



# Report to Cabinet

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| <b>Date:</b>                | 11th October 2022   |
| <b>Title:</b>               | <b>Adult Social Care Update</b>   |
| <b>Cabinet Member(s):</b>   | Deputy Leader and Cabinet Member Health and Wellbeing   |
| <b>Contact officer:</b>     | Clare Capjon, Clare.Capjon@buckinghamshire.gov.uk   |
| <b>Ward(s) affected:</b>    | (All Wards)   |
| <b>Recommendations:</b>     | <b>Cabinet is asked to note the latest developments in relation to adult social care both locally and nationally.</b> |
| <b>Reason for decision:</b> | N/A   |

## 1. Executive summary

- 1.1 Adult social care has been at the frontline of the Covid pandemic response for the past two and a half years. Whilst guidance for businesses and the public has relaxed, adult social care is still responding to significant demand, part of which built up during the pandemic. In addition, during the past 7 months the Government has published a number of reforms, white papers and legislative changes which require a different response to the delivery of adult social care services. This paper provides an update on the current position of adult social care services in Buckinghamshire.

## 2. The National Picture

### Social Care Reforms

- 2.1 In September 2021 the Government published its plan (Build Back Better: Our Plan for Health and Social Care) to address challenges in the health and care system, including the need to achieve a sustainable adult social care system in the long-term. The Government proposals, which will come into effect from October 2023, included:

- The introduction of a cap of £86,000 on an individual's personal care costs
  - Raising the capital limit for contributions to care from £23,250 to £100,000, and
  - The introduction of arrangements to allow self-funders to ask the local authority to arrange their care, securing better value.
- 2.2 The plan was followed by the adult social care White Paper '[People at the Heart of Care](#)', published in December 2021. This paper set out the government's 10-year vision for adult social care, which is that 'everyone receives the care they need, when they need it, to live the life they want to'.
- 2.3 The White Paper confirmed the plan's ambition and set out funding proposals for use of the local government portion (£5.4bn) of the Health and Care Levy. A Laing Buisson report commissioned by the County Council Network demonstrated that the funding identified for implementation of the reforms was significantly below that needed by councils, to the tune of at least £854m per year. Buckinghamshire Council also voiced its concerns to the Department of Health and Social Care. These concerns particularly related to the Government's timeframe for implementation of the reforms in the context of significant workforce challenges, including national shortages, and dedicated staff who have worked tirelessly to support people during the pandemic.
- 2.4 Operational Guidance was published for consultation on 14<sup>th</sup> March and the Council again took the opportunity to lobby for changes to ensure the social care reforms are implemented successfully and improve outcomes for residents.
- 2.5 The final Operational Guidance was published on 7<sup>th</sup> July 2022 and included two significant amendments. The first was the decision to phase the implementation of Section 18(3) of the Care Act 2014. Section 18(3) gives all self-funders (people who currently fund their own care) the right to ask their Council to arrange residential care on their behalf, whether or not they have eligible care needs under the Act. The implementation of Section 18(3) will begin in October 2023 only for new entrants to care homes, with those already in residential care becoming eligible from April 2025 at the latest.
- 2.6 The second change to the draft Operational Guidance was that any reviews undertaken from April 2023 in preparation for the reforms, will no longer need to be reviewed when the reforms are implemented in October 2023, as originally proposed.
- 2.7 The Council continues to engage with Government as details of the implementation of the social care reforms emerge. In September, the Council responded to proposals for the distribution of social care reform funding.

- 2.8 The Health and Care Act gained Royal Assent on 28th April. The Act aims to improve integration both within the NHS and between partners, with a new duty to collaborate for both the NHS and local authorities. The Act also established Integrated Care Systems (ICS) as statutory bodies from 1<sup>st</sup> July 2022 and NHS England is now setting budgets for the NHS at this system level.
- 2.9 Integrated Care Systems comprise an NHS management body, known as the Integrated Care Board, and a partnership forum, the Integrated Care Partnership.
- 2.10 For each 'Place' within the system, there will be a place-based partnership and the Act reinforces the importance of these places within the system, particularly in identifying local priorities. Arrangements for governance, including place-based governance, will need to be implemented by Spring 2023.
- 2.11 The Health and Social Care Levy Act 2021 introduced the mechanism by which the ambition of the Government's Build Back Better plan would be funded. Within the first three years, the Levy will raise £36bn, of which local authorities would receive £5.4bn, with an indication that this proportion would rise after this period.
- 2.12 Finally, the Act also places a duty on the CQC to provide assurance of both local authority adult social care services and Integrated Care Systems from April 2023.
- 2.13 The Government has issued a number of guidance documents since the Act gained Royal Assent. In September, the Cabinet Member for Health and Wellbeing, on behalf of the Council, responded to guidance on the relationship between Integrated Care Systems and Health and Wellbeing Boards.

#### Integration White Paper

- 2.14 On 9th February, the Government published a White Paper on integration (Health and Social Care Integration: Joining Up Care for People, Places and Populations). The vision for integration is that it 'makes a significant, positive impact on population health through services that shift to prevention and address people's needs promptly and effectively'.
- 2.15 The White Paper seeks to deliver on the vision through the introduction of shared outcomes, agreed by all local health and care organisations, and the delivery for which all local leaders are held to account. Whilst the paper does not explicitly include Children's Services, there is an expectation that integration will include services for children.
- 2.16 The Paper also emphasises the importance of an holistic approach to care, beginning with where people live. Places are encouraged to 'think housing and community'. The Government will be developing a framework with a focussed set of national priorities. Local places will be able to develop additional local priorities, which will need to be agreed by the relevant Integrated Care System.

- 2.17 The White Paper sets expectations that local places will increase alignment and pooling of budgets over time; that Integrated Care Systems have plans in place by June 2022 for improving the digital connectivity across the system, including private providers; and reiterates a focus on making it easier for the workforce to move around the health and care system.

#### Liberty Protection Safeguards

- 2.18 Delayed from the original implementation date of April 2022, Liberty Protection Safeguards (LPS) are due to replace the Deprivation of Liberty Safeguards (DoLS). On 17th March, the Government announced an open consultation on proposed changes on the Mental Capacity Act (MCA) Code of Practice, which included guidance on the new Liberty Protection Safeguards. The Council and partners provided a joint response to the consultation which ended on 7th July 2022 and the Government is expected to set an implementation date following consideration of responses.
- 2.19 The DoLS process refers to the protection of a person's rights if they are or may become deprived of their liberty in a hospital or a care home. Although both have the same goals, LPS extends the scope to 16/17-year-olds, to people that live in supported living and to people in their own homes. LPS are designed to be more streamlined, improving the system by spreading the responsibility across hospitals, clinical commissioning groups and social care. However, the changes will require significant planning and training to embed the new ways of working. The Adults and Health Transformation Board is overseeing the project to implement LPS in Buckinghamshire.

#### Down Syndrome Act

- 2.20 The Down Syndrome Act received Royal Assent on 28th April. The Act requires the Secretary of State to give guidance to certain health, education and local authorities on the steps that would be appropriate for them to meet the needs of people with Down syndrome when exercising relevant functions. Authorities will then need to have due regard to the guidance.

#### Mental Health Reforms

- 2.21 In 2021 the Government published a consultation on reforms to the Mental Health Act. The Council responded to these proposals and the Government published the Draft Mental Health Bill on 27<sup>th</sup> June 2022. The Bill aims to modernise the framework for services including the criteria for detention and amending the definition of a mental disorder so that people can no longer be detained solely because they have a learning disability or are autistic.
- 2.22 A Mental Health and Wellbeing Plan Discussion Paper has also recently been published. This will lead to the development of a cross-government 10-year plan for

addressing disparities in mental health and wellbeing. The Council submitted a response to the consultation, which closed on 5<sup>th</sup> July 2022.

#### National Workforce Challenges

- 2.23 Figures from Skills for Care show that the number of adult social workers employed by Councils fell during the year to September 2021 as turnover and vacancy rates rose. These rises are happening at a time of significant pressure on adult social care nationally, including mounting backlogs of assessments and reviews and delays in arranging care packages.
- 2.24 More broadly across the sector, Skills for Care's Workforce Report 2021 says that although there were an estimated 1.67m jobs in the sector, approximately 1.54m were in post and staff turnover was 28.5%. In addition, vacancy rates across the sector are now back at their pre-pandemic levels.

### **3. Buckinghamshire Health and Social Care System**

#### Integrated Care System Development

- 3.1 Buckinghamshire is a 'place' within the Buckinghamshire, Oxfordshire and Berkshire West Integrated Care System (BOB ICS). Appointments have been made to the ICS Integrated Care Board, with Dr James Kent as CEO and Javed Khan OBE as Chair.
- 3.2 Governance arrangements, including local government representation, are currently being developed and it is anticipated that the ICS Integrated Care Partnership will have its first meeting in the early autumn. Philippa Baker has been appointed as Place Director for Buckinghamshire and will be taking up her position in early October, replacing Matt Powls, Interim Place MD for Oxfordshire and Buckinghamshire.
- 3.3 As Buckinghamshire Council boundaries fall within both the Buckinghamshire, Oxfordshire and Berkshire West (BOB) Integrated Care System and the Bedfordshire, Luton and Milton Keynes (BLMK) Integrated Care System, the Council is a founding member of the Integrated Care Partnership in both areas.

#### Place Priorities

- 3.4 Within Buckinghamshire, Chief Executive Officers from ICS, the Council and Buckinghamshire Healthcare Trust meet regularly to discuss and resolve issues relating to the Buckinghamshire health and social care system. In 2021, this place Executive meeting identified five priorities which, by organisations working together to resolve over the next 18-24 months, could deliver better outcomes for residents. These priorities are:
- Hospital discharge – streamlining processes and maximising opportunities for people to regain independence after a hospital admission

- Admission avoidance – identifying ways in which unnecessary admissions to hospital could be avoided, with people receiving more appropriate care, support and advice in the community
- Health inequalities, focussing on cardiovascular disease – reducing the risk of cardiovascular disease, particularly in those areas with higher prevalence
- Mental health – redesigning community mental health services, and
- Primary care with a focus on community service development

3.5 In addition, the Health and Wellbeing Board assisted by the Local Government Association, recently reviewed its priorities and has identified three critical areas of challenge through which to address health inequalities in the county:

- Tackling obesity
- Mental health, and
- Smoking

3.6 The Board agreed these and the underlying priorities for the Start Well, Live Well, Age Well action plan, at its meeting in May. The Board also adopted a Pledge for the residents of the county and approved the revised Joint Local Health and Wellbeing Strategy and underpinning documents at its meeting in September.

#### Better Care Fund

3.7 The Better Care Fund (BCF) provides a framework for driving health and social care integration. The BCF requires a jointly agreed plan for use of the pooled budget, agreed by the local Health and Wellbeing Board.

3.8 Allocations for 2022-23 have been announced, with Buckinghamshire receiving £44.4m. The fund has three elements:

- Minimum Clinical Commissioning Group/Integrated Care System contribution: totalling £35.3m, with £11.9m of this mandated for adult social care (a 5.6% increase on the 2021-22 allocation)
- Improved Better Care Fund (iBCF): confirmed as £5.0m (an increase of 3% on 2021-22), and
- Disabled Facilities Grant (DFG): £4.1m (the same as 2021-22).

3.9 In September 2022, the Buckinghamshire Health and Wellbeing Board will approve the BCF spending plan.

#### Winter Planning

3.10 In preparation for the forthcoming winter period, the health and social care system Winter Plan was reviewed during the summer of 2022. The plan built on lessons from previous winters and address the likely challenges ahead, including those arising from Covid and flu. The Winter Plan provides a clear set of actions and mechanisms for partners in the Buckinghamshire health and social care system to adopt in response to additional pressures and ensure vital services continue

throughout the winter period. The Winter Plan is being considered by the Health and Adult Social Care Select Committee at its September meeting.

## **4. Adult Social Care**

### Better Lives Strategy 2022-2025

- 4.1 In 2018 the Council published its first three-year overarching strategy for adult social care, 'Better Lives'. This was refreshed in January 2022, reinforcing the Council's ambition and demonstrating the impact made to date, with some example case studies. The strategy identified the areas of focus for the next three years to embed changes made to date and continue the programme of transformation.
- 4.2 Key successes from the first phase of the Better Lives programme included a pre-pandemic position where admissions to residential and nursing care were reducing significantly faster than those seen elsewhere in the country. Social care user survey results showed improvements in satisfaction with the Council's adult social care services, despite the pandemic. Satisfaction with care and support received is now higher than both CIPFA comparators and the England average, and increases were seen in responses around having control over daily lives and feeling safe. The Better Lives programme was also primarily responsible for delivering savings of over £10m, mitigating pressures on services from increases in demand and complexity of need.
- 4.3 The programme for the next three years will focus initially in the following areas:
  - Mental health: reviewing the Section 75 agreement with Oxford Health Foundation Trust to ensure social work practise is aligned with the Better Lives approach
  - Community opportunities: reinstating and revisiting the pre-pandemic programme to develop a broad community opportunities offer with voluntary and community sector partners, a county-wide short breaks offer, improved access to training and supported employment for working age adults and volunteering opportunities
  - Tech-enabled care: mainstreaming and maximising the use of technology to enable people to live as independently as possible
  - Specialist housing: developing specialist housing provision to meet demand in the county
  - Carers support: making sure that carers in Buckinghamshire have a broad offer of support and a better experience of the carers assessment process
  - Dementia services: ensuring the route through to services is easier for people to navigate and there are more services on offer for people with dementia and their families.

### Social Care Reforms



- 4.4 In light of the tight timescales associated with the social care reforms, including the requirement for the publication of a fair cost of care exercise and a market sustainability plan by 14th October 2022, the Council secured the services of Ernst & Young (EY), in association with SCIE and the Kings Fund. The consultants are working with the service to produce implementation plans in four key areas: workforce impacts, financial processes & assessments, customer & digital, and care market & commissioning, including the fair cost of care exercise. Work includes an analysis of Buckinghamshire, identification of gaps, process mapping and the development of solutions. EY is additionally reviewing financial and demand modelling of the impact of the reforms for the Council, which are currently estimated at between £40-70m.

Table 1: Estimated demand impact resulting from social care reforms

| Aged 65+ only                                       | Current Demand       | Estimated Demand     |
|---|----------------------|----------------------|
| Fully LA Funded for their care                      | 600 – 1,070          | 2,000 – 2,500        |
| Partially LA funded for their care under means test | 1,180 – 1,800        | 2,080 – 2,600        |
| <b>Total</b>  | <b>1,780 – 2,870</b> | <b>4,080 – 5,100</b> |
| Entirely Self Funded for Care                       | 3,150 – 3,850        | 430 - 465            |

- 4.5 Through the Council’s own initial modelling, there are significant concerns around the ability of the organisation to deliver the reforms within the current workforce capacity and financial envelope. The Government is providing a Fair Cost of Care and Market Sustainability Grant for the Council of £1.2m in 2022-23. Of this, 75% is required to be used as a genuine step towards paying providers the fair cost of care (to be determined through the cost of care exercise), with 25% towards the cost of implementation. The service has concerns that the majority of the costs of implementation will be an unfunded burden for the Council.

Demand for social care

- 4.6 Adult social care receives approximately 3,000 contacts each month. At the end of June 2022, 50 people were waiting for more than 28 days for a social care assessment and just over 1,260 clients were waiting for an annual review. The position in Buckinghamshire is similar to the national picture, with the latest ADASS survey reporting over 500,000 people waiting for adult social care services.
- 4.7 In line with the Better Lives Strategy, over the past year there has been a growth in the number of people accessing long-term support to help them to live at home. At the same time, however, the complexity in people’s needs has increased (a trend from 2020), with each person on average now requiring more homecare hours. In



addition to annual reviews, the service is undertaking more interim reviews in response to people’s changing needs. The impact of the pandemic has also resulted in a reversal of the pre-pandemic trend in relation to nursing care admissions, with an increase of 10% over the past year.

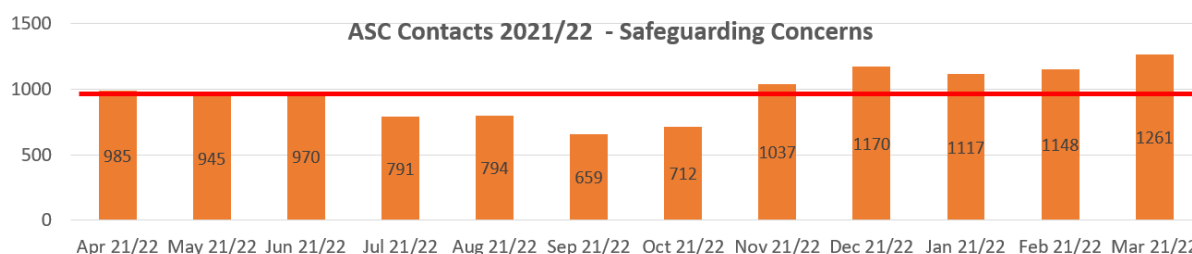
### The Care Market

- 4.8 There are over 190 organisations delivering adult social care in Buckinghamshire. Reflecting the national picture, many of these care providers are struggling, predominantly in relation to staffing. With better pay offered outside of the care sector, together with increases in the national minimum wage and fuel prices, providers are often having to increase rates of pay to remain competitive. As a result, the Council is being approached by providers for uplifts to the rates paid by the Council to ensure their sustainability. This is particularly the case within the domiciliary care market, where staffing equates to at least 70-80% of total costs. The Council is finding it increasingly difficult to source care from the market and this is impacting on the Council’s waiting lists.

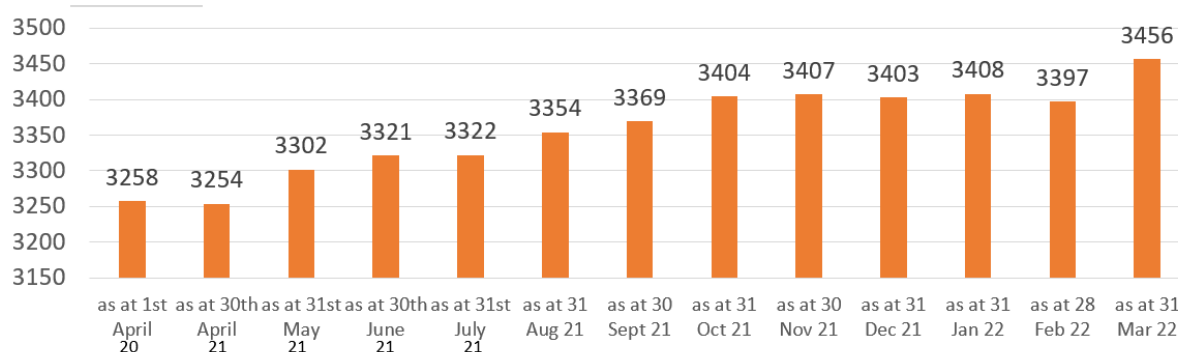
### Improvements in social care

- 4.9 As a result of the pandemic, adult social care is experiencing unprecedented demand (see Tables 2-4 below). This increase in demand is also impacting other associated Council functions such as legal, finance, human resources and business support. For adult social care the demand has meant the need to review and reshape the way in which services respond, to keep vulnerable residents safe and undertake assessments in a timely way. One of the mechanisms has been the implementation of Community Cafes. These are located across the county in the seven day opportunities centres and provide face-to-face appointments for residents. With 60 appointments available each week, waiting times to see a social work professional have reduced from 4-6 weeks to 2 weeks.

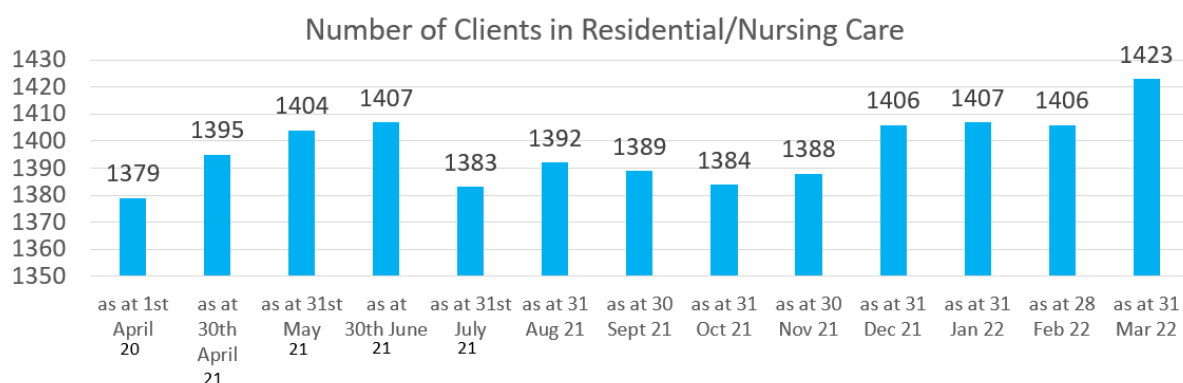
*Table 2: Increased demand in adult social care: numbers of safeguarding concerns received*



*Table 3: Increased demand in adult social care: numbers of people supported to live in the community through direct payments, domiciliary care or supported living*



*Table 4: Increased demand in adult social care: numbers of people supported through residential and nursing care*



- 4.10 Waiting times for allocation to a worker for an assessment remain over 4 weeks. However, the adoption of a triage approach, which offers people an initial discussion by phone call or face-to-face within 2 weeks, has been welcomed by residents. Both the discussions and the café appointments have also been useful in signposting people to other sources of support, such as within the voluntary and community sector, whilst waiting for an assessment.
- 4.11 The long-term and review teams located across the county are adopting a 'named worker' approach in 2022, which will enable the service to deliver a more proactive approach for those who use social care services. The named worker will be a dedicated worker and co-ordinator who will be a voice of challenge and advocacy for the person they support, a trusted support network for people and their families and someone who will work towards making the best future a reality for the individual.
- 4.12 For residents this change will provide a single point of contact who will support the individual to access the right support at the right time. Practitioners will also benefit from being given the opportunity to build relationships with individuals and engage in meaningful social work practice to help people flourish.
- 4.13 Between April 2021 and April 2022, adult social care received 194 compliments from those it supports. This compared with just 42 formal complaints during the same

time period. The trend is continuing this year, with 62 compliments since April 2022, compared with 11 formal complaints. Over the past three years, the service has turned around performance in this area by dealing with concerns promptly before they escalate to complaints, and nearly halving the response time to complaints.

#### DHSC Visits

- 4.14 In March 2022 Michelle Dyson, Director General for Adult Social Care at the Department of Health and Social Care, visited Buckinghamshire Council to see some of the innovative practices in adult social care and the partnership working across the system. Michelle was shown Olympic Lodge, set up and supported by adult social care for Buckinghamshire Healthcare Trust to help with hospital pressures at the start of the year, before seeing a community café in action.
- 4.15 As a result of Michelle's visit, in May the Council hosted Rosie Seymour, National Programme Director for the Better Care Fund, along with other Treasury, DHSC and DLUHC colleagues who looked at the integrated discharge hub which was based at the temporary Olympic Lodge facility.
- 4.16 In August 2022, the DHSC visited the Council to learn more about our approach to preparations for the Social Care Reforms, which are considered to be ahead of many other authorities nationwide.

#### Care Quality Commission (CQC) Inspection Preparation

- 4.17 The CQC is reinstating inspections of local authority adult social care services and a project being delivered to ensure the council is fully prepared for this event. Initial work involves a self-assessment using the tool developed by the Southeast of England Principal Social Worker network, alongside the development of a narrative. The subsequent document will be tested with internal and external stakeholders during the autumn. A comprehensive evidence-base is being established alongside inspection planning processes, to ensure services are well prepared for a future inspection of Buckinghamshire's adult social care.

## **5. Safeguarding**

#### Safeguarding campaign

- 5.1 From September 2021 to March 2022, the Council delivered a 6-month awareness raising campaign 'See Something, Say Something, Do Something', to encourage people to contact the Council if they had concerns about a vulnerable adult. Social media messages reached nearly 57,000 people on Facebook and 64,000 through Twitter, of which 600 people then followed through to the Buckinghamshire Council website to seek further information. In addition, adverts on Greatest Hits radio reached 48,800 listeners, along with 4,000 through Spotify.

- 5.2 By the end of March, over 1,300 referrals had been made by both professionals and members of the public. The number of concerns reported by family members, neighbours or the individual themselves rose by 65% in the second quarter of 2021-22, compared with the same period in the previous year.

#### Safeguarding - demand

- 5.3 The service has seen a significant increase in safeguarding cases. The number of safeguarding concerns averaged 953 per month during 2021/22, compared with 914 per month in 2020/21. In the first quarter of 2022/23, the Council received an average of just over 1,100 per month (a 16% increase on the previous year average).
- 5.4 The number of safeguarding enquiries started in 2021/22 was 3,163, compared with 1,375 in 2020/21. The rate (per 100,000 population) in 2021/22 was 752, twice the South East benchmark level, with increases particularly in relation to cases of self-neglect. A concentrated approach by adult social care to ensure the timely resolution of safeguarding cases and streamlining processes to ensure the individual is kept at the centre of practise has resulted in a significant decrease in the numbers.

## **6. Practice Quality**

### Strategic Workforce Plan

- 6.1 In line with national shortages, the vacancy rates for adult social care remain high at around 29%. Agency staff supplement the permanent workforce and services provide a wide range of recruitment initiatives to attract people to the Council. These include exploring the overseas recruitment and the return to social work scheme; recruitment event days for the Council and social care providers; and offering 'meet the expert' and 'try before you apply' days.
- 6.2 Adult social care has a Strategic Workforce plan which delivers a framework for developing our workforce for the future. The plan is based on the commitment to provide skills development, careers pathways, traineeships, new roles and investment in wellbeing.
- 6.3 The adult social care Careers Advice and Development Service for staff has been launched and the Careers Progression Framework provides an expanded and enhanced offer of career development opportunities. Staff are able to access social care apprenticeships, best interest assessor training, ASYE (assisted year in social work) programmes for newly qualified social workers, social work apprenticeship degrees (with 15 staff currently on the programme) and occupational therapy apprenticeship degrees. Social Work England has accredited the first Buckinghamshire Approved Mental Health Professional (AMHP) programme, one of only a few in the country. This programme is the achievement of joint working with Bucks New University.

6.4 In partnership with Buckinghamshire College Group, through the Buckinghamshire Health and Social Care Academy, the Council have provided placements for a second cohort of Health and Social Care Cadets. These young people are working towards an Extended Diploma in Health and Social Care and the programme aims to encourage more young people to become part of the future social care workforce.

## 7. Budget

7.1 At quarter 1 of the current financial year there is a projected forecast overspend of £3.11m on a net budget of £164.43m (1.89%). This is in part due to the pressures from 2021-22 being carried forward into 2022-23. These include increased demand, due to increased numbers of clients; increased complexity of the needs of clients; and increased price pressures. Inflationary pressures are one of the largest risks with estimates currently around 7%. Reasons for the increase in complexity and volume are due in part to a lower death rate than in previous years, an increase in the number of service users moving to social care after exhausting their own funds and increased flow from the discharge to assess (D2A) process.

7.2 The Adult Social Care Transformation efficiencies target of £3.258m is currently forecast to be fully delivered, with concerns in two specific projects, namely procurement vehicles/accommodation strategy and new care packages. To help mitigate the budget pressures a request from contingency to meet the pressures carried forward from 2021-22 is proposed, and mitigating plans, including a 'Home First' approach and proactive reablement, including the use of equipment to help reduce demand are underway.

7.3 The vast majority of the adult social care budget is spent on providing packages of care to service users:

|                           |        |
|---------------------------|--------|
| • Direct Payments         | £24.9m |
| • Domiciliary Care        | £19.5m |
| • Nursing Placements      | £33.5m |
| • Residential Placements  | £67.5m |
| • Supported Living        | £33.4m |
| • Day Care                | £1.0m  |
| • Supported Accommodation | £0.8m  |
| • Transport               | £2.7m  |

## 8. Corporate implications

8.1 Implications for the Council are referenced in the content of the report as appropriate.

## **9. Corporate implications**

- 9.1 Adult social care services are provided as part of the Council's delivery of its corporate plan priority of 'Protecting the Vulnerable'. The update provided above has identified implications for the Council.

## **10. Local councillors & community boards consultation & views**

- 10.1 This report does not require consultation with local councillors or community boards.

## **11. Communication, engagement & further consultation**

- 11.1 No specific communication or engagement is required in relation to this report.

## **12. Next steps and review**

- 12.1 N/A

## **13. Background papers**

- 13.1 N/A

## **14. Your questions and views (for key decisions)**

- 14.1 If you have any questions about the matters contained in this report please get in touch with the author of this report. If you have any views that you would like the cabinet member to consider please inform the democratic services team. This can be done by telephone 01296 382343 or email [democracy@buckinghamshire.gov.uk](mailto:democracy@buckinghamshire.gov.uk).