#### DFP/24/05

# Health and Adult Care Scrutiny Committee 24 January 2024

### 2024/25 Budget

Joint Report of the Director of Finance and Public Value and the Director of Integrated Adult Social Care and the Director of Public Health, Communities and Prosperity.

#### 1. Recommendation

1.1 That the Committee be asked to:

Consider whether it wishes to draw to the attention of Cabinet any observations on the proposals contained within the draft Revenue Budget 2024/25 and Capital Programme for 2024/25 to 2028/29.

#### 2. Introduction & Commentary

- 2.1 In previous years, Cabinet has agreed target budgets for services in December, based on financial planning forecasts constructed in advance of the provisional settlement. However, this year, with uncertainty over the level of central government funding to local government and further expected cost increases following the Autumn Statement 2023, more time was needed to develop service targets.
- 2.2 It was therefore prudent to defer setting service budget targets until January, after the announcement of the Provisional Local Government Finance Settlement and further development of budget plans. At its meeting on 10 January 2024 Cabinet approved revenue net budget targets as set out in paragraph 2.6.
- 2.3 At the time of writing, the final outcome of the Local Government Finance Settlement is awaited and details of the council tax base, collection fund surpluses and tax base yield have yet to be confirmed along with the local element of business rates. The latest available information will be provided when the County Council considers final budget proposals for 2024/25 on 15 February 2024. Given the late notification of the Settlement and in line with arrangements in previous years, 20 February 2024 has been set aside for a second County Council budget meeting should it be required.
- 2.4 The ongoing impact of cost-of-living effects of high inflation and interest rates, and the lasting impact of the pandemic on supplier markets and demand for public services, has created huge financial pressures nationally. The Authority continues to face price and demand pressures as a result. Significant and sustainable savings are being delivered with further savings required in 2024/25 and subsequent years. Some one-off savings measures have been

- included within plans and will ultimately need to be replaced with more sustainable alternatives.
- 2.5 The target budgets include investment of £48.5 million to cover inflation and national living wage cost increases and a further £44.9 million to cover demand pressures. To enable the authority to set a balanced budget, savings, alternative funding and additional income of £49.6 million have been identified. Overall, there is net additional funding of £43.8 million or 6.3% for service budgets next year.
- 2.6 The approved service revenue budget targets for the 2024/25 financial year are set out in the table below.

	Base	Inflation and National Living Wage	Other Growth and Pressures	Savings Plans and additional income	2024/25 Target Budget	Net Chan	ge
	£'000	£'000	£'000	£'000	£'000		
Integrated Adult Social Care	340,245	29,887	20,025	(29,411)	360,746	20,501	6.0%
Children and Young People's Futures	206,278	9,795	20,862	(9,150)	227,785	21,507	10.4%
Public Health, Communities and Prosperity	21,678	533	289	(1,577)	20,923	(755)	-3.5%
Corporate Services	49,755	2,160	1,361	(4,831)	48,445	(1,310)	-2.6%
Climate Change, Environment and Transport	81,619	6,144	2,348	(4,629)	85,482	3,863	4.7%
Total Service Budgets	699,575	48,519	44,886	(49,598)	743,382	43,807	6.3%

2.7 This report provides detailed budget proposals in line with these targets.

#### 3. The Provisional Local Government Finance Settlement 2024/25

- 3.1 On 18 December 2023, the Rt Hon Michael Gove, Secretary of State for Levelling Up, Housing and Communities released a written Ministerial Statement to Parliament setting out the provisional local government finance settlement for 2024/25 financial year.
- The 2024/25 local government finance settlement is for one year only, being the final year of the 3-year period covered by the Spending Review 2021 (SR21), as updated for announcements made in the Autumn Statement on the 22 November 2023. Government has outlined national funding levels for 2024/25 and provisional allocations of funding individual council level. However, the funding position for subsequent years is unknown and will be subject to the next Spending Review and subsequent annual finance settlements.
- 3.3 The key matters in the provisional settlement are set out below -
  - Core Spending Power The government has increased the Authority's overall
    Core Spending Power by 6.5% which provides some welcome additional
    flexibility to respond to national inflationary pressures and protect services that
    local people rely on as far as possible. This incorporates a Government
    assumption that the Council will implement the full flexibility to increase Council
    Tax up to the referendum threshold.

- Council Tax The provisional settlement confirms that the Core Spending
  Power includes the flexibility in setting Council Tax for 2024/25 by setting the
  referendum limit at 2.99% and that social care authorities may increase the
  precept by a further 2% for adult social care, and therefore raise Council Tax by
  up to 4.99% overall without a referendum being required.
- **Revenue Support Grant** The provisional allocation for 2024/25 of this general funding grant is £713,381, an increase of £44,316 (6.6%) compared to 2023/24.
- Business Rates the business rates funding system and government compensation grant for under-indexing contain a combination of fixed and variable elements making budgeting for this funding complex. The three elements included in the Settlement, and within the Government's assessment of Core Spending Power, have increased by 7.7%. However, actual funding through the business rates system will be subject to actual collection totals locally and estimates for this will not be confirmed until the beginning of February through information to be provided by district / borough / city councils in Devon.
- New Homes Bonus this grant, which is based on delivered housing growth within the County, has been extended by a further year. The provisional allocation of NHB grant in 2024/25 is £1.14 million, which is an increase of £176,859 (18%) compared to 2023/24.
- Rural Services Delivery Grant the provisional allocation for this general funding grant is £8.744 million the same amount as received in 2023/24.
- **Services Grant** the provisional allocation of this general funding grant towards the cost of local services is £653,263 in 2024/25, a decrease of £3.499 million (84%) compared to 2023/24.
- Social Care Grant as reported last year, it was announced in the Autumn Statement 2022 that adult social care charging reforms that were due to be introduced from October 2023 are postponed for 2 years, but that the funding that had been allocated by government would be repurposed and still allocated to councils. In 2023/24 this repurposed funding was added to the social care grant, and the former Independent Living Fund grant was also consolidated within the social care grant. The provisional allocation of this general grant funding in 2024/25, which aims to support local authorities in meeting the costs of adults' and children's social care needs, is £63.28 million, an increase of £9.265 million (17%) compared to 2023/24.
- Improved Better Care Fund this grant funding may be used only for the
  purposes of meeting adult social care needs, reducing pressures on the NHS,
  including seasonal winter pressures, supporting people to be discharged from
  hospital when they are ready, and ensuring that the social care provider market
  is supported. The funding is pooled into the local Better Care Fund. The
  provisional allocation for 2024/25 is £29.127 million the same amount as
  2023/24

- Adult Social Care Market Sustainability and Improvement Fund The primary purpose of the fund is to support local authorities to make tangible improvements to adult social care services in their area, in particular to build capacity and improve market sustainability in both social worker workforce capacity and social care providers. The Authority's allocation of funding for 2023/24 came in two tranches: £8.373 million allocated in the Settlement in February 2023, plus £5.438 million additional in-year allocation confirmed in August 2023. Total funding in 2023/24 is therefore £13.811 million. The Authority's 2024/25 provisional allocation is £15.643 million next year, an increase of £1.832 million (13%) on the funding received in 2023/24.
- Adult Social Care Discharge Fund The funding allocated to local authorities nationally has increased from £300 million in 2023/24 to £500 million in 2024/25. The grant funding must be pooled into the Better Care Fund and may be used to: enable more people to be discharged to an appropriate setting; prioritise those approaches that are most effective in freeing up the maximum number of hospital beds and reducing bed days lost; and boost general adult social care workforce capacity. The provisional allocation for Devon County Council is £6.806 million which is an increase of £2.722 million (67%) compared to 2023/24.
- Local Government funding reform The Government confirmed through the Settlement it is not currently prioritising the Review of Relative Needs and Resources (generally referred to as the 'Fair Funding Review').

Core Funding Income		2024/25
_	2023/24	<b>Provisional</b>
	Settlement	Settlement
	£000	£000
Revenue Support Grant (RSG)	669	713
Business Rates – Central Government Top Up	83,428	86,461
Business Rates – Local Element*	21,566	23,884
Total Core Funding	105,663	111,058

<sup>\*</sup>The actual amount we receive will be derived from returns completed by our Devon Districts in January 2024.

Other Grant Income Included in the Settlement		2024/25
	2023/24	<b>Provisional</b>
	Settlement	Settlement
	£000	£000
New Homes Bonus	963	1,140
Rural Services Delivery Grant	8,744	8,744
Services Grant	4,152	653
Social Care Grant	54,015	63,280
Improved Better Care Fund	29,127	29,127
Adult Social Care Market Sustainability and Improvement Fund*	13,811	15,643
Adult Social Care Discharge Fund	4,084	6,806
<u>-</u>		
Total Other Grant Income	114,896	125,393

<sup>\*</sup>The ASC Market Sustainability and Improvement Fund 2023/24 settlement figure includes £8.373 million allocated in the Settlement in February 2023, plus £5.438 million additional inyear allocation confirmed in August 2023.

3.4 The tables above set out the Authority's Core Funding of £111.1 million and shows the other government grants that have been announced so far. Other existing grants are expected to be published soon (for example, public health grant) and, together with any updates to funding allocations when the Final Settlement is announced, will be reported as part of the overall budget papers in February, if known by then.

#### 4. Service Specific Budget - Integrated Adult Social Care

4.1 The draft total budget for Integrated Adult Social care is £360.7 million. This is an increase of £20.5 million or 6% from the 2023/24 adjusted budget.

#### 5. Integrated Adult Social Care

- 5.1 Overall, the budget provides additional investment of £17.5 million for Operations and £3.0 million for Commissioning. This is net of savings.
- 5.2 Growth and demand pressures amount to £20.0 million. The impact of inflation including pay and the national living wages adds £29.9 million and planned savings amount to £29.4 million.
- 5.3 Our vision is to ensure that we are maximising people's independence and support the increasing number of people that approach us in the most effective way.
- 5.4 Population projections indicate that Devon will see an increase in complexity for both older people and working age adults, this means we will require greater provision of more complex care beds and community services to meet the projected increase in dementia prevalence of 36% between 2020 and 2030. To ensure people have their needs met effectively we need to ensure that both Integrated Adult Social Care and the external workforce has the right skills to support people with increasingly complex care needs.
- We will require increased provision of residential and community services for the projected 26% increase in adults with a learning disability between 2020 and 2030, this is a key priority.
- 5.6 We have seen an increase in the numbers of people admitted to bed based care. There have been national changes to hospital discharge processes. The current model of hospital discharge within Devon is too bed based and produces suboptimal outcomes for individuals in terms of maintaining their independence. We need to work with our ICB colleagues, and NHS providers to create a model that has less unnecessary reliance on bed based and other statutory care services.
- 5.7 We have a strong track record of positive partnership working with NHS in Devon and have maximised The Better Care Fund (BCF) to improve outcomes for people and carers in Devon. A pooled fund of around £127 million, allocation is determined jointly to meet the priorities for the local population. Included in the Operations budget is £46.66 million of BCF funding which contributes directly to the provision of social care services, and a further £5.49

million which contributes to joint health and social care arrangements. The BCF also includes £8.965 million (provisional) Disabled Facilities Grant which is administered by the District Authorities. The table below sets out the detail:

Grants:	£'000
Disabled Facilities Grant	8,965
Improved BCF grant	29,127
Hospital Discharge fund	12,896
NHS funding:	£'000
NHS directly commissioned	31,715
Support to adult social care	20,205
Localities - Older People	10,715
Equipment store	7,587
Carers	3,898
Others	2,137
	127,245

- 5.8 Deprivation of liberty and safeguarding are key priorities, and the budget allows for additional investment of £500,000 to help address the backlog of those awaiting assessment.
- 5.9 Changes to the immigration rules due in April pose a risk to the sufficiency of all sectors of the care market, particularly the home care sector, and risk undoing the progress made through international recruitment. Any negative impact will be felt across the health and care system, and the people we serve, including people experiencing longer waits to get home from hospital.
- 5.10 Internal workforce challenges continue, relating to attracting Occupational Therapists, Social Workers and Team Managers. Our grow your own approach and apprenticeship schemes are having a positive impact but the challenges remain.

#### 6. Savings

- 6.1 Our savings strategy is built around three key approaches:
  - 6.1.1 A continued focus on a strengths-based approach that is embedded and restated in our vision to support people wherever possible without the need for commissioned services
  - 6.1.2 When people do need a commissioned service, it is the right type of care, short term and enabling is the first instance to maximise their independence
  - 6.1.3 When care is commissioned, we work with the market to ensure best value, that services are relevant to what people need to access, and they are modern
- 6.2 We have made significant progress in our programme of care reviews, embedding our vision to ensure that the care we are commissioning and providing is maximising people's independence, this continues.

- 6.3 The directorate grew during the pandemic to ensure we had the capacity to deliver the required prolonged and intense response for those we serve. As we redesign for the future, the budget includes staff savings of £1.9 million. We are working to ensure that the right staff are in the right place and doing the right things to delivery our strategy.
- The budget includes a combined savings of £14.4 million to come from how we commission from the independent provider market. Significant work has taken place, reshaping elements of our work including tightening cost controls to ensure a consistent and equitable approach to how we commission from the independent provider market. We will build further on this.
- 6.5 Combined saving of £29.4 million are planned for 2024/25. Ultimately the successful delivery of the budget will be based on promoting greater independence for all of the people that we work with, and at better value.

#### 7. Service Specific Budget Issues - Public Health

- 7.1 The Public Health grant remains ringfenced for 2024/25. The value of the grant for 2024/25 has not yet been confirmed.
- 7.2 Service demand is starting to recover for key Public Health services. There have been several contract renegotiations during 2023/24 which have largely driven the fluctuations within the budget for 2024/25, alongside realigning budgets to match demand.
- 7.3 The Public Health reserve at the end of the 2022/23 financial year stood at £13 million. This reserve will be used to support cost pressures and related services across the Authority.
- 7.4 The Public Health budget is also included in the papers for the Corporate Infrastructure and Regulatory Services Scrutiny Committee meeting on 25th January 2024.

#### 8. Capital Programme

- 8.1 The capital programme has been produced to maximise investment in infrastructure and assets and to support service delivery and priorities.
- 8.2 Given the financial pressures on resources, bids for corporate capital funding were invited only where they offered revenue savings, cost reductions or were in order to perform a statutory duty.
- 8.3 No bids were received for Integrated Adult Social Care.
- 8.4 External funding, such as the Disabled Facilities Grant, is subject to future government announcements and, therefore, this funding cannot be guaranteed.
- 8.5 Commitments will not be made in future years, until funding is either announced or secured.

#### 9. Equality Impact Assessment

- 9.1 Under the Equality Act 2010, the Authority has a legal duty to give due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations when making decisions about services. This duty applies to the eight 'protected characteristics' of age, disability, gender reassignment, pregnancy and maternity, race, religion and belief, sex and sexual orientation. Where relevant, Impact Assessments are carried out to consider how best to meet this duty, which includes mitigating against the negative impact of service reductions.
- 9.2 The Equality Act 2010 and other relevant legislation does not prevent the Authority from taking difficult decisions which result in service reductions or closures for example, it does however require the Authority to ensure that such decisions are:
  - Informed and properly considered with a rigorous, conscious approach and open mind.
  - Taking due regard of the effects on the protected characteristics with the need to
    ensure nothing results in unlawful discrimination in terms of access to, or
    standards of, services or employment as well as considering any opportunities to
    advance equality and foster good relations.
  - Proportionate (negative impacts are proportionate to the aims of the policy decision).
  - Fair
  - Necessary
  - Reasonable, and
  - Those affected have been adequately consulted.
- 9.3 The impact assessment for the 2024/25 budget is published at www.devon.gov.uk/impact/budget-2024-2025/

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### **Local Government Act 1972: List of Background Papers**

Spending Review 2022 & Provisional Settlement 2024/25

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### **Strategic Leadership Team Commentary**

This is a time of significant challenge for local government as a whole. Despite the government increasing local councils' spending power, a combination of high inflation and rising demand mean that they face some of their toughest ever financial decisions. The Government's local government financial settlement for 2024/25 assumes that all councils will increase their council tax bills by the maximum allowed in 2024/25. The increase in the national living wage poses a significant additional pressure, particularly on the adult social care budget.

In common with all local authorities, Devon County Council has a legal obligation to set a balanced annual budget. Preparing for the financial year 2024/25 has meant a continuation of plans to make savings by getting best value from all contracts, maximising income, reducing the number of employees and selling Council owned property.

Our overriding focus for the next twelve months will continue to be to meet the needs of the young, old and most vulnerable across Devon and we will work closely with our NHS partners to support and develop the local health and care system. We will also continue to work closely with all our partners across Team Devon to help support the local economy, improve job prospects and housing opportunities for local people, respond to climate change, champion opportunities for our young people, and address the impacts of the rising cost of living for those hardest hit.

The year ahead is not going to be easy but we remain fully committed to doing all we can to get the most from every single pound we spend. With key local partners we will transform how we do things so we can continue to deliver vital local services and improve outcomes for the people of Devon as efficiently and effectively as we can.

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## **Integrated Adult Social Care**

## How the 2024/25 Budget has been built up

	Adjusted Budget		Outturn Budget
	£'000	£'000	£'000
Integrated Adult Social Care Operations	311,944	17,550	329,494
Integrated Adult Social Care Commissioning	28,301	2,951	31,252
Total	340,245	20,501	360,746
Reasons for changes in Revenue Budget			Change £'000
Inflation, National Living Wage, and other pressures			
Inflation and National Living Wage			29,887
Price pressures, demographic and other growth in demand			19,525
Deprivations of Liberty and Safeguarding		-	49,912
Source			49,912
<b>Savings</b> Supporting people with disabilities to live more independently			(6,456)
Improved market management for commissioned bed based se	ervices		(8,074)
Improved market management for commissioned community b	ased services		(6,313)
Contract savings			(763)
Supporting people with mental health needs to live more inde	pendently		(500)
Reductions in staffing		-	(1,864)
AD			(23,970)
Alternative sources of funding and additional income			
Better Care Fund mandated increase to Adult Social Care			(4,308)
Increase in partner and client income		-	(1,133)
			(5,441)
Total			20,501

2023/24 Changes 2024/25

## **Analysis of Total Expenditure 2024/25**

	Gross Expenditure	Grant and Contribution Income			Net Expenditure
	£'000	£'000	£'000	£'000	£'000
Integrated Adult Social Care Operations	441,274	(36,104)	(75,676)	0	329,494
<b>Integrated Adult Social Care Commissioning</b>	34,556	(2,649)	(655)	0	31,252
Total	475,830	(38,753)	(76,331)	0	360,746

The following table details the sources of income for the Better Care Fund:

	Gross Expenditure	Grant and Contribution Income			Net Expenditure
	£'000	£'000	£'000	£'000	£'000
Integrated Adult Social Care Operations					
Better Care Fund	127,245	(44,898)	(78,193)	(4,154)	0
Total	127,245	(44,898)	(78,194)	(4,154)	0

## **Integrated Adult Social Care Operations**

Budget	∆diusted				2024/25	2024/25
F000   F000   F000   F000   F000   F000   F000   F000			Gross		Outturn	Net
3,277					_	
3,277   Day Opportunities   3,287   (24)   3,263   (14)     19,752   Direct Payments   24,886   (4,612)   20,274   3,263     55,644   Enabling including supported living   59,348   (654)   58,694   3,050     2,434   Nursing Care   17,045   (6,481)   10,564   (1,935     14,199   Personal Care   17,045   (6,481)   10,564   (1,935     41,154   Residential Care   49,137   (3,911)   45,264   (4,070     134,756   Improved Better Care Fund   9,476   0   9,476   (4,070     14,492   Reablement   5,507   (836)   4,611   (331     4,797   Residential Care   4,708   (500)   4,208   (589     14,194   14,205   (1,413)   12,792   (1,402     14,940   Nursing Care   4,805   (3,699   7,165   (7,843     3,974   Enabling including supported living   4,456   (658)   3,798   (176     29,128   Nursing Care   48,900   (14,794)   34,106   (8,131     17,394   Personal Care   48,900   (14,794)   34,106   (8,131     17,394   Personal Care   48,900   (14,794)   34,106   (3,131     13,1946   OP&D Care Management   35,611   (3,613)   31,848   (3,699     17,555   311,944   441,274   (111,780)   329,494   17,556      Analysis of changes:	2 000	Disability Services	2 000	2 000		2 000
19,752 Direct Payments	3,277	-	3,287	(24)	3,263	(14)
S5,640	-		-		-	
2,434   Nursing Care	-	•			-	
12,499   Personal Care   17,045   6,481   10,564   41,154   Residential Care   49,137   (3,911)   45,226   4,077   134,756   157,958   (16,132)   141,826   7,076   19,476   Improved Better Care Fund   9,476   0 9,476   1n House Services   4,405   Day Opportunities and Reaching For Independence   3,990   (17)   3,973   (432   4,992   Reablement   5,507   (896)   4,611   (381   4,797   Residential Care   4,708   (500)   4,208   (589   14,194   14,205   (1,413)   12,792   (1,402   1,402   1,403   1,404   1,405   1,403   1,406   1,405   1,403   1,406   1,405   1,403   1,406   1,405   1	-			• •	-	
	-	-		• •	-	
134,756	•	Residential Care		-	-	
Name	134,756					
In House Services	·	Improved Better Care Fund			-	. (
4,405   Day Opportunities and Reaching For Independence   3,990   (17)   3,973   (432   4,992   Reablement   5,507   (896)   4,611   (381   4,797   Residential Care   4,708   (500)   4,208   (589   14,194   14,205   (1,413)   12,792   (1,402   755   Day Opportunities   760   (555   705	-,	-	,	· ·	,	
4,992   Reablement   5,507   (896)   4,611   (381   4,797   Residential Care   4,708   (500)   4,208   (589   14,194   14,205   (1,413   12,792   (1,402   14,194   14,205   (1,413   12,792   (1,402   14,194   14,205   (1,413   12,792   (1,402   14,194   14,205   (1,413   12,792   (1,402   14,194   14,205   (1,413   12,792   (1,402   13,194   14,194   14,205   (1,413   12,792   (1,402   13,194   14,194   14,206   (555)   705   (50   7,243   1,206   1,206   1,206   1,206   1,206   1,206   1,206   1,206   1,206   1,206   1,206   1,206   1,206   1,206   1,206   1,206   1,207	4,405		3,990	(17)	3,973	(432
4,797   Residential Care	•				-	
14,194	•		•	, ,	-	-
No.						
755   Day Opportunities   760   (55)   705   (50)   7,243   Direct Payments   10,834   (3,669)   7,165   (7,88   3,974   Enabling including supported living   4,456   (658)   3,798   (176   29,128   Nursing Care   48,900   (14,794)   34,106   4,970   17,394   Personal Care   37,685   (19,142)   18,543   1,144   62,243   Residential Care   120,704   (52,304)   68,400   6,151   120,737   223,339   (90,622)   132,717   11,980   835   Workforce Development   835   0   600   0   0   0   0   0   0   0	,	Older People	,	` ' '	•	` '
7,243 Direct Payments 10,834 (3,669) 7,165 (78 3,974 Enabling including supported living 4,456 (658) 3,798 (176 29,128 Nursing Care 48,900 (14,794) 34,106 4,976 17,394 Personal Care 37,685 (19,142) 18,543 1,144 62,243 Residential Care 120,704 (52,304) 68,400 6,155 120,737 223,339 (90,622) 132,717 11,986 835 Workforce Development 835 0 835 (98 835 Workforce Development 835 0 835 (98 8311,944 441,274 (111,780) 329,494 17,556  Analysis of changes: £ 000 Inflation, National Living Wage, and other pressures Inflation and National Living Wage Price pressures, demographic and other growth in demand Deprivations of Liberty Safeguarding 500 Transfer of Emergency Duty Service to Mental Health (982 45,598  Savings Supporting people with disabilities to live more independently [982 45,598 Sevings Supporting people with disabilities to live more independently [6,456] Improved market management for bed based services [8,074] Improved market management community based services [8,074] Reduction in staffing (6,456 (1,764) Alternative sources of funding and additional income Better Care Fund mandated increase to Adult Social Care [4,308] Increase in partner and client income [4,308]	755	-	760	(55)	705	(50
3,974 Enabling including supported living 4,456 (658) 3,798 (176 29,128 Nursing Care 48,900 (14,794) 34,106 4,978 17,394 Personal Care 37,685 (19,142) 18,543 1,149 62,243 Residential Care 120,704 (52,304) 68,400 6,151 120,737 223,339 (90,622) 132,717 11,980 835 Workforce Development 35,461 (3,613) 31,848 (98 835 Workforce Development 835 (0 83	7,243		10,834			
29,128 Nursing Care	-	•			-	
17,394 Personal Care 37,685 (19,142) 18,543 1,149 62,243 Residential Care 120,704 (52,304) 68,400 6,151 120,737 223,339 (90,622) 132,717 11,980 31,946 OP&D Care Management 35,461 (3,613) 31,848 (98 835 Workforce Development 835 0 835 0 835 (98 835 Workforce Development 835 0 835 0 835 (98 835 Workforce Development 835 0 835 0 835 (98 835 Workforce Development 835 0 835 0 835 (98 835 Workforce Development 835 0 835 0 835 (98 835 Workforce Development 835 0 835 0 835 (98 835 Workforce Development 835 0 835 0 835 (98 835 Workforce Development 835 0 835 0 835 (98 835 Workforce Development 835 0 835 0 835 (98 835 Workforce Development 835 0 835 0 835 (98 835 Workforce Development 835 0 835 0 835 0 835 (98 835 Workforce Development 835 0 835 0 835 0 835 (98 835 Workforce Development Betriem of Living Wage, and other pressures	29,128			(14,794)	-	4,978
120,704   (52,304)   68,400   6,155     120,737	-	-			-	1,149
120,737	62,243	Residential Care	120,704	-	-	
31,946 OP&D Care Management 35,461 (3,613) 31,848 (98 835 Workforce Development 835 0 835 (3,613) 31,848 (98 835 Workforce Development 835 0 835 (3,613) 31,848 (98 835 Workforce Development 835 0 835 (3,613) 31,848 (98 835 Workforce Development 835 0 835 (3,613) 31,848 (98 835 Workforce Development 835 0 835 (3,613) 31,848 (98 835 Workforce Development 835 (111,780) 329,494 (111,780) 329,494 (17,550 Mallysis of changes:	120,737					11,980
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Analysis of changes: Inflation, National Living Wage, and other pressures Inflation and National Living Wage Price pressures, demographic and other growth in demand 17,790 Deprivations of Liberty Safeguarding Transfer of Emergency Duty Service to Mental Health (982 45,598  Savings Supporting people with disabilities to live more independently Improved market management for bed based services Improved market management community based services Improved market management community based services Eduction in staffing (1,764 (22,607) Alternative sources of funding and additional income Better Care Fund mandated increase to Adult Social Care Increase in partner and client income (5,441)	31,946	OP&D Care Management	35,461	(3.613)	31,070	(98
Analysis of changes: Inflation, National Living Wage, and other pressures Inflation and National Living Wage Price pressures, demographic and other growth in demand 17,790 Deprivations of Liberty Safeguarding Transfer of Emergency Duty Service to Mental Health (982 45,598  Savings Supporting people with disabilities to live more independently Improved market management for bed based services Improved market management community based services Improved market management community based services Eduction in staffing (1,764 (22,607) Alternative sources of funding and additional income Better Care Fund mandated increase to Adult Social Care Increase in partner and client income (5,441)		-	-		-	
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Inflation and National Living Wage Price pressures, demographic and other growth in demand 17,790 Deprivations of Liberty Safeguarding Transfer of Emergency Duty Service to Mental Health (982 45,598  Savings Supporting people with disabilities to live more independently Improved market management for bed based services Improved market management community based services Reduction in staffing (1,764 (22,607) Alternative sources of funding and additional income Better Care Fund mandated increase to Adult Social Care Increase in partner and client income (1,133 (5,441)	835	-	835	0	835	C
Price pressures, demographic and other growth in demand  Deprivations of Liberty Safeguarding  Transfer of Emergency Duty Service to Mental Health  (982 45,598  Savings  Supporting people with disabilities to live more independently Improved market management for bed based services Improved market management community based services Improved market management community based services Reduction in staffing  (1,764 (22,607)  Alternative sources of funding and additional income  Better Care Fund mandated increase to Adult Social Care Increase in partner and client income  (1,133 (5,441)	835 <b>311,944</b>	Workforce Development	835	0	835	17,550
Deprivations of Liberty Safeguarding Transfer of Emergency Duty Service to Mental Health  (982 45,598  Savings Supporting people with disabilities to live more independently Improved market management for bed based services Improved market management community based services (6,313 Reduction in staffing (1,764 (22,607)  Alternative sources of funding and additional income Better Care Fund mandated increase to Adult Social Care Increase in partner and client income (1,133 (5,441)	311,944  Analysis of clanflation, Nat	Workforce Development  hanges: ional Living Wage, and other pressures	835	0	835	17,550 £'000
Transfer of Emergency Duty Service to Mental Health  45,598  Savings  Supporting people with disabilities to live more independently Improved market management for bed based services Improved market management community based services Improved market management community based services Reduction in staffing  (1,764 (22,607)  Alternative sources of funding and additional income Better Care Fund mandated increase to Adult Social Care Increase in partner and client income  (1,133 (5,441)	311,944 Analysis of classification, National Inflation and	Morkforce Development  hanges: cional Living Wage, and other pressures National Living Wage	835	0	835	17,550 £'000
Savings  Supporting people with disabilities to live more independently Improved market management for bed based services Improved market management community based services Increase of funding and additional income  Better Care Fund mandated increase to Adult Social Care Increase in partner and client income  (1,133) (5,441)	311,944 Analysis of classification, National Inflation and Price pressu	Morkforce Development  hanges: cional Living Wage, and other pressures I National Living Wage res, demographic and other growth in demand	835	0	835	<b>£'000</b> 28,290 17,790
Savings Supporting people with disabilities to live more independently Improved market management for bed based services Improved market management community based services Improved market management community based services (6,313 Reduction in staffing (1,764 (22,607)  Alternative sources of funding and additional income  Better Care Fund mandated increase to Adult Social Care Increase in partner and client income (1,133 (5,441)	311,944 Analysis of classification, National Inflation and Price pressure Deprivations	Morkforce Development  hanges: cional Living Wage, and other pressures I National Living Wage res, demographic and other growth in demand of Liberty Safeguarding	835	0	835	<b>£'000</b> 28,290 17,790 500
Supporting people with disabilities to live more independently Improved market management for bed based services Improved market management community based services Reduction in staffing (1,764 (22,607)  Alternative sources of funding and additional income Better Care Fund mandated increase to Adult Social Care (4,308 Increase in partner and client income (1,133 (5,441)	311,944 Analysis of classification, National Inflation and Price pressure Deprivations	Morkforce Development  hanges: cional Living Wage, and other pressures I National Living Wage res, demographic and other growth in demand of Liberty Safeguarding	835	0	835	£'000 28,290 17,790 500 (982
Improved market management for bed based services  Improved market management community based services  Reduction in staffing  (1,764  (22,607)  Alternative sources of funding and additional income  Better Care Fund mandated increase to Adult Social Care  Increase in partner and client income  (1,133  (5,441)	311,944 Analysis of classification, National Inflation and Price pressu Deprivations Transfer of E	Morkforce Development  hanges: cional Living Wage, and other pressures I National Living Wage res, demographic and other growth in demand of Liberty Safeguarding	835	0	835	28,290 17,790 500 (982
Improved market management community based services  Reduction in staffing  (1,764 (22,607)  Alternative sources of funding and additional income  Better Care Fund mandated increase to Adult Social Care  Increase in partner and client income  (1,133 (5,441)	311,944 Analysis of clanflation, National Inflation and Price pressu Deprivations Transfer of E	Morkforce Development  hanges: cional Living Wage, and other pressures I National Living Wage res, demographic and other growth in demand of Liberty Safeguarding cimergency Duty Service to Mental Health	835	0	835	28,290 17,790 500 (982 45,598
Reduction in staffing  (1,764  (22,607)  Alternative sources of funding and additional income  Better Care Fund mandated increase to Adult Social Care  (4,308 Increase in partner and client income  (1,133  (5,441)	Analysis of classification, National Inflation and Price pressu Deprivations Transfer of Esavings Supporting page 1	Morkforce Development  hanges: cional Living Wage, and other pressures I National Living Wage res, demographic and other growth in demand of Liberty Safeguarding cmergency Duty Service to Mental Health	835	0	835	28,290 17,790 500 (982 45,598
Alternative sources of funding and additional income  Better Care Fund mandated increase to Adult Social Care (4,308 Increase in partner and client income (1,133)  (5,441)	Analysis of classification, National Inflation and Price pressu Deprivations Transfer of Esavings Savings Supporting proved management of Esavings	Morkforce Development  Ananges: Ananges: Ananges: Anational Living Wage, and other pressures I National Living Wage Ares, demographic and other growth in demand Of Liberty Safeguarding Amergency Duty Service to Mental Health  Deeple with disabilities to live more independently Arket management for bed based services	835	0	835	28,290 17,790 500 (982 45,598
Alternative sources of funding and additional income  Better Care Fund mandated increase to Adult Social Care (4,308 Increase in partner and client income (1,133)  (5,441)	Analysis of clanding price pressu Deprivations Transfer of E Savings Supporting price proved market in the provention of the provention in the provent	Morkforce Development  Ananges: Ananges: Ananges: Anational Living Wage, and other pressures I National Living Wage Ares, demographic and other growth in demand Anof Liberty Safeguarding Amergency Duty Service to Mental Health  Anoeople with disabilities to live more independently Arket management for bed based services Arket management community based services	835	0	835	£'000 28,290 17,790 500 (982 <b>45,598</b> (6,456 (8,074 (6,313
Better Care Fund mandated increase to Adult Social Care (4,308 Increase in partner and client income (1,133 (5,441)	Analysis of clanding price pressu Deprivations Transfer of E Savings Supporting price proved market in the provention of the provention in the provent	Morkforce Development  Ananges: Ananges: Ananges: Anational Living Wage, and other pressures I National Living Wage Ares, demographic and other growth in demand Anof Liberty Safeguarding Amergency Duty Service to Mental Health  Anoeople with disabilities to live more independently Arket management for bed based services Arket management community based services	835	0	835	£'000 28,290 17,790 500 (982 <b>45,598</b> (6,456 (8,074 (6,313 (1,764
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	Analysis of classification, National Inflation and Price pressu Deprivations Transfer of Eavings Savings Supporting proved management of Eavings Improved m	Morkforce Development  Inanges: Itional Living Wage, and other pressures I National Living Wage I National Living	835	0	835	£'000 28,290 17,790 500 (982 <b>45,598</b> (6,456 (8,074 (6,313 (1,764
Total 17,550	Analysis of clanflation, National Inflation and Price pressu Deprivations Transfer of Eavings Savings Supporting proved management of Eavings Improved management of Eavings Alternative Better Care	Morkforce Development  Inanges: Isional Living Wage, and other pressures I National Living Wage Ires, demographic and other growth in demand of Liberty Safeguarding Imergency Duty Service to Mental Health  Deeple with disabilities to live more independently arket management for bed based services arket management community based services staffing  Sources of funding and additional income Fund mandated increase to Adult Social Care	835	0	835	£'000 28,290 17,790 500 (982 45,598 (6,456 (8,074 (6,313 (1,764 (22,607) (4,308 (1,133
	Analysis of clanflation, National Inflation and Price pressu Deprivations Transfer of Eavings Savings Supporting proved management of Eavings Improved management of Eavings Alternative Better Care	Morkforce Development  Inanges: Isional Living Wage, and other pressures I National Living Wage Ires, demographic and other growth in demand of Liberty Safeguarding Imergency Duty Service to Mental Health  Deeple with disabilities to live more independently arket management for bed based services arket management community based services staffing  Sources of funding and additional income Fund mandated increase to Adult Social Care	835	0	835	(98, 000

#### **Service Commentary**

Integrated Adult Social Care delivers the statutory responsibility as set out in the Care Act (2014), this includes: advice, information and signposting to anyone who may feel they need care or support as well as assessment, review and support planning for older people and working age adults with learning disabilities, autism, mental health and physical disabilities who have eligible needs. There is a new CQC inspection framework of local authority Care Act duties.

The service also arranges care, largely from the independent sector, for either short-term interventions or long-term care, on a personalised basis. Additionally, the service delivers a small amount of adult social care directly, rather than commission from the independent sector. These include several different establishments throughout the county which provide services to older people and people with disabilities.

The service undertakes statutory safeguarding responsibilities for vulnerable adults. The workforce undertaking these functions includes professionally qualified social workers, occupational therapists, as well as non-registered staff who are co-located and co-managed alongside community-based NHS staff.

People tell us they want to live in the place that they call home, with the people and things they love, in communities that look out for each other, doing the things that matter to them. This is at the heart of our Promoting Independence vision, and it shapes the work we do every day.

As a service we have four key cost drivers: demand, market sufficiency, the cost of care, and the acuity and complexity of people we are serving.

Subject to joint agreement with NHS partners, in addition to the £9.5 million Improved Better Care Fund within the Operations budget there is a further £46.66 million of funding from the Better Care Fund (BCF), which contributes directly to the provision of social care services, and there is a further £5.49 million of health income which contributes to joint health and social care arrangements.

The £22.6 million savings will require significant operational redesign and rigour and may impact further on already challenging assessment waiting times, on the organisation's prevention agenda, ensuring a sufficient market and our partnership working.

As the service moves forward with its vision of promoting independence via a strengths-based approach, which is the right thing to do and is required for the successful delivery of the budget, there will be a reduction to the care and support which people are currently receiving. The available resource will be focused on those people who need it most.

### **Service Statistics and Other Information**

#### Number of service agreements budgeted to be serviced Average through Year

		2023/24	Change	2024/25
Reablement (across all client groups)	Service Agreements	3,150	0	3,150
These are new people expected to go throu	igh the reablement process			
Disability Services (incl. Autistic Spectrum)				
Day Opportunities	Service Agreements	321	(15)	306
Direct Payments	Service Agreements	1,466	20	1,486
Enabling including supported living	Service Agreements	1,830	(48)	1,782
Nursing Care (including Respite)	Service Agreements	48	5	53
Personal Care	Service Agreements	940	5	945
Residential Care (including Respite)	Service Agreements	523	29	552
Older People and Disability - In house				
Day Opportunities	Service Agreements	64	(13)	51
Residential Care (including Respite)	Service Agreements	44	(9)	35
Reaching for Independence	Service Agreements	744	(204)	540
Older People				
Day Opportunities	Service Agreements	167	(17)	150
Direct Payments	Service Agreements	632	(18)	614
Enabling including supported living	Service Agreements	464	31	495
Nursing Care (including Respite)	Service Agreements	720	(35)	685
Personal Care	Service Agreements	2,180	179	2,359
Residential Care (including Respite)	Service Agreements	2,119	(6)	2,113

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## **Integrated Adult Social Care Commissioning**

2023/24 Adjusted Budget £'000		Gross Expenditure £'000	Gross Income £'000	2024/25 Outturn Budget £'000	2024/25 Net Changes £'000
:	Integrated Adult Commissioning				
2,442	Centrally Managed Contracts	3,960	(687)	3,273	831
1,061	Change Team	1,082	(20)	1,062	1
1,332	Policy, Performance and Involvement Team	1,750	0	1,750	418
3,367	Strategic Commissioning Team	3,352	0	3,352	(15)
8,202		10,144	(707)	9,437	1,235
	Mental Health Services				
4,382	Care Management	5,582	(595)	4,987	605
66	Day Opportunities	147	(169)	(22)	(88)
886	Direct Payments	972	(60)	912	26
7,760	Enabling including supported living	9,137	(1,011)	8,126	366
85	Nursing Care	89	0	89	4
150	Personal Care	362	(321)	41	(109)
6,770	Residential Care	8,123	(441)	7,682	912
20,099		24,412	(2,597)	21,815	1,716
28,301		34,556	(3,304)	31,252	2,951

Analysis of changes:	£'000
Inflation, National Living Wage, and other pressures	
Inflation and National Living Wage	1,597
Price pressures, demographic and other growth in demand	1,735
Transfer of Emergency Duty Service from Operations	982
	4,314
Savings	
Supporting people with mental health needs to live more independently	(500)
Commissioning efficiencies	(763)
Reduction in Mental Health staffing	(100)
	(1,363)
Total	2,951

#### **Service Commentary**

Local authorities have a statutory requirement to meet the needs of people eligible for care, to support them and their carers, and to fund care for those people with needs who meet financial eligibility criteria.

The Integrated Adult Social Care Commissioning team work with NHS colleagues to assess the strategic health and social care needs of the Devon population and ensure there are solutions to meet those needs through commissioning with the provider market and integrated services. This includes the management and oversight of the Better Care Fund.

Commissioners have duties under the Care Act to shape and maintain an efficient and effective market of services for meeting care and support needs in the local area, including working with the provider market to ensure sufficiency of choice, quality and information. This includes addressing workforce challenges through supporting the recruitment and retention of care workers, including actively recruiting people from overseas.

Local authorities have a responsibility to ensure care is maintained where a provider fails financially and services cease – for everyone, including self-funders - to ensure people's needs can continue to be met. This is undertaken by working with the Care Quality Commission to assure and improve quality along with managing contractual provider relationships to ensure their delivery, and consultation with people including carers and families. 2023 saw the introduction of CQC assurance of Adult Social Care duties that will result in a formal inspection and assessment similar to the Ofsted process.

The commissioning function is also responsible for commissioning arrangements for support to carers, for the care management of people with mental health needs (working with Devon Partnership NHS Trust), and for the coordination of activity and governance of the statutory Torbay and Devon Safeguarding Adults Partnership as well as for the oversight of contracts including service user representation and grants to the voluntary and community sector.

The team are also responsible for commissioning intelligence, statutory returns and surveys, internal performance management, and involvement in sector led improvement; for commissioning and operational policy development and strategic planning; and engaging the users of our services and their carers.

The key challenges for Integrated Adult Social Care Commissioning in the year ahead will be maintaining a sufficient provider market and associated workforce for people of all ages, and the delivery of planned savings in Mental Health. We will need to continue to work with people in a strengths-based approach, building their resilience and promoting their independence in a way that reduces the reliance on statutory services.

### **Service Statistics and Other Information**

#### Number of service agreements budgeted to be serviced Average through Year

		2023/24	Change	2024/25
Mental Health Services				
Day Opportunities	Service Agreements	12	(2)	10
Direct Payments	Service Agreements	134	(17)	117
Enabling including supported living	Service Agreements	664	12	676
Nursing Care (including Respite)	Service Agreements	2	0	2
Personal Care	Service Agreements	28	11	39
Residential Care (including Respite)	Service Agreements	166	1	167

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#### **Public Health**

Total

## How the 2024/25 Budget has been built up

	Aujusteu		Outtuiii
	Budget		Budget
	£'000	£'000	£'000
Public Health	0	0	0
Total	0	0	0
Reasons for changes in Revenue Budget			Change £'000
Inflation, National Living Wage and other pressures			
Inflation and National Living Wage			235
Support Services - Inflationary increase to support costs			46
NHS Health Check Programme increase			378
Smoking and Tobacco contract changes			90
Drug and Alcohol support for under 18's - replacement of tem	porary reserv	es fundin_	58
			807
Savings			
Public Health Nursing contract realignment			(215)
Mental Health service remodelling			(100)
Contractual changes - Substance misuse			(277)
Renegotiation of Obesity contracts			(138)
Various demand led, contract and staffing changes		_	(77)
			(807)

2023/24 Changes 2024/25

Outturn

0

Adjusted

## **Analysis of Total Expenditure for 2024/25**

	Gross	<b>Grant and</b>	<b>External</b>	Internal	Net
	Expenditure	Contribution	Income	Income	Expenditure
		Income			
	£'000	£'000	£'000	£'000	£'000
Public Health	34,636	(34,576)	0	(60)	0
Total	34,636	(34,576)	0	(60)	0

### **Public Health**

2023/24 Adjusted Budget £'000		Gross Expenditure £'000	Gross Income £'000	2024/25 Outturn Budget £'000	2024/25 Net Changes £'000
	Public Health				
2,608	Children 5-19 Public Health Programmes	2,558	0	2,558	(50)
873	Comm Sfty, Violence Prvntn and Social Excl	871	0	871	(2)
72	Health At Work	71	0	71	(1)
273	Health Protection	187	0	187	(86)
9,801	Mandated 0-5 Children's Services	9,626	0	9,626	(175)
98	National Child Measurement Programme	95	0	95	(3)
272	NHS Health Check Programme	650	0	650	378
393	Obesity	277	0	277	(116)
590	Other Public Health	590	0	590	0
206	Physical Activity	114	0	114	(92)
360	Public Health Expert Advice	350	0	350	(10)
(31,511)	Public Health Income	0	(31,453)	(31,453)	58
417	Public Mental Health	399	(60)	339	(78)
7,139	Sexual Health	7,208	0	7,208	69
1,316	Smoking and Tobacco	2,350	(950)	1,400	84
5,717	Substance Misuse	7,708	(2,173)	5,535	(182)
1,376	Support Services	1,582	0	1,582	206
0		34,636	(34,636)	0	0

Analysis of changes: Inflation, National Living Wage and other pressures	£'000
Inflation and National Living Wage	235
Support Services - Inflationary increase to support costs	46
NHS Health Check Programme increase	378
Smoking and Tobacco contract changes	90
Drug and Alcohol support for under 18's - replacement of temporary reserves funding	58
	807
Savings	
Public Health Nursing contract realignment	(215)
Mental Health service remodelling	(100)
Contractual changes - Substance misuse	(277)
Renegotiation of Obesity contracts	(138)
Various demand led, contract and staffing changes	(77)
	(807)
Total	0

#### **Service Commentary**

Public Health is funded by means of a ringfenced grant to the Authority from the Department of Health and Social Care. The grant covers the whole cost of Public Health's work, with the vast majority going on the commissioning and delivery of public facing health services which the Local Authority has a statutory requirement to provide.

Service demand is starting to return to pre pandemic levels for key public health services such as health visitors and school nurses, sexual health services, for drug and alcohol services, and NHS health checks. Public Health must manage increase in demand against a backdrop of below inflation increases in the public health grant.

Central government has issued additional short-term ringfenced funding to public health to support delivery of the national drugs strategy, which is resulting in increasing numbers in treatment, and have indicated additional funding for stop smoking services. However, a lack of certainty about the long-term future of this specific funding and the likelihood of below inflation rises in the general Public Health ringfenced grant in future years, has necessitated a focus on the budget of safeguarding statutory public health services.

Key priorities for 2024/25 include utilising the additional short-term funding to continue to increase the numbers in treatment and improve outcomes within the substance misuse service. The additional smoking funding will enable us to increase support for existing smokers to quit and importantly work with partners to curb the rise in youth vaping. Public Health will continue to work with NHS partners to identify at risk individuals and enable early diagnosis and optimal treatment of key conditions such as cardiovascular disease and cancer to help reduce morbidity and excess mortality. An additional priority will be to ensure the available public health data and intelligence is utilised to inform future service development and provision across the Local Authority with a key emphasis on tackling health inequalities and improving health outcomes.

#### **Service Statistics and Other Information**

Service/ Activity	Unit of Measurement	2023/24	Change	2024/25
		<b>Estimate</b>		<b>Estimate</b>
Opiate clients in treatment	Individuals	1,263	(83)	1,180
Non-opiate only clients in treatment	Individuals	159	34	193
Alcohol only clients in treatment	Individuals	657	58	715
Alcohol & non-opiate clients in treatment	Individuals	97	164	261
Genito-urinary medicine patients treated	Individuals	37,822	1,065	38,887
Contraception services accessed	Individuals	30,521	(2,814)	27,707

## **Grants Paid to External Organisations**

2023/24		2024/25
£000 S	Service and Grant Title	£000
]	Integrated Adult Social Care Operations	
6 (	Ottery Help Scheme	6
7 /	Assist Teignbridge	7
15	Tavistock Area Support Services	15
12 E	Blackdown Support Group	12
25 /	Age Concern Barnstaple	25
32 7	The Olive Tree Association	32
97		97
1	Integrated Adult Social Care Commissioning	
28 F	Recovery Devon	28
47 [	Devon Recovery Learning	47
39 E	Bridge Collective open access MH support	0
15 (	Connections open access MH support	15
25 E	Exeter CVS First step project open access MH support	25
154		115
251	Total	212
2023/24		2024/25
£000 S	Service and Grant Title	£000
1	Public Health	
10 (	Contribution to NHSE - Mental Health Treatment Requirements	10
10		10
10	Total	10

## **Staffing Data for 2024/25**

	2023/24		2024/25		
	Adjusted Total FTEs	Changes FTEs	Revenue Funded FTEs	Externally Funded FTEs	Total FTEs
Integrated Adult Social Care Operations	1,085	(51)	897	137	1,034
Integrated Adult Social Care Commissioning	159	6	157	8	165
Integrated Adult Social care	1,244	(45)	1,054	145	1,199

Adult Commissioning includes 72 assigned to Devon Partnership Trust

Explanation of Movements	
Integrated Adult Social Care Operations	
Transfer of Emergency Duty Team to Mental Health	(14)
Reductions in staffing	(42)
Deprivation of Liberty Safeguarding	5
	(51)
Integrated Adult Social Care Commissioning	
European social fund - Cessation of scheme	(6)
Transfer of Emergency Duty Team	14
Reduction in mental health staffing	(2)
	6
Total	(45)

	2023/24	-	2024	/25	
	Adjusted	Changes	Revenue	Externally	Total
	Total	FTEs	Funded	Funded	FTEs
	FTEs		FTEs	FTEs	
Public Health	43	(1)	0	42	42
Public Health	43	(1)	0	42	42

## Explanation of Movements Public Health

Total	(1)
	(1)
Externally funded - removal of vacancies	(2)
Externally funded - minor cumulative changes	1

### **Capital Programme**

The following table details the medium term capital programme for this service and how that programme is being funded.

Total Approval (includes prior years)	Project	2024/25	2025/26	2026/27	2027/28	2028/29
£'000		£'000	£'000	£'000	£'000	£'000
	Integrated Adult Social Care					
	Adult Care Operations and Health					
N/A	Care Teams Accommodation & Equipment	50	50	50	50	-
N/A	Disabled Facilities Grant	8,965	8,965	8,965	8,965	8,965
N/A	Works for ACO&H Provider Services	50	50	50	50	50
	Adult Care Operations and Health Total	9,065	9,065	9,065	9,065	9,015
	Integrated Adult Social Care Total	9,065	9,065	9,065	9,065	9,015
	Financed by:					
	External Funding - Grants	9,065	9,065	9,065	9,065	9,015
-	Total	9,065	9,065	9,065	9,065	9,015

<sup>\*</sup> Total Scheme Approvals have been included for individual projects only, not for programmes.

This table does not show expenditure on capital projects currently programmed in financial year 2023/24 which may be deferred to 2024/25 or future years.

### **Capital - Risk Assessment**

Risks to the capital programme and mitigations are set out below, using the following Risk Matrix

	6	12	18	24	30	
LIKELIHOOD	5	10	15	20	25	
Ĕ	4	8	12	16	20	
.KE	3	6	9	12	15	
_	2	4	6	8	10	
	IMPACT					

"	WIFACT		
Risk Title:	Inherent Score	Current (Mitigated) Score	Mitigations
Capital Scheme costs are higher	Impact: 4	Impact: 2	Early engagement of expert
than estimated	Likelihood: 5	Likelihood: 4	advice and qualified professionals.
	20 – High	8 – Low	Works which may be susceptible
Risk Description			to seasonal variations are
Due to:	Due to:		programmed during less volatile
<ul> <li>Inaccurate or estimates.</li> </ul>	overly optimistic	original	<ul> <li>seasons wherever possible.</li> <li>Projects and the economic</li> </ul>
-	events causing in or outside of our o		climate monitored on a regular basis, and contingency built into major schemes to lessen the

Economic factors such as inflation and interest rates.

as additional supply chain, resource and

- Default event by either party resulting in litigation.
- Agreed changes to original scheme scope.
- Scheme costs may increase, resulting in:
  - Unexpected gap to be financed

transportation costs.

- Default fines
- Reduction in funds available to other schemes
- Increased internal borrowing or requirement to externally borrow.

- basis, and contingency built into major schemes to lessen the overall impact.
  Litigation is unlikely as legal
- Litigation is unlikely as legal team are engaged early to draft contracts with default terms clearly communicated and understood.
- Project boards set up for Major Schemes to try to identify synergies early.
- Capital Programme may be slowed, paused or schemes halted to mitigate financial impact.

Risk Title:	Inherent Score	Current (Mitigated) Score	Mitigations
External funding resources are not	Impact: 3	Impact: 2	The level of internal borrowing
received	Likelihood 4	Likelihood: 3	required to finance the capital programme is monitored, and in
	12 – Medium	6 – Low	accordance with borrowing limits.
Risk Description  Due to:			<ul> <li>The availability of cash resources to support internal borrowing is monitored.</li> </ul>
<ul> <li>Expectations around future funding based on prior year funding and current economic climate.</li> </ul>			<ul> <li>Capital programme is reprioritised. Capital projects reengineered, paused, or</li> </ul>
	I agreements frond other bodies.	m central	deferred.
<ul> <li>Changes to central government priority/policy determining where funds are directed or the</li> </ul>			<ul> <li>External funding balances are monitored monthly, including capital receipts.</li> </ul>
<ul><li>funds available to bid for.</li><li>The expected levels of funding may not be</li></ul>			<ul> <li>Triggers are monitored for S106 and CIL payments.</li> </ul>
achieved, resulting in a shortfall for the delivery of planned works or schemes.			<ul> <li>Bi-monthly monitoring of the capital programme by the Capital Programme Group.</li> </ul>
			<ul> <li>Regular monitoring by Director of Finance and Public Value.</li> </ul>
Risk Title:	Inherent Score	Current (Mitigated) Score	Mitigations
Capital Programme is not	Impact: 3	Impact: 3	Development of a Medium Term
delivered as	Likelihood 6	Likelihood: 4	Capital Programme (MTCP) that can realistically be delivered to
planned	18 – High	12 – Medium	the time scales agreed.
Risk Description			Mitigate delays by bringing
Delays and longer-term delivery dates, particularly for Major Schemes with multiple funding and partners,			forward the planned start dates of future projects in the MTCP.
due to:			The Capital Programme Group
	achieve planning environmental fac	g consent, public ctors.	provides challenge and oversight and supports the Capital Programme delivery.
<ul> <li>Availability of it</li> </ul>	resource / specia	Regular monitoring by Director of	

### • Design reengineering.

- Contractual variations.
- Seasonal variations.

- Regular monitoring by Director of Finance and Public Value.
- Projects are monitored at a service level and board level.

Risk Title:	Inherent Score	Current (Mitigated) Score	Mitigations
Capital Receipts arising later or	Impact: 4	Impact: 3	Alterna
lower than	Likelihood 4	Likelihood: 4	examp borrov
forecast	16 – High	12 – Medium	• Canita

#### **Risk Description**

Forecast capital receipts are estimated by officers and advisors based on local market conditions. Receipts may be lower than expected or not realised, including due to:

- Sale not taking place.
- Limited supply of assets for sale.
- Market conditions and economic climate.
- Lasting economic impact of COVID-19 and the cost-of-living crisis.

Resulting in a need to reprioritise schemes.

- Alternative funding sources, for example internal or external borrowing may be sought.
- Capital schemes may be deferred if receipts are generated later than forecast or for a reduced sum.
- Proceeds from the sale of assets are closely monitored.
- Alternative measures included in the SEND Safety Valve discussions with Government.

Risk Title: Risk of government	Inherent Score	Current (Mitigated) Score
funding to other	Impact: 3	Impact: 2
geographical areas	Likelihood 4	Likelihood: 4
	12 – Medium	8 – Low

#### **Risk Description**

Central government priority or policy determines where funds are directed or funds available to bid for may result in a reduction in funding for the South West or less opportunity overall to bid for funding.

- Projects and the economic climate monitored on a regular basis.
- Contingency built into major schemes to lessen the overall impact.

**Mitigations** 

- The level of internal borrowing required to finance the capital programme is monitored, and in accordance with borrowing limits.
- External funding balances are monitored monthly, including capital receipts.
- Triggers are monitored for S106 and CIL payments.
- Monitoring of the capital programme by the Programme Group.
- Regular monitoring by Director of Finance and Public Value.
- Monitoring by individual project and programme groups.

Risk Title:	Inherent Score	Current (Mitigated) Score	Mitigations
Capital Project aborted due to external forces  Risk Description Should funding be rebe preferred, a capitaresults in costs to data A project may also be change in legislation requiring an alternative solution is	Impact: 3 Likelihood 4 12 – Medium  Evoked or an alteral project may be te becoming reverse aborted as a refor the service, for the service, for each of the service aborted as a reformation of the service aborted as a reformation of the service, for the service and	Impact: 2 Likelihood: 3 6 – Low  rnative solution aborted which enue in nature. esult of a or example	<ul> <li>Effort is made to ensure that a project is not aborted.</li> <li>Alternatives will be investigated to ensure service needs are met by meeting capital objectives, whilst minimising a risk that abortive capital costs impact the revenue budget.</li> <li>If it is not possible to avoid aborting the project, the normal revenue mitigations of in year savings and use of earmarked reserves and balances, may be used.</li> <li>Process reengineering or pausing a project whilst alternative funding sources are identified are possible mitigations allowable under the Local Government Code of Practice.</li> </ul>
			<ul> <li>Monitoring by Capital Programme Group.</li> </ul>
			<ul> <li>Regular monitoring by Director of Finance and Public Value.</li> </ul>
			<ul> <li>Monitoring by individual project and programme groups.</li> </ul>

## **Integrated Adult Social Care - Risk Assessment**

Service	Budget 2024/25	Risk and Impact	Mitigation
	£'000		
Section 1: Ris	sks to market	sufficiency - costs and workforce	
Market sufficiency	296,361	The Authority has a statutory duty under section 5 of the Care Act 2014 to ensure the sufficiency of social care markets in Devon.  Specialist dementia care provision in the independent sector and residential care for adults of working age with complex behaviours is underdeveloped, posing a challenge to commissioners to develop a specialism of a	Commissioners will work closely with key providers to shape the market, where possible, to accord to longer term commissioning strategies, and the requirements for future care. This includes working in partnership with NHS Devon and DPT to secure the support that care providers need in order to meet complex needs, including dementia.
		market which is already under pressure overall.  The discharge to assess model has also had an impact on the care home market, particularly nursing care. There has been an increase in care home placements which is placing an increased pressure on the care home budgets and other costs across the wider health and care system	People are supported to leave home with a package of care (where appropriate) via the discharge to assess model, these fundamental shifts require the authority to recommission how these services are purchased to ensure market viability and a sustainable workforce.
		Changes to the immigration rules due in April 2024 pose a significant risk to the sufficiency of all sectors of the care market, particularly the home care sector. In addition, current cost of living challenge, the national living wage increase and low wages in this sector, plus high housing costs locally and increases in the national	Strengthening of the process for financial support requests from providers to manage demand aid intervention decisions.  Focussed work with providers facing the most difficulties to improve their approach, including encouraging cross industry working through support of provider collaboratives.

		living wage and inflation are impacting on the overall market sustainability.	Use of improved Better Care Fund, government grants, and NHS system funding has focused on increasing capacity, reducing wait times and targeting provider costs to support with workforce and other cost pressures.  Part of the Devon Alliance for International Recruitment, supporting providers in securing workforce capacity (care workers and nurses) from overseas. Other workforce support has been targeted via the Proud to Care offer and strategic commissioning resource to support the local work force challenges
Demand for packages of care (across all service types)	296,361	Demand for the number and intensity of packages of care can be volatile Learning Disability services (including autism) have seen significant growth in activity over recent years and continues to be under pressure going forward. We also anticipate an increase in adults with a learning disability by 26% across all market sectors, residential care, community care and direct payments for the same period. Devon provides more care to people with a disability than comparator areas.  Devon has an above average elderly population when compared nationally, which is forecasted to continue increasing. Dementia prevalence in Devon is expected to rise, projecting estimate an increase of 36% between 2020 and 2030.  If our assumptions and forecasts of demand are incorrect the financial risk will vary because the average unit cost	The 2024/25 budget has been planned based on the most recent volume data available at the time of preparation, with estimates made for anticipated growth in demand for services next year, and the effects of planned savings strategies.  The core principle is to promote independence of individuals wherever possible by supporting people to live well in their own homes and to prevent reliance on ongoing care by earlier intervention and reablement, including reassessing the proportion of care spent on short term recovery services to target resources most effectively.  We have made significant progress in our programme of care plan reviews, embedding our vision to ensure that the care we are commissioning and providing is maximising

		per package varies significantly. For example, the unit cost per year for an older person's personal care package is c. £15,000 but the average unit cost for a disability residential placement is £73,000 per year.  There is an increase in the use of 1 to 1 care hours to support people both in community services and care home settings. This has led to an increase in costs of older persons mental health placements as well as working age adults. This is a risk on the budget but also this practice model and the available commissioning options may not be best meeting people's needs as 1 to 1 care can be restrictive and not support people to be independent.	people's independence. We have developed our IASC values and we are supporting staff to deliver these within their work, and to have the right conversations with the people we work alongside.
Unit cost pressure (across all service types)	296,361	The unit cost for packages of care and placements is generally continuing to increase and can be volatile. Cost of living increases, fuel, energy, goods and services, labour, impacted by the greater increase in the national living wage, and inflationary costs are contributing to pressure within our provider market and supply chains.  Parts of Devon are at full employment and the care sector is competing for labour with other industry sectors. Inflation effect has been estimated based on CPI averaging around 3% for 2024/25. With the current volatility of inflation indicators, particularly utilities, there is a high risk that inflationary forces in the care markets are greater than the budget allows.	The budget is based on actual unit costs as at the time of budget preparation and is inflated for forecast prices changes.  Detailed unit costs are monitored monthly by managers. There is an escalation process in place for approval of high cost packages.  We continue to review the way we commission and contract for services to ensure efficiency and effectiveness of delivery, in 2024/25 there will be a focus on supported living, community based services and complex care home placements.  Lobbying of central government to provide for sustainable funding for social care as part of delivery of the government's promise to 'fix the crisis in social care'.  The NLW increase for April 2024 has already been announced by government at £1.02p. The effect of

			this increase has been modelled and is taken into consideration in setting the budget.
Social care workforce	46,963 (gross of contributions for externally funded staffing)	This relates to the Authority's internal social care workforce, and the far larger care workforce employed by our commissioned providers in Devon.  Internally, recruitment to roles which require professional qualifications is challenging. This is common across health and care professions both nationally and in the southwest (for social work, OT, AMHP and team manager roles). In some instances, pay and conditions in the Authority do not compare well with competitors.  Investment in workforce capacity and skill mix is insufficient to meet the (changing) nature and intensity of demand. Most particularly complex work in areas of autism, disability, Mental Capacity, LPS, dementia and transitions. There is a significant risk that failure to plan for substantive capacity will destabilise delivery of functions.  Externally, commissioned providers face recruitment and retention challenges in respect of care workers. Changes to the immigration rules due in April 2024 pose a significant risk to the sufficiency of all sectors of the care market, particularly the home care sector. There is also a specific challenge in the recruitment of nurses affecting the nursing home sector.  External workforce issues risk impacting on unit costs and market sufficiency as supply and costs are interlinked.	Success in recent years has relied upon direct support for qualifications and recruiting and supporting newly qualified professional staff. This requires forward planning, sustained investment, and action to meet requirements at least three years ahead.  Workforce growth in recent years has been driven by short term investment and targeted (invest to save) initiatives.  The Authority is part of the Devon Recruitment Alliance to support providers in securing workforce capacity (care workers and nurses) from overseas.  We have been active and successful in national awards that provide a platform for us to celebrate and promote adult social care in Devon, and the Authority as an employer  Ongoing monitoring of government's legislative programme, along with raising issues nationally via the LGA, ADASS and other networks.

		eliness of assessment and support	Operational plans will positions to be developed
Savings Strategies	29,411	The key challenge for the service in 2024/25 will be delivery of £29.4 million of savings which are necessary to balance the budget. These savings will require operational and commissioning changes to be made.	Operational plans will continue to be developed, and legal advice and challenge sought before final decisions on implementation are taken.  Our ability and capacity to work increasingly in a
		As we reiterate and refocus our promoting independence approach through our refreshed Vision, and Strategies, more people will be supported and enabled to need less or no commissioned care, replaced by VCSE and other support in their communities.	strengths-based way with people and communities is key to our success in building resilience. The pace of our work, and therefore the trajectory of progress will be modelled, planned, and monitored. However residual risk remains relating
		A vibrant, sufficient and connected VCSE will be key to this approach replaced with other types of support as the impact of these reductions has been estimated in the service statistics (within the detailed service budget pages) but the eventual numbers of reductions by the end of 2023/24 will vary depending on how quickly changes can be made.	to operational and management capacity to formulate and deliver detailed plans at the scale and pace required whilst continuing to respond to BAU pressures e.g., in our hospital system, or in our markets.  Discussions with NHS colleagues to explore any opportunity to work together to mitigate our
		Risk of loss of full year effect due to consultation requirements delaying implementation	pressures.
		Internal redesign work and the Authority's overall budget position is impacting on our workforce retention.	
Children transitioning to Adults	141,139	This year, we expect around 73 young people to require ongoing support as adults. Required levels of support vary enormously making financial planning difficult.  In recent years there has been a trend of increasing volumes of very high-cost children's care packages and thus a risk that demand and cost from transitions into adult services outstrips the budget available.	Strong links with children's and education services continue.  We continue to transform the ASC Transitions Service. It will focus on young people's aspirations, helping them to reach their goals and a focus on housing and employment. We will work with local markets to develop new and innovative ways to support young people to be independent.

Mental Health	21,818	Aspects of the population's mental health resulting from the effects of the pandemic have yet to fully emerge. Acute service demand has increased, which current service struggle to support, and suicide rates are thought to have risen but further data is expected.	We continue to work with partners across the health and care system to understand local prevalence of mental health, learning disability and autism, and to assess future service requirements across the statutory and voluntary sector.
		The Transforming Care Partnerships programme results in individuals, who are currently in NHS funded hospital placements around the country transferring back to a Devon care setting where there is likely to be a requirement for adult social care support.	Adult social care managers are engaged in the Learning Disability and Autism Partnership, with Integrated Care Board and Authority colleagues. The work includes repatriations of people back to Devon in a sensitive and planned way.
		Promoting independence means a shift from the use of residential care for working age adults, to alternative provision. There is a risk that placements made back into Devon will be at a higher cost, or a greater responsibility for funding will fall to social care budgets, or both. These care packages are often at a higher unit price.	
Autism demand and repatriations	7,473	Autism diagnosis rates and demand for care services has increased sharply in recent years with increasing prevalence evident nationally, regionally and locally. Individuals with autism overlaid with learning disabilities and/or other psychological issues can show complex and risky behaviours necessitating packages of high	There is currently an autism team within the service, which manages planning and assigning the most appropriate packages of care to people with highest risk levels and ensuring that the impacts of new cases are phased in a controlled manner over the course of the year.
		intensity. We are continuing to see increasing prevalence, particularly in younger adults.	The NHS continues to commission a service response from DPT to support the management of people with autism and complex behaviours, thereby support their community offer.
			Discussions regarding the overall NHS commissioned response to people displaying these complex needs will be required in 24/25.

Legislative change	360,746	ASC reform continues to be uncertain. Charging reform has been delayed for two years and there remains uncertainty in the Governments approach to the Cost of Care exercise and the introduction of Liberty Protection Safeguards.  The assurance (regulation) of ASC Care Act duties will commence in April 2023, but the delivery of the new programme is still unclear, but we will need to be ready in April.  There is also a risk within the assurance programme that improvement action requiring investment will be needed.	Sector guidance will be carefully reviewed, and we will work with our partners across the health and social care system to prepare for assurance.  Monitoring of the new government's legislative programme and working with our partners in national bodies such as the LGA and the Association of Directors of Adult Social Services to lobby government and ensure effective consultation.  We will work with our partner authorities in the region to operate safe, comparable services.
Deprivation of Liberty Safeguards	296,361	The service operates a DOLS waiting list. The risk relates to claims if a deprivation is shown to have been unlawful. Further, the recovery of debts to the Authority can be impacted if a deprivation order remains outstanding.	Further investment into the DOLS service in 24/25. Current triage processes remain in place to reduce the risks.
Section 3: Part	nership arran	gements	
NHS Contributions to Social Care (including Better Care Fund)	Total BCF pooled budget is currently expected to be in the	The Authority entered a pooled budget arrangement in 2015/16 with NHS Commissioners described nationally as the Better Care Fund (BCF). This mandatory pooled arrangement now includes £46.66 million of direct support to the Authority's social care budgets. The BCF deployment in 24/25 will require review.	An executive officer group comprising senior executives for each organisation, with detailed governance and specialist support in overseeing the application of the BCF and will review the 24/25 s75 agreement.  All partners are committed to working together to
	region of £127 million	Given the increasing budget pressures the risk is that existing investments in joint budgets will not continue and we gradually step back from joint arrangements for system benefits and invest increasingly in ASC in isolation and less strategically across the system. This	deal with similar challenges faced by each organisation and continue integrated services.  Strong professional relationships between the health and social care sectors have been developed over the past years and our

		may be an approach that could be reciprocated by NHS partners who are facing similar challenges.	longstanding joint management posts in operations further consolidate this ethos.
Joint funding of complex care		A tighter application of eligibility for NHS Continuing Health Care can lead to rising demand for social care.  This risks an increase in the number of complex packages which generally have a high individual unit cost.	Joint frameworks and relationships with the ICB are well developed, including escalation and challenge where appropriate.  External review of cases by another LA to validate Devon's approach is in place.
		The financial flows from and within the Provider Collaborative needs further understanding. Financial flows affect the S117 funding.	Pooling of resources and risk are considered collectively with the NHS commissioners.  Health Liaison leads are in place to support staff's decision making.
			The current S117 was renegotiated in 23/24. Further investigation of the Provider Collaborative financial flows is needed.

#### **Abbreviations**

Abbreviations used within the budget for all Scrutiny Reports:

ADASS

Association of Directors of Adult Social Services

AMHP Approved Mental Health Professional AONB Area of Outstanding Nature Beauty

ASW RAA Adopt South West Regional Adoption Agency

BACS Bankers automated clearing services (electronic processing of financial transactions)

BCF Better Care Fund - formerly known as the Integration Transformation Fund, a national

arrangement to pool existing NHS and Local Government funding starting in April

2015.

BDUK Broadband delivery UK

Blk Block

CCLA Churches, Charities and Local Authorities

CFR Capital Financing Requirement
CIL Community Infastructure Levy

CIPFA The Chartered Institue of Public Finance & Accountancy

CO Carbon Monoxide C of E Church of England

CPG Capital Programme Group
CQC Care Quality Commission
CVS Council of Voluntary Services
CYP Children and Young People
DAF Devon Assessment Framework

DAP Devon Audit Partnership

DC District Council

DCC Devon County Council
DDA Disability Discrimination Act

DEFRA Department for Environmental Food & Rural Affairs

DFC Devolved Formula Capital
DfE Department for Education
DFG Disabled Facilities Grant
DfT Department for Transport

DLUHC Department for Levelling Up, Housing and Communities formally known as Ministry of

Housing, Communities and Local Government

DoLS Deprivation of Liberty Safeguards
DPLS Devon Personalised Learning Service

DPT Devon Partnership NHS Trust
DSG Dedicated Schools Grant
DYS Devon Youth Services
EFA Education Funding Agency
EH4MH Early Help 4 Mental Health
EHCP Education & Health Care Plans

ERDF European Regional Development Fund

ESPL Exeter Science Park Ltd

EU European Union

FF&E Fixtures, Fittings & Equipment

FTE Full Time Equivalent

HIF Housing Infrastructure Fund
HIV Human Immunodeficiency Virus
HMRC Her Majesty's Revenue & Customs

HNB High Needs Budget HR Human Resources

HRMS Human Resources Management System

iBCF Improved Better Care Fund - Additional grant funding to supplement the Better Care

Fund

ICB Integrated Care Board

ICT Information & Communications Technology

IID Investing in Devon funds

ILACS Inspection of Local Authority Children's Services

INTERREG European Territorial Cooperation

IVC In Vessel Composting LAG Local Action Group

LEP Local Enterprise Partnership
LGA Local Government Association
LEVI Local Electric Vehicle Infrastructure

LMC Local Medical Committee
LPS Liberty Protection Safeguards

LTP Local Transport Plan

MH Mental Health

MHCLG Ministry of Housing, Communities and Local Government is now called Department

for Levelling Up, Housing and Communities

MRP Minimum Revenue Provision
MTCP Medium Term Capital Programme
MTFP Medium Term Financial Plan
MUGA Multi Use Games Area

MUMIS Major Unforeseen Maintenance Indemnity Scheme

NDLR North Devon Link Road

NEWDCCG Northern, Eastern and Western Devon Clinical Commissioning Group

NFF National Funding Formula NHS National Health Service

NHSE National Health Service England

NLW National Living Wage

NPIF National Productivity Investment Fund

NPV Net Present Value
OP&D Older People & Disability
OSP On Street Parking Account
OCCUPATIONAL Therapiet

OT Occupational Therapist
PFI Private Finance Initiative

PH Public Health

PHN Public Health Nursing

PPE Personal Protective Equipment
PSPB Priority School Building Project
PTE Part Time Equivalent (15 hours)
PWLB Public Works Loans Board

R&R Ring and Ride

REACH Reducing Exploitation and Absence from Care or Home ROVICs Rehabilitation Officers for Visually Impaired Children services

RD&E Royal Devon & Exeter Hospital

RPA Rural Payments Agency RSG Revenue Support Grant

S106 Funding from developers resulting from planning obligations authorised by section

106 of the Town and Country Planning Act 1990

SCF Southern Construction Framework

SCOMIS Schools Management Information Service SEND Special Education Needs and Disability

SGO Special Guardianship Order SPF Shared Prosperity Fund SRO Senior Responsible Officer SR21 Spending Review 2021

STP Sustainable Transformation Programme

TBC To be confirmed

TCS Transport Coordination Services

TIDE Atlantic Network for Developing Historical Maritime Tourism

TUPE Transfer of Undertakings (Protection of Employment)

UASC Unaccompanied Asylum Seeking Children

UK United Kingdom

VELP Vehicle Equipment Loan Pool

VfM Value for Money

WEG Water Environment Grant