For example:
- There will be an ongoing impact of the Covid-19 pandemic into the 2021/22 financial year, although the exact nature of this is difficult to predict with any certainty. It is likely that both the demand on services and the costs of services will remain higher over the next 12 months, and there is currently no indication from the Government of future policy or funding direction in respect to additional Covid-19 related activity.
  - The Government has committed to further reform of adult social care policy and the future sustainability of adult social care funding. However, as yet there is no indication of when this will take place or what the outcome may be.

- Increasing costs of care mainly due to increases in the National Living Wage and shortages of workforce in the care sector in certain rural areas.

### **Other Funding Sources**

61. For 2021/22, the following other funding is expected to be received:

- Adult Social Care Winter Pressures Grant of £2.4m to support winter pressures in adult social care and the NHS. The grant determination states that the funding may only be used for supporting the local health and social care system to manage pressures that are in addition to existing budgets.
- Former Independent Living Fund grant of £1.1m is to be paid to the County Council in 2020/21 which provides support packages, usually alongside local authority funding, to help disabled people live independently in the community;
- Service users eligible for Continuing Health Care - £7.0m through the Learning Disabilities Pooled Budget and for non-Learning Disability service users (£9.9m);
- Social Care in Prisons Grant - £102,000 which is anticipated to be ongoing;
- Local Reform and Community Voices Grant - £51,000 for Deprivation of Liberty Services in Hospitals;
- War Pension Scheme Disregard Grant - £103,000;
- Funding to support Adult Learning from Skills Funding Agency estimated to be £4.1m and Education Funding Agency £46,000.

### **Capital Programme**

62. The proposed Adults and Communities capital programme totals £24.9m (see Appendix D). The main source of external funding for the programme is the BCF grant programme (£15.7m), which is pass-ported to District Councils to fund major housing adaptations in the County. The balance of the programme (£9.2m) is discretionary funding.

63. The capital programme for the Department has traditionally been relatively small. However, there are a number of future projects being developed with a focus on delivering long term revenue savings/operational improvements:

- Development of Hamilton Court/Smith Crescent site in North West Leicestershire £2.130m (£3.381m total project cost)* - The project involves moving existing tenants and residents to alternative properties / services, demolishing the existing buildings, and redeveloping the site.
- Social Care Investment Plan £7.0m (£10.0m total project cost)* – The Social Care Investment Plan (SCIP) involves the purchase and development of properties to meet the needs identified within the Social Care Accommodation Development Plan, which was approved by the Cabinet on 25 June 2019. The programme specifically includes £5.4m for the development of a specialist dementia care facility in Coalville. The remainder will be used to increase the supply of community-based accommodation options, for example in the form of extra care and supported living, subject to business cases.

### **Future Developments**

64. A summary of provisional capital bids expected to be made by the Department are below. These have yet to be formally approved and are subject to business cases:
- a) *Collections and Learning Hub (Phase 2)* – To co-locate the Council's museums and learning collections into a single facility at the Eastern Annexe. This forms part of the Communities and Wellbeing Strategy to reduce the number of collection locations.
  - b) *SCIP* – Other potential accommodation opportunities are being investigated which may require capital investment.
  - c) *Digital for Adults and Communities* – To consider how access to assessment, review and other services can be facilitated on a self-serve basis using digital technology and modern access methods.

### **Background Papers**

None.

### **Circulation under local issues alert procedure**

None

### **Equality and Human Rights Implications**

65. Public authorities are required by law to have due regard to the need to:
- Eliminate unlawful discrimination, harassment and victimisation;
  - Advance equality of opportunity between people who share protected characteristics and those who do not;
  - Foster good relations between people who share protected characteristics and those who do not.
66. Many aspects of the County Council's MTFs may affect service users who have a protected characteristic under equalities legislation. An assessment of the impact of the proposals on the protected groups must be undertaken at a formative stage prior to any final decisions being made. Such assessments will be undertaken in light of the potential impact of proposals and the timing of any proposed changes. Those assessments will be revised as the proposals are developed to ensure decision makers have information to understand the effect of any service change, policy or practice on people who have a protected characteristic.
67. Proposals in relation to savings arising out of a reduction in posts will be subject to the County Council Organisational Change policy which requires an Equality Impact Assessment to be undertaken as part of the action plan.

### **Officers to Contact**

Jon Wilson, Director of Adults and Communities  
 Tel: 0116 305 7454  
 E-mail: [jon.wilson@leics.gov.uk](mailto:jon.wilson@leics.gov.uk)

Chris Tambini, Director of Corporate Resources

Tel: 0116 305 6199

E-mail: [chris.tambini@leics.gov.uk](mailto:chris.tambini@leics.gov.uk)

Judith Spence, Finance Business Partner, Corporate Resources Department

Tel: 0116 305 5998

E-mail: [judith.spence@leics.gov.uk](mailto:judith.spence@leics.gov.uk)

## **Appendices**

Appendix A – Revenue Budget 2021/22

Appendix B – Growth

Appendix C – Savings

Appendix D – Capital Programme 2021/22 to 2024/25

This page is intentionally left blank