

Local Government Reorganisation: Impact on people services

Full report

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Local Government Reorganisation: Impact on people services

Newton[↗]

INTRODUCTION

This report contains the full output of both Phase 1 and 2 of analysis of the impact of LGR on people services in Cambridgeshire and Peterborough. The work has considered the impact on Adult Social Care, Children's Social Care, Education services, and Housing and Homelessness as local authorities are reorganised and responsibility of care changes across new geographical footprints within the Cambridgeshire and Peterborough.

For each proposed formation, the expected demand and/or caseload for key people services within Cambridgeshire and Peterborough has been calculated across the options proposed by the authority. This includes a view of how demand and cost of service delivery split in 2025 and how these may change over the period until 2040.

The analysis contained in this report is based on data shared with Newton from Cambridgeshire and Peterborough and from national data returns.

The core methodology used, and assumptions made to undertake this analysis are included in the appendix.

This report contains the results of Newton's analysis, based on the data that has been provided, or otherwise made available to us, and no information contained within it should be treated as a recommendation to any Council or other authority. Responsibility for all business decisions including decisions on improvement actions (and for the acts themselves) rests solely with the Council or other authority making such decision.

Purpose of this report

THIS REPORT IS DESIGNED TO PROVIDE COMPARISONS BETWEEN SCEANRIOS

This model has been developed to allow the analysis to be completed across multiple councils at pace as well as aggregate results to inform a national report. Therefore, whilst this report provides detailed analysis allowing comparisons between scenarios, it has limitations and should not be considered in isolation.

What this report is...	What this report is not...
 A way to compare different scenarios and proposed unitary authorities based on expected demand and cost figures	 A detailed financial model designed to predict exact spend or demand numbers
 A way to highlight the impact of LGR on people-based services and the key themes that are important for your local area	 A detailed staffing model that accounts for all expected roles in new unitary authorities
 A general model that can applied to multiple councils that will show directionally correct forecasts	 A recommendation on the best scenario
 Designed to allow high level aggregated insight to be used in a national report with the CCN	

This report covers the agreed scope discussed in steering groups. This does not consider all possible factors for LGR and should therefore not be treated in isolation. For example, the impact of public health, social housing or additional staffing costs from other teams, such as IT or legal teams, has not been modelled.

People Based Services

THIS REPORT IS FOCUSSED ON THE IMPACT OF LGR ON PEOPLE-BASED SERVICES



Adult Social Care

Adult Social Care is the support provided to help adults of all ages most commonly with physical disabilities, learning disabilities, frailty, mental illnesses, or who suffer from substance misuse. Local authorities have a legal duty under the Care Act 2014 to assess and meet eligible needs, provide safeguarding, and shape the local care market. The aim is to promote independence, dignity, and wellbeing, enabling people to live as safely and independently as possible in their own communities, with the people and things that matter to them most.

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In this report Adult Social Care has been split by age group and referred to Working Age Adult (18-64) and Older Adult (65+).

The report focusses on adults who are receiving long term care. These can be supported through a variety of provisions. For this analysis the report has focussed on:

- **Nursing Care:** Specialised nursing support provided in a care home.
- **Residential Care:** Support provided in a care home.
- **Supported Living:** Supporting individuals either in their own homes or shared housing.
- **Domiciliary Care:** Supporting individuals in their own home with personal care and household tasks.
- **Other:** Care that does not fall into the above categories.



Children's Social Care

Children's Social Care supports children, young people and families who need additional help to protect children and young people from harm. Its main aim is to keep families together, but when this isn't possible, the system provides an alternative home to children and young people. The Director of Children's Services and Lead Member for Children's Services in local authorities are the key points of professional and political accountability, but the relevant Acts of Parliament also place safeguarding duties on a range of organisations and individuals (including LCBs, police and education providers).

Children can be supported through a variety of measures. This report focuses on these key services:

- **Children in Care:** The council has parental responsibility of the child and must place the child in a safe setting.
- **Child Protection Plan:** Compulsory plan when a specific risk to a child is identified.
- **Child in Need Plan:** A non-statutory plan that recognises a need that a child has.
- **Early help:** Non-statutory support to families and children considered to be vulnerable and at risk.

There is a significant reform agenda underway that will impact the nature of services in Children's Social Care, with the Children's Wellbeing and Schools Bill progressing through Parliament at present.



Services For Children With SEND

Special Educational Needs and Disabilities refers to a child or young person who has a learning difficulty and/or disability that means they need special health and education support.

This report focuses on young people who are supported by an Educational Health and Care Plan (EHCP). This is a legal document outlining the educational, health, and social care needs of a child or young person with special educational needs or disabilities, aged 0 to 25. Children and young people with EHCPs can be supported in a variety of settings. For this analysis the report has focussed on:

- **Mainstream:** Children and young people supported in mainstream schools.
- **Maintained Special Schools (MSS):** Children and young people supported in local authority owned special schools.
- **Independent Non-Maintained Special Schools (INMSS):** Children and young people supported in independent non-local authority owned special schools.
- **Other:** EHCPs that do not fall into the above categories.

This report doesn't include statutory SEN support which should be provided by mainstream schools with less oversight from the LA.

Across all services for residents that need additional support there are increasing costs that are putting increased pressure on councils to deliver these services, against a backdrop of increasingly constrained finances. This report focuses on the impact LGR may have on these services.

Interpreting the report

THIS HIGHLIGHTS THE KEY TERMINOLOGY USED THROUGHOUT THIS REPORT

Scenarios

Scenarios have been provided by councils through the data returns.

- **Unitary authorities:** The new unitary authorities that have been proposed by councils for each scenario. These unitary authorities are made up of current Districts and/or Middle Super Output Areas (MSOAs).
- **Baseline:** The current boundaries of the council as well as any neighbouring unitary authorities that are included as part of any proposed scenarios.

Projections

This analysis focusses on the impact of LGR now (2025) as well as future demand (2030 and 2040).

- **2025:** 2025 refers to what would happen to demand and cost on the day that LGR takes effect. This has been done taking the data provided and projecting to 2025. This refers to the initial demand and costs expected to be distributed to each unitary authorities at this point.
- **Future demand:** Demand and cost has been projected out to 2030 and 2040 to illustrate how this may change over time. This is to show the different growth rates and highlight the sustainability of proposed unitary authorities. For detailed methodology, please see the appendix.

People-based services terminology

Where appropriate acronyms and terminology on specific slides has been called out.

- **Supported person:** This refers to someone who is currently receiving support from the council. Adult Social Care: an individual receiving long term support. Children's Social Care: Children in Care (CiC) as well as young people on a Child Protection Plan, Child in Need plan or receiving an early help intervention, for SEND this is a young person with an EHCP.
- **Prevalence:** The amount of the population that is supported by the council, represented as number per 10,000 of the relevant population (e.g. working age adults).
- **Ordinary residence:** Where current residing address (e.g. a residential care home) is different to the originating address of future demand (i.e. the supported person's initial residence prior to social care support) and demand therefore re-balances over time due to ordinary residence rules.
- **Service spend:** Total spend produced by the model for each directorate. This includes "provision spend" which refers to the total spend of delivering social care and "staffing spend" which refers to the staffing spend that is solely attributable to delivering social care.

Key Assumptions

THIS OUTLINES THE KEY ASSUMPTIONS THAT HAVE GONE INTO THIS INITIAL ANALYSIS

Key assumptions have been made to enable this analysis to be performed at scale and pace. The key caveats and assumptions have been listed below and should be considered when drawing insight from the data. For detailed methodology, please see the appendix.

Neighbouring unitary authorities:

Where neighbouring unitary authorities have been included in scenarios, but no data provided, it has been assumed that the prevalence and unit cost in each provision will match the average for the rest of Cambridgeshire and Peterborough. Therefore, if you export a neighbouring unitary authority to show very different trends this will not be captured. Please note, if data has been provided for neighbouring unitary authorities this has been included.

Data sources:

The analysis in this report has been compiled using each council's data returns along with nationally available data where appropriate.

Data caveats:

Where data has not been submitted to complete key analysis this has been highlighted in the relevant sections.

All analysis has been completed using data submissions returned by authorities and nationally available returns. If there are anomalies or inaccuracies, please contact Newton who will work with each authority to reconcile.

Changes from Version 1

THIS OUTLINES THE KEY CHANGES IN INPUT WHEN UPDATING THIS REPORT

Additional Data

The following additional or updated datasets have been provided and used in this report:

- **Population Data:** district level estimates and forecasts by year and age group
- **SEND** – forecasts to 2034 (including +/-5% forecasts)
- **CSC** – costs
- **CSC** – 2025 numbers
- **CSC** - number of early help interventions (PCC only)
- **CSC** – internal fostering capacity (PCC only)
- **CSC** – total number of CiC (PCC only)
- **ASC** - costs (CCC and PCC) and demand (CCC only)

Methodology Changes

- This report uses council provided data to model populations, rather than ONS population data.
- SEND prevalence has been modelled using council provided data and forecasts for U25 population and number of children and young people with SEND, the latter of which is only available until 2034. We have modelled a linear increase after 2034. Detail is included in the methodology section of the appendix.
- CSC prevalence now includes the 2025 value. Average prevalence is now over 21/22, 22/23, 23/24 and 24/25

Updated Formatting

Scenarios relabelled to match newest terminology.

Section 1: Executive summary and high-level overview

This section provides a high-level summary of the outputs produced as part of Newton analysis on the impact on people services as a result of LGR.

Further detail is available in the full report.

Overview: Geographies of New Unitary Authorities

THE BELOW TABLE LAYS OUT THE DISTRICTS INCLUDED IN EACH OF THE NEW UNITARY AUTHORITIES



Scenario	Proposed Unitary	Districts included
Baseline	CCC	Cambridgeshire current boundaries
	PCC	Peterborough current boundaries
Option A	UA 1 - FDC_HDC_PCC	Peterborough, Fenland, Huntingdonshire
	UA2 - CC_ECDC_SCDC	Cambridge, East Cambridgeshire, South Cambridgeshire
	UA 1 - CC_SCDC	Cambridge, South Cambridgeshire
	UA2 - ECDC_FDC_HDC_PCC	East Cambridgeshire, Fenland, Huntingdonshire, Peterborough
Option B	UA 1 - ECDC_FDC_PCC	Peterborough, East Cambridgeshire, Fenland
	UA 2 - CC_HDC_SCDC	Cambridge, Huntingdonshire, South Cambridgeshire
Option C	UA1 - FDC_PCC	Peterborough, Fenland
	UA2 - ECDC_HDC	East Cambridgeshire, Huntingdonshire
	UA3 - CC_SCDC	Cambridge, South Cambridgeshire

Executive Summary: Terminology

WE HAVE OUTLINED THE KEY INSIGHT BY SCENARIO

Newton⁴

The following slides outline how the demand and spend will split in each of the proposed unitary authorities by scenario, along with a comparison of the total cost of each scenario. We have also included the variation between each proposed unitary authority for the scenario in question and compared this to the baseline position.

The definitions of the key terminology used in these summaries is outlined below:

- **Total predicted spend per scenario:** This shows the combined spend per scenario predicted by the model for people-based services. This includes both placement costs (e.g. Residential Care beds or EHCP provision) and staffing costs for staff working directly on supporting service users, such as social workers, (where this has been provided). Staffing costs for other teams, such as IT or legal teams, are not included as part of this work. Please note that this is a general model designed to allow comparisons between proposed scenarios and is not a detailed financial forecast.
- **Spend per resident:** This the spend per resident per year where spend is total service and staffing spend (where this has been provided) and number of residents is the total population in each of the proposed unitary authorities.
- **Total demand:** This is the total demand for people-based services predicted by the model and refers to Adult Social Care (ASC): long term support, Children's Social Care (CSC): Children in Care (CiC), Child Protection Plans (CPP), Child in Need (CiN) plans or receiving an early help intervention, SEND: child or young person supported by an Education, Health and Care Plan (EHCP).
- **Demand variation:** This is the variation in the percentage of the population supported by people-based services in the unitary authorities in 2025. Where population supported by people-based services is the same as above.
- **Demand growth:** This is the growth in total number of people supported by people-based services from 2025-2040. Population supported by people-based services is defined as in spend per resident above.
- **Baseline:** The values associated with the baseline scenario, including current county council and any neighbouring unitary authorities.

Executive Summary: Scenario Comparison

The table below compares the key metrics across scenarios. Here a lighter colour indicates a lower total cost or variation. Option D – 3 UA's has the most variation across key metrics as well as the highest increase in spend. Between the three two unitary options option C see the most variation, the variation in Options A and B being similar with Option A slightly less.

Scenario	Proposed Authority	Total increase in cost to baseline 2025	Total increase in cost to baseline 2040	Variation in 2025 spend per resident (relative % difference)	Variation in 2040 spend per resident (relative % difference)	Variation in 2025 % of people supported by people services (relative % difference)	Variation in 2040 % of people supported by people services (relative % difference)
Baseline	CCC PCC	-	-	32.0%	40.0%	76.9%	78.1%
Option A	UA 1 - FDC_HDC_PCC	-£1.2m	£0.5m	26.6%	30.1%	53.5%	54.6%
	UA2 - CC_ECDC_SCDC						
Option B	UA 1 - CC_SCDC	-£1.6m	-£0.8m	28.1%	31.8%	52.1%	55.2%
	UA2 - ECDC_FDC_HDC_PCC						
Option C	UA 1 - ECDC_FDC_PCC	-£1.8m	-£1.1m	38.6%	42.9%	60.6%	62.5%
	UA 2 - CC_HDC_SCDC						
Option D - 3 UA's	UA1 - FDC_PCC	£0.6m	£3.7m	46.5%	52.3%	84.3%	86.9%
	UA2 - ECDC_HDC						
	UA3 - CC_SCDC						

Executive Summary: Conclusions

KEY INSIGHTS ACROSS THE SCENARIOS

£ TOTAL COST PER SCENARIO

Total and unit cost differ across scenarios and are caused by two key factors:

- 1. Increased leadership overheads** when disaggregating into more than two unitary authorities and hence additional senior leadership teams are required, this is only case for Option D.
- 2. Demographic differences in the districts.** The model applies a regression model based on size, medium income and IMD to scale unit costs.

Page 3

This leads to Option D having the highest total spend due to the increased staffing overheads. The difference in total cost between the two unitary authorities is small and due to the different demographics of the proposed unitary authorities.



VARIATION IN 2025

Disaggregation creates more variation in metrics, so the three unitary option has the highest variation across the board.

In the three two unitary options, in all three scenarios we have Fenland and Peterborough in the same unitary authority. These districts tend to have the highest prevalence across services, meaning the **unitary authorities containing Peterborough and Fenland will have higher demand for people-based services, and higher spend per resident.**

Variation in demand between unitary authorities is high across the board, but will be less where the other districts grouped with Peterborough and Fenland have lower prevalence rates, hence why options A and B have relatively lower variation than option C.

Similar patterns occur for spend per resident, but **there is a lower variation in current unit costs paid for placements which translates through to the variation in unitary authorities.** Option A has the lowest variation, and option D the highest.



FUTURE GROWTH

The variation in 2040 is due to the difference in population growth rates as well as the increasing SEND prevalence.

Population growth:

- For Adult Social Care and Children's Social Care the future projections assume prevalence remains constant and this is applied to population projections.
- South Cambridgeshire is seeing the most growth in population projections** so the unitary authority that contains it has a higher growth rate.
- Peterborough is seeing a decreasing U18 population**, leading to some new unitary authorities seeing a flat demand in Children's Social Care.

SEND growth:

- SEND forecasts have used the local SEND projections and we have also looked at a range of +/- 5%.
- Peterborough is seeing the most growth in SEND projections**, leading to the unitary authority that contains it having the higher growth rate.

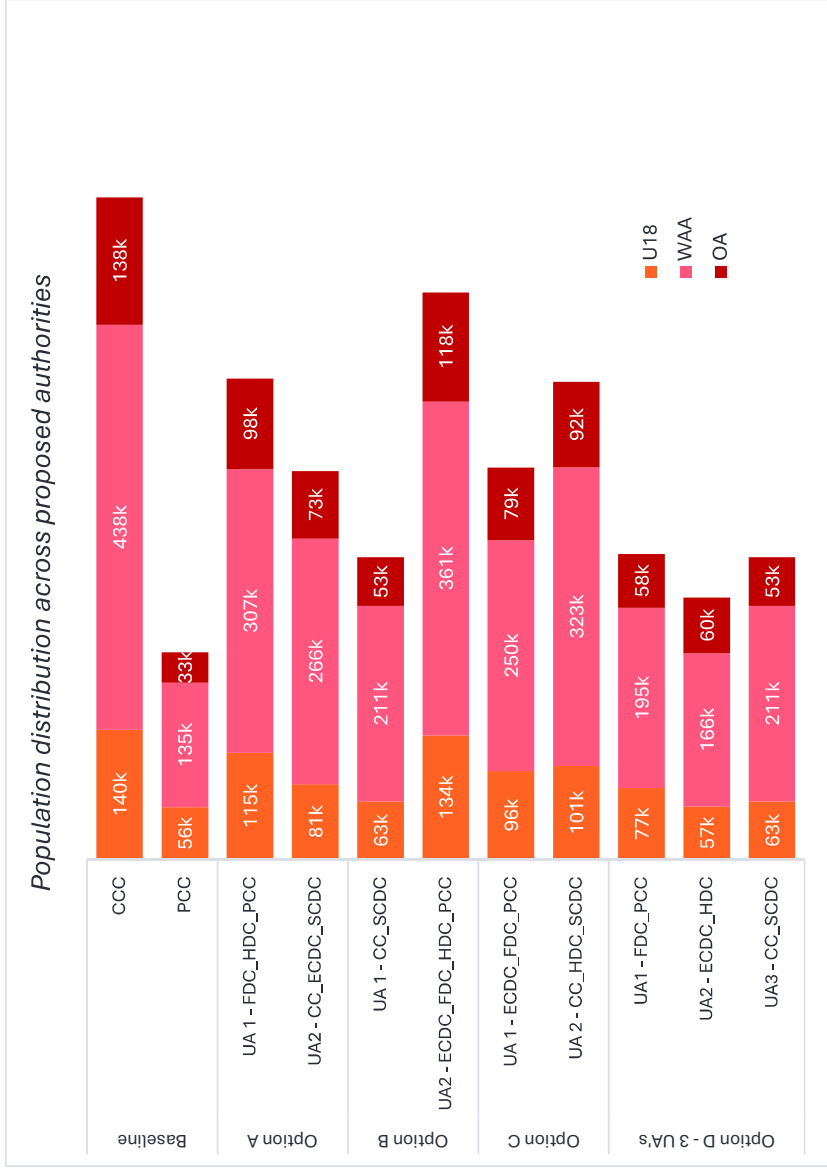
Overview: Demographics of New Unitary Authorities

4 Scenarios have been modelled and compared to the current set up (baseline)

Newton

This analysis has considered the impact of LGR on people services by considering 4 proposed unitary formations and comparing this to the baseline position. These are summarised below.

Baseline – Cambridgeshire and Peterborough	
Cambridgeshire: Current boundaries • Total population: 716k • % population 65+: 19.3% • % population U18: 19.6%	Peterborough: Current boundaries • Total population: 224k • % population 65+: 14.7% • % population U18: 25.1%
Option A	
UA1 - FDC_HDC_PCC: • Total population: 520k • % population 65+: 18.8% • % population U18: 22.1%	UA2 - CC_ECDC_SCDC: • Total population: 420k • % population 65+: 17.4% • % population U18: 19.4%
Option B	
UA1 - CC_SCDC: • Total population: 327k • % population 65+: 16.1% • % population U18: 19.2%	UA2 - ECDC_FDC_HDC_PCC: • Total population: 616k • % population 65+: 19.3% • % population U18: 21.8%



WAA: Working Age Adult, 18 - 64
OA: Older Adult, 65+

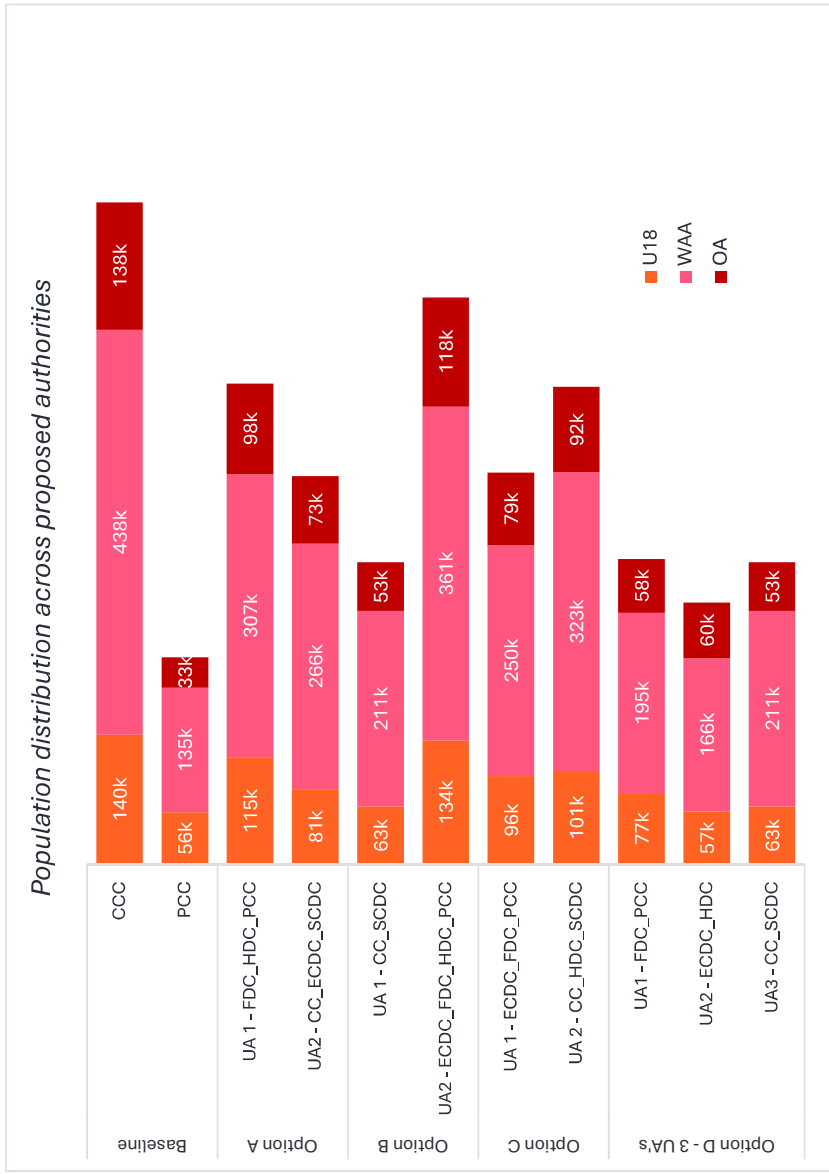
Overview: Demographics of New Unitary Authorities

4 Scenarios have been modelled and compared to the current set up (baseline)

Newton

This analysis has considered the impact of LGR on people services by considering 4 proposed unitary formations and comparing this to the baseline position. These are summarised below.

Option C	
UA 1 - ECDC_FDC_PCC: - Total population: 424k % population 65+: 18.5% % population U18: 22.5%	UA 2 - CC_HDC_SCDC: - Total population: 516k % population 65+: 17.9% % population U18: 19.6%
Option D – 3 UA's	
UA1 - FDC_PCC: - Total population: 330k % population 65+: 17.6% % population U18: 23.3%	UA3 - CC_SCDC: - Total population: 327k % population 65+: 16.1% % population U18: 19.2%
UA2 - ECDC_HDC: - Total population: 283k % population 65+: 21.2% % population U18: 20.1%	



WAA: Working Age Adult, 18 - 64
OA: Older Adult, 65+

Overview: Demand

DEMAND FOR SOCIAL CARE AND EDUCATION SERVICES IS EXPECTED TO GROW



This analysis has modelled the demand for Adult Social Care, Children's Social Care and Education services. A detailed breakdown by setting is included later in this report.

The % of the Total Population supported by people services refers to Adult Social Care: long term support, Children's Social Care: Children in Care, Child Protection Plans, Child in Need plans or receiving an early help intervention, SEND: child or young person supported by an Education, Health and Care Plan. This analysis shows the variation in both 2025 demand and the future growth in demand. This will support understanding if certain scenarios would create unitary authorities that have high variation in demand in 2025. The projected view to 2040 also gives insight to any sustainability challenge for unitary authorities that are seeing a disproportionate growth in the future demand levels.

Scenario	Proposed Authority	% Total Population supported by people services 2025	% Total Population supported by people services 2040	% Change in number of residents supported by people services (2025-2040)	% change ASC (2025 – 2040)	% change CSC (2025 – 2040)	% change SEND (2025 – 2040)*	Number of residents supported by people services		
Baseline	CCC	2.90% (2.84%-2.96%)	3.78% (3.67%-3.88%)	53% (52%-54%)	26%	7%	104%	6.9k	5.4k	8.5k
	PCC	5.13% (5.06%-5.20%)	6.73% (6.56%-6.89%)	46% (44%-47%)	20%	-3%	152%	2.0k	6.2k	3.3k
Option A	UA 1 - FDC_HDC_PCC	4.06% (4.00%-4.13%)	5.33% (5.19%-5.46%)	46% (45%-48%)	21%	-1%	124%	5.2k	8.8k	7.1k
	UA2 - CC_ECDC_SCDC	2.65% (2.59%-2.70%)	3.45% (3.35%-3.54%)	57% (56%-58%)	30%	10%	108%	3.7k	2.8k	4.6k
Option B	UA 1 - CC_SCDC	2.56% (2.51%-2.61%)	3.30% (3.21%-3.39%)	58% (57%-59%)	31%	13%	109%	2.7k	2.2k	3.5k
	UA2 - ECDC_FDC_HDC_PCC	3.90% (3.83%-3.96%)	5.12% (4.99%-5.25%)	47% (46%-49%)	21%	-1%	121%	6.2k	9.4k	8.3k
Option C	UA 1 - ECDC_FDC_PCC	4.33% (4.26%-4.40%)	5.68% (5.54%-5.83%)	47% (46%-48%)	22%	-2%	129%	4.4k	8.0k	6.0k
	UA 2 - CC_HDC_SCDC	2.70% (2.64%-2.75%)	3.50% (3.40%-3.59%)	54% (53%-55%)	27%	9%	105%	4.5k	3.7k	5.7k
Option D - 3 UA's	UA1 - FDC_PCC	4.72% (4.64%-4.79%)	6.17% (6.01%-6.32%)	46% (45%-47%)	21%	-2%	136%	3.4k	7.3k	4.9k
	UA2 - ECDC_HDC	2.94% (2.87%-3.00%)	3.91% (3.80%-4.02%)	50% (49%-51%)	22%	3%	100%	2.8k	2.1k	3.5k
	UA3 - CC_SCDC	2.56% (2.51%-2.61%)	3.30% (3.21%-3.39%)	58% (57%-59%)	31%	13%	109%	2.7k	2.2k	3.5k

Where relevant, SEND range (local authority provided forecast +/- 5%) indicated in brackets. Graphs use the mid-range of the SEND forecast.

Data: council-provided data and forecasts, ONS data where required
Assumptions: Population growth matched to local population estimates.

PRIVATE AND CONFIDENTIAL

Overview: Spend

SPEND ON PEOPLES SERVICES BY PROPOSED UNITARY FORMATION

This analysis has considered the impact of LGR on the cost of delivering Adult & Children's Social Care services alongside the cost of SEND support. Note this is a general model to allow comparison between authorities and is not a financial forecast.

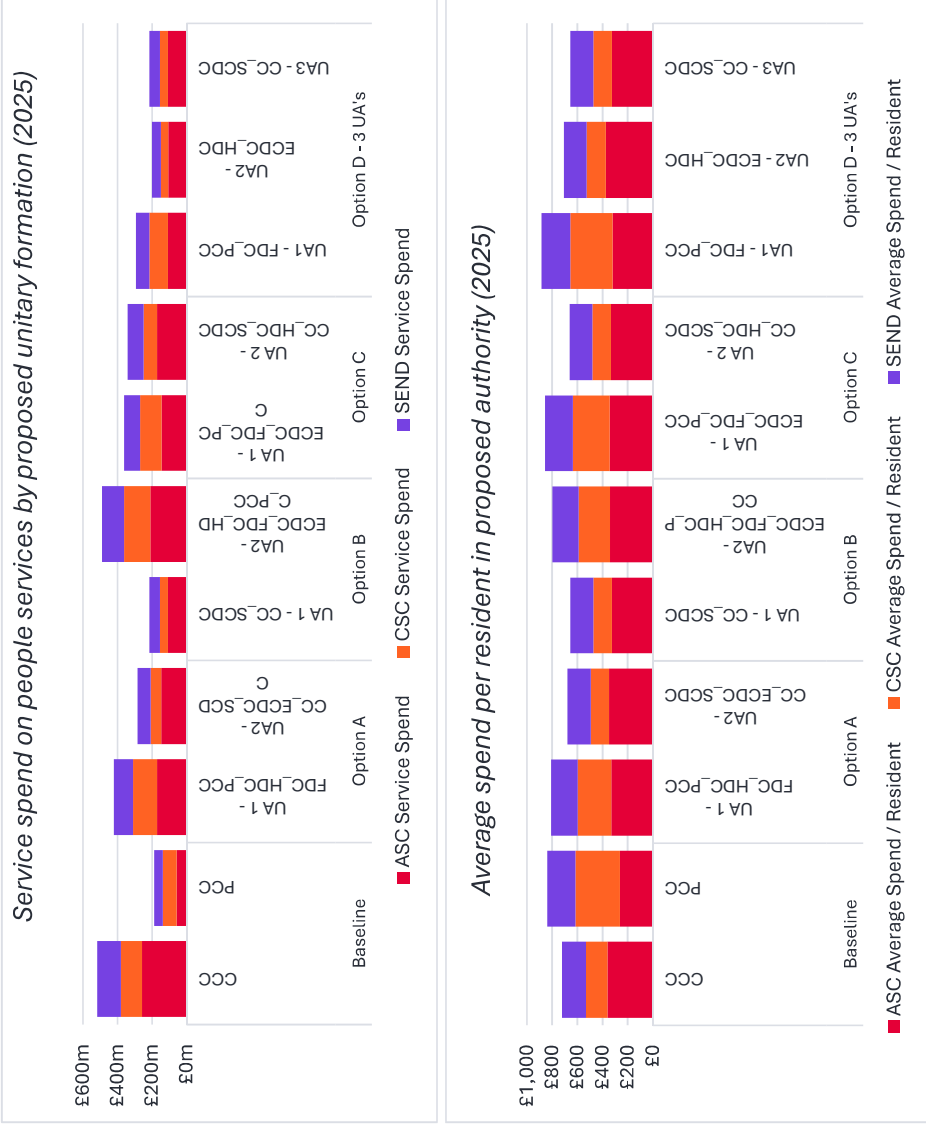
Cost values presented herein include both placement costs (e.g. Residential Care beds or EHCP provision) and staffing costs for staff working directly on supporting service users, such as social workers, (where this has been provided). Staffing costs for other teams, such as IT or legal teams, are not included.

All analysis is a combination of local authority data returns supplied for the purposes of this research and national reporting.

In general, spend aligns with spread of demand across Cambridgeshire and Peterborough. This is because there is greater variation in demand than unit cost.

The average spend per resident shows the total spend per resident of the total population within the authority split by each directorate. Areas which have a higher total spend per resident than baseline may cause increased cost pressures when total spend is compared to expected funding.

Both the total spend per scenario and spend per resident has been broken down further and provided in the following pages. This page does not include spend on Home to School Transport or Housing.



The graphs above use the mid-range of the SEND forecast provided by the local authorities.

Overview: Spend

SPEND PER PROPOSED SCENARIO

The table below shows the total cost per scenario predicted by the model for people-based services. Note this is a general model designed to allow comparisons between proposed scenarios and is not a financial forecast for budgeting purposes. This page does not include spend on Home to School Transport or Housing.

In general, we see an increase in combined service cost for scenarios with more authorities, driven by additional fixed management costs within the proposed scenario, as each proposed authority requires its own management team. Additionally, the model applies a step-up factor to unit cost that takes into account median income, deprivation and total population; this means that if other factors remain constant, an increase in unit costs for smaller authorities is forecasted*.

Note, the model only accounts for the additional uplift in staffing costs for delivery teams and we would expect an additional increase from other teams, such as IT or legal teams, that have not been modelled in this analysis.

Scenario	Proposed Authority	Total cost of service for scenario 2025	ASC cost of service for scenario 2025	CSC cost of service for scenario 2025	SEND cost of service for scenario 2025	Total cost of service for scenario 2040	ASC cost of service for scenario 2040	CSC cost of service for scenario 2040	SEND cost of service for scenario 2040
Baseline	CCC PCC	£731.1m (£721.8m-£740.5m)	£341.8m	£202.6m	£186.7m (£177.3m-£196.0m)	£1690.0m (£1656.9m-£1723.1m)	£689.0m	£339.4m	£661.6m (£628.5m-£694.7m)
Option A	UA 1 - FDC_HDC_PCC UA2 - CC_ECDC_SCDC	£730.0m (£720.6m-£739.3m)	£341.7m	£201.6m	£186.7m (£177.3m-£196.0m)	£1690.6m (£1657.5m-£1723.6m)	£691.0m	£337.9m	£661.6m (£628.5m-£694.7m)
Option B	UA 1 - CC_SCDC UA2 - ECDC_FDC_HDC_PCC	£729.5m (£720.1m-£738.8m)	£341.1m	£201.7m	£186.7m (£177.3m-£196.0m)	£1689.2m (£1656.2m-£1722.3m)	£689.5m	£338.1m	£661.6m (£628.5m-£694.7m)
Option C	UA 1 - ECDC_FDC_PCC UA 2 - CC_HDC_SCDC	£729.3m (£720.0m-£738.7m)	£341.2m	£201.5m	£186.7m (£177.3m-£196.0m)	£1689.9m (£1655.8m-£1722.0m)	£689.6m	£337.7m	£661.6m (£628.5m-£694.7m)
Option D - 3 UA's	UA1 - FDC_PCC UA2 - ECDC_HDC UA3 - CC_SCDC	£731.7m (£722.4m-£741.1m)	£343.4m	£201.6m	£186.7m (£177.3m-£196.0m)	£1693.7m (£1660.6m-£1726.7m)	£694.0m	£338.0m	£661.6m (£628.5m-£694.7m)

Where relevant, SEND range (local authority provided forecast +/-5%) indicated in brackets.

* See Appendix I for additional detail.

Overview: Spend SPEND PER RESIDENT

The table below shows the spend per resident per year for each of the proposed unitary authorities as well as breaking this down into each directorate. Note this is a general model designed to allow comparisons between proposed scenarios and is not a financial forecast for budgeting purposes. Here spend is total service and staffing spend (where this has been provided) and number of residents is the total population in each of the proposed unitary authorities. This page does not include spend on Home to School Transport or Housing.

This analysis demonstrates where there are scenarios that have an increased spend per resident both in the 2025 scenario and in 2040, providing the detail behind the high-level insights into variation between proposed unitary authorities provided in the preceding summaries of each scenario.

Scenario	Proposed Authority	Total spend per resident 2025	ASC spend per resident 2025	CSC spend per resident 2025	SEND spend per resident 2025	Total spend per resident 2040	ASC spend per resident 2040	CSC spend per resident 2040	SEND spend per resident 2040
Baseline	CCC	£722 (£713-£732)	£360	£171	£191 (£182-£201)	£1422 (£1395-£1450)	£626	£252	£544 (£517-£571)
	PCC	£954 (£943-£965)	£374	£358	£222 (£211-£233)	£1990 (£1949-£2032)	£655	£513	£823 (£782-£864)
	UA 1 - FDC_HDC_PCC	£857 (£846-£867)	£377	£269	£211 (£200-£222)	£1741 (£1706-£1775)	£658	£394	£689 (£655-£724)
Option A	UA2 - CC_ECDC_SCDC	£677 (£668-£686)	£347	£147	£183 (£174-£192)	£1337 (£1312-£1363)	£608	£215	£514 (£489-£540)
Option B	UA 1 - CC_SCDC	£656 (£647-£665)	£326	£147	£183 (£173-£192)	£1292 (£1267-£1318)	£570	£215	£507 (£482-£533)
	UA2 - ECDC_FDC_HDC_PCC	£840 (£829-£850)	£382	£250	£207 (£197-£217)	£1703 (£1669-£1736)	£670	£366	£666 (£633-£700)
Option C	UA 1 - ECDC_FDC_PCC	£916 (£905-£927)	£401	£295	£220 (£209-£231)	£1867 (£1831-£1904)	£706	£427	£734 (£697-£771)
	UA 2 - CC_HDC_SCDC	£661 (£652-£670)	£332	£148	£181 (£172-£190)	£1307 (£1281-£1332)	£577	£220	£510 (£485-£536)
Option D - 3 UA's	UA1 - FDC_PCC	£961 (£949-£972)	£396	£335	£230 (£218-£241)	£1968 (£1929-£2008)	£693	£486	£789 (£750-£829)
	UA2 - ECDC_HDC	£707 (£698-£716)	£375	£151	£181 (£172-£190)	£1409 (£1383-£1435)	£658	£227	£524 (£498-£551)
	UA3 - CC_SCDC	£656 (£647-£665)	£326	£147	£183 (£173-£192)	£1292 (£1267-£1318)	£570	£215	£507 (£482-£533)

Where relevant, SEND range (local authority provided forecast +/-5%) indicated in brackets.

Section 2a: Adult Social Care

The scope of this section is to provide insight into the likely impacts of each proposed scenario on Adult Social Care, covering demand, cost and quality over the next 15 years.

Adult Social Care

SERVICE COST VARIATION AND FORECASTS

This analysis has considered the variation in the cost of delivering care between each of the proposed unitary formations. This cost includes both the cost of the provision of care, in addition to the authority staffing cost associated with delivering ASC support (where this data has been provided). Staffing costs resulting from other teams, such as IT or legal teams, that have not been modelled in this analysis. Cost growth includes both the expected impact of increased demand, increased unit cost and wage increases. Spend per resident per year compares the cost for this service to total number of residents in the new authority. Note this is a general model designed to allow comparisons between proposed scenarios and is not a financial forecast for budgeting purposes.

This will support understanding if certain scenarios create variation in spend per resident both in 2025 and the future, showing where there are unitary authorities with a higher spend per resident to the baseline scenario as well as unitary authorities that have high cost growth in the future. Growth in cost is driven by inflation, the different growth rates in demand across constituent areas within proposed authorities, and effect of ordinary residence.

Scenario	Proposed Authority	Spend per resident 2025	Spend per resident 2040	% growth in spend (2025-2040)	ASC service cost 2025 (gross placements cost + staffing)	
Baseline	CCC	£360	£626	104%	£219m	£39m
	PCC	£374	£655	94%	£71m	£13m
Option A	UA 1 - FDC_HDC_PCC	£377	£658	95%	£166m	£30m
	UA2 - CC_ECDC_SCDC	£347	£608	112%	£124m	£22m
Option B	UA 1 - CC_SCDC	£326	£570	115%	£90m	£16m
	UA2 - ECDC_FDC_HDC_PCC	£382	£670	96%	£199m	£35m
Option C	UA 1 - ECDC_FDC_PCC	£401	£706	97%	£144m	£25m
	UA 2 - CC_HDC_SCDC	£332	£577	107%	£145m	£26m
Option D – 3UA's	UA1 - FDC_PCC	£396	£693	95%	£111m	£20m
	UA2 - ECDC_HDC	£375	£658	97%	£89m	£17m
	UA3 - CC_SCDC	£326	£570	115%	£90m	£16m

■ ASC provision spend 2025 ■ ASC staffing spend 2025

Data: council-provided data and forecasts, ONS data where required
Assumptions: Population growth matched to local population estimates. Detail included in methodology section of the appendix.

PRIVATE AND CONFIDENTIAL

Adult Social Care: Older Adult population

POPULATION VARIATION AND FORECASTING

The existing Older Adult (over 65) population is shown across the districts in the geography. The below table shows the expected growth rate for Older Adult in each of the districts.

This analysis shows the underlying population trends that drive the change in demand for each of the new unitary authorities in the future.

District	65+ population by year			Percentage growth in 65+ from 2025-2040	Average percentage of Authority 65+	Annual growth rate of 65+ population
	2025	2030	2040			
Cambridge	17.7k	19.5k	22.8k	29%	12%	1.7%
East Cambridgeshire	20.3k	23.3k	27.4k	35%	24%	2.0%
Fenland	25.3k	28.6k	32.9k	30%	26%	1.8%
Huntingdonshire	39.7k	44.1k	50.3k	26%	22%	1.6%
Peterborough	32.9k	36.7k	42.6k	29%	16%	1.7%
South Cambridgeshire	34.9k	39.8k	48.9k	40%	21%	2.3%
Average growth rate						

Adult Social Care: 85+ population

POPULATION VARIATION AND FORECASTING

The existing over 85 population is shown across the districts in the geography. The below table shows the expected growth rate for the 85+ population in each of the districts.

This analysis shows the underlying population trends that drive the change in demand for each of the new unitary authorities in the future.

District	85+ population by year			Percentage growth in 85+ from 2025-2040	Average percentage of Authority 85+	Annual growth rate of 85+ population
	2025	2030	2040			
Cambridge	2.5k	2.9k	3.9k	52%	2%	2.8%
East Cambridgeshire	2.8k	3.4k	4.6k	66%	4%	3.4%
Fenland	3.4k	3.9k	5.3k	57%	4%	3.1%
Huntingdonshire	5.0k	6.2k	8.3k	64%	3%	3.4%
Peterborough	4.3k	4.8k	6.7k	54%	2%	2.9%
South Cambridgeshire	5.2k	6.4k	9.2k	79%	3%	4.0%
Average growth rate						

Adult Social Care: Older Adult demand

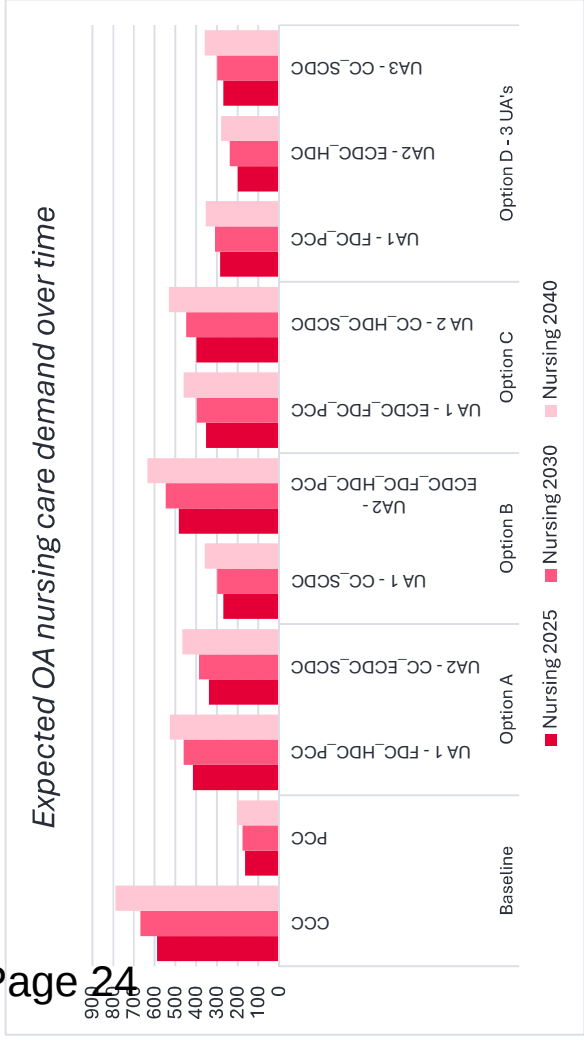
NURSING CARE DEMAND VARIATION AND FORECASTING

The following slides show the expected demand for Older Adult in 2025, 2030 and 2040. The expected demand is driven by population forecasts in each new unitary as well as the effect of ordinary residence on the prevalence in each new unitary.

The graph on the left shows total demand in 2025, 2030 and 2040. In general, this is proportional to population in the new unitary authorities. This analysis will show the expected growth in each unitary and identify areas that are expected to see high growth.

The table to the right of each graph shows the prevalence per 10,000 Older Adults. Changes to prevalence over time will reflect where current residing address is different to the originating address of future demand and demand therefore re-balances over time due to ordinary residence rules. Therefore, some areas will have a high prevalence in 2025 which then decreases by 2040. Other areas have a low prevalence in 2025 with prevalence increasing by 2040 or no change to prevalence.

For Domiciliary Care and Other demand there is no impact of ordinary residence, therefore prevalence remains consistent.

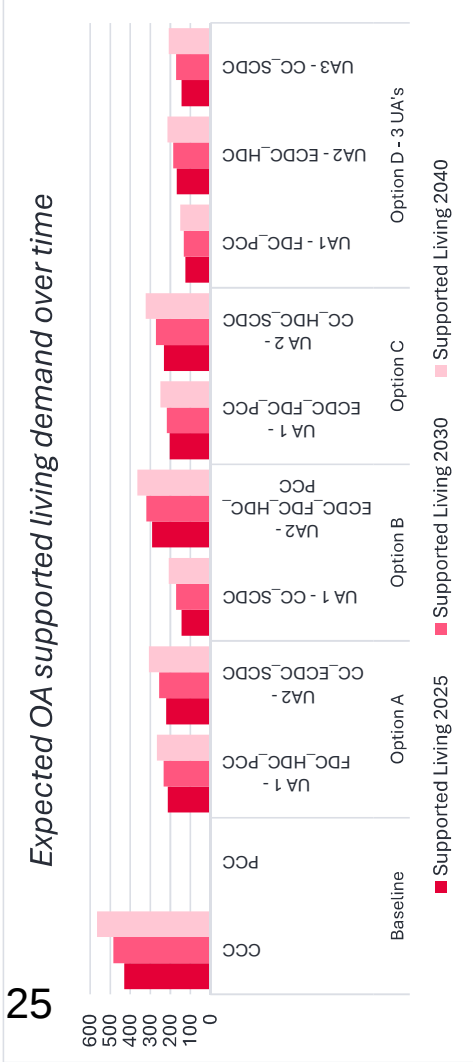
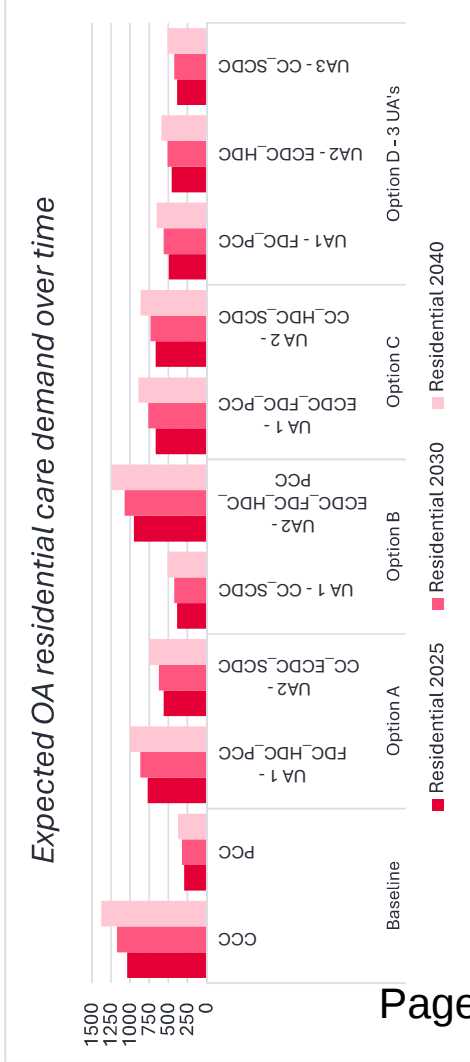


Scenario	Proposed Authority	Nursing care Prevalence 2025	Nursing care Prevalence 2030	Nursing care Prevalence 2040
Baseline	CCC	43	43	43
	PCC	50	48	48
Option A	UA 1 - FDC_HDC_PCC	42	42	42
	UA2 - CC_ECDC_SCDC	46	47	47
Option B	UA 1 - CC_SCDC	51	50	50
	UA2 - ECDC_FDC_HDC_PCC	41	41	41
Option C	UA 1 - ECDC_FDC_PCC	45	45	45
	UA 2 - CC_HDC_SCDC	43	43	44
Option D	UA1 - FDC_PCC	49	47	47
- 3 UA's	UA2 - ECDC_HDC	33	35	36
	UA3 - CC_SCDC	51	50	50

Adult Social Care: Older Adult demand

RESIDENTIAL CARE AND SUPPORTED LIVING DEMAND VARIATION AND FORECASTING

Newton

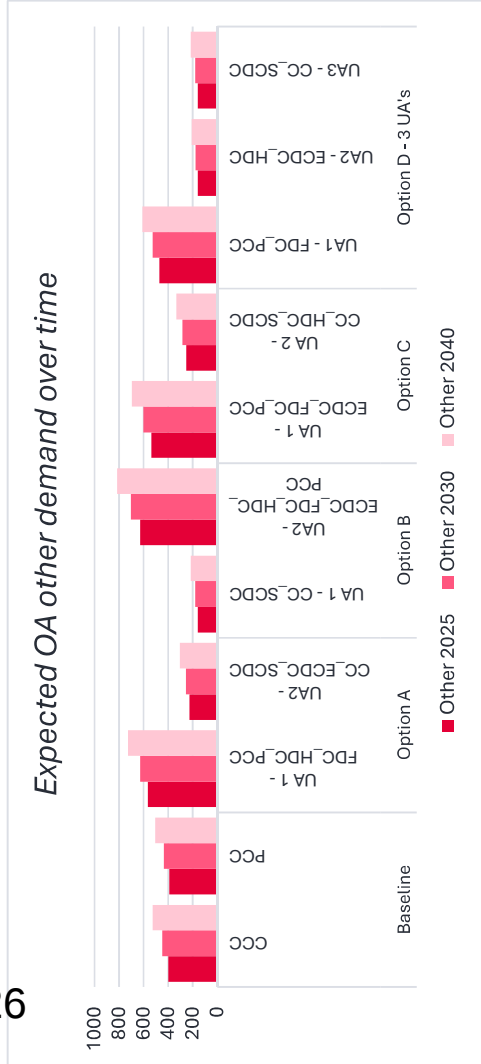
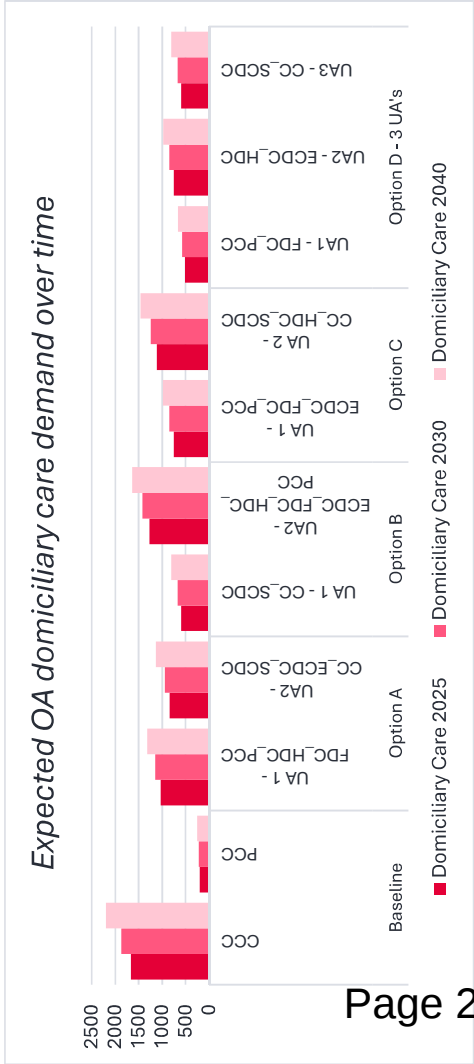


Scenario	Proposed Authority	Residential care Prevalence 2025	Residential care Prevalence 2030	Residential care Prevalence 2040
Baseline	CCC	75	76	76
Option A	PCC	90	88	88
Option B	UA 1 - FDC_HDC_PCC	79	79	80
Option C	UA2 - CC_ECDC_SCDC	77	76	76
Option D - 3 UA's	UA 1 - CC_SCDC	73	72	71
	UA2 - ECDC_FDC_HDC_PCC	80	81	81
	UA 1 - ECDC_FDC_PCC	85	86	87
	UA 2 - CC_HDC_SCDC	72	71	71
	UA1 - FDC_PCC	85	86	86
	UA2 - ECDC_HDC	76	76	76
	UA3 - CC_SCDC	73	72	71

Scenario	Proposed Authority	Supported Living Prevalence 2025	Supported Living Prevalence 2030	Supported Living Prevalence 2040
Baseline	CCC	31	31	31
Option A	PCC	2	2	2
Option B	UA 1 - FDC_HDC_PCC	22	21	21
Option C	UA2 - CC_ECDC_SCDC	30	31	31
Option D - 3 UA's	UA 1 - CC_SCDC	27	29	29
	UA2 - ECDC_FDC_HDC_PCC	25	24	24
	UA 1 - ECDC_FDC_PCC	26	25	24
	UA 2 - CC_HDC_SCDC	25	26	27
	UA1 - FDC_PCC	21	20	20
	UA2 - ECDC_HDC	28	28	28
	UA3 - CC_SCDC	27	29	29

Adult Social Care: Older Adult demand

DOMICILIARY CARE AND OTHER DEMAND VARIATION AND FORECASTING



Scenario	Proposed Authority	Domiciliary Care Prevalence
Baseline	CCC	121
Option A	PCC	60
Option B	UA 1 - FDC_HDC_PCC	105
Option C	UA2 - CC_ECDC_SCDC	115
Option D - 3 UA's	UA 1 - CC_SCDC	113
Option E	UA2 - ECDC_FDC_HDC_PCC	107
Option F	UA 1 - ECDC_FDC_PCC	96
Option G	UA 2 - CC_HDC_SCDC	120
Option H	UA1 - FDC_PCC	88
Option I	UA2 - ECDC_HDC	126
Option J	UA3 - CC_SCDC	113

Scenario	Proposed Authority	Other Prevalence
Baseline	CCC	29
Option A	PCC	119
Option B	UA 1 - FDC_HDC_PCC	58
Option C	UA2 - CC_ECDC_SCDC	31
Option D	UA 1 - CC_SCDC	30
Option E	UA2 - ECDC_FDC_HDC_PCC	53
Option F	UA 1 - ECDC_FDC_PCC	68
Option G	UA 2 - CC_HDC_SCDC	27
Option H	UA1 - FDC_PCC	81
Option I	UA2 - ECDC_HDC	26
Option J	UA3 - CC_SCDC	30

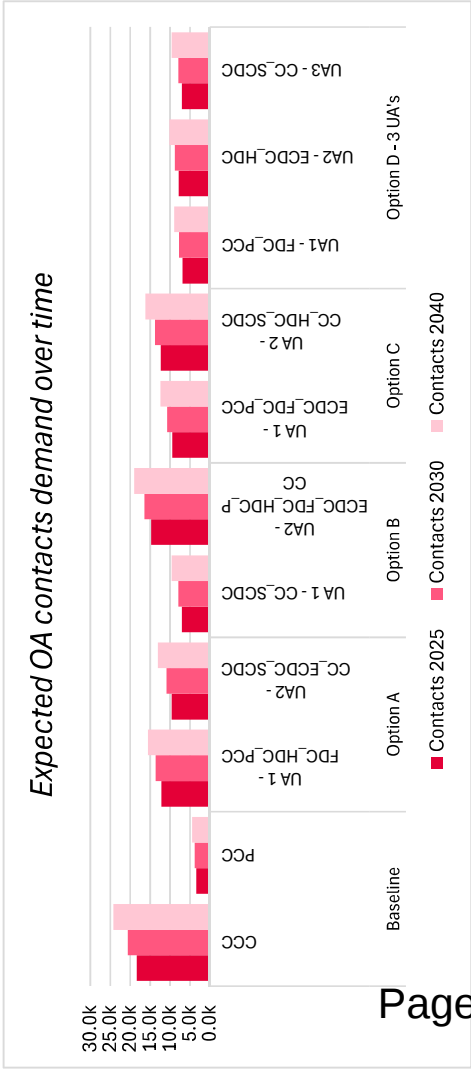
Data: council-provided data and forecasts, ONS data where required
Assumptions: Population growth matched to local population estimates. Detail included in methodology section of the appendix.

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For Domiciliary Care and Other demand there is no impact of ordinary residence, therefore prevalence remains consistent. Prevalence is shown per 10k older adults (65+).

Adult Social Care: Older Adult demand

CONTACTS DEMAND VARIATION AND FORECASTING



Scenario	Proposed Authority	Contacts Prevalence
Baseline	CCC	1331
	PCC	1028
Option A	UA 1 - FDC_HDC_PCC	1239
	UA2 - CC_ECDC_SCDC	1318
Option B	UA 1 - CC_SCDC	1339
	UA2 - ECDC_FDC_HDC_PCC	1243
Option C	UA 1 - ECDC_FDC_PCC	1202
	UA 2 - CC_HDC_SCDC	1332
Option D - 3 UA's	UA1 - FDC_PCC	1181
	UA2 - ECDC_HDC	1303
	UA3 - CC_SCDC	1339

Adult Social Care: Working Age Adult population

POPULATION VARIATION AND FORECASTING

The existing Working Age Adult (18-65) population is shown across the districts in the geography. The below table shows the expected growth rate for Working Age Adult in each of the districts.

This analysis shows the underlying population trends that drive the change in demand for each of the new unitary authorities in the future.

District	WAA population by year			Percentage growth in WAA from 2025-2040	Average percentage of Authority WAA	Annual growth rate of WAA population
	2025	2030	2040			
Cambridge	110.5k	116.7k	123.9k	12%	73%	0.8%
East Cambridgeshire	54.5k	58.3k	59.8k	10%	58%	0.6%
Fenland	60.4k	63.5k	65.7k	9%	56%	0.6%
Huntingdonshire	111.7k	115.3k	122.2k	9%	58%	0.6%
Peterborough	134.9k	142.8k	151.5k	12%	61%	0.8%
South Cambridgeshire	100.9k	112.3k	135.3k	34%	58%	2.0%
Average growth rate						

Adult Social Care: Working Age Adult demand

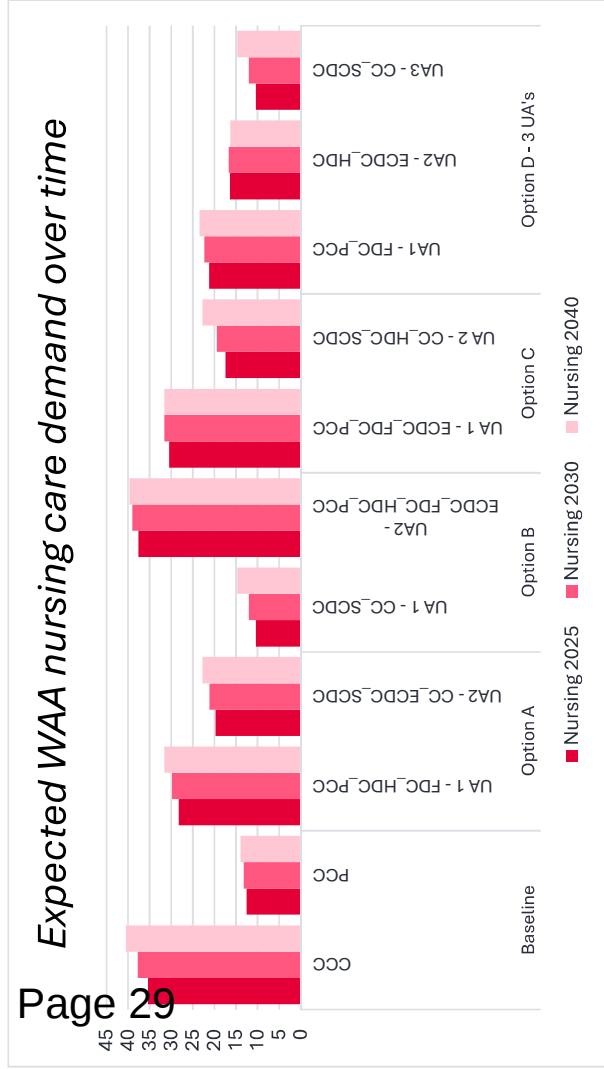
NURSING CARE DEMAND VARIATION AND FORECASTING

The following slides show the expected demand for Working Age Adults in 2025, 2030 and 2040. The expected demand is driven by population forecasts in each new unitary as well as the effect of ordinary residence on the prevalence in each new unitary.

The graph on the left shows total demand in 2025, 2030 and 2040, in general this is proportional to population in the new unitary authorities. This analysis will show the expected growth in each unitary and identify areas that are expected to see high growth.

The table to the right of each graph shows the prevalence per 10,000 Older Adults. Changes to prevalence over time will reflect where current residing address is different to the originating address of future demand and demand therefore re-balances over time due to ordinary residence rules. Therefore, some areas will have a high prevalence in 2025 which then drops by 2040. Other areas have a low prevalence in 2025 with prevalence increasing by 2040 or no change to prevalence.

For Domiciliary Care and Other demand there is no impact of ordinary residence, therefore prevalence remains consistent.

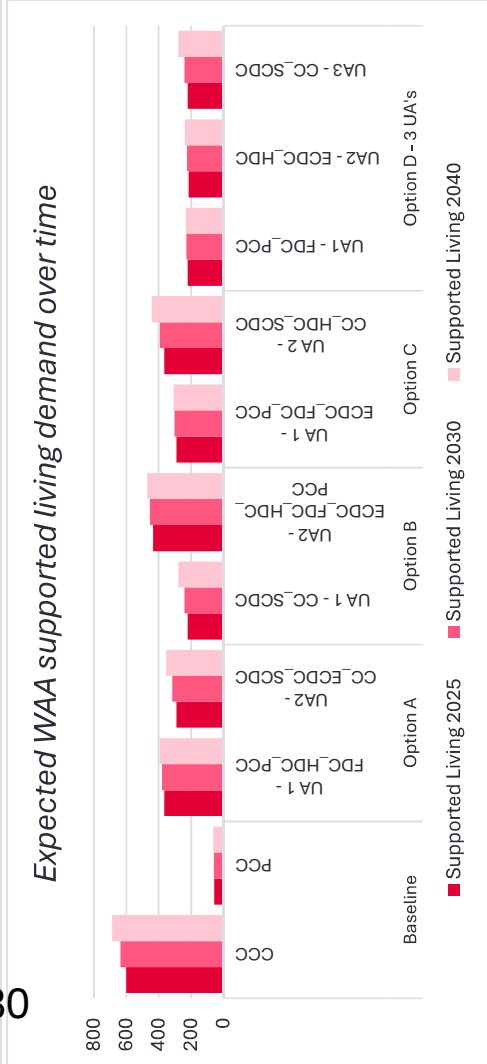
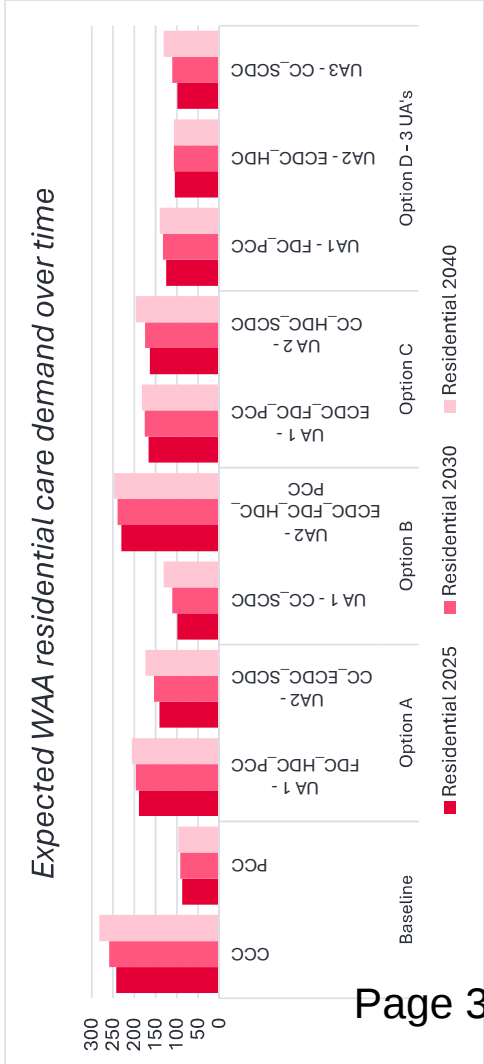


Scenario	Proposed Authority	Nursing care Prevalence 2025	Nursing care Prevalence 2030	Nursing care Prevalence 2040
Baseline	CCC	0.81	0.81	0.80
	PCC	0.93	0.93	0.92
Option A	UA 1 - FDC_HDC_PCC	0.92	0.93	0.93
	UA2 - CC_ECDC_SCDC	0.74	0.74	0.71
Option B	UA 1 - CC_SCDC	0.49	0.52	0.56
	UA2 - ECDC_FDC_HDC_PCC	1.04	1.03	1.00
Option C	UA 1 - ECDC_FDC_PCC	1.22	1.19	1.14
	UA 2 - CC_HDC_SCDC	0.54	0.56	0.60
Option D - 3 UA's	UA1 - FDC_PCC	1.09	1.08	1.08
	UA2 - ECDC_HDC	0.99	0.96	0.90
	UA3 - CC_SCDC	0.49	0.52	0.56

Adult Social Care: Working Age Adult demand

RESIDENTIAL CARE AND SUPPORTED LIVING DEMAND VARIATION AND FORECASTING

Newton



Data: council-provided data and forecasts, ONS data where required
Assumptions: Population growth matched to local population estimates. Detail included in methodology section of the appendix.

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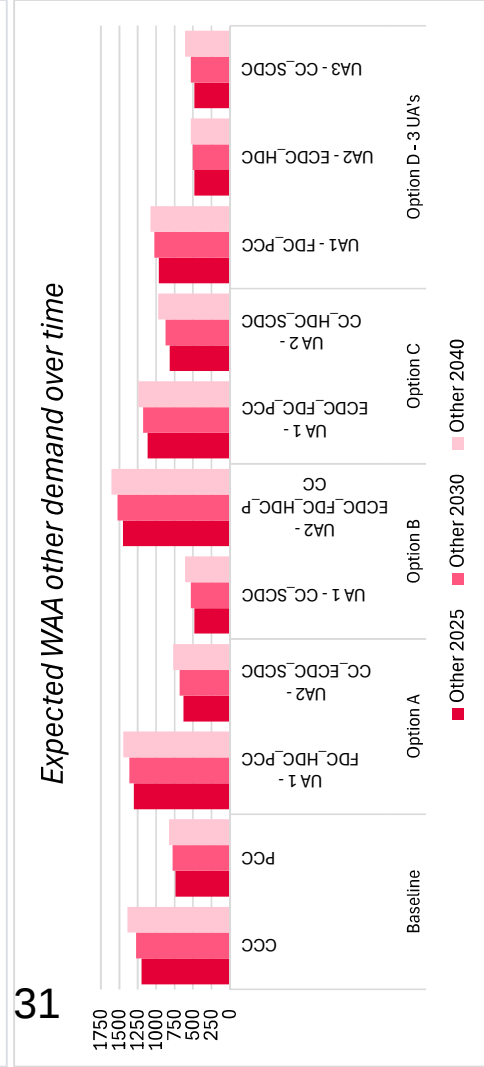
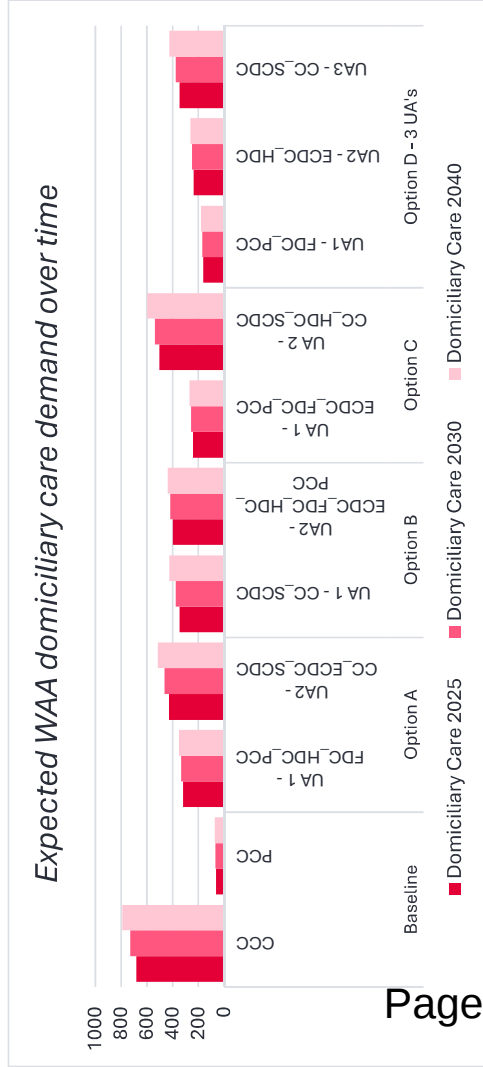
Prevalence is shown per 10k working age adults (18-64).

Scenario	Proposed Authority	Residential care Prevalence 2025	Residential care Prevalence 2030	Residential care Prevalence 2040
Baseline	CCC	5.53	5.55	5.57
	PCC	6.46	6.43	6.38
Option A	UA 1 - FDC_HDC_PCC	6.16	6.12	6.06
	UA2 - CC_ECDC_SCDC	5.28	5.35	5.44
Option B	UA 1 - CC_SCDC	4.68	4.83	5.07
	UA2 - ECDC_FDC_HDC_PCC	6.37	6.31	6.20
Option C	UA 1 - ECDC_FDC_PCC	6.66	6.63	6.57
	UA 2 - CC_HDC_SCDC	5.04	5.08	5.16
Option D - 3 UA's	UA1 - FDC_PCC	6.40	6.42	6.46
	UA2 - ECDC_HDC	6.34	6.17	5.89
	UA3 - CC_SCDC	4.68	4.83	5.07

Scenario	Proposed Authority	Supported Living Prevalence 2025	Supported Living Prevalence 2030	Supported Living Prevalence 2040
Baseline	CCC	14	14	14
	PCC	4	4	4
Option A	UA 1 - FDC_HDC_PCC	12	12	12
	UA2 - CC_ECDC_SCDC	11	11	11
Option B	UA 1 - CC_SCDC	10	11	11
	UA2 - ECDC_FDC_HDC_PCC	12	12	12
Option C	UA 1 - ECDC_FDC_PCC	12	11	11
	UA 2 - CC_HDC_SCDC	11	11	12
Option D - 3 UA's	UA1 - FDC_PCC	11	11	11
	UA2 - ECDC_HDC	13	13	13
	UA3 - CC_SCDC	10	11	11

Adult Social Care: Working Age Adult demand

DOMICILIARY CARE AND OTHER DEMAND VARIATION AND FORECASTING



Scenario	Proposed Authority	Domiciliary Care Prevalence
Baseline	CCC	16
	PCC	5
Option A	UA 1 - FDC_HDC_PCC	10
	UA2 - CC_ECDC_SCDC	16
Option B	UA 1 - CC_SCDC	16
	UA2 - ECDC_FDC_HDC_PCC	11
Option C	UA 1 - ECDC_FDC_PCC	10
	UA 2 - CC_HDC_SCDC	16
Option D - 3 UA's	UA1 - FDC_PCC	8
	UA2 - ECDC_HDC	14
	UA3 - CC_SCDC	16

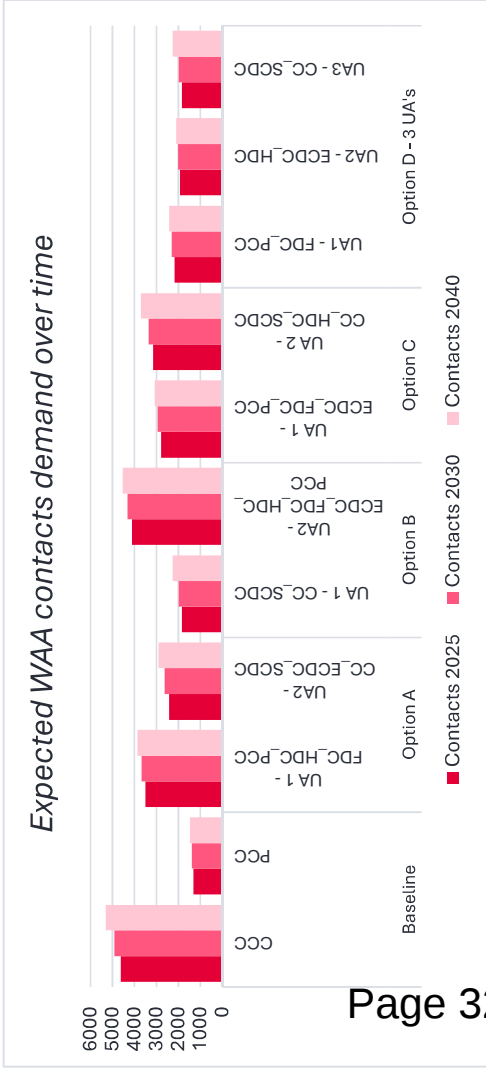
Scenario	Proposed Authority	Other Prevalence
Baseline	CCC	27
	PCC	55
Option A	UA 1 - FDC_HDC_PCC	42
	UA2 - CC_ECDC_SCDC	24
Option B	UA 1 - CC_SCDC	23
	UA2 - ECDC_FDC_HDC_PCC	40
Option C	UA 1 - ECDC_FDC_PCC	45
	UA 2 - CC_HDC_SCDC	25
Option D - 3 UA's	UA1 - FDC_PCC	49
	UA2 - ECDC_HDC	29
	UA3 - CC_SCDC	23

Data: council-provided data and forecasts, ONS data where required
Assumptions: Population growth matched to local population estimates. Detail included in methodology section of the appendix.

For Domiciliary Care and Other demand there is no impact of ordinary residence, therefore prevalence remains consistent. Prevalence is shown per 10k working age adults (18-64).

Adult Social Care: Working Age Adult demand

CONTACTS DEMAND VARIATION AND FORECASTING



Scenario	Proposed Authority	Contacts Prevalence
Baseline	CCC	106
	PCC	97
Option A	UA 1 - FDC_HDC_PCC	114
	UA2 - CC_ECDC_SCDC	91
Option B	UA 1 - CC_SCDC	86
	UA2 - ECDC_FDC_HDC_PCC	114
Option C	UA 1 - ECDC_FDC_PCC	111
	UA 2 - CC_HDC_SCDC	98
Option D - 3 UA's	UA1 - FDC_PCC	112
	UA2 - ECDC_HDC	116
	UA3 - CC_SCDC	86

Adult Social Care: Older Adult unit costs

UNIT COST VARIATION AND FORECASTING

Newton

The table shows a breakdown of the placement unit cost over time by setting in the proposed unitary formations. This has been calculated from the council data provided and refers to gross costs.

For each proposed unitarity formation unit price forecasts are based on a real-terms average of the previous cost data provided. The impact of inflation, changing demographics, and local cost variation has then been forecast.

Our analysis more widely had found there to be a correlation between unit cost and scale of existing upper tier local authorities. Controlling for deprivation, demographics and median income this applies an expected uplift in unit price for smaller unitary authorities. Detailed information is included in the methodology section of the appendix.

Scenario	Proposed Authority	Nursing Care				Residential Care				Domiciliary Care				Supported Living				Other			
		2025	2030	2040	% change	2025	2030	2040	% change	2025	2030	2040	% change	2025	2030	2040	% change	2025	2030	2040	% change
Baseline	CCC	£1,004	£1,177	£1,632	63%	£856	£1,008	£1,400	64%	£321	£378	£525	63%	£435	£514	£714	64%	£457	£538	£749	64%
	PCC	£1,037	£1,221	£1,694	63%	£908	£1,070	£1,484	63%	£365	£430	£597	63%	£1,881	£2,216	£3,074	63%	£433	£509	£707	63%
Option A	UA 1 - FDC_HDC_PCC	£934	£1,099	£1,525	63%	£826	£972	£1,348	63%	£320	£377	£523	63%	£419	£491	£681	62%	£415	£489	£678	63%
	UA2 - CC_ECDC_SCDC	£1,115	£1,304	£1,801	62%	£927	£1,093	£1,518	64%	£335	£395	£548	63%	£493	£584	£811	65%	£507	£597	£830	64%
Option B	UA 1 - CC_SCDC	£1,123	£1,309	£1,806	61%	£966	£1,140	£1,584	64%	£337	£397	£550	63%	£395	£482	£677	71%	£540	£636	£884	64%
	UA2 - ECDC_FDC_HDC_PCC	£956	£1,127	£1,566	64%	£826	£971	£1,348	63%	£320	£377	£524	63%	£478	£560	£778	63%	£416	£491	£681	63%
Option C	UA 1 - ECDC_FDC_PCC	£977	£1,153	£1,602	64%	£827	£972	£1,348	63%	£327	£385	£534	63%	£570	£673	£936	64%	£418	£492	£683	63%
	UA 2 - CC_HDC_SCDC	£1,043	£1,218	£1,685	62%	£907	£1,070	£1,488	64%	£328	£386	£536	63%	£344	£416	£586	71%	£484	£571	£795	64%
Option D - 3 UA's	UA1 - FDC_PCC	£946	£1,114	£1,546	63%	£825	£969	£1,344	63%	£328	£386	£536	63%	£526	£622	£865	64%	£413	£487	£675	63%
	UA2 - ECDC_HDC	£973	£1,152	£1,603	65%	£837	£985	£1,367	63%	£322	£379	£526	63%	£450	£525	£730	62%	£412	£486	£674	64%
	UA3 - CC_SCDC	£1,123	£1,309	£1,806	61%	£966	£1,140	£1,584	64%	£337	£397	£550	63%	£395	£482	£677	71%	£540	£636	£884	64%

Data: Council data

Assumptions: see appendix for UA assumptions and step-up-factor. Inflation at 3.28%.

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Adult Social Care: Working Age Adult unit costs

UNIT COST VARIATION AND FORECASTING

Newton

The table shows a breakdown of the placement unit cost over time by setting in the proposed unitary formations. This has been calculated from the council data provided and refers to gross costs.

For each proposed unitarity formation unit price forecasts are based on a real-terms average of the previous cost data provided. The impact of inflation, changing demographics, and local cost variation has then been forecast.

Our analysis more widely had found there to be a correlation between unit cost and scale of existing upper tier local authorities. Controlling for deprivation, demographics and median income this applies an expected uplift in unit price for smaller unitary authorities. Detailed information is included in the methodology section of the appendix.

Scenario	Proposed Authority	Nursing Care				Residential Care				Domiciliary Care				Supported Living				Other			
		2025	2030	2040	% change	2025	2030	2040	% change	2025	2030	2040	% change	2025	2030	2040	% change	2025	2030	2040	% change
Base Case	CCC	£1,514	£1,786	£2,494	65%	£1,653	£1,938	£2,675	62%	£324	£382	£531	64%	£1,141	£1,343	£1,858	63%	£391	£461	£643	65%
	PCC	£1,457	£1,716	£2,380	63%	£1,931	£2,274	£3,155	63%	£365	£430	£597	63%	£1,988	£2,342	£3,248	63%	£488	£574	£797	63%
	UA 1 - FDC_HDC_PCC	£1,556	£1,833	£2,551	64%	£1,827	£2,150	£2,981	63%	£336	£396	£549	63%	£1,307	£1,540	£2,137	64%	£414	£489	£678	64%
	UA2 - CC_ECDC_SCDC	£1,404	£1,663	£2,330	66%	£1,578	£1,857	£2,574	63%	£328	£387	£539	65%	£1,090	£1,288	£1,790	64%	£446	£526	£732	64%
Option B	UA 1 - CC_SCDC	£1,511	£1,780	£2,470	63%	£1,567	£1,846	£2,566	64%	£333	£393	£548	65%	£951	£1,129	£1,600	68%	£460	£542	£753	64%
	UA2 - ECDC_FDC_HDC_PCC	£1,476	£1,745	£2,444	66%	£1,782	£2,097	£2,913	63%	£330	£388	£539	63%	£1,336	£1,576	£2,185	64%	£414	£488	£678	64%
Option C	UA 1 - ECDC_FDC_PCC	£1,340	£1,582	£2,206	65%	£1,725	£2,032	£2,825	64%	£329	£387	£537	63%	£1,414	£1,667	£2,320	64%	£429	£506	£703	64%
	UA 2 - CC_HDC_SCDC	£1,746	£2,040	£2,803	61%	£1,719	£2,011	£2,766	61%	£332	£392	£545	64%	£1,050	£1,238	£1,729	65%	£417	£493	£687	65%
Option D - 3 UA's	UA1 - FDC_PCC	£1,381	£1,627	£2,257	63%	£1,767	£2,081	£2,885	63%	£340	£400	£555	63%	£1,384	£1,632	£2,273	64%	£429	£506	£703	64%
	UA2 - ECDC_HDC	£1,617	£1,922	£2,738	69%	£1,816	£2,136	£2,970	63%	£329	£388	£538	63%	£1,303	£1,536	£2,125	63%	£376	£443	£615	63%
	UA3 - CC_SCDC	£1,511	£1,780	£2,470	63%	£1,567	£1,846	£2,566	64%	£333	£393	£548	65%	£951	£1,129	£1,600	68%	£460	£542	£753	64%

Data: Council data

Assumptions: see appendix for UA assumptions and step-up-factor. Inflation at 3.28%.

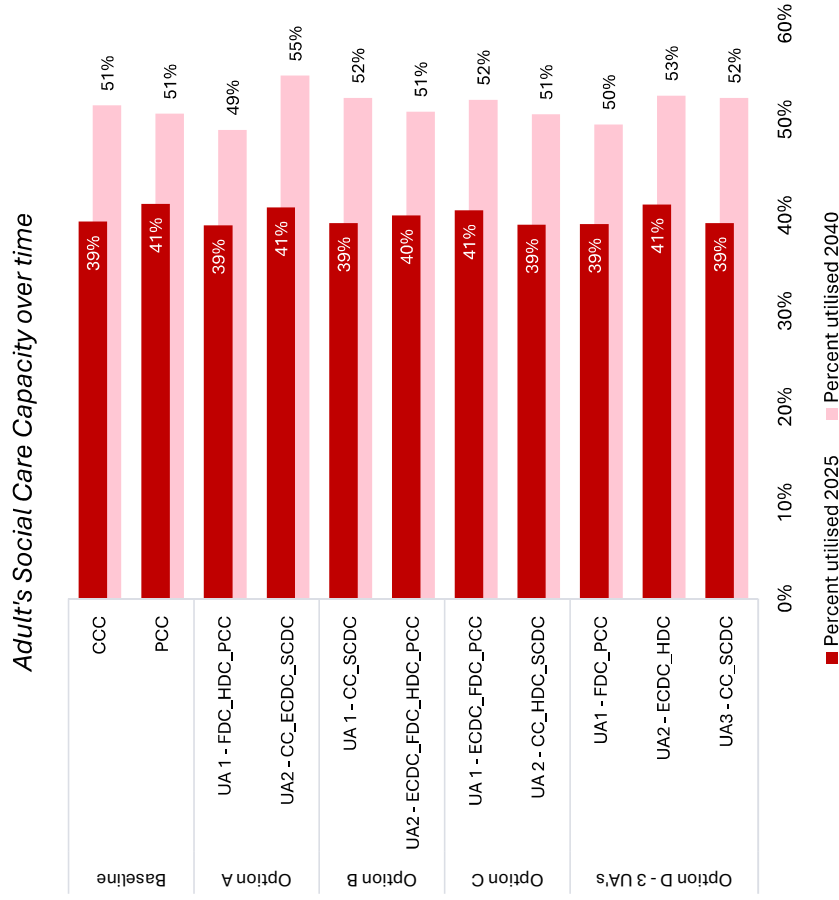
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Adult Social Care: Capacity

PLACEMENT DEMAND AND CAPACITY UTILISATION

This analysis shows the expected % of available capacity required to support forecast demand for 2025 and 2040. This capacity also includes beds occupied in the private market and so exceeds council only demand in most cases.

Where there is a higher % this means that a higher proportion of the available capacity is required to support the forecasted demand.



Adult Social Care: Quality

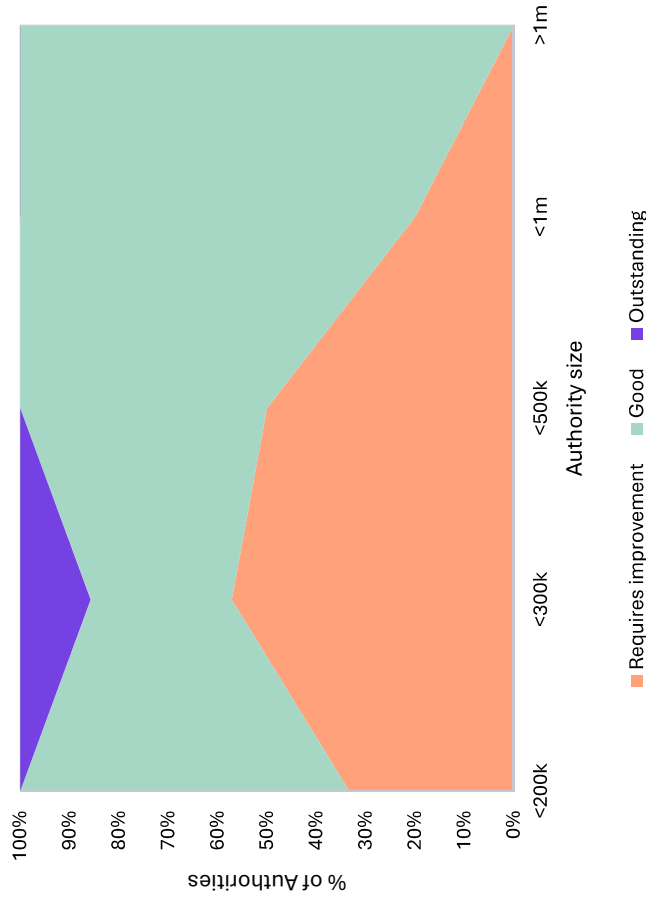
THERE IS LIMITED NATIONALLY AVAILABLE DATA TO DRAW CONCLUSIONS OF QUALITY BASED ON POPULATION SIZE

The CQC is currently in the process of implementing a new assessment framework for local authorities and integrated care networks. This means that limited CQC ratings have been published at time of completing this analysis.

There was not sufficient data for us to provide a meaningful model based on these published outcomes. Therefore, no conclusions have been drawn, even at a high level, from the published reports.

As with OFSTED, income, deprivation and geographic location could be more influential than population alone, however further data and information is required to draw meaningful conclusions.

CQC Quality of Authority Distribution



The predicted spend for each scenario is included in the table below alongside the expected service cost in 2025 and 2040. Note this is a general model designed to allow comparisons between proposed scenarios and is not a financial forecast for budgeting purposes.

In general, there is an increase in combined service cost for scenarios with more authorities. This is driven by the expected uplift on placement unit costs applied to smaller authorities and higher combined staffing overheads due to having more authorities and therefore leadership teams. Note, the model only accounts for the additional uplift in staffing costs for delivery teams and there is an expected additional increase from other teams, such as IT or legal teams, that have not been modelled in this analysis.

Scenario	Proposed Authority	Predicted spend for scenario 2025	ASC service cost 2025 (gross placements cost + staffing)	Predicted spend for scenario 2040	ASC service cost 2040 (gross placements cost + staffing)
Baseline	CCC		£258m		£526m
	PCC	£341.8m	£84m	£689.0m	£163m
Option A	UA 1 - FDC_HDC_PCC		£196m		£382m
	UA2 - CC_ECDC_SCDC	£341.7m	£146m	£691.0m	£309m
Option B	UA 1 - CC_SCDC		£107m		£229m
	UA2 - ECDC_FDC_HDC_PCC	£341.1m	£235m	£689.5m	£461m
Option C	UA 1 - ECDC_FDC_PCC		£170m		£335m
	UA 2 - CC_HDC_SCDC	£341.2m	£171m	£689.6m	£354m
Option D – 3 UA's	UA1 - FDC_PCC		£131m		£255m
	UA2 - ECDC_HDC	£343.4m	£106m	£694.0m	£210m
	UA3 - CC_SCDC		£107m		£229m

Section 2b: Children’s Social Care

The scope of this section is to provide insight into the likely impacts of each proposed scenario on Children’s Social Care, covering demand, cost and quality over the next 15 years.

Children's Social Care

SERVICE COST VARIATION AND FORECASTING

Newton

This analysis has considered the variation in the cost of delivering care between each of the proposed unitary formations. This cost includes both the cost of the provision of care, in addition to the authority staffing cost associated with delivering CSC support (where this data has been provided). Staffing costs resulting from other teams, such as IT or legal teams, that have not been modelled in this analysis. Cost growth includes both the expected impact of increased demand, increased unit cost and wage increases. As this work has been performed without any personal identifiable data and caseload sizes for Children in Care settings are small, changes in the blend of settings with time have not been modelled. Should this blend change, this may cause a variation in unit cost over time i.e. due to a decline in internal fostering capacity or increase in Residential Care placements, but this has not been included in the model. Spend per resident per year compares the cost for this service to total number of residents in the new authority. Note this is a general model designed to allow comparisons between proposed scenarios and is not a financial forecast for budgeting purposes.

This will support understanding if certain scenarios create variation in spend per resident both in 2025 and the future, showing where there are unitary authorities with a higher spend per resident to the baseline scenario as well as unitary authorities that have high cost growth in the future. Growth in cost is driven by inflation and the different growth rates in demand across constituent areas within proposed authorities.

Scenario	Proposed Authority	Spend per resident 2025	Spend per resident 2040	% growth in spend (2025-2040)	CSC service cost 2025 (gross placements cost + staffing)	
Baseline	CCC	£171	£252	73%	£45m	£91m
	PCC	£358	£513	59%	£35m	£31m
Option A	UA 1 - FDC_HDC_PCC	£269	£394	64%	£90m	£50m
	UA2 - CC_ECDC_SCDC	£147	£215	77%	£45m	£16m
Option B	UA 1 - CC_SCDC	£147	£215	80%	£35m	£13m
	UA2 - ECDC_FDC_HDC_PCC	£250	£366	64%	£100m	£54m
Option C	UA 1 - ECDC_FDC_PCC	£295	£427	62%	£80m	£45m
	UA 2 - CC_HDC_SCDC	£148	£220	76%	£55m	£21m
Option D – 3 UA's	UA1 - FDC_PCC	£335	£486	62%	£69m	£42m
	UA2 - ECDC_HDC	£151	£227	69%	£31m	£12m
	UA3 - CC_SCDC	£147	£215	80%	£35m	£13m

■ CSC provision spend 2025
■ CSC staffing cost 2025

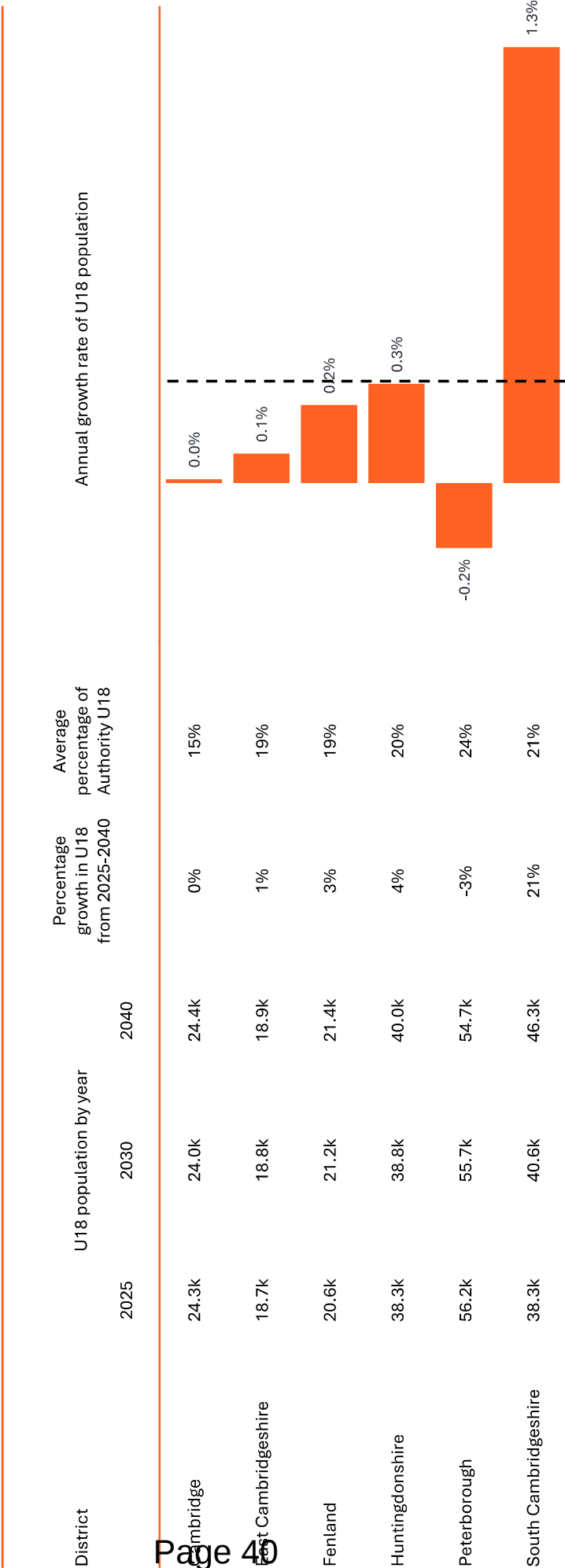
Data: council-provided data and forecasts, ONS data where required
Assumptions: Population growth matched to local population estimates. Detail included in methodology section of the appendix.

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Children's Social Care: Population

U18 POPULATION VARIATION AND FORECASTING

The existing U18 population is shown across the districts in the geography. The below table shows the expected growth rate for U18s in each of the districts. This analysis shows the underlying population trends that drive the change in demand for each of the new unitary authorities in the future.

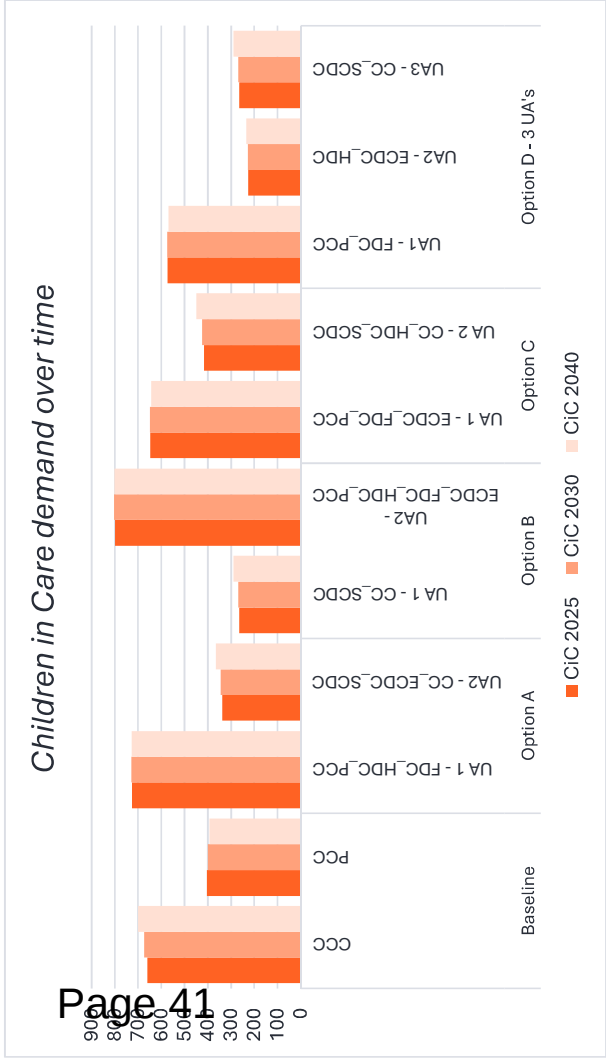


Children's Social Care: Demand CHILDREN IN CARE DEMAND VARIATION AND FORECASTING

The following slides show the expected demand for Children's Social Care in 2025, 2030 and 2040. The expected demand is driven by population forecasts in each new unitary.

The graph on the left shows total demand in 2025, 2030 and 2040, in general this is proportional to population in the new unitary authorities. This analysis will show the expected change in demand in each unitary.

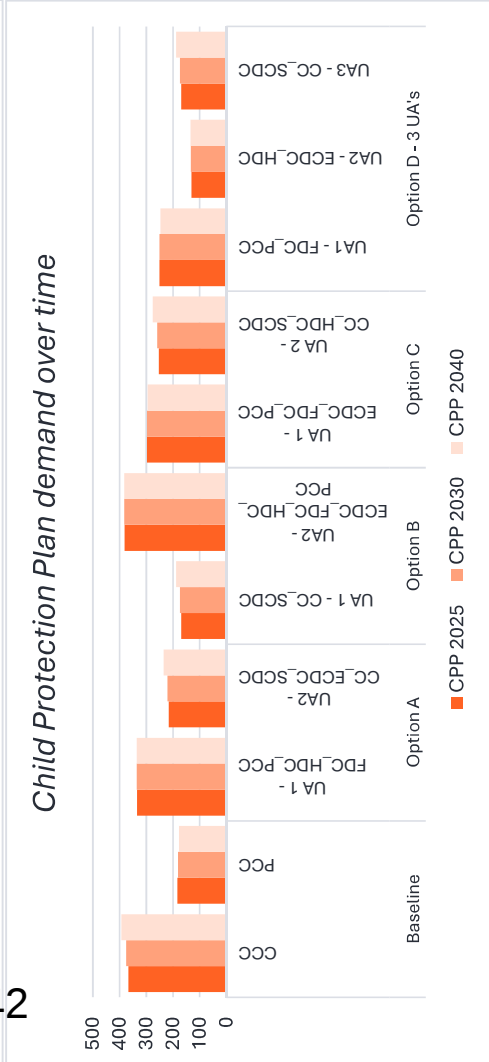
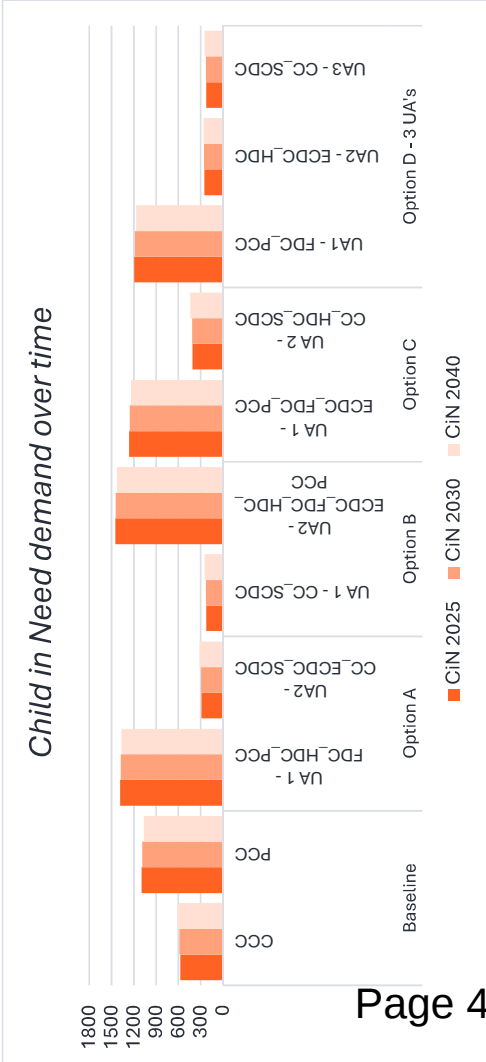
The table to the right of each graph shows the prevalence per 10,000 U18 population. This remains consistent over time as agreed in the methodology sessions. As this work has been performed without any personal identifiable data and caseload sizes for Children in Care settings are small, changes in the blend of settings with time have not been modelled.



Scenario	Proposed Authority	CiC Prevalence
Baseline	CCC	47
Option A	UA 1 - FDC_HDC_PCC	72
	UA 2 - CC_ECDC_SCDC	63
Option B	UA 1 - CC_SCDC	42
	UA 2 - ECDC_FDC_HDC_PCC	42
Option C	UA 1 - ECDC_FDC_PCC	60
	UA 2 - CC_HDC_SCDC	68
Option D - 3 UA's	UA 1 - FDC_PCC	41
	UA 2 - ECDC_HDC	75
	UA 3 - CC_SCDC	40
		42

Children's Social Care: Demand

DEMAND VARIATION AND FORECASTING



Data: council-provided data and forecasts, ONS data where required
Assumptions: Population growth matched to local population estimates. Detail included in methodology section of the appendix.

Scenario	Proposed Authority	CiN Prevalence
Baseline	CCC	41
Option A	PCC	195
Option B	UA 1 - FDC_HDC_PCC	120
Option C	UA2 - CC_ECDC_SCDC	36
Option D - 3 UA's	UA 1 - CC_SCDC	36
	UA2 - ECDC_FDC_HDC_PCC	108
	UA 1 - ECDC_FDC_PCC	132
	UA 2 - CC_HDC_SCDC	41
	UA1 - FDC_PCC	156
	UA2 - ECDC_HDC	44
	UA3 - CC_SCDC	36

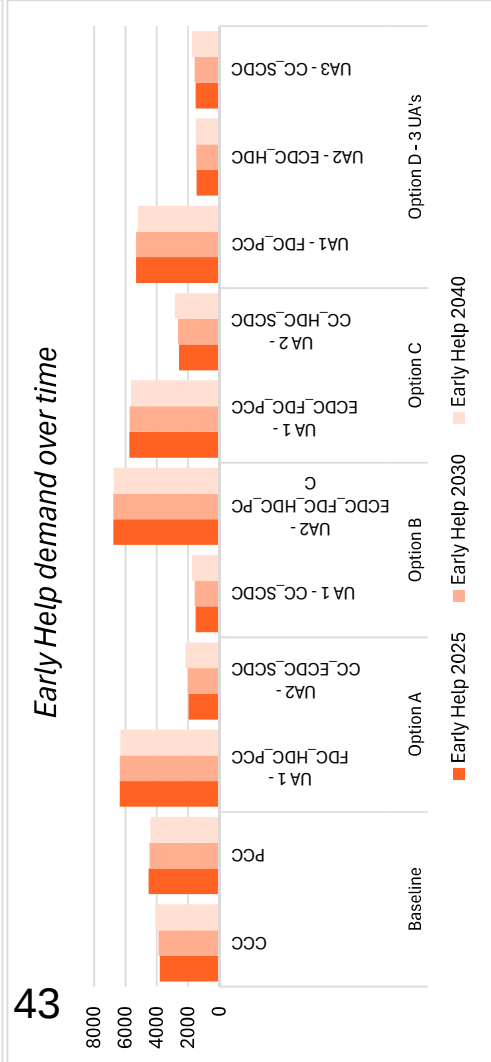
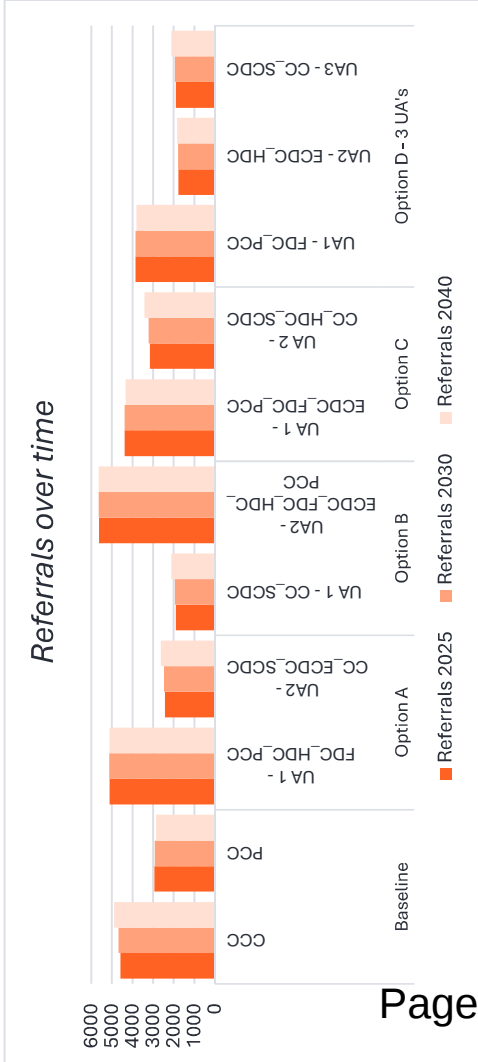
Scenario	Proposed Authority	CPP Prevalence
Baseline	CCC	26
Option A	PCC	33
Option B	UA 1 - FDC_HDC_PCC	29
Option C	UA2 - CC_ECDC_SCDC	27
Option D - 3 UA's	UA 1 - CC_SCDC	27
	UA2 - ECDC_FDC_HDC_PCC	28
	UA 1 - ECDC_FDC_PCC	31
	UA 2 - CC_HDC_SCDC	25
	UA1 - FDC_PCC	33
	UA2 - ECDC_HDC	23
	UA3 - CC_SCDC	27

Prevalence remains consistent. Prevalence is shown per 10k U18 population.

Children's Social Care: Demand

DEMAND VARIATION AND FORECASTING

Newton



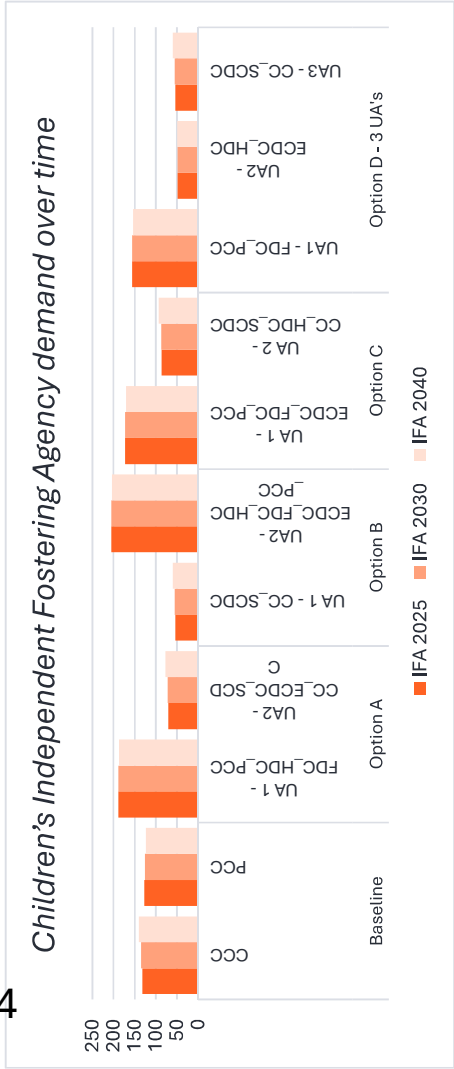
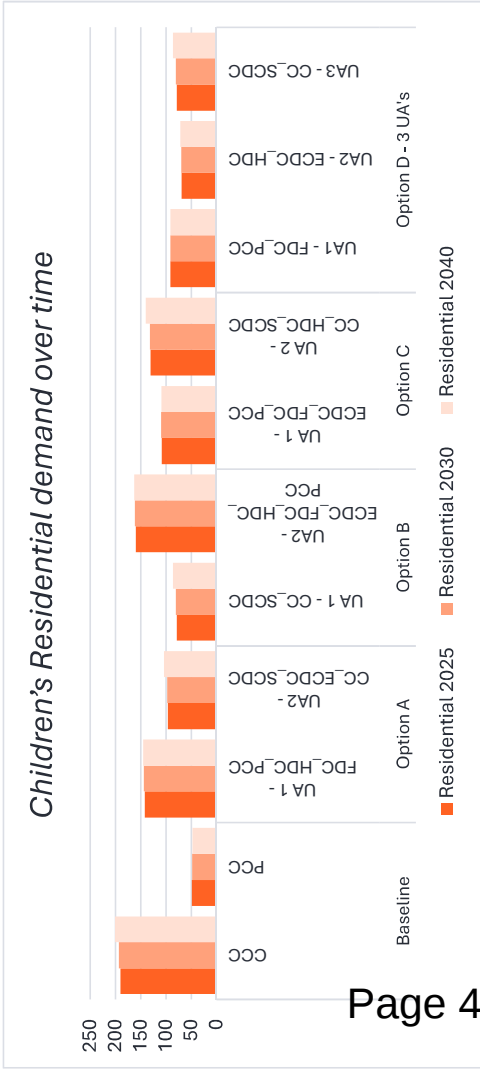
Data: council-provided data and forecasts, ONS data where required
Assumptions: Population growth matched to local population estimates. Detail included in methodology section of the appendix.

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Prevalence remains consistent. Prevalence is shown per 10k U13 population.

Children's Social Care: Demand

DEMAND VARIATION AND FORECASTING

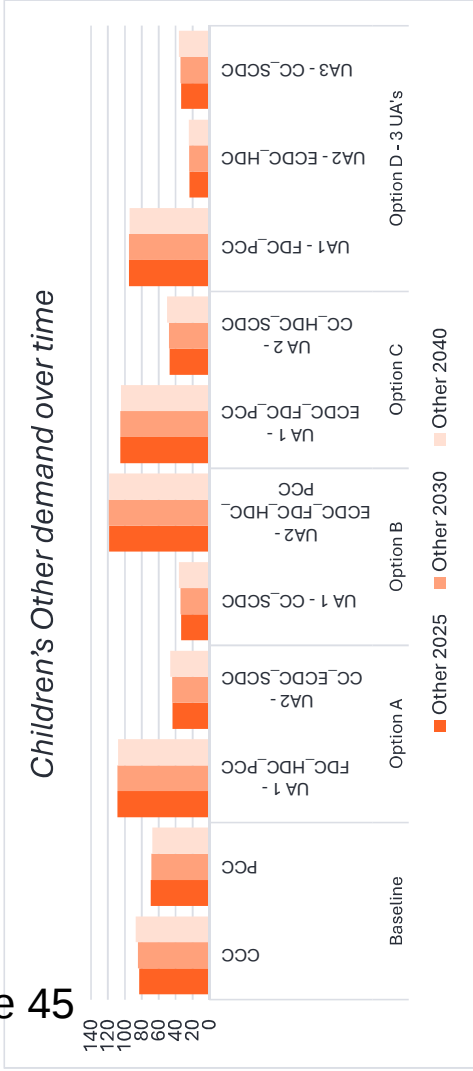
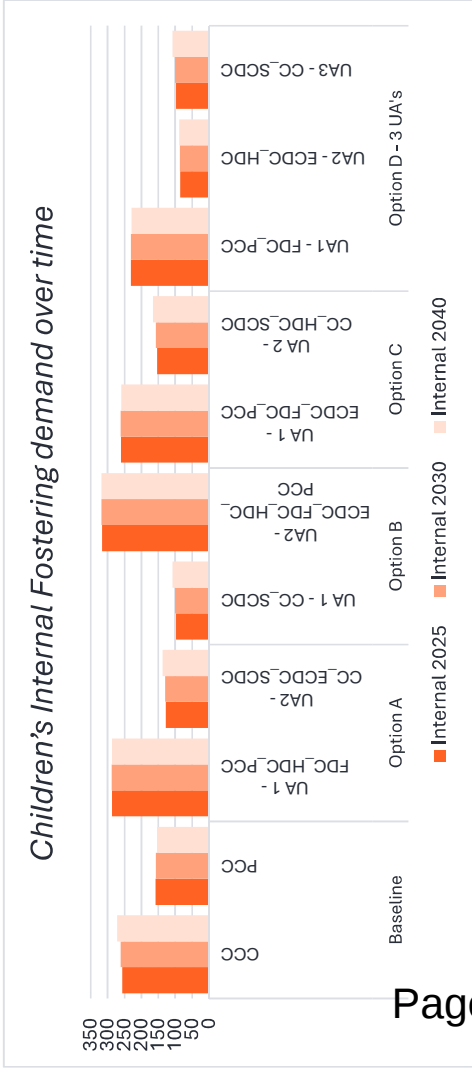


Scenario	Proposed Authority	Residential Care Prevalence
Baseline	CCC	13.5
Option A	PCC	8.7
Option B	UA 1 - FDC_HDC_PCC	12.4
Option C	UA2 - CC_ECDC_SCDC	11.8
Option D - 3 UA's	UA 1 - CC_SCDC	12.6
	UA2 - ECDC_FDC_HDC_PCC	11.9
	UA 1 - ECDC_FDC_PCC	11.3
	UA 2 - CC_HDC_SCDC	12.9
	UA1 - FDC_PCC	11.8
	UA2 - ECDC_HDC	12.1
	UA3 - CC_SCDC	12.6

Scenario	Proposed Authority	Independent Fostering Agency Prevalence
Baseline	CCC	9.4
Option A	PCC	22.6
Option B	UA 1 - FDC_HDC_PCC	16.3
Option C	UA2 - CC_ECDC_SCDC	8.7
Option D - 3 UA's	UA 1 - CC_SCDC	8.6
	UA2 - ECDC_FDC_HDC_PCC	15.3
	UA 1 - ECDC_FDC_PCC	18.1
	UA 2 - CC_HDC_SCDC	8.5
	UA1 - FDC_PCC	20.4
	UA2 - ECDC_HDC	8.5
	UA3 - CC_SCDC	8.6

Children's Social Care: Demand

DEMAND VARIATION AND FORECASTING



Scenario	Proposed Authority	Internal Fostering Prevalence
Baseline	CCC	18
	PCC	28
Option A	UA 1 - FDC_HDC_PCC	25
	UA2 - CC_ECDC_SCDC	16
Option B	UA 1 - CC_SCDC	16
	UA2 - ECDC_FDC_HDC_PCC	24
Option C	UA 1 - ECDC_FDC_PCC	27
	UA 2 - CC_HDC_SCDC	15
Option D - 3 UA's	UA1 - FDC_PCC	30
	UA2 - ECDC_HDC	15
	UA3 - CC_SCDC	16
Scenario	Proposed Authority	Other Prevalence
Baseline	CCC	6
	PCC	12
Option A	UA 1 - FDC_HDC_PCC	9
	UA2 - CC_ECDC_SCDC	5
Option B	UA 1 - CC_SCDC	5
	UA2 - ECDC_FDC_HDC_PCC	9
Option C	UA 1 - ECDC_FDC_PCC	11
	UA 2 - CC_HDC_SCDC	5
Option D - 3 UA's	UA1 - FDC_PCC	12
	UA2 - ECDC_HDC	4
	UA3 - CC_SCDC	5

Children’s Social Care: Unit costs

UNIT COST DEMAND VARIATION AND FORECASTING

The table shows a breakdown of the placement unit cost over time by setting in the proposed unitary formations. This has been calculated from the council data provided and refers to gross costs.

For each proposed unitarity formation unit price forecasts are based on a real-terms average of the previous cost data provided. The impact of inflation, changing demographics, and local cost variation has then been forecast.

Our analysis more widely had found there to be a correlation between unit cost and scale of existing upper tier local authorities. Controlling for deprivation, demographics and median income this applies an expected uplift in unit price for smaller unitary authorities. Detailed information is included in the methodology section of the appendix.

Scenario	Proposed Authority	Children in Care				Residential Care				Independent Fostering Agency				Internal Fostering				Other			
		2025	2030	2040	% change	2025	2030	2040	% change	2025	2030	2040	% change	2025	2030	2040	% change	2025	2030	2040	% change
Baseline	CCC	£2,659	£3,132	£4,329	63%	£6,171	£7,272	£10,058	63%	£987	£1,162	£1,612	63%	£419	£494	£686	64%	£4,190	£4,949	£6,838	63%
	PCC	£2,137	£2,517	£3,492	63%	£7,687	£9,055	£12,562	63%	£1,169	£1,377	£1,911	63%	£368	£433	£601	63%	£4,043	£4,762	£6,606	63%
	UA 1 - FDC_HDC_PCC	£2,377	£2,807	£3,901	64%	£6,732	£7,927	£10,970	63%	£1,080	£1,271	£1,762	63%	£377	£444	£617	64%	£4,194	£4,951	£6,869	64%
Option A	UA2 - CC_ECDC_SCDC	£2,586	£3,041	£4,206	63%	£6,041	£7,113	£9,848	63%	£1,014	£1,194	£1,657	63%	£443	£521	£724	64%	£3,762	£4,439	£6,163	64%
	UA 1 - CC_SCDC	£2,564	£3,015	£4,172	63%	£5,850	£6,891	£9,562	63%	£1,029	£1,212	£1,681	63%	£450	£530	£736	64%	£3,484	£4,118	£5,747	65%
	UA2 - ECDC_FDC_HDC_PCC	£2,406	£2,841	£3,948	64%	£6,760	£7,959	£11,018	63%	£1,073	£1,263	£1,750	63%	£381	£449	£624	64%	£4,238	£5,001	£6,940	64%
Option C	UA 1 - ECDC_FDC_PCC	£2,366	£2,794	£3,885	64%	£7,256	£8,546	£11,853	63%	£1,084	£1,276	£1,769	63%	£373	£440	£611	64%	£4,368	£5,159	£7,170	64%
	UA 2 - CC_HDC_SCDC	£2,557	£3,008	£4,164	63%	£5,802	£6,834	£9,479	63%	£1,011	£1,191	£1,652	63%	£435	£513	£712	64%	£3,313	£3,912	£5,455	65%
Option D - 3 UA's	UA1 - FDC_PCC	£2,308	£2,727	£3,791	64%	£7,267	£8,559	£11,874	63%	£1,086	£1,278	£1,772	63%	£365	£430	£597	64%	£4,298	£5,077	£7,057	64%
	UA2 - ECDC_HDC	£2,613	£3,078	£4,269	63%	£6,088	£7,169	£9,937	63%	£987	£1,163	£1,613	63%	£418	£492	£683	63%	£3,717	£4,375	£6,054	63%
	UA3 - CC_SCDC	£2,564	£3,015	£4,172	63%	£5,850	£6,891	£9,562	63%	£1,029	£1,212	£1,681	63%	£450	£530	£736	64%	£3,484	£4,118	£5,747	65%

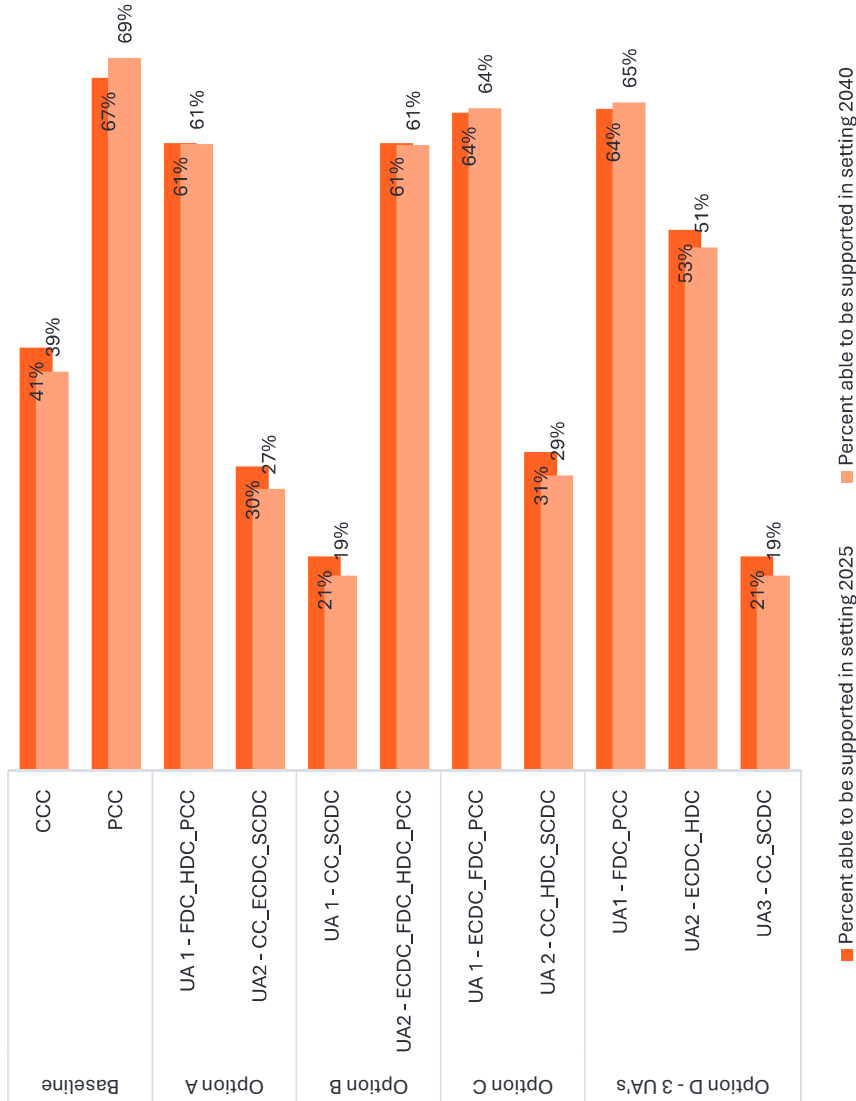
Children's Social Care: Capacity

PLACEMENT DEMAND AND CAPACITY

The placement capacity for internal fostering has been compared to the expected Children in Care caseload size as determined by the model.

Where there is a lower percentage, this indicates that a lower proportion of Children in Care can be supported in internal fostering. This likely means that there will be a greater use of IFA and residential , reducing the number of children who can be supported in a family-based setting.

Proportion of Children in Care that could be supported by our internal fostering capacity over time

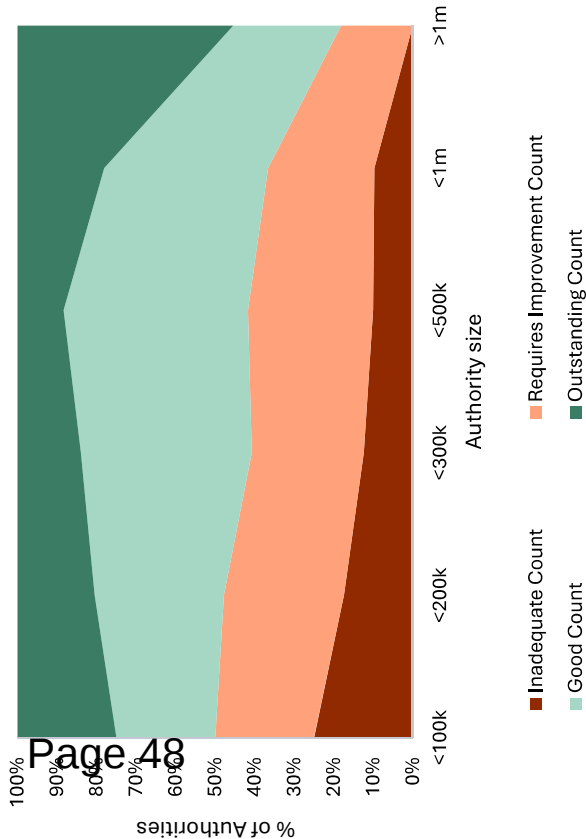


Data: council-provided data and forecasts, ONS data where required
Assumptions: Population growth matched to local population estimates.

Based on a regression model, controlling for authority, location deprivation and median income the probability of an authority achieving good or outstanding reduces as the authority shrinks.

An indication of the likelihood of an authority achieving a good or outstanding rating based on its likely characteristics has been calculated. This gives a score of 1 – 4 which relates to the probability of achieving inadequate (1) to outstanding (4). This analysis does not account for current OFSTED scores, or the effect of splitting or merging current unitary authorities and practises. This analysis should therefore only be treated as an indication of outcome, rather than a forecast or prediction.

OFSTED Distribution of Authorities



Scenario	Proposed Authority	Total population	Median income	IMD Score	OFSTED prediction score
Baseline	CCC	716.2k	£35.1k	14.00	3.16
	PCC	224.0k	£29.7k	27.61	2.52
Option A	UA 1 - FDC_HDC_PCC	520.1k	£31.5k	21.69	2.81
	UA2 - CC_ECDC_SCDC	420.1k	£36.7k	11.74	3.12
Option B	UA 1 - CC_SCDC	326.7k	£37.7k	11.80	3.13
	UA2 - ECDC_FDC_HDC_PCC	613.6k	£31.7k	20.14	2.88
Option C	UA 1 - ECDC_FDC_PCC	423.8k	£31.0k	23.58	2.72
	UA 2 - CC_HDC_SCDC	516.4k	£36.1k	12.04	3.13
Option D - 3 UA's	UA1 - FDC_PCC	330.4k	£30.4k	26.99	2.61
	UA2 - ECDC_HDC	283.2k	£33.3k	12.16	2.86
	UA3 - CC_SCDC	326.7k	£37.7k	11.80	3.13

Children’s Social Care

SERVICE COST SUMMARY

The predicted spend for each scenario is included in the table below alongside the expected service cost in 2025 and 2040. Note this is a general model designed to allow comparisons between proposed scenarios and is not a financial forecast for budgeting purposes.

In general, there is an increase in combined service cost for scenarios with more authorities. This is driven by the expected uplift on placement unit costs applied to smaller authorities and higher combined staffing overheads due to having more authorities and therefore leadership teams. Note, the model only accounts for the additional uplift in staffing costs for delivery teams and there is an expected additional increase from other teams, such as IT or legal teams, that have not been modelled in this analysis.

Scenario	Proposed Authority	Predicted spend for scenario 2025	CSC service cost 2025 (gross placements cost + staffing)	Predicted spend for scenario 2040	CSC service cost 2040 (gross placements cost + staffing)
Baseline	CCC		£122m		£212m
	PCC	£202.6m	£80m	£339.4m	£127m
Option A	UA 1 - FDC_HDC_PCC		£140m		£229m
	UA2 - CC_ECDC_SCDC	£201.6m	£62m	£337.9m	£109m
Option B	UA 1 - CC_SCDC		£48m		£86m
	UA2 - ECDC_FDC_HDC_PCC	£201.7m	£154m	£338.1m	£252m
Option C	UA 1 - ECDC_FDC_PCC		£125m		£203m
	UA 2 - CC_HDC_SCDC	£201.5m	£76m	£337.7m	£135m
Option D – 3 UA's	UA1 - FDC_PCC		£111m		£179m
	UA2 - ECDC_HDC	£201.6m	£43m	£338.0m	£72m
	UA3 - CC_SCDC		£48m		£86m

Data: council-provided data and forecasts, ONS data where required
Assumptions: Population growth matched to local population estimates. Detail included in methodology section of the appendix.

Section 2c: SEND and Education

The scope of this section is to provide insight into the likely impacts of each proposed scenario on SEND, covering demand, cost and quality over the next 15 years.

Education: SEND

SERVICE COST VARIATION AND FORECAST

This analysis has considered the variation in the cost of delivering care between each of the proposed unitary formations. This cost includes both the cost of the provision of care, in addition to the authority staffing cost associated with delivering SEND support (where this data has been provided). Staffing costs resulting from other teams, such as IT or legal teams, that have not been modelled in this analysis. Cost growth includes both the expected impact of increased demand, increased unit cost and wage increases. Spend per resident per year compares the cost for this service to total number of residents in the new authority. Note this is a general model designed to allow comparisons between proposed scenarios and is not a financial forecast for budgeting purposes.

This will support understanding if certain scenarios create variation in spend per resident both in 2025 and the future, showing where there are unitary authorities with a higher spend per resident to the baseline scenario as well as unitary authorities that have high cost growth in the future. Growth in cost is driven by inflation and the different growth rates in demand across constituent areas within proposed authorities.

Scenario	Proposed Authority	Spend per resident 2025	Spend per resident 2040	% growth in spend (2025-2040)	SEND service cost 2025 (placements cost + staffing)	
Baseline	CCC	£191	£544	233%	£127m	£10m
	PCC	£222	£823	312%	£46m	£4m
Option A	UA 1 - FDC_HDC_PCC	£211	£689	265%	£101m	£9m
	UA2 - CC_ECDC_SCDC	£183	£514	239%	£71m	£6m
Option B	UA 1 - CC_SCDC	£183	£507	241%	£55m	£4m
	UA2 - ECDC_FDC_HDC_PCC	£207	£666	260%	£117m	£10m
Option C	UA 1 - ECDC_FDC_PCC	£220	£734	274%	£86m	£7m
	UA 2 - CC_HDC_SCDC	£181	£510	235%	£87m	£7m
Option D – 3 UA's	UA1 - FDC_PCC	£230	£789	283%	£70m	£6m
	UA2 - ECDC_HDC	£181	£524	226%	£47m	£4m
	UA3 - CC_SCDC	£183	£507	241%	£55m	£4m

■ SEND provision spend 2025
■ SEND staffing cost 2025

Education: School age population

POPULATION VARIATION AND FORECASTING

The existing school aged population is shown across the districts in the geography. The below table shows the expected growth rate for school aged population in each of the districts.

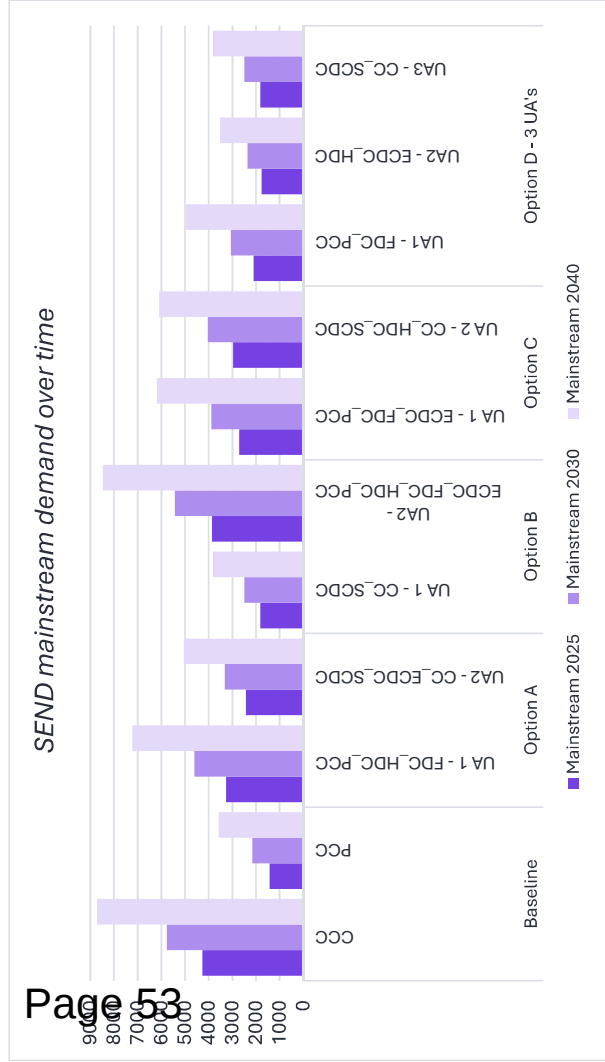
This analysis shows the underlying population trends that drive the change in demand for each of the new unitary authorities in the future.

District	School aged population by year			Percentage growth in school aged population from 2025-2040	Average percentage of Authority school aged	Annual growth rate of school aged population
	2025	2030	2040			
Cambridge	16.6k	15.8k	15.8k	-5%	10%	-0.3%
East Cambridgeshire	13.1k	12.6k	12.7k	-3%	13%	-0.2%
Fenland	14.2k	14.3k	14.2k	0%	13%	0.0%
Huntingdonshire	26.5k	26.1k	26.8k	1%	13%	0.1%
Peterborough	39.3k	38.1k	36.6k	-7%	16%	-0.5%
South Cambridgeshire	27.2k	27.9k	31.5k	16%	15%	1.0%
Average growth rate						

The following slides show the expected demand for EHCPs in 2025, 2030 and 2040. The expected demand is driven by population forecasts in each new unitary as well as the increasing prevalence of EHCPs.

The graph on the left shows total demand in 2025, 2030 and 2040, in general this is proportional to population in the new unitary authorities. This analysis will show the expected growth in each unitary and identify areas that are expected to see high growth.

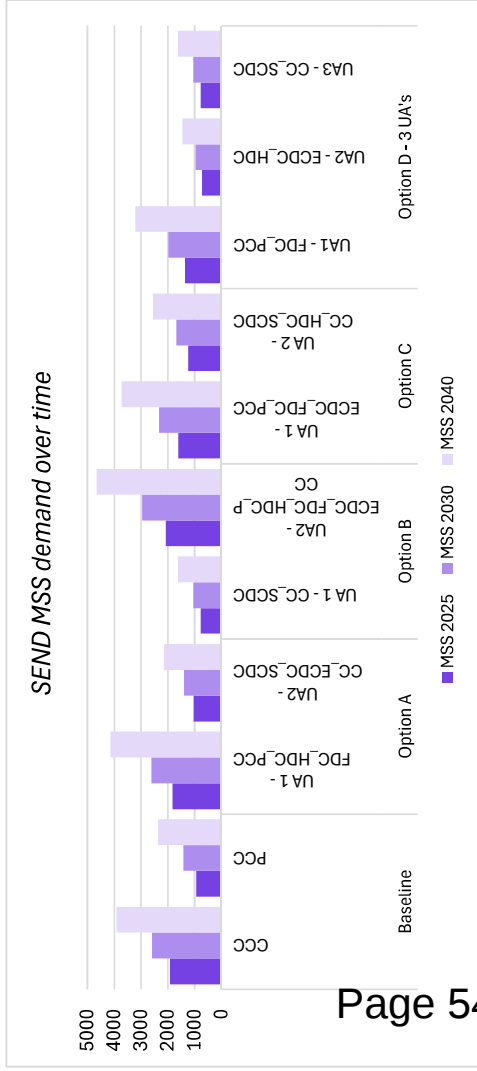
The table to the right of each graph shows the prevalence per 10,000 under 25 population. This is expected to grow at the rate seen in the data provided.



Education: SEND

MAINTAINED SPECIAL SCHOOLS (MSS) AND INDEPENDENT NON-MAINTAINED SPECIAL SCHOOLS (INMSS) DEMAND

Newton



Scenario Proposed Authority	MSS Prevalence 2025	MSS Prevalence 2030	MSS Prevalence 2040
Baseline	94	120	176
CCC	128	189	318
PCC	122	169	267
Option A	81	104	151
Option B	75	96	138
Option C	120	165	260
Option D - 3 UA's	135	191	311
UA1 - FDC_PCC	130	181	293
UA2 - CC_ECDC_SCDC	82	104	151
UA2 - ECDC_FDC_PCC	120	165	260
UA2 - CC_HDC_SCDC	75	96	138
UA2 - ECDC_HDC	99	129	191
UA3 - CC_SCDC	75	96	138

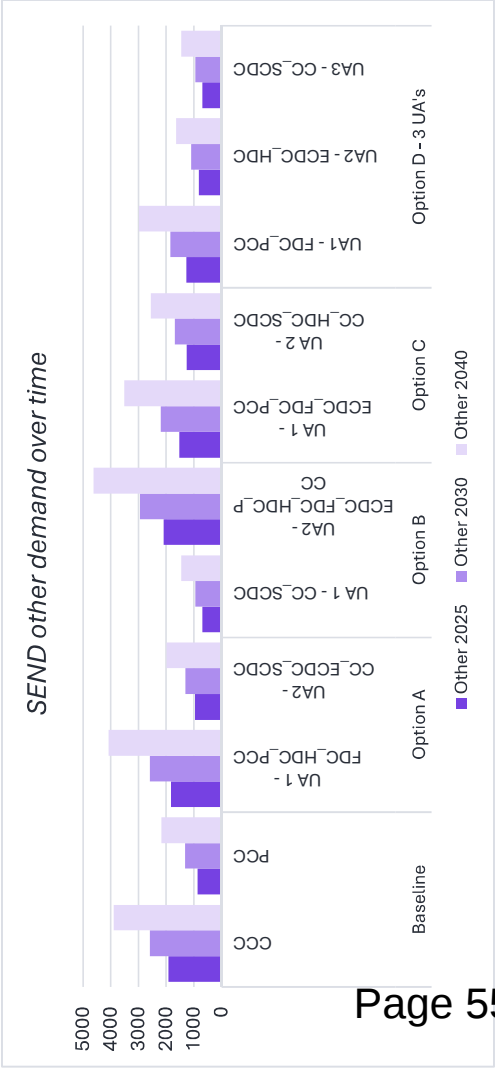
Scenario Proposed Authority	INMSS Prevalence 2025	INMSS Prevalence 2030	INMSS Prevalence 2040
Baseline	18	24	35
CCC	9	13	22
Option A	15	20	32
Option B	17	22	32
Option C	16	20	29
Option D - 3 UA's	14	19	30
UA1 - FDC_PCC	15	21	33
UA2 - CC_ECDC_SCDC	15	20	32
UA2 - ECDC_FDC_PCC	17	21	31
UA2 - CC_HDC_SCDC	14	19	30
UA2 - ECDC_HDC	20	25	38
UA3 - CC_SCDC	16	20	29

Data: council-provided data and forecasts, ONS data where required
Assumptions: Population growth matched to local population estimates. Detail included in methodology section of the appendix.

Prevalence increases with time based off current SEND growth. Prevalence is shown per 10k under 25 population. MSS: Maintained Special Schools. INMSS: Independent Non-Maintained Special Schools.

Education: SEND OTHER DEMAND

Newton



Scenario	Proposed Authority	Other Prevalence 2025	Other Prevalence 2030	Other Prevalence 2040
Baseline	CCC	94	120	175
Option A	PCC	118	174	293
	UA 1 - FDC_HDC_PCC	121	167	264
	UA2 - CC_ECDC_SCDC	75	96	140
Option B	UA 1 - CC_SCDC	67	86	124
	UA2 - ECDC_FDC_HDC_PCC	120	164	258
Option C	UA 1 - ECDC_FDC_PCC	123	171	276
	UA 2 - CC_HDC_SCDC	82	105	151
Option D - 3 UA's	UA1 - FDC_PCC	126	177	289
	UA2 - ECDC_HDC	111	145	216
	UA3 - CC_SCDC	67	86	124

Data: council-provided data and forecasts, ONS data where required
Assumptions: Population growth matched to local population estimates. Detail included in methodology section of the appendix.

PRIVATE AND CONFIDENTIAL

Prevalence increases with time based off current SEND growth.
Prevalence is shown per 10k under 25 population. Other contains all SEND demand not captured in the previous categories.

Education: SEND UNIT COSTS VARIATION AND FORECASTING

The table shows a breakdown of the placement unit cost over time by setting in the proposed unitary formations. This has been calculated from the council data provided, Peterborough SEND costs were not broken down by type therefore Cambridgeshire averages have been used.

For each proposed unitarity formation unit price forecasts are based on a real-terms average of the previous cost data provided. The impact of inflation, changing demographics, and local cost variation has then been forecast.

£/week	Scenario	Proposed Authority	Mainstream			Maintained Special Schools			Independent Non-Maintained Special Schools			Other		
			2025	2030	2040	% change	2025	2030	2040	% change	2025	2030	2040	% change
Baseline	CCC	£201	£237	£329		64%	£250	£295	£409	64%	£1,327	£1,562	£2,167	63%
	PCC	£201	£237	£329		63%	£251	£296	£411	63%	£1,319	£1,554	£2,156	63%
	UA 1 - FDC_HDC_PCC	£198	£233	£324		64%	£245	£289	£402	64%	£1,367	£1,609	£2,230	63%
Option A	UA2 - CC_ECDC_SCDC	£206	£242	£336		64%	£260	£306	£425	63%	£1,282	£1,509	£2,095	63%
	UA 1 - CC_SCDC	£211	£248	£344		63%	£266	£313	£435	63%	£1,376	£1,619	£2,245	63%
	UA2 - ECDC_FDC_HDC_PCC	£197	£232	£322		64%	£245	£289	£401	64%	£1,296	£1,528	£2,120	64%
Option B	UA 1 - ECDC_FDC_PCC	£202	£238	£330		63%	£248	£292	£406	64%	£1,329	£1,565	£2,169	63%
	UA 2 - CC_HDC_SCDC	£201	£237	£329		64%	£254	£299	£415	64%	£1,323	£1,558	£2,163	63%
	UA1 - FDC_PCC	£205	£241	£334		63%	£249	£294	£408	64%	£1,461	£1,711	£2,362	62%
Option D – 3 UA's	UA2 - ECDC_HDC	£187	£220	£306		63%	£236	£278	£385	63%	£1,141	£1,343	£1,862	63%
	UA3 - CC_SCDC	£211	£248	£344		63%	£266	£313	£435	63%	£1,376	£1,619	£2,245	63%

Education: SEND deficit SEND DEFICIT DISTRIBUTION

As of 31st March 2025 Cambridgeshire has a deficit of £62.62m. The SEND deficit position is projected to increase by vesting day where this position may fall to the proposed new unitary authorities. It is undecided how this deficit may be split and is likely to involve a financial settlement based on the assets and future income of the new unitary authorities. The contribution from each of the new unitary authorities has been estimated by calculating the cumulative spend on EHCPs over the past 3 years. This shows the proportion of spend that would have come from each of the proposed unitary authorities and therefore their estimated contribution to the deficit.

Note this analysis has not considered the different deficit positions of neighbouring unitary authorities along with how the DSG budget has been managed.

Cumulative spend on EHCPs over past 3 years



Education: Demand forecasting

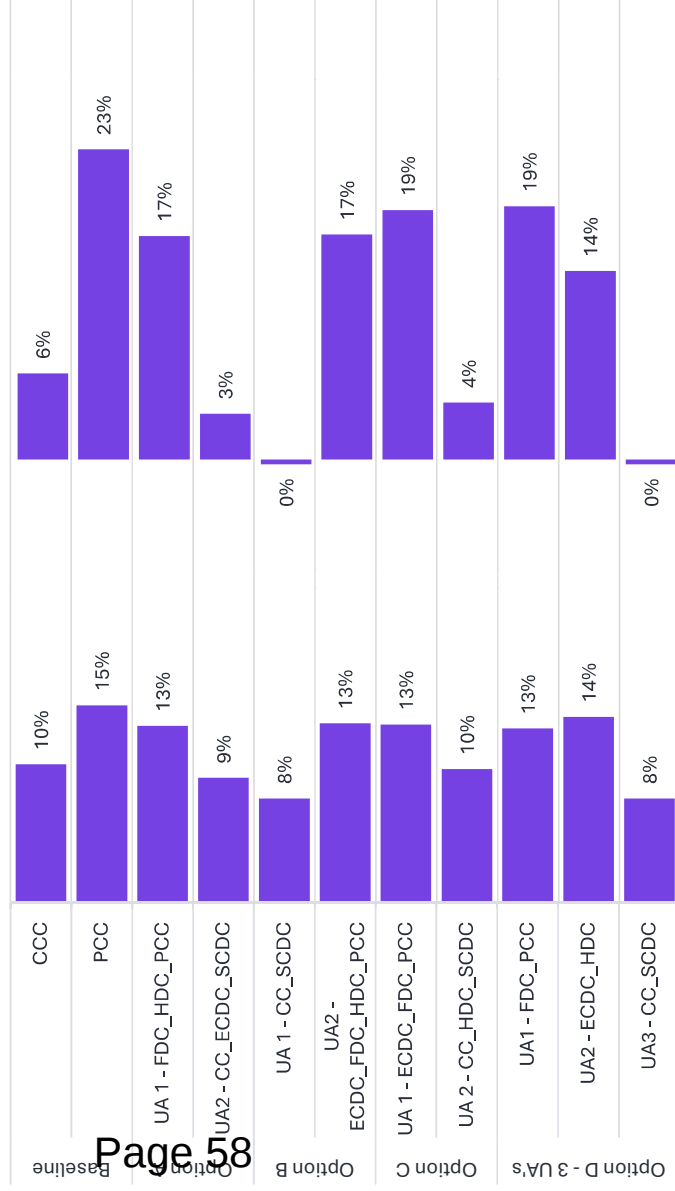
PLACEMENT DEMAND AND CAPACITY

The below graphs show the school capacity compared to the projected school age population. This shows the demand vs capacity for schools in each of the proposed unitary authorities.

Note if neighbouring unitary data has not been provided the capacity from schools within these has not been included.

2025 school capacity deficit

2040 school capacity deficit



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MSS capacity

This graph shows the percentage of children in maintained special schools (MSS) and independent non maintained special schools (INMSS) that can be supported in local authority owned special schools.

Where there is a lower percentage, this indicates that a lower proportion of young people can be supported in maintained special schools. This likely means that there will be a greater use of INMSS placements.

MSS capacity



Education: SEND costs

SERVICE COST SUMMARY

The predicted spend for each scenario is included in the table below alongside the expected service cost in 2025 and 2040. Note this is a general model designed to allow comparisons between proposed scenarios and is not a financial forecast for budgeting purposes.

In general, there is an increase in combined service cost for scenarios with more authorities. This is driven by higher combined staffing overheads due to having more authorities and therefore leadership teams. Note, the model only accounts for the additional uplift in staffing costs for delivery teams and there is an expected additional increase from other teams, such as IT or legal teams, that have not been modelled in this analysis. SEND staffing costs where not provided so the total cost is consistent across scenarios.

Scenario	Proposed Authority	Predicted spend for scenario 2025	SEND service cost 2025 (gross placements cost + staffing)	Predicted spend for scenario 2040	SEND service cost 2040 (gross placements cost + staffing)
Baseline	GCC		£137m		£457m
	PCC	£186.7m	£50m	£661.6m	£205m
Option A	UA 1 - FDC_HDC_PCC		£110m		£400m
	UA2 - CC_ECDC_SCDC	£186.7m	£77m	£661.6m	£261m
Option B	UA 1 - CC_SCDC		£60m		£204m
	UA2 - ECDC_FDC_HDC_PCC	£186.7m	£127m	£661.6m	£458m
Option C	UA 1 - ECDC_FDC_PCC		£93m		£348m
	UA 2 - CC_HDC_SCDC	£186.7m	£93m	£661.6m	£313m
Option D – 3 UA's	UA1 - FDC_PCC		£76m		£291m
	UA2 - ECDC_HDC	£186.7m	£51m	£661.6m	£167m
	UA3 - CC_SCDC		£60m		£204m

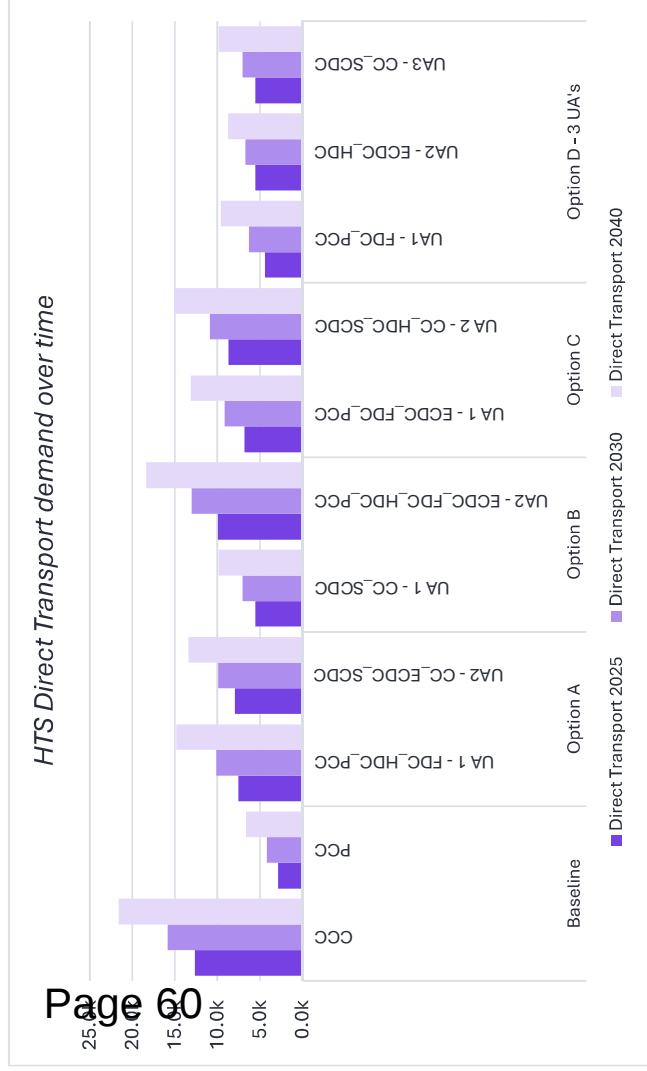
Education: HTS transport

DIRECT TRANSPORT DEMAND VARIATION AND FORECASTING

The following slides show the expected demand for home to school transport in 2025, 2030 and 2040. The expected demand is driven by population forecasts in each new unitary as well as the increasing SEND demand.

The graph on the left shows total demand in 2025, 2030 and 2040, in general this is proportional to population in the new unitary authorities. This analysis will show the expected change in demand in each unitary.

The table to the right of each graph shows the prevalence per 10,000 school aged population. This grow over time as home to school transport is expected to grow with the increase in SEND prevalence.



Data: council-provided data and forecasts, ONS data where required

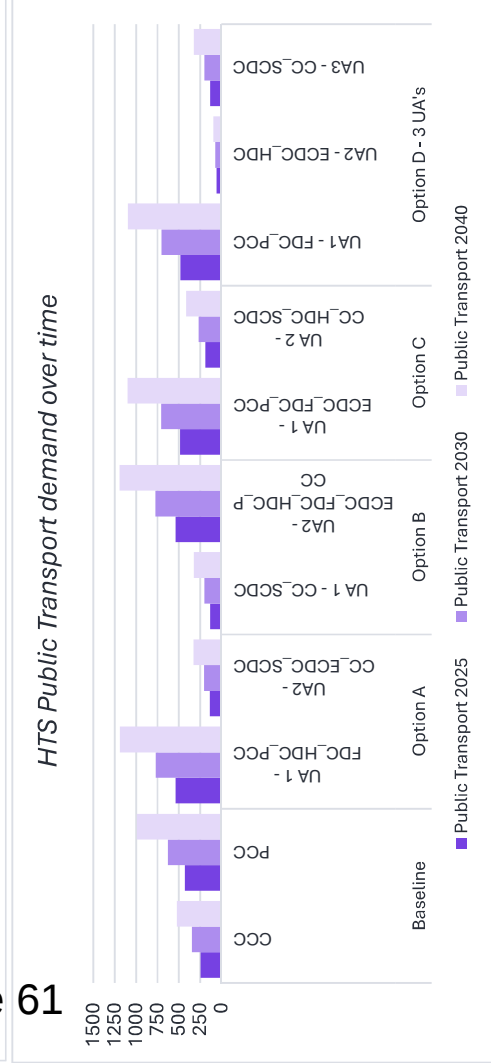
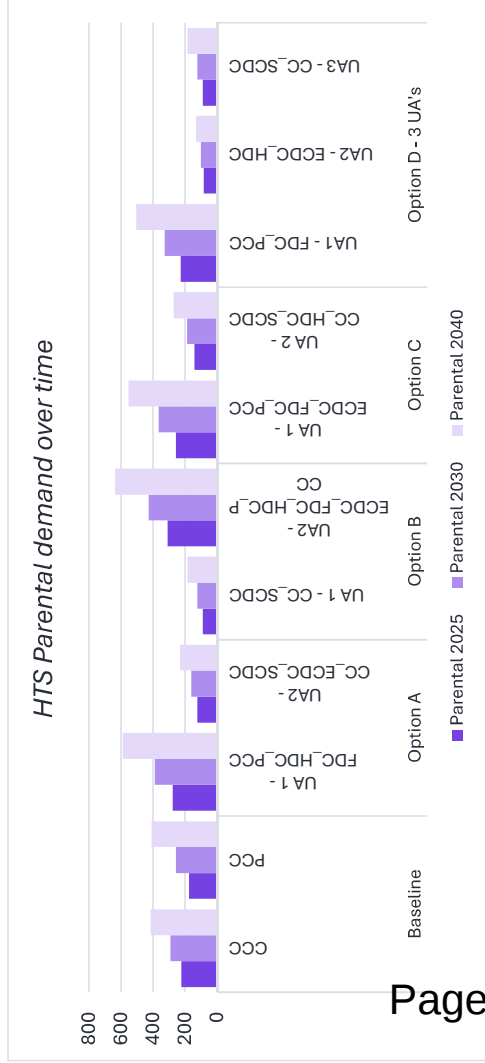
Assumptions: Population growth matched to local population estimates. HTS transport demand grows with SEND demand. Detail included in methodology section of the appendix.

PRIVATE AND CONFIDENTIAL

Prevalence increases with time based off current SEND growth.
Prevalence is shown per 10k school aged population.

Education: HTS transport

PARENTAL AND PUBLIC TRANSPORT DEMAND VARIATION AND FORECASTING



Scenario	Proposed Authority	Parental Prevalence 2025	Parental Prevalence 2030	Parental Prevalence 2040
Baseline	CCC	23	30	41
Option A	PCC	45	68	112
	UA 1 - FDC_HDC_PCC	35	50	76
	UA2 - CC_ECDC_SCDC	22	29	39
Option B	UA 1 - CC_SCDC	21	28	39
	UA2 - ECDC_FDC_HDC_PCC	33	47	71
Option C	UA 1 - ECDC_FDC_PCC	39	56	87
	UA 2 - CC_HDC_SCDC	20	27	36
Option D - 3 UA's	UA1 - FDC_PCC	42	62	100
	UA2 - ECDC_HDC	21	26	33
	UA3 - CC_SCDC	21	28	39

Scenario	Proposed Authority	Public Transport Prevalence 2025	Public Transport Prevalence 2030	Public Transport Prevalence 2040
Baseline	CCC	25	35	52
Option A	PCC	109	165	271
	UA 1 - FDC_HDC_PCC	67	98	153
	UA2 - CC_ECDC_SCDC	24	36	54
Option B	UA 1 - CC_SCDC	30	45	68
	UA2 - ECDC_FDC_HDC_PCC	58	85	132
Option C	UA 1 - ECDC_FDC_PCC	73	109	173
	UA 2 - CC_HDC_SCDC	27	38	56
Option D - 3 UA's	UA1 - FDC_PCC	90	134	216
	UA2 - ECDC_HDC	15	18	24
	UA3 - CC_SCDC	30	45	68

Data: council-provided data and forecasts, ONS data where required
Assumptions: Population growth matched to local population estimates. HTS transport demand grows with SEND demand. Detail included in methodology section of the appendix.

Prevalence increases with time based off current SEND growth.
Prevalence is shown per 10k school aged population.

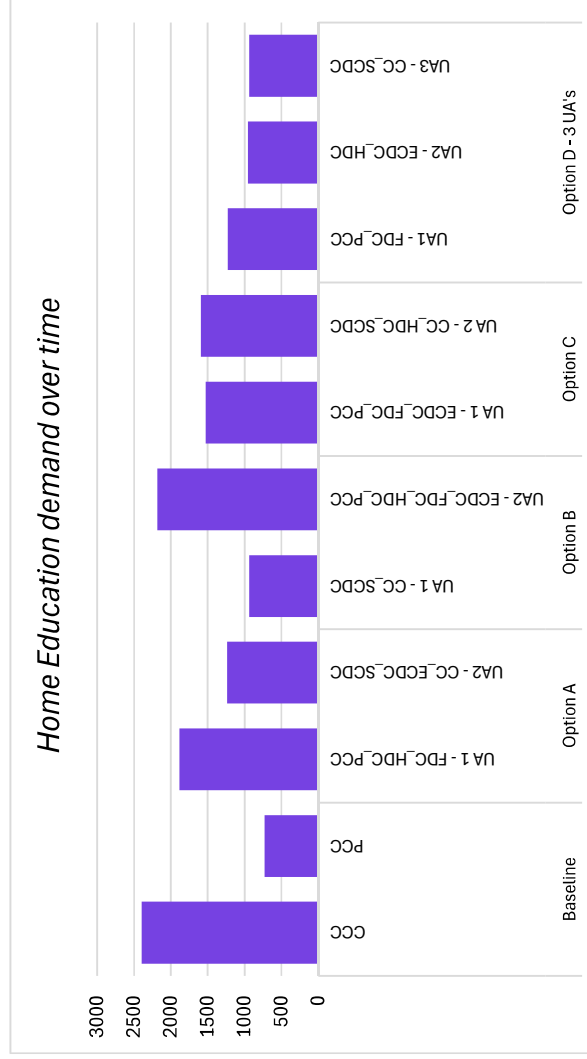
Education: Home education

DEMAND VARIATION AND FORECASTING

The following slides show the expected home education, school exclusion, school absences and Children Missing Education (where data was available) in 2025, 2030 and 2040. The expected demand is driven by population forecasts in each new unitary.

The graph on the left shows total demand in 2025, 2030 and 2040, in general this is proportional to population in the new unitary authorities. This analysis will show the expected change in demand in each unitary.

The table to the right of each graph shows the prevalence per 10,000 school aged population, this remains consistent over time.

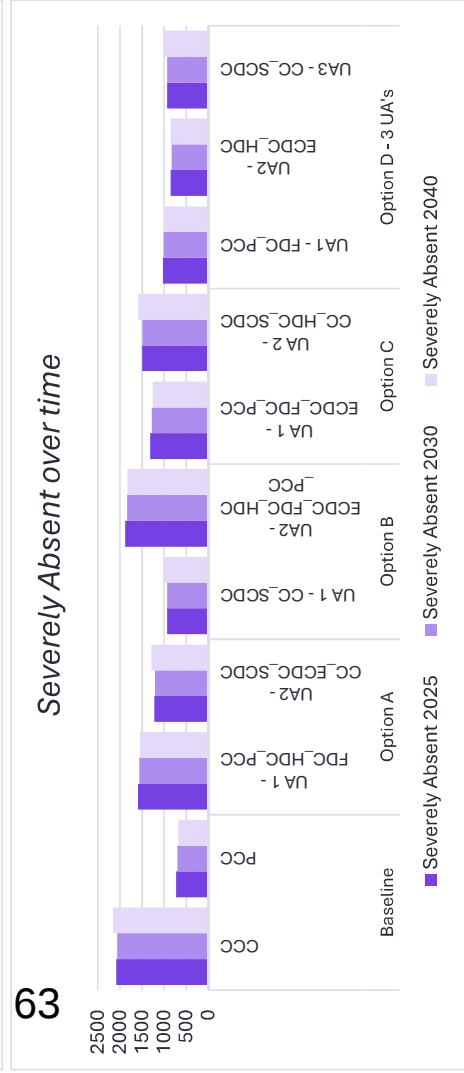
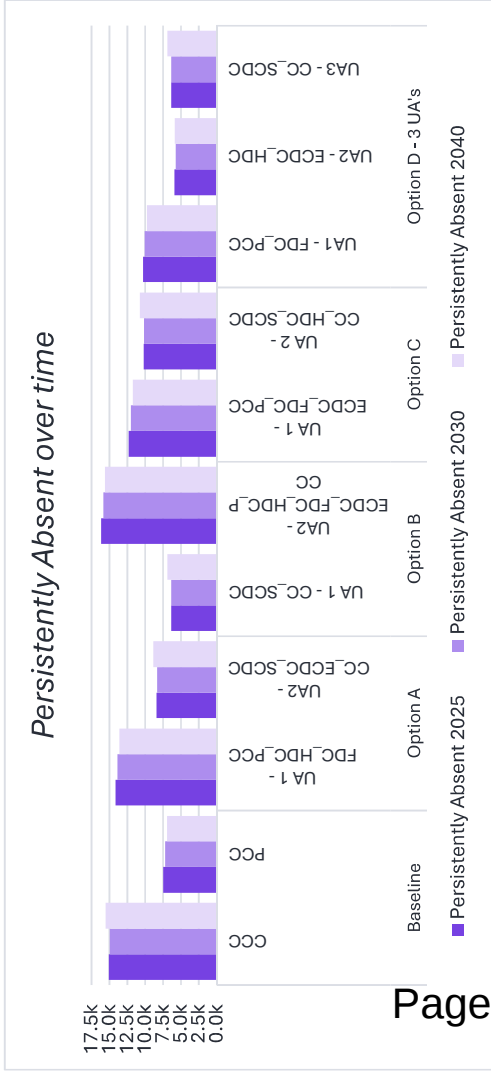


Note, for home education the data available shows prevalence increasing. However, both council data and nationally available data was only available for post covid years, and it is unclear if this trend will continue or flatten out. Therefore, only demand for 2025 has been shown. Nationally available data has been taken for PCC prevalences.

Education: Absences and Exclusions

DEMAND VARIATION AND FORECASTING

Newton



Nationally available data has been used for severely absent pupil demand, and national data has additionally been used in all cases within this section for PCC.

Data: council-provided data and forecasts, ONS data where required, nationally available data

Assumptions: Population growth matched to local population estimates. Detail included in methodology section of the appendix.

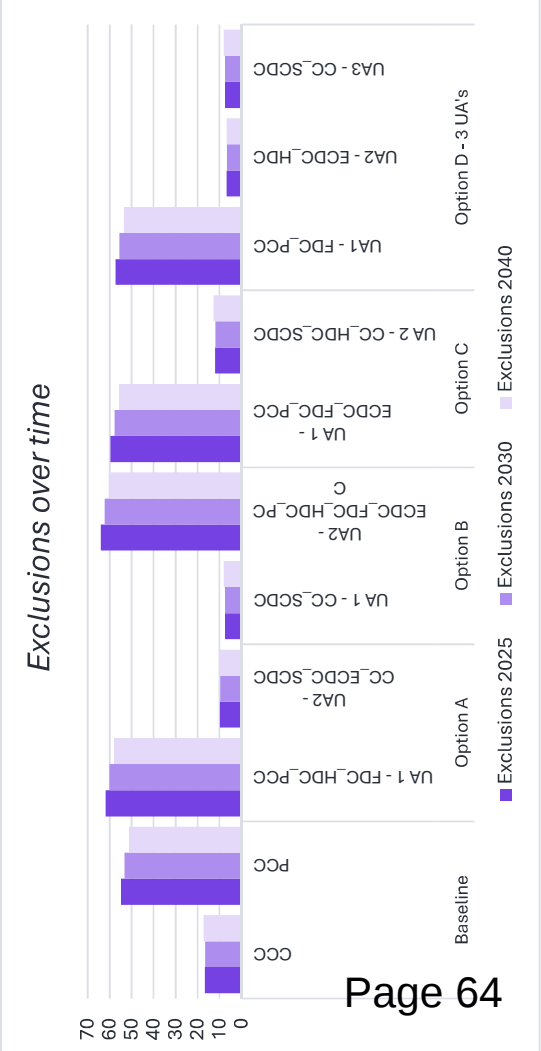
Scenario	Proposed Authority	Persistently Absent Prevalence
Baseline	CCC	1545
Option A	PCC	1900
Option B	UA 1 - FDC_HDC_PCC	1766
Option C	UA 2 - CC_ECDC_SCDC	1481
Option D - 3 UA's	UA 1 - CC_SCDC	1456
Option E	UA 2 - ECDC_FDC_HDC_PCC	1737
Option F	UA 1 - ECDC_FDC_PCC	1852
Option G	UA 2 - CC_HDC_SCDC	1454
Option H	UA 1 - FDC_PCC	1923
Option I	UA 2 - ECDC_HDC	1486
Option J	UA 3 - CC_SCDC	1456

Scenario	Proposed Authority	Severely Absent Prevalence
Baseline	CCC	214
Option A	PCC	185
Option B	UA 1 - FDC_HDC_PCC	199
Option C	UA 2 - CC_ECDC_SCDC	215
Option D	UA 1 - CC_SCDC	214
Option E	UA 2 - ECDC_FDC_HDC_PCC	202
Option F	UA 1 - ECDC_FDC_PCC	197
Option G	UA 2 - CC_HDC_SCDC	213
Option H	UA 1 - FDC_PCC	192
Option I	UA 2 - ECDC_HDC	215
Option J	UA 3 - CC_SCDC	214

Prevalence remains consistent. Prevalence is shown per 10k school aged population.

Education: Absences and Exclusions

DEMAND VARIATION AND FORECASTING



Scenario	Proposed Authority	Exclusions Prevalence
Baseline	CCC	2
Option A	PCC	14
	UA 1 - FDC_HDC_PCC	8
	UA2 - CC_ECDC_SCDC	2
	UA 1 - CC_SCDC	2
Option B	UA2 - ECDC_FDC_HDC_PCC	7
	UA 1 - ECDC_FDC_PCC	9
	UA 2 - CC_HDC_SCDC	2
	Option D - 3 UA's UA1 - FDC_PCC	11
Option C	UA2 - ECDC_HDC	2
	UA3 - CC_SCDC	2

Section 2d: Housing

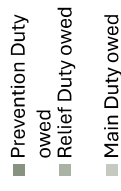
The scope of this section is to provide insight into the likely impacts of each proposed scenario on homelessness demand.

Homelessness: Households owed a duty

DEMAND FOR HOMELESSNESS SUPPORT FOR 2025 HAS BEEN MODELLED

This analysis has modelled the demand for homelessness support for 2025. This analysis shows the variation in 2025 demand for homelessness support based on what duty is required. This will identify if certain scenarios are creating unitary authorities that have a high demand variation in 2025 as well as an increased demand to baseline scenario. This is shown both as a % of total households in that scenario and a total number of households.

Scenario	Proposed Authority	% of total households assessed as owed a prevention duty	% of total households assessed as owed a relief duty	% of total households assessed as owed a main duty*	Number of households assessed as owed a duty		
Baseline	CCC	0.63%	0.49%	0.25%	1762	1365	694
	PCC	1.20%	0.69%	0.26%	1008	582	216
Option A	UA 1 - FDC_HDC_PCC	0.92%	0.55%	0.27%	1925	1152	574
	UA2 - CC_ECDC_SCDC	0.55%	0.52%	0.22%	845	795	336
Option B	UA 1 - CC_SCDC	0.48%	0.54%	0.23%	544	609	265
	UA2 - ECDC_FDC_HDC_PCC	0.89%	0.54%	0.26%	2226	1339	645
Option C	UA 1 - ECDC_FDC_PCC	0.93%	0.62%	0.24%	1584	1054	408
	UA 2 - CC_HDC_SCDC	0.62%	0.47%	0.26%	1186	893	503
Option D - 3 UA's	UA1 - FDC_PCC	0.99%	0.67%	0.26%	1282	868	336
	UA2 - ECDC_HDC	0.79%	0.40%	0.26%	944	471	309
	UA3 - CC_SCDC	0.48%	0.54%	0.23%	544	609	265



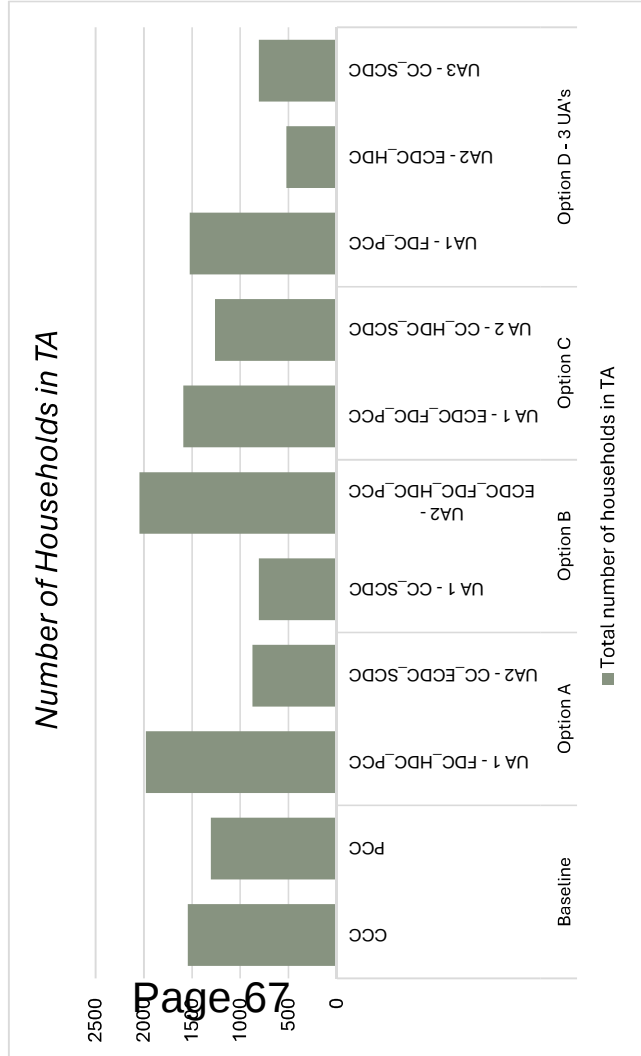
*Main duty is households assessed, following relief duty end, as unintentionally homeless and priority need. Therefore, there may be cases of a household included in both relief and main duty count

Homelessness: Temporary accommodation

TEMPORARY ACCOMMODATION DEMAND FOR 2025 HAS BEEN MODELLED

This analysis has modelled the demand for temporary accommodation for 2025. This analysis shows the variation in temporary accommodation support and will identify if certain scenarios are creating high variation in demand between unitary authorities as well as an increase in demand to baseline.

The graph on the left shows number of households needing temporary accommodation and the table on the right shows the prevalence of this as a % of total households in the unitary.



Homelessness: Historic trends

DEMAND FOR HOMELESSNESS SUPPORT IS EXPECTED TO INCREASE

Newton ↗

The limitations of the nationally available data along with the changing trends in homelessness means the future homelessness demand can not be modelled accurately. However, the 2025 analysis provides a view of how both the number of households facing homelessness and the number of households in temporary accommodation will split amongst the proposed unitary authorities.

Historic trends:

There has been an increase in the number of households seeking help from local authorities for support with homelessness. This has been driven by the impact of recent economic and policy developments.

- Temporary accommodation: There has been a rise in temporary accommodation placements, particularly Bed and Breakfast hotel placements.
- First-Time Homelessness: More people are experiencing homelessness for the first time.
- Housing Cost Burden: Rising housing costs and lack of affordable housing are major drivers of homelessness. There are now more renter households paying over 50% of their income on rent.

Future demand:

It is expected that the number of households requiring local authority support for housing and homelessness prevention will continue to increase. However, there are policy changes that are due to impact this. For example, the Renters (Reform) Bill will have an impact on homelessness legislation, with the government planning to make relevant changes to the homelessness legislation to align with the reforms brought forward by this bill.

Data

THE MODEL HAS BEEN INPUTTED WITH DATA PROVIDED BY THE COUNCIL

As part of this work data was requested from councils . This data is outlined below and is the foundation for the analysis in the report:

Area	Data requested
ASC	- Number of clients accessing long term support at year end split by working age Adult and Older Adult. Provided as a snapshot at financial year end, 21/22, 22/23, 23/24 - Where possible this data has been provided by originating address and placement address - Number of requests for support year end split by working age Adult and Older Adult. Provided as a snapshot at financial year end, 21/22, 22/23, 23/24 - Number of requests for support resulting in a service year end split by working age Adult and Older Adult. Provided as a snapshot at financial year end, 21/22, 22/23, 23/24 - Average unit cost for each provision split by working age Adult and Older Adult. This was requested for the last 3 financial years, 21/22, 22/23, 23/24 - Both gross and net costs were requested. - Where possible this data has been provided by originating address and placement address - Capacity of Residential Care and Nursing Care provisions - FTE and pay by team for staff involved in delivering Adult Social Care
CSC	- Number of Children in Care by provision at year end. Provided as a snapshot at financial year end, 21/22, 22/23, 23/24 - Where possible this data has been provided by originating address and placement address - Number of child protection pans and Child in need plans at year end. Provided as a snapshot at financial year end, 21/22, 22/23, 23/24 - Number of new in year referrals. Provided as a snapshot at financial year end, 21/22, 22/23, 23/24 - Number of new in year Social Care assessments. Provided as a snapshot at financial year end, 21/22, 22/23, 23/24 - Number of early help interventions. Provided as a snapshot at financial year end, 21/22, 22/23, 23/24 - Average unit cost for each provision split by working age Adult and Older Adult. This was requested for the last 3 financial years, 21/22, 22/23, 23/24 - Both gross and net costs were requested - Where possible this data has been provided by originating address and placement address - Capacity of internal fostering placements - FTE and pay by team for staff involved in delivering Children's Social Care

Data

THE MODEL HAS BEEN INPUTTED WITH DATA PROVIDED BY THE COUNCIL

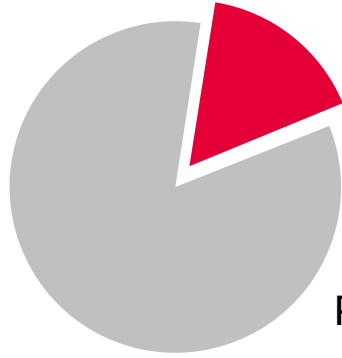
As part of this work data was requested from councils . This data is outlined below and is the foundation for the analysis in the report:

Area	Data requested
SEND	• Number of total EHCPs by provision type. Snapshot at the SEN2 data return date. For 2022. 2023 and 2024 • Number of new in year EHCPs by provision type. For 2022. 2023 and 2024 • Average cost of EHCPs by provision type • Capacity of Maintained Special Schools • FTE and pay by team for staff involved in delivering SEND support • Number of total EHCPs. Actuals (at year end) 2022, 2023, 2024 and forecasts for each year 2025 - 2034
Education	• Total capacity of school places • Number of young people receiving home to school transport by type for the last three financial years, 21/22, 22/23 and 23/24 • Average cost of home to school transport by type for the last three financial years, 21/22, 22/23 and 23/24 • Number of young people missing or absent from school for the last 3 financial years • Number of young people receiving elective home education for the last 3 financial years

Appendix I (b): Demand Modelling methodology

Demand Modelling: High Level Approach

POPULATION AND PREVALENCE



To model how we expect demand to vary by geography and change over time we have segmented the population. This will both enable us to provide forecasts for new geographical footprints, and control for the impact of deprivation and population density in our forecasting.

When we look to the features that have the biggest impact on Social Care demand for a population, we see that these are age and deprivation. In the model, we have segmented our population by age and used the smallest practical geography to control for deprivation.

Smaller geography = more accurate.

For each segment (i.e. U18 in MSOA x) of the population we can say:

$$\text{Segment Demand} = \text{Segment Population} \times \text{Segment Prevalence}$$

Through making a series of sensible assumptions on how we expect the prevalence and population to change within a segment we can forecast our expected demand in that segment.

Population modelling

APPROACH TO PROJECTING POPULATIONS

Segment demand

=

Segment population

x

Segment prevalence

- To model population, we are using the following datasets:
 1. **Forecasts:** Council-provided data and projections (at a District level) and ONS population projections (at a District level) (2018)
 2. **Historical trends:** Council-provided data and projections (at a District level) and ONS population estimates (at an MSOA level (2023))
 3. **Analysis:** Combining population projections with population estimates
- Where they exist, we are using the population projections data provided by Cambridgeshire County Council.
 - This is with the exception of housing and homelessness. The government data used for the analysis is in terms of the number of households (e.g. number of households in temporary accommodation). Therefore, we have used the methodology detailed on page 86, using the 2018-based ONS household size dataset for household size actuals and projections.

Prevalence modelling

WHAT DO WE MEAN BY PREVALENCE

Segment demand

=

Segment population

x

Segment prevalence

Prevalence formula

Segment Prevalence

=

$\sum$

Actual demand in segment

from your returns

$\sum$

Actual segment population

From your returns

Worked example

Historical average prevalence

Children in Care average prevalence

=

Known number of Children in Care

2022 = 5
2023 = 10
2024 = 7

=

23

=

Known U18 population in wonderland

2022 = 4,568
2023 = 4,762
2024 = 4,823

=

14,153

=

16.25 CIC/10k U18

Demand Modelling: Handling of unknown values and Out of County data

APPROACH TO UNKNOWN¹ WITHIN THE DATA RETURN

Segment demand

=

Segment population

x

Segment prevalence

To handle where values in data returns have been redacted, or where demand data has been given for districts / MSOAs which are ‘Out of County’, we have taken the following approach:

Redactions

Where MSOA-level data returns are heavily suppressed, we have instead run the analysis using the district-level data return.

- Where cost data is redacted, we have used the average cost of districts / MSOAs with data for that year.
- Where we have no more detailed information, we have assumed 2.5.

Unknown and Out of County

Where ‘unknown’ locality data, UASC, or Out of County* data has been provided, we have redistributed this across districts / MSOAs within Cambridgeshire and Peterborough.

For demand data, we spread out this demand across Cambridgeshire and Peterborough through weighting against the relevant population segment (e.g. U18s for Childrens). This is essentially a likelihood that the unknown demand came from a certain district / MSOA within Cambridgeshire and Peterborough.

To account for the fact that Out of County placements may differ in cost to in-county placements, where cost data is provided, we have then back-worked the average unit cost for each demand type per district / MSOA. This ensures total forecasted costs remain accurate & constant pre and post value re-distribution.

Unit costs at a district level may appear greater than that provided in the data return, if the cost data provided for Out of County / Unknown placements are greater than in-county, to account for the greater cost of Out of County placements.

Appendix I (c): Adults & Children's Social Care and SEND methodology

Approach to projecting prevalence forward, with time

HOW ARE WE MODELLING CHANGES IN PREVALENCE OVER TIME

Segment demand

=

Segment population

x

Segment prevalence

Introduction

Adults and Children’s Social Care

To project prevalence going forward, for ASC and CSC, we have calculated the average prevalence from actuals, for the period FY21/22 through FY23/24, and applied the same prevalence going forward. These years were chosen to (1) avoid influence from COVID-19 and (2) as longer-term data is rarely available, for the same set of districts, utilising the same methodology.

For ASC, in the longer term, we have then proportionally modelled a prevalence trend back towards originating demand, discussed on the next slide.

SEND

To model total SEND prevalence, we have used council provided data and forecasts for U25 population and number of children and young people with SEND, the latter of which is only available until 2034. As the number of children and young people with SEND has greatly increased over the past few years, we have modelled a linear increase after 2034. We have apportioned SEND prevalence to different SEND setting types using the proportions seen in 2024 for each district in council-provided data.

Other aspects of the report (Home to School transport, Absences and Exclusions etc.)

Our approach to modelling other sections of the report are detailed further into this methodology appendix.

Population segments used

These are used for both prevalence calculations, and for the weighted redistribution of unknown data.

Cohort	Population segment used	
ASC: Older Adults	65+	
ASC: Working Age Adults	18 – 65	
Children’s Social Care	Under 18	
SEND (and Home to School transport)	Under 25	

Approach to projecting prevalence forward, with time

PLACEMENT VS ORIGINATING PREVALENCE

We know that we have more placements in some parts of Cambridgeshire and Peterborough than others relative to local demand. As a result, we place service users in areas of Cambridgeshire and Peterborough that are not the same as their originating address. **This means that our data currently shows an artificially distorted view of need across Cambridgeshire and Peterborough.** As our population tends to its “natural” demographics we would expect this distortion to unwind over time and social care need to equalise across geographies. This phenomenon will only impact “placement” based services (e.g. Residential Care), and not community services (e.g. domestic care).

For each service, we produced cost and demand analysis for 2 key scenarios:

Service	Prevalence now (2025)	Long term population driven prevalence (2030 and 2040)
Children: Children in Care	We have assumed that this placements will be distributed with respect to their originating address , not the placement address.	No change in prevalence: we will perform the analysis based on the child's originating/ parental address, which will not change as a result of the location of the child's placement.
Adult: Residential Care, Nursing Care and Supported Living placements	Using known demand and cost data for each placement, provide a forecast for each district based on service users currently placed in that locality . These forecasts will have demographic distortions baked in as we do not expect services users to be moved due to changes in boundaries.	Our long-term population driven prevalence forecast will be shaped towards the distribution of service users by originating address where known. As the population across Cambridgeshire and Peterborough tends to its natural demographics, we expect the prevalence of Nursing Care and Residential Care placements to tend to the same distribution between districts as Nursing Care and Residential Care demand by origin. Where this data is unavailable, we will use the prevalence rate of domestic care (as this service does not result in service users changing address). For the longer term forecasts we will use a prevalence rate that is distributed in this way.
Adult: Other care types	For Other care types, or where placement information is not available, the forecast for each district will be based on the service user's originating address.	No change in prevalence: we will perform the analysis based on the service user's originating address.

Assumptions

LENGTH OF STAY

In the longer term, we expect the prevalence to trend back towards the distribution of prevalence suggested from originating data (or where unavailable, domestic care demand).

For longer term forecasts (2030 and 2040), and for three types of placement care – Nursing Care, Residential Care and Supported Living, we have therefore blended the prevalence between placement prevalence and originating prevalence with the weightings on the right.

81

Trend towards originating prevalence over the long term

Age group (WAA or OA)	Type of care	Year	Weighting
OA	Nursing	2030	30%
		2040	0%
	Residential	2030	20%
		2040	0%
	Supported Living	2030	20%
		2040	0%
WAA	Nursing	2030	80%
		2040	50%
	Residential	2030	80%
		2040	50%
	Supported Living	2030	80%
		2040	50%

ASC, CSC and SEND demand modelling

SUMMARY TABLE

Cohort	Assumptions for 2025	Assumptions for 2030 & 2040 (where this differs)
Older Adult	- For 2025 only, prevalence remains the same as past average per district / MSOA, based on placement address - For OP, use population 65+ for prevalence and population forecasts - Practice is consistent across current LA footprints	- For residential-type settings, assume "natural" demographic demand is proportionally spread as per originating address where available or as per dom care between districts / MSOAs. - For OA: Assume average placement duration of 2 years.
Working Age Adult	- For 2025 only, prevalence remains the same as past average per district / MSOA, based on placement address - For WAA, use population 18-65+ for prevalence and population forecasts - Practice is consistent across current LA footprints	- For residential-type settings, assume "natural" demographic demand is proportionally spread as per originating address where available or as per dom care between districts / MSOAs. - For WAA: Assume average placement duration of 15 years.
Children's	- For 2025 and 2030 & 2040, prevalence remains the same as past average per district / MSOA - Use U18 population - Assumed that spend will be divided by originating address rather than placement address, therefore analysis completed based on parents' address (not placement address) - Practice is consistent across current LA footprints	
SEND	- We have used council provided data and forecasts for number of people accessing SEND services by district, which is only available until 2034. We have used a linear forecast to model this after 2034. - Breakdown by setting in same proportions as council-provided data for 2024. - Prevalence is calculated from dividing by U25 population, which has been provided by councils.	

Appendix I (d): Home to School Transport, Education and Homelessness forecast methodology

Education

FORECASTING METHODOLOGY FOR ABSENCES, EXCLUSIONS AND HOME EDUCATION

Data inputs

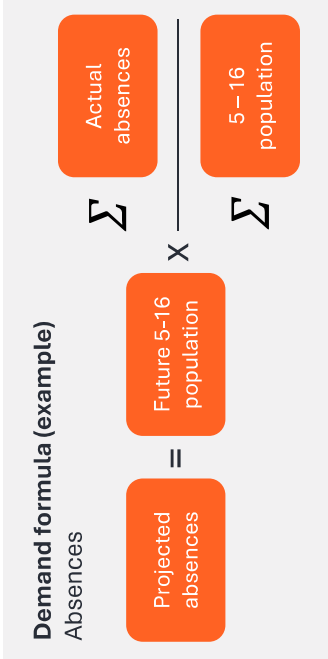
In all cases, where data was available in the data return, this was used.

Where data was unavailable (for example, for neighbouring unitaries without data), national data was used for that district.

National data is only available at the UTLA level, and as such where national data was used, the same prevalence will be applied to all districts / MSOAs within a UTLA.

Metric	National data source used	Years used
Persistent absences	Pupil absence in schools in England [1]	Academic years 2021, 2022, 2023
Selective absences		
Exclusions	Suspensions and permanent exclusions in England [2]	Academic years 2021 and 2022. 2023 data currently un-available.
Elective Home Education (EHE)	Elective home education – at any point during the previous academic year [3]	Academic year 2023/24 used to reflect latest trends.
Children Missing Education*	* CME was only included if complete information was supplied in the data return for all districts / MSOAs within the scenarios. Where CME data was missing for neighbouring unitaries, this was excluded from the outputs.	

Demand calculation



For absences, exclusions and EHE, an average prevalence is calculated from either the available years of data (if using the data return) or from the 'years used' in the table on the left (if using national data).

Analysis of national data shows that the rates of school absences and exclusions are higher than the pre-COVID average.

By taking an average prevalence from the immediate years available for both 2025 and longer-term forecasts, our projection will be more accurate in the short term.

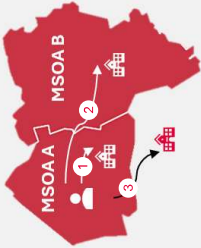
This approach does not assume that the rates of absences and exclusions will return to their pre-COVID baseline.

EHE was only projected for 2025, as national data is only available from 2021, and we are unsure if the post-COVID rise in EHE will continue.

Data limitations

Where data is available by home address, this will be used. This is preferable as we are calculating the prevalence against the school age population of each area. However, national data looks to only be available by school location.

Effect of calculating absences and exclusions by school location



- 1 CYP goes to school in same area**
No issues with calculating prevalence by the MSOA's SAP.
- 2 CYP goes to school in a different district / MSOA**
Prevalence may be overstated in areas with more schools and undercounted in areas with fewer schools. Impact: Changes in UA could overstate or understate the number of missing/absent students between scenarios.
- 3 CYP goes to a school Out of County**
UAs which largely educates pupils whose home authority is elsewhere will have the number of absences / exclusions overstated.

Housing and homelessness

FORECASTING METHODOLOGY

Data inputs

Metric	National data source used
Household size actuals & projections	Household projections for England: 2018-based [1]
Households assessed as owed a duty	Statutory homelessness in England, 2023 [2]
Number of households in temporary accommodation	GOV.UK

Assumptions

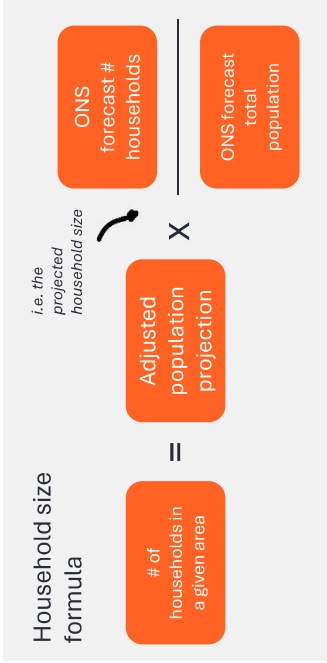
We have assimilated data across the previous 4 quarters of data available. Where data was missing for a council in a quarter, we have applied the average across the remaining quarters.

The national data on homelessness is only available at a LA level. At an MSOA level, we have assumed that all MSOAs within an LA will have the same prevalence. Scenarios where current LAs are split will therefore be an approximation.

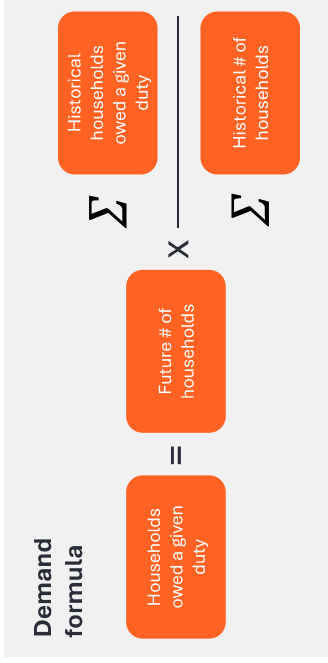
Similarly, household size projections produced by the ONS are also at an LA level. We have therefore assumed the household size is constant for all MSOAs within a local authority, which we know to be a broad assumption. We have accepted this approximation, as the national data on homelessness is also limited at an LA level.

Methodology

As we have adjusted our population projections, we have applied the 2018 household sizes to our adjusted population projections, to calculate the projected number of households.



This is then used as the basis on which prevalence is calculated.



What we aren't forecasting and why

- 1 Costs of temporary accommodation**
No reliable data available without requesting data returns.
- 2 Exact placement splits beyond temporary accommodation**
This would require looking into the local social housing supply locations to ascertain how this would be split between proposed UAs, as well as added complexities where councils are sending residents out of county.
- 3 2030 & beyond**
Due to the rapidly changing policy space (renter's reform, housebuilding), we are only providing 2025 estimates.

Cost Modelling

SERVICE COST

Our cost analysis has been limited to assessing the impact of LGR on two key drivers of spend:

1. **Provision** costs: the cost of placements, homecare, and supporting SEN provision.
2. The **staffing** cost associated with identifying need and supporting residents.

Where we have sufficiently granular data this extends to:

Service	Description	Services in scope		
		Adult	Childrens	Education
Placements	Analysis on unit cost of placements and homecare. This will extend to estimating the impact of scale, population density, complexity, self funding, OOA placements, Inflation and equalisation of rates.	• Nursing • Residential • Domiciliary • Supported Living • “Other”	• Children in Care placements	• Mainstream School • MSS • IMSS • ‘Other’ • Home to School transport
Staffing	Analysis of the distribution of staffing spend across the proposed unitaries, and any anticipated changes in organisation structure.	• All Council Adult Social Care directorate staffing	• All Children’s Social Care directorate staffing	• All Council Education directorate staffing

The overarching governing equation is:



Cost Modelling

UNIT COSTS



In a similar manner to our demand modelling, we have used the same population segmentation approach to help us model costs across Cambridgeshire and Peterborough.

As part of the data return you have provided us with unit costs. We have then modelled cost at the same geographic level to help control for complexity (driven by deprivation etc.) and local cost variation (e.g. higher rents in urban areas).

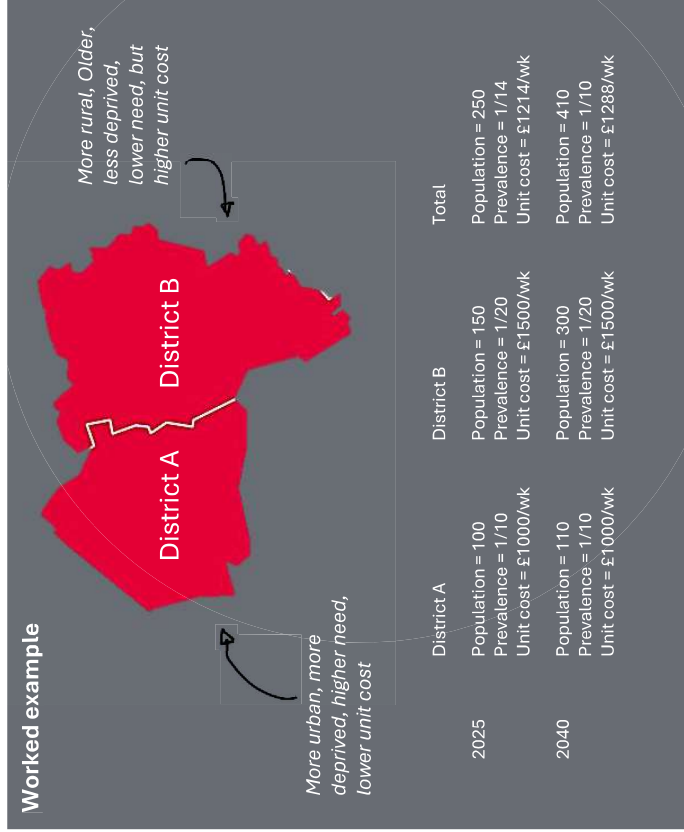
We have modelled unit cost by individual setting (i.e. OP Nursing) to ensure that we are comparing cases of comparable complexity so-far as is possible within non-PID data.

Placement demand is taken as per the approach discussed in the previous section.

To provide average rates over larger geographic areas we have used a demand weighted average. This average is also used where no data is available (for example, for neighbouring unitaries where we have not received data).

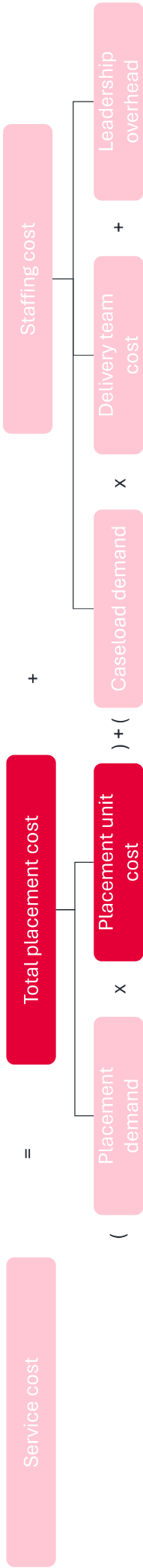
This means that if we forecast increasing need in an expensive area of Cambridgeshire and Peterborough, and a reduction in need in a less expensive area, the average unit cost would adjust to account for this.

Please note that for Peterborough's data, instead of using a real terms average of the costs provided in the data return, we have directly used the 2025 costs as provided for Adult Social Care placements, as the historical data was not accurate.



Cost Modelling

UNIT COSTS

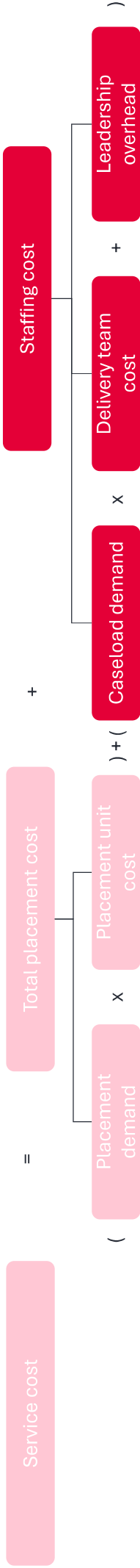


The unit cost is the cost of a setting placement, or providing a service such as Home to School transport for one service user. As we forecast unit cost forward, there are several factors that we have considered to assess the impact of LGR.

Factor	Hypothesis	How have we considered the impact of this?
Scale	That smaller authorities have less buying power and so will pay more for placements as they are outcompeted by larger LAs and the private market.	Using both national and individual data returns we will identify any correlation between unit cost and scale. If any strong trend is identified, we will apply an expected increase in unit cost rate as a result.
Population density	It is more expensive to deliver care in areas with lower population density due to increased travel time.	
Complexity	More complex cases have a higher associated cost of care and our caseload is increasing.	By modelling costs at a small geographic scale we control for these factors. As our underlying population changes (gets older, poorer or less dense) the aggregated cost will change to reflect this as we will have more service users with a higher average unit cost.
Self funding	Different areas of Cambridgeshire and Peterborough will have differing levels of self funders, which means that different unitary authorities will need to contribute differing percentages of the total cost of care.	
Out of area placements	We pay more to place service users outside an authority.	We have used out of county costs where these have been provided, and used an average cost where this is unavailable.
Inflation	Placement costs will increase in cost regardless of complexity or authority boundaries.	We have assumed compounding 3.328% inflation in line with 10 year CPI & average earnings index. When taking the average cost of a placement, we have also uplifted historical costs to account for inflation at a 5.81% rate.
Equalisation of care rates within a LA	Where an existing unitary authority is absorbing neighbouring MSOAs/districts and is paying a materially higher unit cost, and additional demand added to these contracts will be at this higher rate.	We are not expecting this to impact many scenarios, but will assume the unit cost of the existing unitary where this is higher.

Cost Modelling

STAFFING COST



Through our analysis on staffing cost, we are looking to understand the following:

1. How will staffing requirements will vary across the proposed unitary authorities.
2. Where do we expect to see the cost of staffing change between different proposed models?
3. Where might existing organisational structures become unviable due to disaggregation of services?

Page 6

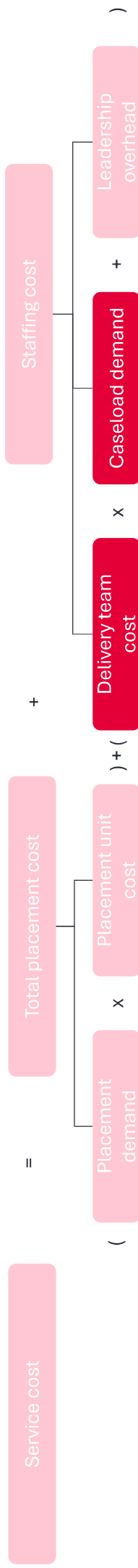
Our analysis has focused only on staff working directly on people services (e.g. transformation or data teams are excluded).

We have divided the workforce into 2 key groups:

- **Delivery team:** Staff that scale with demand, this includes all staff up to “team manager” level (up to c. £70k/annum/FTE).
- **Senior leadership:** Staff at Director level or their direct reports (over c. £70k/annum/FTE). These roles are required for every organisation regardless of caseload size.

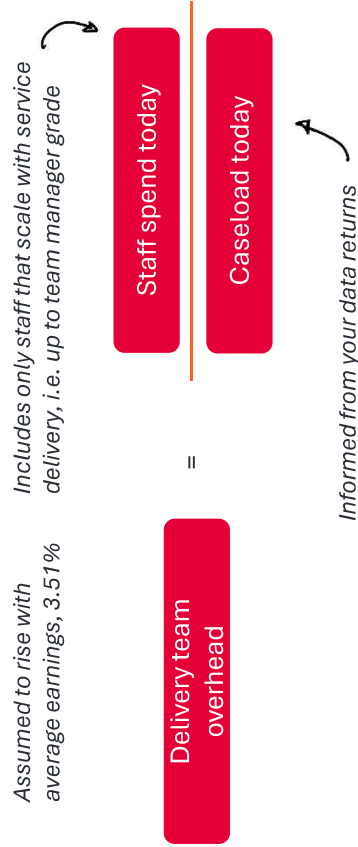
Cost Modelling

STAFFING COSTS (DELIVERY TEAM)



Staffing costs that scale with demand

Most staffing cost scales with the number of service users that we serve. We can therefore use a delivery team overhead per service user to attribute this spend to unitary authorities based on expected demand both in 2025, and using our 2030 / 2040 forecasts.



Caseload demand is used as a proxy to understand how our total staffing costs will change with time and be distributed between proposed LAs. Because we are most interested in changes to caseload and we are using a consistent definition of this demand for both the future state and demand today, it does not matter if this demand fails to capture all work performed by a team.

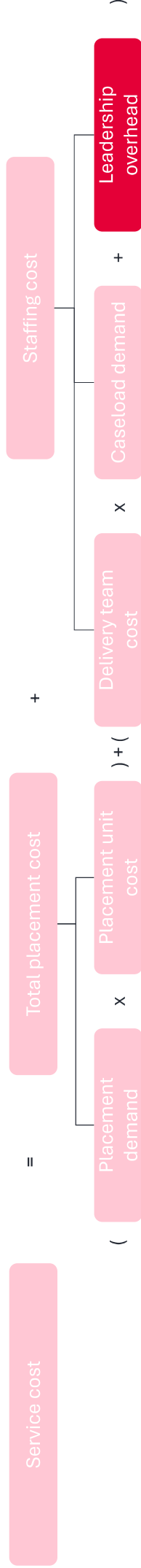
Following feedback, we have modelled caseload demand to include:

Service	Caseload demand metric
Adult	All care types returned in the data return, excluding requests for support & fulfilled requests for support
Children's	All placement types returned in the data return, excluding referrals and assessments
SEND	EHCP demand

We have chosen this metric as it more accurately captures a consistent baseline. Whilst we understand that assessments, and handling requests for support do form part of a delivery team's caseload, this is not meant to be a direct caseload measurement, but a proxy to use. As we are keeping the same caseload proxy measurement in the calculation of the future staffing cost, this remains consistent.

Cost Modelling

STAFFING COSTS (SENIOR LEADERSHIP)



Senior leadership

7 Whilst these staff might make up a relatively small proportion of the number of employees in an organisation, due to higher salaries they make up a disproportionate percentage of current staffing spend. For scenarios whereby total demand on an organisation is smaller, this leadership overhead can make up a significant proportion of spend.

8

93 We have assumed that director level leadership team for each directorate is fixed in its scale, and that by increasing the number of authorities in a geography we would need to duplicate this team across each service.

We have calculated the senior leadership team spend as a fixed overhead for the baseline scenario. We have then uplifted this by inflation, and scaled this by demand with a 50% weighting (e.g. a 50% reduction in demand would result in a 25% reduction in this cohort).

We have assumed senior leadership to include staff with salaries >£70k/ annum/FTE.

Hypothesis: *Smaller authorities have less buying power in the market, so all things being equal they pay more for the same provision.*

- As a response to feedback, we did some analysis to assess the impact of scale on unit cost.
- To do this, we focused on Older Adult Residential Care bed unit costs (as provided in the ASCFR data) – these are the most consistent setting, have the biggest population size and the data-set is most readily accessible nationally.
- We looked at the factors that best explain the difference in cost between authorities
 - Population size of relevant cohort (i.e. 65+) – council-received data
 - Median income - Earnings and hours worked, place of residence by local authority: ASHE Table 8 2024
 - IMD – Indices of Multiple Deprivation 2019

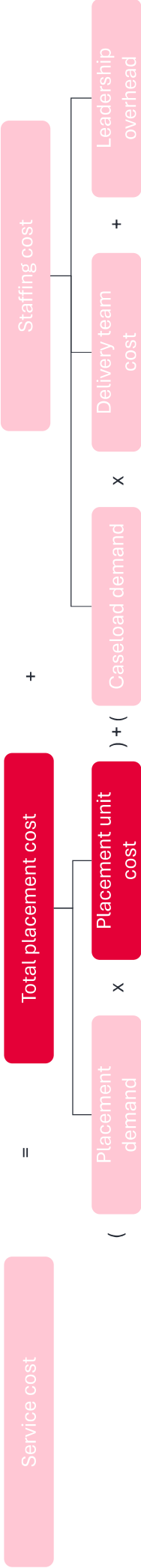
We used a linear multivariable regression model to identify the trend in this dataset and found a statistically significant correlation between smaller authority population sizes and higher unit costs, in combination with these additional factors.

- As we know the population size, IMD and median income for each geography we could calculate the expected increase in cost by varying the population size, predicted IMD and predicted median income in the model compared to the baseline scenario.
- For each proposed authority we then calculated a relative cost factor that we could apply to each unitary to calculate the expected unit cost.
- For where neighbouring unitary data has been provided, the step-up factor has not been applied in the baseline case.
- This has been applied to Adult and Children's placement costs but not to SEND or Home to School Transport.

As we have Peterborough data we have calculated the step up factor accounting for the proportion of the population within the proposed new unitary authority that originates from Peterborough. This avoids double counting the impact of moving towards the demographics of Peterborough.

Cost modelling

SUPPRESSION HANDLING



Where placement cost values in data returns have been redacted, we have taken the following approach to “filling in the blank”.

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1. Where an average over a larger geographical area is known, we have set the missing value for all unknowns to that average.
2. Where a total at a larger geographical area is not known, we have assumed a flat average of the known data.

Appendix II: Data tables

Data tables: Demand

WAA :

District	Nursing 2025	Nursing 2030	Nursing 2040	Residential 2025	Residential 2030	Residential 2040	Dom Care 2025	Dom Care 2030	Dom Care 2040	Supported living 2025	Supported living 2030	Supported living 2040	Other 2025	Other 2030	Other 2040
Cambridge	5	6	7	39	43	50	182	192	204	115	124	134	186	197	209
East Cambridgeshire	9	9	8	41	43	42	81	87	89	70	74	75	147	158	162
Fenland	9	9	9	38	41	44	98	103	106	163	169	169	231	243	251
Huntingdonshire	7	7	8	64	64	65	157	162	172	146	152	163	335	346	367
Peterborough	13	13	14	87	92	97	64	68	72	56	59	62	735	778	826
South Cambridgeshire	6	6	7	60	67	82	165	184	221	105	118	144	296	330	397

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District	Nursing 2025	Nursing 2030	Nursing 2040	Residential 2025	Residential 2030	Residential 2040	Dom Care 2025	Dom Care 2030	Dom Care 2040	Supported living 2025	Supported living 2030	Supported living 2040	Other 2025	Other 2030	Other 2040
Cambridge	150	130	135	157	158	180	239	263	308	83	88	102	70	78	91
East Cambridgeshire	69	88	107	175	202	238	240	275	324	78	85	98	65	75	88
Fenland	121	133	151	197	239	279	315	356	410	119	127	144	80	90	104
Huntingdonshire	131	149	172	281	308	350	515	572	652	89	101	116	93	103	118
Peterborough	163	177	203	296	322	373	197	220	255	5	6	7	390	434	505
South Cambridgeshire	119	168	224	226	267	331	357	406	499	61	83	106	90	102	125

Out of county and unknown demand has been redistributed.

PRIVATE AND CONFIDENTIAL

Data tables: Demand

CSC:

District	CiC 2025	CiC 2030	CiC 2040	Residential 2025	Residential 2030	Residential 2040	IFA Fostering 2025	IFA Fostering 2030	IFA Fostering 2040	Internal Fostering 2025	Internal Fostering 2030	Internal Fostering 2040	Other 2025	Other 2030	Other 2040
Cambridge	139	137	139	44	44	44	24	24	24	50	50	50	21	20	21
East Cambridgeshire	74	74	75	18	18	18	17	17	17	30	30	30	10	10	10
Fenland	171	175	176	42	43	44	29	30	30	73	75	76	26	27	27
Huntingdonshire	152	154	159	51	52	54	32	32	33	56	56	58	13	14	14
Peterborough	403	399	392	49	48	47	127	126	123	158	157	154	69	69	67
South Cambridgeshire	125	132	151	34	36	42	30	32	36	48	50	57	13	14	15

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District	Mainstream School 2025	Mainstream School 2030	Mainstream School 2040	MSS 2025	MSS 2030	MSS 2040	INMSS 2025	INMSS 2030	INMSS 2040	Other 2025	Other 2030	Other 2040
Cambridge	730	982	1493	360	484	736	67	90	138	266	357	543
East Cambridgeshire	609	820	1239	255	344	520	52	71	107	262	353	533
Fenland	683	916	1373	419	562	842	71	95	142	400	536	804
Huntingdonshire	1154	1535	2284	470	626	931	92	122	181	558	742	1104
Peterborough	1418	2155	3578	937	1424	2364	65	99	165	863	1311	2177
South Cambridgeshire	1094	1511	2320	416	575	883	95	132	202	428	591	907

Data tables: Unit costs

WAA:

District	Nursing Avg Cost per Week 2025	Nursing Avg Cost per Week 2030	Nursing Avg Cost per Week 2040	Residential Avg Cost per Week 2025	Residential Avg Cost per Week 2030	Residential Avg Cost per Week 2040	Dom Care Avg Cost per Week 2025	Dom Care Avg Cost per Week 2030	Dom Care Avg Cost per Week 2040	Supported living Avg Cost per Week 2025	Supported living Avg Cost per Week 2030	Supported living Avg Cost per Week 2040	Other Avg Cost per Week 2025	Other Avg Cost per Week 2030	Other Avg Cost per Week 2040
Cambridge	1434	1689	2343	1330	1567	2173	289	340	472	596	702	974	420	495	686
East Cambridgeshire	1248	1470	2040	1577	1857	2577	308	362	503	1500	1767	2451	403	474	658
Fenland	1450	1708	2370	1699	2001	2776	353	415	576	1273	1499	2080	338	399	553
Huntingdonshire	2070	2439	3383	1943	2289	3175	336	396	549	1190	1402	1945	359	423	587
Peterborough	1457	1716	2380	1931	2274	3155	365	430	597	1988	2342	3248	488	574	797
South Cambridgeshire	1422	1675	2323	1576	1857	2576	343	404	561	1231	1450	2012	443	522	724

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District	Nursing Avg Cost per Week 2025	Nursing Avg Cost per Week 2030	Nursing Avg Cost per Week 2040	Residential Avg Cost per Week 2025	Residential Avg Cost per Week 2030	Residential Avg Cost per Week 2040	Dom Care Avg Cost per Week 2025	Dom Care Avg Cost per Week 2030	Dom Care Avg Cost per Week 2040	Supported living Avg Cost per Week 2025	Supported living Avg Cost per Week 2030	Supported living Avg Cost per Week 2040	Other Avg Cost per Week 2025	Other Avg Cost per Week 2030	Other Avg Cost per Week 2040
Cambridge	1102	1298	1801	876	1032	1432	320	377	523	282	332	461	484	571	792
East Cambridgeshire	1088	1281	1778	830	977	1356	326	384	533	652	768	1065	424	500	693
Fenland	943	1110	1540	809	953	1322	333	392	544	495	583	809	448	527	731
Huntingdonshire	899	1059	1469	828	976	1353	315	371	515	266	313	434	397	467	648
Peterborough	1037	1221	1694	908	1070	1484	365	430	597	1881	2216	3074	433	509	707
South Cambridgeshire	1009	1188	1648	937	1104	1531	317	373	518	498	586	813	530	624	866

Out of county and unknown costs have been redistributed.

PRIVATE AND CONFIDENTIAL

Data tables: Unit costs

CSC:

District	CiC Avg Cost per Week 2025	CiC Avg Cost per Week 2030	CiC Avg Cost per Week 2040	Residential Avg Cost per Week 2025	Residential Avg Cost per Week 2030	Residential Avg Cost per Week 2040	IFA Fostering Avg Cost per Week 2025	IFA Fostering Avg Cost per Week 2030	IFA Fostering Avg Cost per Week 2040	Internal Fostering Avg Cost per Week 2025	Internal Fostering Avg Cost per Week 2030	Internal Fostering Avg Cost per Week 2040	Other Avg Cost per Week 2025	Other Avg Cost per Week 2030	Other Avg Cost per Week 2040
Cambridge	2526	2975	4127	5511	6491	9006	977	1150	1596	420	495	686	3026	3564	4945
East Cambridgeshire	2654	3126	4337	6904	8132	11282	961	1132	1570	416	490	680	4615	5436	7542
Fenland	3121	3676	5100	7609	8962	12434	1028	1211	1681	418	493	684	5807	6839	9489
Huntingdonshire	2556	3011	4177	5733	6752	9368	986	1162	1612	413	486	674	2980	3510	4869
Peterborough	2137	2517	3492	7687	9055	12562	1169	1377	1911	368	433	601	4043	4762	6606
South Cambridgeshire	2306	2716	3768	5545	6531	9060	969	1141	1583	431	507	704	3719	4381	6078

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District	Mainstream School Avg Cost per Week 2025	Mainstream School Avg Cost per Week 2030	Mainstream School Avg Cost per Week 2040	MSS Avg Cost per Week 2025	MSS Avg Cost per Week 2030	MSS Avg Cost per Week 2040	INMSS Avg Cost per Week 2025	INMSS Avg Cost per Week 2030	INMSS Avg Cost per Week 2040	Other Avg Cost per Week 2025	Other Avg Cost per Week 2030	Other Avg Cost per Week 2040
Cambridge	207	244	339	269	316	439	1525	1797	2493	334	393	546
East Cambridgeshire	191	225	312	241	284	394	988	1163	1614	290	342	474
Fenland	212	250	347	245	288	400	1592	1875	2601	272	320	444
Huntingdonshire	185	218	303	233	274	380	1229	1447	2008	291	343	476
Peterborough	201	237	329	251	296	411	1319	1554	2156	314	370	513
South Cambridgeshire	213	250	347	264	311	431	1271	1497	2077	382	450	624

PRIVATE AND CONFIDENTIAL

Out of county, unknown and UASC costs have been redistributed.

Data Tables: Step up factor

STEP UP FACTOR

Proposed Authority	Population 65+ 2023	IMD	Median income	Mid	Step up factor	Scenario
CCC	132.9k	14.0	£35.1k	1026.6	1.0000	Baseline
PCC	31.9k	27.6	£29.7k	856.8	1.0000	Baseline
UA 1 - FDC_HDC_PCC	94.5k	21.7	£31.5k	922.5	0.9676	Option A
UA2 - CC_ECDC_SCDC	70.2k	11.7	£36.7k	1071.7	1.0458	Option A
UA 1 - CC_SCDC	50.8k	11.8	£37.7k	1083.6	1.0587	Option B
UA2 - ECDC_FDC_HDC_PCC	113.9k	20.1	£31.7k	937.3	0.9724	Option B
UA 1 - ECDC_FDC_PCC	75.8k	23.6	£31.0k	902.4	0.9635	Option C
UA 2 - CC_HDC_SCDC	89.0k	12.0	£36.1k	1060.4	1.0346	Option C
UA1 - FDC_PCC	56.4k	27.0	£30.4k	866.6	0.9499	Option D - 3 UA's
UA2 - ECDC_HDC	57.5k	12.2	£33.3k	1034.6	1.0095	Option D - 3 UA's
UA3 - CC_SCDC	50.8k	11.8	£37.7k	1083.6	1.0587	Option D - 3 UA's

Local Government Reorganisation: Impact on people services

If you would like to discuss the content of his report or would like any further information, please contact:

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