

SOCIAL CARE: FROM CRISIS TO CATASTROPHE

**Cambridge Fairness Review
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by David Plank

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Social Care: From Crisis to Catastrophe

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SOCIAL CARE: FROM CRISIS TO CATASTROPHE

Government real terms cuts of 37 per cent from funding for local authorities have forced Cambridgeshire County Council to make very large "savings" on social care services that vulnerable people desperately need but cannot afford. This report shows the devastating effects of the cumulative savings the council has had to put in place - rising over the next three years to £125 million a year - to its children, family and adult social care services. Our initial Fairness Review, published earlier this year, concluded that social care in Cambridge and Cambridgeshire was in crisis. My research now demonstrates that the crisis has become a catastrophe to which no end is in sight.

It is a catastrophe taking place across the whole country as well as in Cambridgeshire. It is the hidden side of the government's austerity regime that reduces the capacity of local authorities to protect people in need. Together with the parallel cuts in the welfare system, it contributes greatly to the rise in poverty, homelessness and distress which scar our society. Just when social care budgets should be raised, they are being decimated and the institutional structure of care in the community is being damaged.

It is difficult perhaps for many people to understand what these "savings" actually mean for the people they affect - and the customary official language of officer reports to councillors from which this report is drawn, does not lift the veil other than for those in the know. Therefore, this report starts where it should, with a plain statement of what the savings actually mean for those they affect - the children, young people, older and disabled adults, families and carers who meet the tight "eligibility criteria" and the strict means test for getting social care.

Social care for older people with critical or substantial needs is being severely rationed; fewer are receiving care and their "care packages" are being reduced. Huge burdens are falling on their often old and frail carers. Distressed children and young people in care are more at risk of being isolated and vulnerable to abuse. The ability of people with learning difficulties to lead a normal life is drastically reduced. Overall, the savings lead to greater and damaging isolation of vulnerable fellow citizens by the society around them.

The report goes on to spell out how we got here - and where we will be going next, given the government's continuing withdrawal of essential funding of local authorities to reduce the national budget deficit.

The human cost of the savings

In plain language this is the effect of some of the savings made in the last two years, summarising the detailed account given in the first two annexes to this report. For a full understanding of the savings it is important to read these annexes. Annex Three explains in full the two

categories of eligibility criteria for the provision of social care, "critical" and "substantial". Annex Four, in defining social care, underlines how vital it is for many vulnerable people in our society.

Older people with critical or substantial care needs

The savings mean: having their incontinence pads changed less frequently; less help and/or less frequent help with their personal toileting, washing and bathing; less assistance to go to the toilet, making distressing incontinence more likely; more reliance for these essential activities by often bedridden or housebound people on frequently frail and stressed carers with greater risk of breakdown (we are often talking here of a very frail 90 year old being looked after by a frail 85 year old spouse or brother/sister); loss of self-esteem which is known to be related to increased illness and earlier death; greater likelihood of abuse of the older person by a carer pushed beyond breaking point, or of the carer by an older person with severe dementia; more frequent changes of paid home carer and less time per visit with associated distress and isolation. Many of the people concerned have senile dementia, Alzheimer's Disease, Parkinson's Disease, clinical depression or severe confusion as well as being physically frail or infirm. Disturbed sleep patterns require help at any time of the night or day; carers are often exhausted and their health is adversely affected; all are likely to be, and to feel "imprisoned" within the four walls.

Adults with mental ill-health and critical or substantial care needs

The savings mean: Less ability to get a much-needed place in residential care, leading to delayed admission and associated deterioration and distress; less home care support; reduced day, supported accommodation and advocacy services with associated deterioration of their condition which might otherwise have been prevented; and increased burdens on stressed and sometimes frail carers with greater risk of breakdown. We are talking here about people who, by definition, are disabled by their mental ill health, who suffer often severe distress or anxiety as a result of their illness, who are likely to be a great source of worry, anxiety and exhaustion to their families and carers, who require substantial help with their daily lives and, hopefully, to recover - and, having recovered to a degree, sometimes require significant support to re-establish a way of living and to continue doing so. The effect of the savings on these people is made worse by significant reductions in NHS adult mental health spending over recent years.

Adults with learning difficulties with critical or substantial care needs

The savings mean: provision of crisis care only in most instances and withdrawal of care where it would have been continued in the past; less help at home including for people with multiple disabilities; reduced ability to live independently due to less support with their personal care such as toileting, washing and bathing and essential routines such as

shopping; less opportunity for them to live a normal life and to go out because there is no-one suitable available to accompany and help them - and/or not being able to pay for transport from a reduced personal budget - more "imprisonment" within the four walls; more frustration in daily life due to less support and diversion; more challenging behaviour for carers and others to deal with, including occasional violence; less opportunity for some to go out to work (local authority supported employment schemes are also being cut); increased burdens on stressed and sometimes frail carers with greater risk of breakdown. These are people with normal needs and wishes - as are their often lifetime carers who pay a huge price for their devotion in terms of lost opportunity, income and health. The savings mean a cut in their ability to be people - cared for and carer.

Adults with physical or sensory disabilities and critical or substantial care needs

The savings mean: Less ability to live independently; less opportunity to live a normal life and to go out - more isolation and loneliness - more "imprisonment" within the four walls and less life satisfaction; less opportunity for some to go out to work and/or to use their talents in other ways; more demands on stressed carers and the risk of breakdown in carer support, due to ill health and no longer being able to cope with, for example, heavy lifting, changing clothing or assisting with washing and bathing. More being cut off from the world around them for both cared for and carers. We are talking here about people with a wide range of conditions: from degenerative disease such as Huntington's Chorea or Multiple Sclerosis; to severe effects of Thalidomide; to severe paralysis and double incontinence as a result of industrial or other accidents, to lifetime blindness and deafness with physical disability, to macular degeneration in adulthood, to severe disability arising from a middle-life stroke. We are also talking about severely disabled young adults emerging from the more supported environment of the school or college into a very cold adult world with little opportunity of supported employment or gainful activity, despite an innate ability and desire.

Children and young people taken into the Council's care

The savings mean: greater risk of vulnerability to grooming, exploitation or abuse; greater risk of future mental health issues, homelessness and prison. Less independent contact, monitoring, personal support & advocacy due to pressures on social workers who are supposed to be there for them - this is for youngsters who often experience isolation, feelings of loss of brothers and sisters, being on their own whatever their "placement", as well as the usual turmoils of childhood and adolescence plus low self-esteem and the felt stigma of being "in care". The children and young people are less likely to be placed in specialist residential or fostering facilities able to address serious personal issues arising from past abuse or neglect, including difficulty in trusting any adult or craving affection inappropriately, and withdrawn, aggressive or very challenging/violent behaviour. And this is for children and young people towards whom the state, through the County Council, has parental responsibility.

The pressures on the social workers are increased by a vacancy rate of 23.5 full time equivalent social worker posts in Children's Social Care - within an overall 15 per cent social worker vacancy rate in Children, Families & Adults Service (CFA) in June 2015: together with a significant level of sickness absence due to stress, indicating a service under considerable pressure.

The effect of the savings on children and young people in care is made worse by large reductions in NHS child and adolescent mental health spending over recent years.

Children, young people and their families

The savings mean: less social work and other support to help children, young people and their families in difficulty and at risk of deterioration or breakdown, with increased risk of problems further down the road such as reception into care, domestic violence or abuse. Less support to encourage the use of free child care for three and four year olds with attendant development risks for some children and perpetuation of educational disadvantage. The lower take up amongst parents on lower incomes, including the so called "white working class", and lower educational achievement, particularly amongst boys, is of increasing concern. Further, there is a complete cessation of dedicated youth work with disaffected young people not in touch with mainstream services, with greater likelihood of going off the rails into the criminal justice system, homelessness or substance abuse; and reduced support for young people who are not in education, employment or training and who need support to find employment - an acute concern in the context of a still high youth unemployment rate.

Children with disabilities in need of care

The savings mean: reduced support to families with disabled children who are under great pressure due to the needs of the child or young person and the strain they place on even the strongest parental relationships; reduction in ability to provide much needed respite; greater risk of breakdown in families. Many of these children have severe physical disabilities, often multiple and/or with significant cardiovascular or other health problems, including distressing degenerative conditions. The children often have disturbed sleep patterns - with great emotional and physical demands on parents who almost always show huge commitment towards their loved child. In circumstances where a child inevitably becomes the centre of attention, sometimes consumingly so, with possible issues for siblings - and for parents at risk of getting cut off from themselves, each other and others by the demands made on them, most of all by themselves - there is a need for outside caring support for parents and their child if he/she is to develop to their full potential and have a satisfying life. These savings make this less possible and their situation worse.

The institutional consequences of the savings

The savings made in the last two years have led to introduction across the board of *tighter gatekeeping and rationing mechanisms* within the County Council's Children, Families and Adults Service (CFA). Proportionately fewer people are defined as "eligible" for services or personal budgets because they are assessed to have critical or substantial care needs; those that are so assessed, get less service and a less good quality service or a smaller budget - and one which is much more likely to be reduced or withdrawn before it would have been previously. This is driven in part only by the stated desire to improve practice. The main driver is the financial imperative to meet growing eligible demand within much reduced budgets. In common with all social care authorities, the County Council must in law meet eligible need regardless of cost. Yet it is also obliged in law not to go into the red. Social care was a heavily "gate-kept" service well before the cash limits came into full force in the 2014/15 budget. We can now see that the very large savings required as a result of reductions in government funding mean even tighter gatekeeping and rationing with all their human consequences.

There is also the *robbing Paul & Peter to pay Peter & Paul* syndrome. The new statutory duties imposed by Parliament and increases in demand from eligible people, due to the rapidly growing numbers of older and younger people, have to be funded by savings within a reduced cash budget. For instance, implementation of the new duty to meet the needs of carers costing £3.2 million a year in Cambridgeshire, is being funded by service cuts elsewhere which adversely affect those they care for and carers themselves (implementation of the Care Act 2014). The end result is less cash to meet continuously growing eligible need.

Within the savings made by the CFA Service are some improvements in practice and sharpening up of services to use money to better effect. This is commendable and as it should be. But there is no getting away from the fact that *the overall effect of the savings on vulnerable people and their carers is adverse and severely so*. As will be seen in what follows, the savings required are very large and no service could make them without harming the people whose needs they are intended to meet. The examples listed in Annexes One and Two, on which the above summary relies, provide eloquent testimony to this. And this is only for the last two years. Even larger savings are yet to be made over the next four years. Before we get there, the future must be set in the context of events to date so that we understand why the social care crisis reported in the Cambridge Fairness Review has now become a catastrophe to which no end is in sight.

How did we get here?

Why are savings with effects this severe taking place in Children, Families & Adults social care services - of all services?!

The Fairness Review published earlier this year reported that due to large and continuing reductions in government funding, Cambridgeshire County

Council had been forced to impose cash limits on all its services from the 2014/15 budget onwards. These are absolute cash limits within which must be met not only the overall cash reduction required, but also inflation, demographic change and demand, additional statutory responsibilities imposed by Parliament and other pressures. At that time the County Council estimated that to meet its cash limit and the other pressures, it would have to make total savings of £149 million a year by 2018/19 - starting with savings in 2014/15 of £37.4 million a year, in addition to the savings of £138 million a year already made since 2010.

According to the National Audit Office, the government reduced its funding to local government in England by 37 per cent in real terms from 2010/11 to 2015/16. This amounted to a 25 per cent fall in local authorities' total income when Council Tax receipts were taken into account. This is why the savings are having to be made - and will go on being made due to the further large cuts in government funding still to come.

The Fairness Review noted that while the County Council, like other local authorities, had sought to protect social care services, this was no longer possible due to the severity of the government's funding reductions. As a result, an absolute cash limit was set for the Children, Families and Adults Service (CFA), starting with the 2014/15 budget, which imposed a cash reduction of £25.4 million a year by 2018/19, i.e., a cash cut of 7 per cent from the 2013/14 budget. In real terms this is much greater with, for example, inflation over that period officially estimated at 11 per cent and growth in the number of people aged 85 or more across the county projected at 49 per cent between 2011 and 2021 (26 per cent for Cambridge). To meet the cash limit and cater for these other pressures CFA had to make savings of £32.5 million in 2014/15. These are "recurrent" savings; they recur each year in at least the same amount and savings to be made in future years are additional to them and are also recurrent. Any savings which are not achieved have to be replaced by others.

The savings figure for the Children, Families and Adults Service (CFA) is large in part because its budget forms a large proportion of the County Council's total budget; 67 per cent of the Council's gross revised budget for 2013/14. Increases in demand due to population change are also particularly significant for CFA services. (The "Dedicated Schools Budget", which is a nationally determined and funded budget over which local authorities have no control, is outside the County Council's cash limit and savings.)

The Fairness Review noted that even before imposition of the 2014/15 cash limit, social care services in Cambridgeshire were under pressure due to previous reductions in government funding. According to official statistics, they had experienced reductions in adult social care and in some discretionary children & young people's social care services. For instance, fewer older people receive care services assisting them to continue living at home, including those having their care needs assessed and those in receipt of personal budgets; day care had reduced significantly and meals on wheels ceased altogether.

This is in the context where it has long been difficult for any adult to qualify for publicly funded social care due to tight nationally set

eligibility criteria and a stringent means test. For example, the criteria state that "If you are not, or will not, be able to carry out *most* personal care or domestic routines", you are eligible [my emphasis]. This means that if you can carry out the majority of these essential routines, but not others, you do not meet the substantial needs criterion, which is the lower of the two categories of need (see Annex Three for the current and revised criteria).

Consequently, you do not get publicly funded social care no matter what your means - you must continue to depend on often frail carers, neighbours or relatives, build up large costs or go without until you can no longer cope at all. If you meet the needs criteria but have more savings than the stringent means test allows, you do not get publicly funded care until you are poor enough to do so.

Access to social care for children and young people is also tightly controlled. Other than young people involved with the criminal justice system, the legislation limits access to children "in need". This means children: who without the provision of a service would be unlikely to achieve a "reasonable standard of health or development", or "significant impairment" of that standard would be likely; or who are disabled, i.e. substantially and permanently handicapped by a physical or mental condition. The legislation also obliges local authorities to "have regard to" the means of the child concerned and each of his/her parents before giving any assistance. As will be seen, social care for both adults and children was heavily "gate-kept" well before the cash limits were imposed.

The Fairness Review also reported that significant increases in social care budgets for children and adults are required to keep services at the same level per person in need due to continuing increases in the number of older people, particularly those aged 80 or more, whose individual needs are much greater, and in the numbers of disabled children and adults due to greater birth survival and longevity. This is illustrated in the table that follows.

Population projections for Cambridge & Cambridgeshire 2011 to 2021

	Total	0-14	15-24	25-64	65-74	75-84	85+
<u>Cambridge:</u> 2011	123,900	16,800	28,300	64,100	6,900	5,000	2,700
2021	149,900	22,300	32,800	77,200	8,600	5,600	3,400
(% change)	+ 21.0	+ 32.7	+ 15.9	+ 20.4	+ 24.6	+12.0	+ 25.9
<u>Cambridge-</u> <u>shire:</u> 2011	621,300	105,400	83,700	331,800	53,100	33,300	13,900
2021	713,800	124,200	84,600	370,600	69,500	44,300	20,700
(% change)	+ 14.9	+ 17.8	+ 1.1	+ 11.7	+ 30.9	+33.0	+ 48.9

Source: Cambridgeshire County Council, Research & Statistics, Population Projections, 2012.

The age groups which particularly affect demand for social care - those aged 0-14 and 75 or more - are increasing rapidly in Cambridge and Cambridgeshire; individual need is much greater and much more complex among people aged 80 or more, and particularly so among people aged 85 or over. In other circumstances additional resources would have to be allocated to meet these significant increases in demand. But this is not possible as reductions in government funding do not allow it. Instead provision has to be made within a reduced cash budget eroded by inflation. The savings required to do this and meet other pressures, such as additional statutory responsibilities, are way beyond what can be met from improved ways of working - and cuts in services result.

The social care services are, therefore, subject to a "double whammy" - rapidly rising demand and rapidly reducing resources - or a "triple whammy" when new statutory duties, particularly those towards carers under the Care Act 2014, are added.

It was in this context that the official in charge of social care warned councillors when the cash limit was decided that they now had *"to consider what previously might have been considered unthinkable"* [my emphasis].

The Fairness Review report concluded that:

"These changes - past, present and prospective - are increasing inequality as well as reducing well-being, by diminishing the ability of people who are poor, on low incomes or with few personal resources to get the social care services they desperately need but cannot afford."

In other words, there was a crisis in social care in Cambridge and Cambridgeshire.

From crisis to catastrophe

What has happened since then? In short, the "unthinkable" has come to pass. The crisis in social care has become a catastrophe.

Services for frail and vulnerable people and their carers fundamental to our ability to call ourselves a civilised society have been cut and are continuing to be cut. This is harming people who cannot fend for themselves. It is not just and it is very difficult to see how it can be justified. Large cuts in the government's funding of local authorities to reduce the national budget deficit are harming the vulnerable children, young people, adults and older people who rely on the social care services for a minimally decent life.

2014/15

Two months after the cash limit had been set the County Council decided its 2014/15 budget for the CFA Service. It required £32.5 million savings in 2014/15 - £24.5 million in adult services and £8 million in services for children & families. This left a total net cash budget for the year of

£251.8 million compared with the 2013/14 net budget of £278.5 million (net of fees, charges and ring-fenced grants). The savings were required to meet:

- The Council's absolute cash limit - £10 million
- Inflation - £7.5 million
- Demography & Demand - £8.9 million
- Pressures - £6.5 million
- Investments - plus £500,000.

These figures illustrate the crucial point that the savings necessary to meet the cash limit are much greater than the overall cash saving to be achieved.

The savings cover eleven pages in the Council report. The officer in charge of the CFA Service wrote in his report:

"As in previous years, the approach to financial planning has been to find ways to deliver savings whilst minimising the impact on the quantity or quality of services that the Directorates provide. However, as discussed with the Committee in September [when the cash limit was set], the scale of savings required and the more fixed nature of some of the larger budgets within the directorates means that options that will reduce the services and support that the public receives from the County Council are being proposed" [my explanation and emphasis].

Translated from the customarily restrained language used by a senior official, this means that many of the savings adopted by the County Council are service cuts.

All of the 2014/15 savings are "recurrent", that is, they recur in future years at the same cash level and many of them with considerably greater recurrent effects. EXAMPLES are given in Annex One together with descriptions taken from officer reports to councillors and, separately, my comments. Full understanding of the "savings" is aided by close reading of the Annex.

2015/16

The CFA budget for 2015/16 was decided a year later, requiring savings of £25.2 million in 2015/16 on top of the £32.5 million savings the previous year and their recurrent effects - £15.7 million in adult services and £9.5 million in children & families' services - out of a total net revised opening CFA budget of £248 million. The savings were required to meet:

- The Council's absolute cash limit - £6.4 million
- Net inflation - £5.5 million (adults - £3.2 million)
- Demography & demand - £9 million (adults - £7.1 million)
- Pressures - £4.9 million
- Investments + £600,000.
- [The above includes £3.2m "additional funding" needed to implement the new Care Act, i.e., funded by savings.]

This programme was part of the County Council's need to make total savings of £32.1 million a year to meet its cash limit. CFA's net budget for

2015/16 is £241.7 million, compared with £251.8 million in 2014/15 and £278.5 million in 2013/14.

The CFA "savings" cover *nine pages* in the Council report - in which the officer in charge emphasises that: "Delivering the level of savings required to balance the budget becomes increasingly difficult each year."

The high level of officer concern is further underlined throughout the covering report in statements such as:

All services:

"It is important to emphasise that there are many risks within these savings proposed in terms of the impact they will have (on service users) and they are all high risk in terms of our ability to deliver them because of the demand led nature of services"[my clarification].

Adult Social Care, Older People and Mental Health Services:

"As described throughout this report, this approach ("management of triggers of demand") is high risk and will have a considerable impact on those who use services."

[Comment: This approach seeks to defer/delay the point at which eligible needs are met. This is a high risk approach for service users and carers; it is primarily finance not needs driven.]

Older People's Services (Savings on Nursing care Placements, Residential care Placements and Home Care hours):

"These savings will be very challenging to deliver."

[Comment: Similar statements are made on other savings.]

Adult Care Services:

"The impact on service users is potentially significant as it amounts to a reduction in the cost of the care packages they receive."

[Comment: The "reduction in the cost" referred to is additional to the £1.3 million recurrent effect of a 2014/15 budget saving which "reset the financial calculator for personal budgets (for people with learning disabilities) to give a lower financial allocation." The calculator is used to decide personal budgets for adults assessed care needs to keep them within the cut cash budget. It is a statutory duty to meet the assessed needs of eligible people; they will be met less well.]

Children & Young People's Services:

"The most significant challenge in developing plans to deliver the sizeable savings required ... is that the demand for services from people who are eligible ... continue at a level that exceeds the available budget ... we are seeing an increased child population and acuity of need creating demographic pressure. Services at all tiers are experiencing high levels of demand with caseloads increasing, including a slow but noticeable increase in Looked After Children and an increase in children with statements of Special

Educational Need. We are also seeking to identify savings that are over and above the £27.15m that has already been achieved by Children & Young people's Services over the previous three financial years."

[Comment: This is in the same report that proposed recurrent savings of £2 million a year in the budget for children and young people in care in 2015/16, with an additional £1 million in 2016/17 (out of a total budget of £18 million). In total the 2013/14 to 2015/16 budget savings in this service amount to £8.55 million a year by 2016/17. According to official statistics, the number of children looked after in care at 31 March 2014 was 500, compared with 470 a year earlier, a figure which had remained fairly stable since 2010.

EXAMPLES of the 2015/16 savings are given in Annex Two together with descriptions taken from officer reports to councillors and, separately, my comments. Full understanding of the savings is aided by close reading of the Annex.

Annex Two also gives summaries of the total savings in 2014/14 and 2015/16 affecting particular groups of people: people with learning disabilities - under Saving 2G; people with physical disabilities, sensory needs and mental health needs - also under Saving 2G; older people - under saving 2H; and looked after children (children and young people in care) - under 2K. These show the massive scale of the savings that have been made.

No end in sight - 2016/17 to 2019/20

The County Council's Business Plan spells out the further "savings" that will have to be made given the continuing reduction of government funding through the virtual removal of the Revenue Support Grant by 2018/19. These savings are:

Savings required	2016/17 (£000)	2017/18 (£000)	2018/19 (£000)	2019/20 (£000)
Children, Families & Adults	-25,666	-19,288	-16,066	-7,173
<i>(of which - savings yet to be identified)</i>	<i>(-13,752)</i>	<i>(-10,992)</i>	<i>(-15,666)</i>	<i>(-6,773)</i>
The Council	-34,203	-24,824	-20,806	-9,718

Remember that each year's savings figure is recurrent in future years and that the savings shown in each future year are additional and also recurrent.

This is shown in the following table including the first two years following the setting of the Council's cash limit in 2013:

Savings required: cumulative per annum	2014/15 (£000)	2015/16 (£000)	2016/17 (£000)	2017/18 (£000)	2018/19 (£000)	2019/20 (£000)
CFA Services						
Total	-32,500	-57,738	-83,304	-102,592	-118,658	-125,831
(of which - yet to be identified)	-	-	(-13,752)	(-24,744)	(-40,410)	(-47,183)
The Council	-37,400	-69,510	-103,713	-128,537	-149,343	-159,061

This is on top of the savings of £138 million a year made by the County Council in the budgets from 2010/11 to 2013/14 in response to reductions in government funding.

The huge cumulative size of the savings is due to the loss of government funding that requires an *absolute cash cut* in the Council's budget. Not only does the actual amount of cash spent have to be reduced, but all other pressures have to be met within the reduced cash amount. As already explained, for the County Council's services and particularly CFA services, these other pressures - inflation, the demand from growing numbers of elderly people and children and additional responsibilities - are large. In other circumstances, to keep services at the same level per eligible person there would have to be significant cash increases in the budget. Exactly the opposite is happening. Hence the "triple whammy" referred to above.

And CFA services have a large number of crucial statutory duties which they must carry out for people who have critical or substantial care needs - or for whom the County Council has safeguarding or parental responsibility. It is not a question of simply stopping doing things and having the discretion or opportunity to do so.

As will be seen from the above tables, *CFA has more savings in total yet to be made than it has already made: £68.2 million a year to be made from 2016/17 to 2019/20 on top of the £57.7 million a year already made in 2014/15 and 2015/16.* Making the risky assumption that the 2015/16 committed savings are fully achieved, it still has further to go again than it has gone to date. The officer in charge of CFA's report to the Council makes very clear that this assumption is high risk and may not be delivered, in which case the CFA Service would be expected to find replacement savings.

As will also be seen, *a large proportion of the CFA future savings are as yet unidentified: £47.2 million out of the total further savings of £68.2 million a year to be made from 2016/17 to 2019/20.* This is not surprising given the sheer scale and severity of the savings to date, the even greater peril for service users arising from the large cuts yet to come and the Council's statutory duty to meet the care needs of eligible adults, or for whom it has a safeguarding or parental duty.

Such cuts cannot be achieved without huge damage to the most vulnerable members of our society. This is a catastrophe happening in our midst in Cambridge and elsewhere in Cambridgeshire.

It's happening everywhere

The damage in Cambridgeshire is also happening to vulnerable adults and children up and down the country - from Cambridge to Coventry to Carlisle.

With characteristic prescience, the National Audit Office anticipated the growing catastrophe and alerted the government. In response to a report on the Department of Communities and Local Government concerning local authorities in England, (NAO, *Financial sustainability of local authorities 2014*, 19 November 2014), the Comptroller and Auditor General concluded:

"Local authorities have worked hard to manage reductions in government funding at a time of austerity. At the same time, there is evidence of some service reductions. The Department really needs to be better informed about the situation on the ground among local authorities across England, in a much more active way, in order to head off serious problems before they happen. It should look for evidence of financial stress in local authorities to assure itself that they are able to deliver the services for which they are responsible. It should be clear about the knock-on effect of the various funding decisions taken by departments in Whitehall."

The NAO report found:

- Increasing concern amongst local auditors about the future financial sustainability of some local authorities and their capacity to make further savings. This was particularly the case with single tier and county councils [i.e., social care authorities] given the scale of the savings they had already made;
- The Department did not have an adequate means of measuring the "scale of the financial challenge facing local authorities over time";
- The Department expected local authorities "to manage future funding reductions by transforming the way they deliver services but has limited understanding of the size and timing of resultant savings"; and
- "None of the submissions" the Department obtained from relevant spending departments to inform its comment to HM Treasury on a proposed 10% reduction in the main component of government funding to local authorities in 2015/16, "assessed the capacity of different types of authority to manage further reductions", "Service areas such as . . . youth services . . . were not covered." [The proposed 10% reduction was made].

In short, in making crucial funding decisions affecting local government, the government was not well enough informed, did not know what the effects of its previous decisions had been, and did not know what the effects of its future decisions would be. The government made uninformed assumptions about local government's ability to make savings through so-called "service

transformation", and was not sufficiently in touch with the reality of local government to assess the risks of different decisions for the people they affected and for the very financial sustainability of local authorities. Only the careless could be on the receiving end of such an excoriating indictment. The careful could not.

Experience since then indicates that the situation has not improved. The further £20 billion of "consolidation" to be achieved in the current "stringent Spending Review" to be announced by the government in the autumn will make things far worse because local government will continue to be outside the many protected areas of government spending - further extended in the summer budget to include the previously unprotected area of defence.

The government's decision to defer implementation of the "lifetime care costs cap" to 2020 will not add one penny to its funding of local government. It will remove temporarily a significant additional demand on their rapidly reducing resources. The effects of successive large cuts in government funding of local authorities are real. No amount of "service transformation" will offset their scale. Their hurtful and damaging effects have been and are being inflicted on those least able to cope - vulnerable older people and adults, children, young people and families.

The NAO report makes abundantly clear that what is happening in Cambridgeshire to adults who have critical or substantial social care needs and children and young people in need, is also happening in all other areas of the country. The catastrophe for these people and their carers is, as I state above, the hidden half of the public spending reductions in successive government budgets.

Tucked away in "departmental spending", the annual local government financial settlement receives no attention whatsoever from most of the media and little attention from the political class. Yet the savage reductions in government funding it contains are depriving the most vulnerable members of our society of the social care stuff of life - the personal care and support which is essential to a minimally decent life.

Many of the same people are also harmed by the harsh welfare "reforms" which have been and are being inflicted on them, for example: the bedroom tax; the benefit sanctions regime; the swingeing reduction in the maximum benefit entitlement (known as the benefit cap) which will force some people to move as they will no longer be able to pay the rent; the end of automatic entitlement to Housing Benefit for out of work 18 - 21 year olds;; the freezing for four more years of working age benefits; limiting tax credit to two children for new births; reducing income thresholds in tax credits; and a major cut in the Employment and Support Allowance paid to many sick or disabled people. It is clear that *they* and their children and carers are in it on their own - and that, collectively, we are *not* all in it together. The mantra of making work pay, rarely convincing to those guided by the evidence not demonising mythology, is never more cruelly applied than to those who have lost their much prized job as the council can no longer afford the personal support essential to its continued successful performance (see the instance of Richard from Coventry in

"Cutting Employment Support for Learning Disabled People is a False Economy", Guardian, 5 May 2015).

This harms us all. If we do not stick together when times are hard but allow the continuing effects of the global financial crash to inflict most harm on the weak and vulnerable, all of us are diminished. As a society we are not taking the responsibility we have for all our fellow citizens. We are working apart, not together, and our mutual strength as a community of solidarity and respect continues to disappear into the past when individualism, materialism and the residual state were not as prominent as they are now.

This silent catastrophe is occurring in our midst here and now. We need to wake up to it. Cuts in social care are not like potholes in the road, obvious to everyone. They harm people's lives behind the four walls, hidden from public view. It is understandable that the public may not know what is going on unless it hits them or someone dear to them personally. But there is no such excuse for government.

This report tries to redress the balance by bringing out some of the real hurt and harm which is happening as a result of huge cuts in the government's funding of local government. It is hoped that anyone who has the ability to make a difference will begin to take an informed interest. The injustice occurring in our midst demands that people of good will stand up for those who cannot stand up for themselves.

Recommendation

To assist in this perhaps fond hope, it is recommended that the County Council commissions and publishes an independent assessment of the real effects on people of the savings its Children, Families and Adults Service is being required to make to keep the Council within its government determined spending limit; and that these effects are monitored each year and a report published in plain language to inform public debate as well as the County Council's own deliberations.

The real responsibility, of course, rests with the government. It has the opportunity this autumn to start righting the wrong that is being done to the most vulnerable people in our midst when it decides what money to make available to desperately hard pressed local authorities. This is a matter of political choice not economic inevitability.

Annex One

EXAMPLES of savings made in the 2014/15 Children, Families & Adults budget

Examples taken from an eleven page list totalling £32.5m a year				
Saving	2014/15 £000	2015/16 £000	2016/17 £000	2017/18 £000
A. Older People & Adult Mental Health Services - Management of Nursing Care Placements, Residential Care Placements & Home Care Hours	- 6,667	-6,533	-6,333	-4,592
<p><i>Description</i> (in the Council report): “. . . to manage the demand for services within the net available resources . . . annual budget is based upon a 10% reduction in demand and measures will be put in place which aim to ensure that the service remains within these limits. . . . This is likely to be challenging to deliver” [my emphasis].</p> <p>The “measures” include: “strengthening financial accountability”, “more robust assessment processes”, “robust reviews of care packages”, “review of the Cambridgeshire model of social care and service offering to older people”, including “functions that should or can be met by other organizations”, “strengthening commissioning arrangements”, “prevention of escalation of need and more proactive use of the voluntary sector to support carers”, “making better use of extra care housing”.</p> <p><i>Comment:</i> A “10% reduction in demand” when demand due to demographic change is growing, is a tall order. It is counter to the increased use of nursing and residential homes for older people and adults with mental health problems up to 2013/14 - while numbers supported to use community services necessary to prevent admissions reduced. The community services are not being increased to support the reduced use of residential and nursing homes. Indeed home care hours are also being reduced by this saving. And other CFA savings reduce support to the adult mental health and homelessness voluntary sector by £1 million a year by 2016/17 - which is not likely to be well placed, therefore, to take on the extra work. (See Saving 2F in Annex Two). Other organizations are also hard pressed and transfer of responsibility to them is unlikely. Extra care housing (higher level of support than warden assisted sheltered</p>				

housing) is no substitute for the vast majority of older people requiring admission to nursing home care or residential care; and it relies on home care to provide the extra support when those hours are being reduced. In practice, even more reliance on stressed and often frail carers seems inevitable if these large savings are to be achieved. In other words, *this is a significant cut in service*, particularly when demand due to demographic change is growing every year not reducing.

Total savings of £24.1 million a year are to be made in these budgets by 2017/18. If CFA is to continue to meet its statutory duties towards people with care needs and their carers, achievement of these savings seems improbable.

It is of concern that at the end of 2014/15 the Older People Service had underspent by £2.4 million ". . . in line with the target OPS set itself in anticipation of a reduced demography allocation in future years." It is also of concern that the Adult Mental Health Service underspent by £750,000 in the same year "due to management of demand". It seems that as a result of this and other savings, service allocation to older people and adults with mental health problems and their carers is being rationed severely. At the same time the report to councillors on the 2015/16 budget identified £3 million of "pressures" on the Older People Service that could not be absorbed within the budget ". . . without significant impact on the delivery of those services." These pressures are being funded by further savings in CFA's budget!

See also the other examples of savings which adversely affect older people: 2C, 2Ei & 2H in Annex Two. See also comment on the total of these savings under 2H in Annex Two; they amount to up to £30.2 million a year by 2017/18.

As noted, another example of a saving which adversely affects adults with mental health needs is 2F in Annex Two.

<p>B. Adults with Learning Disabilities - Learning Disability Partnership Services: reset the financial calculator for personal budgets to give a lower financial allocation (£000)</p>	<p>-1,300</p>	<p>-</p>	<p>-</p>	<p>-</p>
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Description: ". . . reducing expenditure to meet substantial and critical needs. This will impact on the support and activities that people with learning disabilities will be able to include in their support plans . . . People are likely to find the changes difficult.

This could lead to increased isolation, boredom and frustration for some people, leading to increases in challenging behaviour" [my emphasis].

Comment: The Learning Disability Partnership is a pooled budget with the Health Service of which the County Council contributes 80 per cent - "Approximately 94% of the pool is spent on direct care delivery."

This is a straight cut in service to people with learning disabilities with critical and substantial care needs - and their carers. It means: less help with their personal care such as toileting and washing; less help with other essential domestic routines such as cleaning and shopping; and less ability due to lack of support to get out from the four walls which confine their lives - to do their own shopping or enjoy a social activity. It means less support to and respite for often frail and stressed carers. It means more outbursts of distressing and sometimes violent behaviour due to frustration and lack of distraction. People with learning disabilities who meet the eligibility criteria often have multiple needs, i.e., severe physical as well as learning disabilities. They are heavy for carers to lift or move. They can be very demanding and often have disturbed sleep patterns. They are also, like all of us, people with the need for occupation and activity. This cut means less ability to be human in this way - for some of the most vulnerable people in our society.

See also the many other examples of savings which adversely affect adults with learning disabilities: C & D in this Annex - and Savings 2Ai, 2B, 2Eiii & 2G in Annex Two. See also comment on the total of these savings under 2G in Annex Two; they amount to up to £29.6 million a year by 2017/18.

C. Adults with Learning Disabilities - Learning Disability Partnership contracts: negotiation or retender to reduce costs (£000)	-600	-	-	-
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Description: "Risks include that providers have been squeezed over a number of years and for many there are no savings to be made."

Comment: In other words, contracted service providers are being forced to reduce service quality to allow this saving to be made. Their major cost is staffing - and wages are low. Therefore, the only way to reduce costs even more is to reduce staff numbers. Service to people with learning disabilities with critical and substantial needs will be further reduced. Care costs are being driven down further by cutting staff and continuing to pay them poorly - to the detriment of the daily lives of people with learning disabilities.

<p>D. <i>Adults with Disabilities - Management of packages for people with learning difficulties & people with physical disabilities & sensory needs (£000)</i></p>	-122	-6,241	-5,967	-4,219
<p><i>Description:</i> "Demographic investment (funded by the savings) will be used in the most efficient way to respond to new demand and assist the Service in managing the services within the budget available . . . A model of progression will be developed aimed at developing and enhancing skills and reducing the level of service required to meet people's needs . . . With people receiving services for up to 45 years, the need to reduce the financial allocation in the personal budget, but continue to meet assessed eligible needs <i>offers a very significant challenge</i>" [my emphasis].</p> <p><i>Comment:</i> It is very difficult to conceive how developing and enhancing people's skills, desirable thought it is, will realize the very large year on year annual savings anticipated. The sums are massive, amounting to £16.5 million a year by 2017/18. Assisting people with disabilities to be as independent as possible is good, humane practice. While improvement in practice should always be aimed for, further developing people's independence skills is most unlikely to achieve savings on this scale while still meeting the basic needs of people with critical and substantial care needs. It seems more likely that this is primarily a financially driven reduction in basic service which will cut the level of personal care to vulnerable people and their hard pressed carers.</p> <p>This saving deals with new demand and is the counterpart of Saving B above which relates primarily to existing demand. Therefore, the same comments apply here as to Saving B.</p> <p>Other examples of savings which adversely affect people with physical disabilities and people with sensory needs are 2Aii, 2Eii & 2G in Annex Two.</p>				
<p>E. <i>Children, Young People and Families - Looked After Children Savings (£000)</i></p>	-1,759	-1,292	-	-

Description: ". . . will be delivered through the delivery of Children's placement strategy, which is . . . whole system change to reduce the risk of children entering care, reduce the length of time children are in care and reduce the risk of children returning to care . . . the strategy also focuses on reducing the unit cost of care through market management and development of in-house provision."

Comment: The number of looked after children (i.e., in care) in Cambridgeshire is going up not down; and the preventive support and intervention services essential to achievement of the aims of the Children's Placement Strategy are being reduced. Therefore, the main, if not the only contributor to achievement of this saving is reduction in the more costly specialist residential and foster placements. These serve the needs of children and young people with the greatest emotional and other needs - due to often chaotic and dysfunctional family circumstances, including domestic violence and abuse. In-house provision is often not suitable for children with these complex needs.

This saving significantly reduces the level of support and care experienced by the most disadvantaged children and young people in our community. This is even more so when the large additional Looked After Children savings in the 2013/14 and 2015/16 budget are taken into account - in total amounting to £8.55 million a year by 2016/17. The total effect of the savings in this area is addressed under Saving 2K in Annex Two. It concludes that we are *seriously failing* our most vulnerable children and young people.

F. Youth Support Services (£000)	-110	-	-	-
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Description: "Savings will be achieved via the ending of a contract for detached youth provision *which will mean that detached provision is no longer provided*" [my emphasis].

Comment: The Youth Service has been cut in previous years and this is the end of a process leading, in this instance, to the complete cessation of detached youth work. It is - or was - a preventive service for and with young people, usually in deprived areas. This form of youth work can be highly effective, particularly with more disaffected young people not in touch with mainstream services. The cut is not consistent with or supportive to achievement of the Looked After Children savings. See also Saving K below.

G. Services to Disabled Children (£000)	-270	-102	-	-
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Description: "£50K achieved through Section 17 budget reductions (Section 17 of the Children Act 1989 requires Local Authorities to safeguard and promote the welfare of "children in need"). The remaining savings will be delivered through ending block inclusion contract and identifying alternative ways of achieving inclusive outcomes with families' use of personal budgets, as well as restructure of Community Support Service (registered domiciliary care services within Disability Social Care) that provides and procures community based services" [my explanations].

Comment: This saving is additional to a 2015/16 saving of £156,000 in "Disability Children's Services" (Saving 2J). Recurrent savings of the order £530,000 by 2015/16 in so sensitive a service area cannot be achieved without reduction of service. This is acknowledged in the officer comment on the 2015/16 saving - "*This will result in reduced service offer to some families*" [my emphasis]. Families with disabled children are under great pressure and stress. The level of disability eligible for publicly funded care is high and its demands on parents and carers are great. Relationships breakdown under the pressure. Sensitive and skilled support is essential - and it is being reduced. The nature of the "restructure" of the domiciliary care services is not made clear but involves reduced cost. The number of children and young people with disabilities is growing not reducing: reduction in support to them seems unconscionable.

H. Children's Centres (£000)	-1,250	-259	-	-
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Description: "Reduce total Children's Centres budget from £6,269K to £4,769K . . . reducing some centre opening hours . . . There will be a reduction across all staffing levels, including managers, family workers . . . There will be an increased use of volunteers . . ."

Comment: The saving of £1.5 million a year represents 24 per cent of the total budget.

Amongst other things, children's centres are an important targeted family support service aiming to prevent / reduce bigger problems down the road, e.g., for parents with underdeveloped parenting skills and their children. The skilled worker capacity essential to this is being reduced; volunteers are no replacement. This is a cut in services for children in need and their parents with the possibility of more children being taken into care than might otherwise be the case - and with an increasing number of Looked After Children in Cambridgeshire.

Centres also provide early years' education and child care. A number of other savings also affect Early Years provision for three and four year olds - see J & K below and 2015/16 Saving 2M in Annex Two.

J. Early Years (£000)	-1,163	-645	-	-
<p><i>Description:</i> "Secure savings by stopping non-statutory functions, targeting support, integrating functions and developing trading."</p> <p><i>Comment:</i> No explanation is given of the functions this saving has stopped or what areas of service are removed/reduced by targeting support. Early Years refers to the national scheme of free 15 hours a week child care places for three and four year olds; "non-statutory" means discretionary: the Council has discretion to use its statutory powers to provide support rather than having a duty to do so. These are large recurrent savings of more than £1.8 million a year in a key preventative service. See also Saving 2M in Annex Two.</p>				
K. Recommissioning of Early Help (£000)	-	-1,500	-1,848	-
<p><i>Description:</i> "The Enhanced and Preventative Services Directorate is undertaking a review and re-specification of its core purpose ... (leading) to the design of an early help model . . . likely to focus on a tightened set of outcome areas . . . there will also be further reductions in service . . ." [my emphasis].</p> <p><i>Comment:</i> The Directorate provides four main service blocks:</p> <ul style="list-style-type: none"> ➤ Locality teams based around school clusters for preventative work with children, young people and families acting as a hub for identifying and supporting young people (saving of £934,000 a year in 2015/16 budget); ➤ Children's Centres (see Saving H above) ➤ Youth Support Services (see Saving F above and previous years savings) ➤ Special Educational Needs and Inclusion support- including Educational Psychology, Sensory Services and Early Support <p>The savings are large for such sensitive services, particularly given the additional very large saving in the Children's Centres budget; see Saving H above. As the officer comment acknowledges, service reductions are involved. Problems will be picked up later if at all, and more problems will occur further down the road. Support to schools is being reduced. It is understood that there are now waits of a year or more for Special Educational Needs assessments which, if the unconfirmed accounts are correct, is entirely unacceptable for the children involved and their parents.</p>				

L. School Clothing Allowance (£000)	-141	-	-	-
<p><i>Description:</i> "Cease payments to parents of secondary age children living in low income households for the purchase of school uniform and shoes . . . This is a discretionary, not statutory service, paid by only a small number of local authorities . . . This could affect families entitled to Disability Living Allowance who also receive Employment Support Allowance . . ."</p> <p><i>Comment:</i> In the scale of these savings this may seem small beer. However, it is a direct cut in the incomes of low income households struggling with daily life and the adverse effects on their incomes of other savings such as the freezing of working age benefits, the bedroom tax, and tight benefit / housing benefit caps. School uniform and shoes for growing young people are a major cost to people on low incomes. Poor clothing for any youngster is a source of ridicule and shame - additionally so for teenagers. It is an additional pressure on parents forcing unacceptable choices between clothing, rent, heating and food. The reference to "non-statutory" is shorthand indicating that the Council has the statutory power to provide the service but is not obliged to do so.</p>				

SOURCE: Business Plan for Cambridgeshire 2014-19, which includes the Children, Families and Adults budget for 2014/15.

Annex Two

EXAMPLES of savings made in the 2015/16 Children, Families & Adults budget

Examples taken from a nine page list totalling £25.2 million a year on top of the £32.5 million a year savings made in 2014/15			
Saving	2015/16 £000	2016/17 £000	2017/18 £000
2Ai. Learning Disability Packages	- 1,388	-	-
2Aii. Physical Disability Packages	- 231	-	-
<p><i>Description</i> in the Council report (for both savings): "Absorb all demand arising from increased need of existing clients from existing resources . . . by focusing on short-term support in a crisis, stabilising situations and subsequently removing extra support . . . People might need more help because of illness, physical deterioration or a breakdown in their normal informal care arrangements (e.g. elderly parents can no longer cope). Such demand will be managed within existing resources" (my emphasis).</p> <p><i>Comment:</i> In other words, in & out crisis care only to meet the increased needs of vulnerable adults and their carers in order not to exceed much reduced resources. So that, for example, elderly parents who could no longer cope are back in the front line supporting their multiply disabled son or daughter when they are just about back on their feet - until the next time. One size fits all crisis care for people with differing needs is not good practice. By definition, only a proportion of increased needs are temporary - many are not. Even if there is some recovery following physical deterioration or aged lifetime carers no longer being able to cope, continuing support at a higher level may well be essential for some to avoid further deterioration and breakdown. The situation of people with disabilities living in the community with critical and substantial care needs is fragile and carers are often under intense pressure: the physical and mental health of disabled people does deteriorate, relationships crucial to ability to cope / have a decent life break down, and the health of carers is undermined. Risks are greater when needs increase - and the saving makes clear that the response to increased need will be both limited and short term.</p>			

2B. Review of Learning Disability Cases (£000)	- 899	-	-
<p><i>Description:</i> "Continuation of work to review all cases against the reduced allocation to ensure personal budget allocations fit with reduction to resource allocation system introduced in 2014/15 - supported by new policies relating to Transport & Activities. This could lead to increased isolation, boredom & frustration, leading to challenging behaviours. . ." [my emphasis].</p> <p><i>Comment:</i> This saving is continuation of Saving B in 2014/15, resetting the financial calculator for personal budgets (see Annex One) and is additional to it. It means that the costs allowed for services assessed as needed have been reduced so that they will be met less well. This saving results from applying the new calculator to more existing service users. So, by the end of the year all or most people with learning disabilities and care needs assessed as critical or substantial will have had their service and support reduced. The comment under Saving 2Ai applies here also.</p>			
2C. Reviews of Home Care Activity (£000)	- 750	-	-
<p><i>Description:</i> "Reduce home care activity . . . The Council will invest in capacity to review home care packages with a view to ensuring they meet needs appropriately, and introduce flexible, community-based support for independence wherever possible." (my emphasis)</p> <p><i>Comment:</i> See also part of Saving A in 2014/15, "Management of Home Care Hours".</p> <p>For "flexible, community-based support" read volunteers, neighbours and carers. In some instances responsibility for highly personal care such as toileting, washing and bathing for people with critical and substantial care needs is being transferred to informal carers. People who are up to their necks in dependency are least likely to complain about challenges to their dignity even of this very personal nature, despite the distress and loss of privacy and self-esteem they entail, for the unjustified but real fear of withdrawal of support if they do complain. The sums involved are simply too large to believe that this is not happening, despite best intentions on the part of the County Council and its hard-pressed staff.</p>			

<p>It may be recalled that the Fairness Review reported that, despite increasing need, the number of people receiving home care had gone down in 2013/14 compared with the previous year. This is likely to have continued as a result of savings such as this - and the "management" of home care hours (Saving A in Annex One).</p>			
2D. Management of new demand at point of first contact (£000)	- 500	-	-
<p><i>Description:</i> "Use support <i>from within the community</i> to meet need wherever possible in new packages. . . and more short term support for people to learn to be more independent than they are now" (my emphasis).</p> <p><i>Comment:</i> Same comments as on Savings 2A & 2C. Reducing dependency by increasing independence is good, humane social care practice; "reablement" (in the jargon) is an important ingredient in this. At the same time we are talking about people with critical or substantial care needs for whom short-term support plus volunteers, neighbours and informal carers is unlikely to be sufficient in most instances; significant, rather than limited, increases in independence may also be realistic for relatively few people. Given the overall size of this recurrent saving in "new packages", it is likely that actual reductions in service and support are occurring as a result.</p>			
2Ei. Inflation on care packages (Older People) (£000)	- 855	-	-
2Eii. Inflation on care packages in Physical Disability (£000)	- 206	-	-
2Eiii. Inflation on care packages in Learning Disability (£000)	- 630	-	-

Description:

2Ei. "Review & reduce inflation on OPMH (older people mental health) placement . . . from 2% to 1% . . . The impact of this will be that *the Council struggles to have available a suitable range of providers for home care, residential and nursing care* and that providers have to find ways to meet their costs *which impact on quality*" [my explanation and emphasis].

2Eii & iii. "Review and reduce inflation on LD / PD Placements. This is a reduction from 2% to 1% inflation." [Same wording used for both savings.]

Comment: In other words, a reduction in the quality of care received by vulnerable older people, including those with mental health problems, and by disabled adults, will occur at a time when there is heightened concern about inadequate quality throughout social and health care. Scope for cost reduction with little impact on quality of care is almost non-existent as the major cost is staffing and pay is already low, which is itself a perennial problem in recruiting and retaining staff of quality. Instead staff turnover is high, which is not surprising when many care workers can earn more working at Tesco's. Reduced costs mean reduced staffing which means less time for personal and other care. The reduction in quality will not be so great as to cause suspension of contracts, but will still be noticeable.

2F. Review of non-statutory community based support services for adult mental health (£000)	- 249	- 26	-
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Description: "Relates to contracts with voluntary & community sector organizations that provide *community based support for adults with mental health need* - early help, direct support, positive activities and community engagement opportunities. ... The Council has worked with providers to agree a feasible reduction whilst keeping services viable and effective" [my emphasis].

Comment: This saving is additional to savings in the 2014/15 budget arising from the same review: 2014/15 - £283,000; 2015/16 - £393,000; & 2016/17 -£54,000: altogether making *total savings of £1 million a year by 2016/17*. This is a very large recurrent saving for the poorly resourced voluntary and community sector to absorb. It is difficult to see how savings of this magnitude can be achieved while keeping services in this sector "viable and effective": they are not well funded and reductions in funding almost always lead to reductions in service.

Preventative support services in the community will be cut leading to more deterioration in vulnerable individuals with detriment also to their families/carers. Groups affected include the Richmond Fellowship, MIND, Street Outreach, Wintercomfort and Cambridge City Homeless People Support. Services affected include supported accommodation, day services, advocacy & counselling services.

Services generally for adults with mental health problems and their families are few and far between. They will become scarcer. This saving is not consistent with or supportive of the intended large recurrent savings on residential care for people with mental health problems - see Saving A in Annex One.

"Non-statutory" in the heading of this saving means that the Council has the statutory power to provide such services but does not have a statutory duty to do so. Preventative services for adults with mental ill-health have often been developed by the voluntary sector and local authorities have used their discretionary powers to help them do so. Because local authorities have to provide certain services, funding provided under discretionary powers is more vulnerable to cuts. Whether a power or a duty is used makes no difference to the people on the receiving end; it is their much needed support which is reduced or removed altogether.

2G. Management of packages for people with learning disabilities and people with physical disabilities and sensory needs (£000)	-	- 4,000	- 4,200
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Description: "This will be particularly challenging to achieve in future years, with relatively low turnover and the number of new service users with learning disabilities and physical disabilities requiring support running at a higher level. The implementation of Transforming Lives and application of policies to ensure the most efficient and effective use of resources will contribute to this target. However, each year it is the same people we will be working with to try to achieve reductions through supporting their progression [skills development leading to the need for less support] and working with communities to develop new opportunities. Skills development may be slow and many people will continue to require significant levels of support despite developing their skills" [my emphasis and explanation].

Comment: The officer description speaks for itself. A trace of desperation may be detectable, which would not be surprising as

this attempt to square the circle will not wash. For the people concerned, if these further large reductions are to be anywhere near achieved, the support vital to a minimally decent life for them and their carers will be cut. The equation is simple. The number of people with these disabilities and critical and substantial care needs is going up while the resources to meet those needs is going down - to ensure CFA and the County Council meet their government imposed cash limit. This is a service cut. In the context of all the other savings adversely affecting these vulnerable people, this is unconscionable.

It is correct to say that "Skills development may be slow ..." It is also essential to recognize that the scope for it is finite. Similar realism is essential when addressing aspirations to reduce demand on state services by "working with communities to develop new opportunities". We are talking about services for basic human needs here, for which greater reliance on neighbours and volunteers is no substitute. In practice, these are cuts which will create further demands on carers, where available, and going without, where they are not. No amount of service transformation can square this cruel circle.

Total savings in support to people with learning disabilities (from the examples in Annexes One & Two):

Part of this saving (2G) is in addition to Savings B, C & D (part) made in 2014/15 and to Savings 2Ai, 2B & 2Eiii made in 2015/16. All of these adversely affect people with learning disabilities.

When commenting on the 2014/15 savings, which amounted to £2 million a year, the officer in charge of CFA commented that they offered ". . . a very significant challenge" (my emphasis). But these pale into relative insignificance against the 15 times greater total savings in services for people with learning disabilities of up to £29.6 million a year by 2017/18 which all these savings require. (This total includes all of savings D in 2014/15 and 2G in 2015/16 which entail some savings for people with physical disabilities and with sensory needs. However, other savings not included in this total also adversely affect people with learning disabilities: for example, 2C & 2D.) Savings on this massive scale can only be made with very significant cuts in support to some of the most vulnerable people in our society. Their opportunity to have a reasonable life is being severely harmed - and even more burdens are being placed on struggling carers though cuts in help with basic daily care. The pressures on this service are indicated by the £500,000 overspend on Learning Disability Services in 2014/15 despite the severe gatekeeping and rationing which is taking place.

Total savings in support to adults with physical disabilities, sensory needs & mental health needs:

It is not possible to give total figures for savings affecting these groups of people as the source documents combine them with savings for other larger groups. For example, people with physical disabilities are affected by savings D in Annex One and 2Aii, 2Eii and 2G in Annex Two, which total £25.2 million per annum by 2017/18. Adults with mental health needs are affected by savings A in Annex One and 2F in Annex Two which total £25.1 million per annum by 2018/19 taking account of the 2014/15 saving which preceded saving 2F. The bulk of the larger savings - A, D & 2G - probably relate to people with learning disabilities. Even allowing for this, the total of savings affecting these groups is large and involves service cuts for vulnerable people with critical and substantial care needs. For adults with mental ill-health and critical and substantial care needs this is in the context of a low baseline of social care support before the cuts - and significant reductions in NHS funding as well. This seems particularly harsh.

2H. Demand management in Old People and Mental Health (£000)	-	- 2,400	- 2,092
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Description: "The implementation of Transforming Lives and closer working with UCP (health services provider), voluntary sector and district councils are expected to help towards delivery of savings related to effective demand management during 2016-17 and beyond. *This demand-led budget* is subject to a wide range of factors including decisions by other partner organizations, increasing levels of need and complexity among service users and seasonal changes and *these savings are likely to be very challenging to deliver*" [my emphasis].

Comment: The apparent trace of desperation in the officer comment mentioned under the previous saving (2G) is detectable here as well. Again it would not be surprising in the context of this being yet another large recurrent saving in amongst all the other savings adversely affecting support to older people and adults with mental health needs.

This saving has two key dependencies: progression through skill development leading to greater independence/less service reliance, and joint working with the cross NHS Uniting Care Partnership (UCP). The comments made on skills development and Transforming Lives under Saving 2G above apply here -and apply in buckets given the rapidly growing number of older people across the County and

the proportionately greater complexity of their individual needs. It will not wash as a realistic saving measure; it is a cut. A key purpose of UCP is to change the NHS in Cambridgeshire so that it becomes fit for purpose, in particular by reversing the decline of community services. It is intended to reduce investment in hospital care for older people in particular and invest more in community health services. If successful, this will increase health care support in the community which is beneficial for people with health care needs and who rely on social care. However, by reducing hospital admissions and stays in hospital, it may well also result in a net increase in eligible demand for social care - demand which will not be satisfied by the Better Care Fund (transferred monies from the NHS). The Fund, though welcome, is relatively small beer in the context of CFA's adult social care budget requirements; and £2.5 million a year of it has already been used as a 2015/16 CFA saving ("Application of funding from Better Care Fund"). So, this will not wash either as a realistic saving; it is a cut. There is no getting away from the blunt fact that to be met in any way satisfactorily significantly increased need requires increased not reduced resources, notwithstanding better use of resources through "service transformation".

Total savings in support to older people

(from the examples in Annexes One & Two):

This is one of a number of savings in 2014/15 and 2015/16 which adversely affect older people with critical and substantial care needs and their carers; viz. A in Annex One and 2C, 2Ei & 2H in this Annex. These savings affect other groups as well but the bulk relate to older people. Together they amount to £30.2 million a year by 2017/18. This is a very large reduction - particularly for a group whose numbers are increasing rapidly. They require significant reductions in service with all the deprivation and distress this causes for highly vulnerable older people and their often frail carers. When commenting on Saving A in Annexe One, the officer in charge of CFA said it was "likely to be challenging to deliver". Unfortunately, it is the people at the sharp end, the older people and their carers, who have to meet that challenge - when they are not able to get a desperately needed place in a home or care in their own home to maintain some semblance of a reasonable life. Instead they have to wait until the budget allows, or they never get help at all.

2J. Disability children's services (£000)	- 156	-	-
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Description: "This will result in reduced service offer for some families. With the continuing rise in numbers of children with disabilities, there is a high risk that the service will not be able to achieve these further unit cost reductions" [my emphasis].

Comment: The officer comment means that the service to some families will be cut BUT it is unlikely to secure the planned budget reduction as insufficient budget provision has been made for the increasing numbers of families with disabled children (due to more surviving birth and longer life thereafter). This saving is additional to the 2014/15 saving in this budget of - £270,000 a year with a further saving in 2015/16 of £102,000 a year (see Saving G in Annex One). The comment made there applies here as well; these savings seem unconscionable.

2K. Looked After Children Savings (children and young people in care) (£000)	- 2,000	- 1,000	-
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Description: "Reducing the total spend on placements for looked after children ... *will have an impact on all children's services*" (my emphasis). See also the CFA senior officer's comments on children's & young people's services as a whole on pages 10-11 of this report (under From crisis to catastrophe, 2015/16).

Comment: The senior officer's comments indicate a very high level of concern at the risks for children & young people and their families. This saving is additional to Saving E in Annex One; the comments made there apply here as well - even more so given the size of this further reduction.

Total savings in support to Looked After Children
(from the examples in Annexes One & Two):

Altogether the 2014/15 and 2015/16 savings amount to £6.05 million a year by 2016/17. Together with the £2.5 million saving made in this service in 2013/14, no less than *£8.55 million* a year will have been removed by 2016/17. This is a very large reduction. It is difficult to identify a precise figure with which to set it in context. However, the total net budget in 2014/15 for Looked After Children Placements, where virtually all the reductions are being made, was £15.6 million (after the 2013/14 and 2014/15 savings of £4.26 million a year were made). So, in crude terms, since 2013 the placements budget will have been cut from nearly £20 million to £11.3 million a year by 2016/17 (44 per cent). These vital budgets are experiencing very large proportionate reductions at the same time as the number of Looked After Children is going up. The already poor life chances of our most vulnerable children and young people are being damaged.

The "placements" which have been most reduced are in specialist residential homes and specialist foster homes for the children and young people with the most serious emotional and behavioural

difficulties and distress; often associated with dysfunctional, chaotic or abusive family backgrounds. These young people deserve a break. They are not getting it now.

According to official statistics, the number of Looked After Children in Cambridgeshire at 31 March 2014 was 500 compared with 470 a year earlier, a number that had remained fairly stable since 2010. In 2014/15 the Looked After Children placement budget was overspent by £1.5 million. This is a service under huge pressure - but not as much as the unfortunate young people at the sharp end of it - for them the rough end of the stick has become even rougher.

About 60 per cent of looked after children have emotional and mental health problems and the main reason for entering care is abuse or neglect (in 62 per cent of cases). There is great concern nationally at the significant proportion of looked after children who end up in custody, become homeless, or experience mental ill health or substance abuse - not assisted by the historically inadequate after care provided by local authorities, notwithstanding their statutory duties in this regard. The Prison Reform Trust has just announced an independent review of the links between care and custody given the large over-representation of looked after children in the criminal justice system. The Trust reports a recent survey of 15-18 year olds in young offender institutions which found that a third of the young men and 61 per cent of the young women said they had spent time in local authority care - despite fewer than 1 per cent of all children and young people in England being in care.

These savings also need to be placed alongside large reductions in NHS spending on child and adolescent mental health services amounting nationally to £80 million per annum over the last four years including £35 million in the last year alone.

We are seriously failing our most vulnerable children and young people. This is unconscionable in so vital an area of our public responsibility.

2L. Recommissioning of Early Help - Youth Support Services (£000)	- 369	- 463	-
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Description: "Central Youth Support Services . . . The budget will be reduced by 60%. There will be reductions in functions and . . . reduced support for more universally focused activities. There will be a more streamlined focus on performance management and quality assurance for those young people with NEET [not in education, employment or training] . . . will also be savings in this area [community facing voluntary and community sector funding] . . . [my emphasis]."

Comment: The review of Central YSS reports that there will be a "reduced and more narrow focus" on young people who are NEET which

means less activity to reduce the numbers who are NEET. The service's previous "lead for apprenticeships will remain albeit reduced ..." and the Employer Services Team, which helps to identify suitable employment opportunities for young people, "will no longer be funded" by the service. The Youth Service has been cut in previous years - e.g. by Saving F in Annex One. The Locality Teams, which provide front line preventative support to young people and their families, have also experienced major budget reductions - £934,000 a year in 2015/16.

Services meant to identify and prevent problems at an early stage are being cut severely, making associated deterioration in family situations more likely to occur which may have been prevented in the past - with an associated greater risk of children having to be taken into care.

2M. Early Years and Place Planning (£000)	- 713	-	-
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Description: ". . . stopping or reducing non-statutory functions that encourage the provision and take-up of Early Years places . . ."

Comment: Early Years places are free child care places for three and four year olds for 15 hours per week over a 38 week school year. This large saving ends or substantially reduces the County Council's initiative to encourage take-up of this high priority national scheme (which may be extended to two year olds in the future). Some parents will lose out as a result. Take-up of places is lower in low income families: encouragement of take-up is necessary to ensure that all children develop to their full potential and are not disadvantaged by differential awareness and resources between parents. The marked educational disadvantage amongst "white working class" children in particular and its contribution to reduced life chances is a growing source of concern. "Non-statutory" means discretionary rather than mandatory: the County Council has the legal power to do this but not a duty to do so.

This saving is in addition to a 2014/15 saving in "Early Years" services of £1,163,000 a year with a further effect in 2015/16 of £645,000 a year ". . . by stopping non-statutory functions, targeting support, integrating functions and developing trading" (See Saving J in Annex One).

SOURCE: Business Plan for Cambridgeshire 2015-20, which includes the Children, Families and Adults budget for 2015/16.

ANNEX THREE

The National Eligibility Criteria for Adults' Receipt of Social Care

Current criteria:

Substantial needs

- If you have, or will have, only partial choice or control over your immediate surroundings
- If you have been, or will be, abused or neglected
- If you are not, or will not, be able to carry out most personal care or domestic routines
- If you cannot, or will not, be able to maintain your involvement in many aspects of work, education or learning
- If you cannot, or will not, be able to maintain most social support systems and relationships
- If you cannot, or will not, be able to carry out most family and other social roles and responsibilities

Critical needs

- If your life is, or will be, threatened
- If you have developed, or will develop, significant health problems
- If you have, or will have, little or no choice and control over vital aspects of your immediate surroundings
- If you have been, or will be, seriously abused or neglected
- If you are not, or will not be, able to carry out vital personal care or domestic routines
- If you cannot, or will not, be able to be involved in vital work, education or learning
- If you cannot, or will not, be able to maintain vital support systems and relationships
- If you cannot, or will not, be able to carry out vital family and other social roles and responsibilities

These are the two national categories of need to which Cambridgeshire and most other social care local authorities in England work (132 out of 152 at the last count). The "Low" and "Moderate" categories of need have been dropped over the years as resources have not kept pace with increasing demand driven by population change. Gatekeeping has got significantly tighter so that people who would have been allocated service in the past no longer do so.

From April 2016

The criteria are due to change and are now enshrined in statutory regulations which are binding on local authorities whose current discretion will be removed. They are said to equate to the current critical and substantial needs criteria. Arguably, in practice they may be tighter due to the "two or more" requirement and addition of the consequential impact on the adult's well-being. This remains to be seen. Certainly they are no less stringent.

Needs which meet the eligibility criteria: adults who need care and support

- (1) An adult's needs meet the eligibility criteria if-
 - (a) the adult's needs arise from or are related to a physical or mental impairment or illness;
 - (b) as a result of the adult's needs the adult is unable to achieve two or more of the outcomes specified in paragraph (2); and
 - (c) as a consequence there is, or is likely to be, a significant impact on the adult's well-being.
- (2) The specified outcomes are-
 - (a) managing and maintaining nutrition;
 - (b) maintaining personal hygiene;
 - (c) managing toilet needs;
 - (d) being appropriately clothed;
 - (e) being able to make use of the adult's home safely;
 - (f) maintaining a habitable home environment;
 - (g) developing and maintaining family or other personal relationships;
 - (h) accessing and engaging in work, training, education or volunteering;
 - (i) making use of necessary facilities or services in the local community including public transport, and recreational facilities or services; and
 - (j) carrying out any caring responsibilities the adult has for a child.
- (3) For the purposes of this regulation an adult is to be regarded as being unable to achieve an outcome if the adult-
 - (a) is unable to achieve it without assistance;
 - (b) is able to achieve it without assistance but doing so causes the adult significant pain, distress or anxiety;

(c) is able to achieve it without assistance but doing so endangers or is likely to endanger the health or safety of the adult, or of others; or

(d) is able to achieve it without assistance but takes significantly longer than would normally be expected.

(4) Where the level of an adult's needs fluctuates, in determining whether the adult's needs meet the eligibility criteria, the local authority must take into account the adult's circumstances over such period as it considers necessary to establish accurately the adult's level of need. "

[Extract from: The Care and Support (Eligibility Criteria) Regulations 2015.]

As now, potential recipients of social care who satisfy the eligibility criteria also have to meet a strict means test. If they do not meet the test, they do not receive publicly funded care.

ANNEX FOUR

What is social care?

Adults of all ages

Imagine yourself without some or most of your basic abilities - the things which you rely on in everyday life, often unthinkingly because they are there, which go to make you a person in your own and others' eyes: imagine yourself in this situation permanently or temporarily, from birth or at a later stage of life: imagine yourself with or without ill-health as well as a disability - with full or with limited ability to think or judge for yourself, with or without a close carer, a caring relative, friend or neighbour - with a reasonable income or not¹ - resilient or worn down - with needs, wishes, fears and anxieties, hopes, abilities, a contribution to make . . .

What help would you need for a reasonable life? i.e., reasonable in your eyes?

- How would you want that help to be given?
- How would you want decisions to be made?

Answers to these questions help to define social care - a definition which for each individual varies with the hugely variable circumstances of ability, disability, life . . .

You might need help with some or a lot of the following things.

- Personal care: going to the toilet; getting in and out of bed; washing/bathing; dressing
- Maintaining life: housing; cooking, eating; drinking; heating; shopping
- Your environment: making the house easier for you to live in, get around; aids/skills to help you move around under your own steam in the house and out
- Maintaining yourself: work; benefits; budgeting; paying the rent; paying bills; management of your affairs; morale and motivation
- A social being: personal relationships - carer, family, social, sexual, difficult . . . ; keeping company, getting out and about, not getting cut off; culture, entertainment
- Personal improvement and fulfilment: developing/regaining skills to cope better, be more independent; arranging education or training
- Personal safety: protection from exploitation, abuse; when capacity is impaired permanently or temporarily, acting in your best interests; protection of your carers

¹ Local authorities responsible for social care have a duty to ensure that all adults in their area, including carers, are able to access comprehensive information and advice about the care and support services local to them. This is to help people understand how the services work, the options available to them and how they can get access to the services they want. Authorities must also help people to benefit from independent financial advice. This duty is not restricted to people who meet the eligibility criteria and the means test.

- Crises: management of critical episodes, emergencies when things go wrong
- Dealing with "the system": information, advice and advocacy in dealing with all the bodies you need to - to arrange your own care, to appeal against a decision . . .; management of your personal budget, making it last
- Your needs and wishes: assessment of what you need and want, and might be able to get; review of the assessment from time to time; including raising things you might not want but may well need
- Big decisions: making really big decisions such as where to live if your needs change a lot, recognizing and working with your feelings, perhaps of loss and pointlessness

The help you want may be: for someone to do something for you or to arrange for it to be done; to help you do it yourself or to arrange it yourself; to provide you with a personal budget for you to spend in the best way for you, and to advise and inform you in dealing with a complex system; to advocate with an agency or organization on your behalf; to help you improve a skill you need for everyday life; to suggest something you may need but do not want or do not realize that you do, e.g., how to get on better with someone important to you and see their point of view, and vice versa; how to challenge a decision you do not like or agree with - whether it concerns a service to you, your landlord's wish to evict you, whatever; to make an application for adaptations to your house to make it more suitable for you; to stop the energy company cutting you off; to help you go out and enjoy other people's company, or to go to work; anything and everything that is part and parcel of everyday life.

You might want the help to be arranged for you, to arrange it yourself, or be helped to arrange it yourself - or all of these depending on what it is.

Whether you can say it or not, you are likely to want to make the decisions yourself, certainly the decisions that are most important to you - which affect you personally - it is your life after all!

This is what social care is. It is meant to give a flavour and is not meant to be a comprehensive description of social care covering the hugely varied circumstances of adults in need. It may be provided by many agencies, but the linchpin is the local authority, and in particular the social care department.

Children and young people: In their "birth" families

Think of yourself as a parent, perhaps on your own, who

- is struggling or not coping with a young child or toddler, perhaps with another on the way, ill-prepared for parenthood,
- and who gets cross and maybe more on occasion
- has a five year old who is seen by others not to be thriving
- has an "out of control" ten year old ...
- has a disabled child, perhaps with many disabilities or a degenerative, life-limiting disease

- has a fourteen year old who disappears, sometimes for days, has extreme moods and sometimes threatens you
- has a fifteen year old who gets into trouble with the law and is in with a "bad lot" in your eyes - and who may be frightening to you
- is into drug or alcohol abuse and may be out of control, perhaps reliant on your child

Think of yourself as that child or young person.

What help would either of you need to see your way through? - even though you might not know it.

And what action does the state need to take to ensure that the welfare of you as a child or young person comes first and that you are safe and, if necessary, protected.

The fact that there are two "yourselves" here - child/young person and parent(s) - one of whom is a minor and may be at risk, leads to the second question on state action. These factors make the answers somewhat different to those for adults for whom the relationship with informal carers usually does not involve a minor, though sometimes it does of course (e.g., sons or daughters as young carers).

Depending on the circumstances, some or a lot of the following help/actions may be needed.

- Identification of families who are struggling a bit and may need help to function better; building, if possible, a trusting relationship with parent and child; assessing the situation with the family and agreeing the help that might make a difference
- Helping parents to develop their parenting and personal skills, their understanding of children and young people and what they need to flourish, the need to provide structure and boundaries alongside love and affection
- Helping parents and children to take advantage of and benefit from the available opportunities - whether a "soft play" facility, pre-school playgroups, early years places, "out of hours" school provision - or the various forms of professional help that may be available to help with possible developmental delay or behaviour issues
- Helping parents with the basics of life to support reasonable care and development for their child and themselves: income - work, benefits; household organization - cleanliness, safety . . .
- Helping the child or young person to identify / participate in activities which may help them, e.g., sports, youth facilities (if available), music; helping them to identify and cope with the pressures of modern day childhood and teenage
- Supporting children with disabilities and their parents: advising on/ arranging practical help and respite (if available); providing information and advice, aiding access to often very local assistance; supporting relationships which may be strained or close to breaking, if acceptable to those involved

- Assessing and judging risk - particularly to the child or young person who comes first - sometimes to the parent(s), e.g., if mental illness or substance abuse is an issue
- Taking action to secure the safety / best interests of the child or young person, e.g. applying to the court for an order to take someone into care, voluntary reception into care for a young person, assisting with applications for restraining orders where issues of violence or domestic abuse exist . . .

This is meant to give a flavour only of what social care is in these hugely varying circumstances. It is not in any way comprehensive, nor is it meant to be. The appropriate balance of attention between parent and child or young person varies greatly and over time. It takes place within a wider network of agency provision - education, health, housing, voluntary, benefits.

Children and young people: "In care"

Think of yourself as a child or young person without your birth parents, who may be around but are not able to bring you up now or at all; and think of what a parent does or is expected to do. Think of yourself as having been in this situation from birth, a very young age or from an older age - with brothers and sisters or not, having been treated well or not, emotionally disturbed or not, abused or not, perhaps distrustful of adults but wanting affection, as all of us do - perhaps never having had it - but maybe still having feelings for your birth parents, good, bad or both, having abilities often unrecognized, sometimes feeling frustrated or angry, etc.

What help do you need to grow up reasonably safe, secure in yourself, healthy, fit for adult life - or at least to have a chance of this?

Many or most of the following help and actions are likely to be required.

- A place to live of your choice following assessment of your needs, as well as your wishes, and informing/advising you - temporary or permanent, which is your home, is secure and supportive, which you trust and trusts you, provides the basics of a reasonable life, treats you with respect and pays regard to you as an individual of worth, helps you to develop, looks after your health, addresses your problems and issues in a responsible way/setting boundaries to what is expected and what is not, never giving up on you notwithstanding your behaviour at times, even if temporary provides a degree of permanence and continuity for you, helps you to form trusting relationships with others, stands up for you and is honest with you, helps you prepare for the future - and is capable of doing these things in sometimes very adverse circumstances
- Supports you in your present school or arranges admission to a different school that suits you, participates appropriately in your school career/ represents you with the school as needed, attends parents evenings - helps you to make the most of your education - progressing to further or higher education where this is right for you

- Ensures your protection if you are at risk and is close enough to be likely to know if you are
- Helps you to be healthy and fit, ensuring you have the full benefit of the NHS and that you are accompanied or otherwise supported in doing so
- Supports your participation in sport if you wish - and other activities, cultural or otherwise
- Helps you to learn for and about life in the round, as well as for work
- Helps you to do the things you really like or most want to do - fostering your talents and interests
- Helps you to prepare for adulthood and live independently - with all this entails, practical and emotional
- Where appropriate, working with your birth parent(s) to re-establish / maintain your relationship with them; if it is best for you, helping you to live with them again
- Keeps a watchful and caring eye on you, ensuring you do not get overlooked or lost in the system no matter what, monitoring your progress, finding out what is important to you and what you want to do
- Monitors the place where you live to make sure it is good/suitable for you, taking issues up as needed and making sure they are dealt with
- If necessary and with your agreement, changing the place where you live to one more suited to you
- Support and advice if you get into trouble - being accessible enough to know if you do; being an "appropriate person" if you are seen by the Police, arranging representation if needed
- Makes sure you are referred for specialist assessment and advice when needed
- Helps you prepare for leaving care and supporting you when you do

This is not meant to be comprehensive but to give a flavour of what social care is in the widely varying circumstances of children and young people in care (looked after children in the social care jargon). It takes place in the context of a wide range of agencies, but the linchpin is the local authority social care department.

The Cambridge Commons

We are a new organisation for progressive-minded people in and around Cambridge. We aim to be a "hub" organisation, or network, for local citizens and local members of national groups with shared interests in promoting social justice and reducing inequality. We will seek to bring them together to create a real political and social force in the area. For the moment we are a local representative body for The Equality Trust, and we hope to provide a network for Compass, the Fabians and Unlock Democracy.

We have three priorities:

- To make local people aware of the poverty that exists in and around Cambridge and to bring people together to campaign *for* the living wage; *against* the precarious low wage economy; and to *end* the punitive benefits system which is causing hunger and misery to thousands of residents.
- To campaign *for* a more equal society and *against* the rising tide of inequality here and in the country as a whole.
- To draw attention to the absurd cruelty of a housing market that prevents ordinary citizens here from buying or securely renting their own homes, unless their circumstances are so desperate that they qualify for social housing.

There is conclusive evidence on a large range of criteria - e.g., physical and mental health, standards of education, incidence of crime and violence, family stability - greater inequality has adverse effects across the whole of society. Further, inequality does substantial harm to the economy, as the OECD has demonstrated. We have and will share a positive belief in a communal response to this country's difficulties in place of the neo-liberal economic and anti-state policies that are now supreme. We stand for a public realm of common citizenship in place of divvying up public services and institutions between private owners.

We believe that fairness and a spirit of co-operation between self-confident citizens is the way forward for our society.

Membership of Cambridge Commons is free and open to all, but we would be grateful for donations so that we can do more. Check us out on our website, www.thecambridgecommons.org. If you wish to join us, you can do so via the website.