Appendix 1 – Benchmarking Data

Kent County Council (KCC) Previous years agreed uplifts

This table below provides a clear longitudinal view of how fee uplifts across adult social care service lines have been determined over time, set alongside inflation as measured by December Consumer Price Index. (CPI). It demonstrates that uplift decisions are not arbitrary or one-off, but part of a consistent and evidence-informed approach that responds to changing market conditions, cost pressures and affordability. Overall, the table provides evidence that the Council has had due regard to its duties under the Care Act 2014, including the duty to promote a sustainable market and ensure continuity of care, while also acting reasonably and proportionately in the context of public finances.

	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27
December CPI	**0.60%**	**5.40%**	**10.50%**	**4.00%**	**2.50%**	**3.40%**
OP Resi & Nursing	**0.94% /1.2%**	**3.00%**	**7.00%**	**4.00%**	**4.00%**	**0.00%**
Care and Support in the Home Services	**1.20%**	**3.00%**	**10.00%**	**4.00%**	**4.00%**	**3.40%**
LDPDMH Residential	**1.36%**	**3.00%**	**6.00%**	**4.00%**	**4.00%**	**2.00%**
Supported Living Services	**1.20%**	**3.00%**	**6.00%**	**4.00%**	**4.00%**	**2.00%** + NLW for sleep nights

National and Regional Benchmarking

National and regional benchmarking indicates that Kent's 2025/2026 fee levels sit at the upper end of both national and local comparator groups across older persons' residential care, nursing care and homecare. Kent's rates are materially above the England average for all three service types and are among the highest when compared with statistical and regional neighbours.

This positioning reflects the cumulative impact of previous uplifts and investment decisions and demonstrates that Kent has consistently prioritised market sustainability and continuity of care. However, the benchmarking evidence also indicates that further uniform inflationary uplifts would increase the risk of exacerbating Kent's outlier position and place additional pressure on the Council's available resources.

The Council is therefore proposing a differentiated and proportionate approach to fee uplifts, informed by benchmarking, market intelligence and engagement with providers. This approach seeks to balance affordability with the need to manage identified risks to market sustainability and continuity of care, while meeting statutory duties under the Care Act 2014.

Appendix 1 – Benchmarking Data

Spending Benchmarks - National

	Provisional Average Fee 2025-26	KCC 2025-26 above average	Average Fee 2024-25	Change 2024-25 to 2025-26	*Change 2023-24 to 2024-25*
KCC					
Older Persons Residential	£1,186.81	24.2%	£1,063.00	11.6%	*20.2%*
Older Persons Nursing	£1,378.00	26.5%	£1,239.73	11.2%	*14.7%*
Older Persons Homecare	£28.05	11.9%	£26.97	4.0%	*2.9%*
England Average					
Older Persons Residential	£955.56		£907.56	5.3%	*8.3%*
Older Persons Nursing	£1,089.48		£1,038.23	4.9%	*7.0%*
Older Persons Homecare	£25.05		£23.79	5.3%	*5.5%*

Spending Benchmarks (Local)

	Provisional 2025-26 Homecare	Rank	Provisional 2025-26 Residential	Rank	Provisional 2025-26 Nursing	Rank
Kent	£28.05	3	£1,186.81	2	£1,378.00	1
Medway	£21.92	11	£875.07	10	£1,125.89	5
Bexley	£23.88	9	£1,015.69	7	£1,088.36	8
Bromley	£24.35	8	£1,062.32	5	£1,257.17	4
Croydon	£22.80	10	£1,168.41	3	£1,299.91	3
East Sussex	£28.16	2	£928.72	9	£994.24	10
Essex	£28.04	4	£849.45	11	£1,102.68	7
Hampshire	£25.90	6	£1,245.00	1	£1,365.00	2
Suffolk	£26.60	5	£1,064.00	4	£1,051.00	9
Surrey	£24.87	7	£952.38	8	£988.04	11
West Sussex	£28.92	1	£1,033.31	6	£1,124.80	6

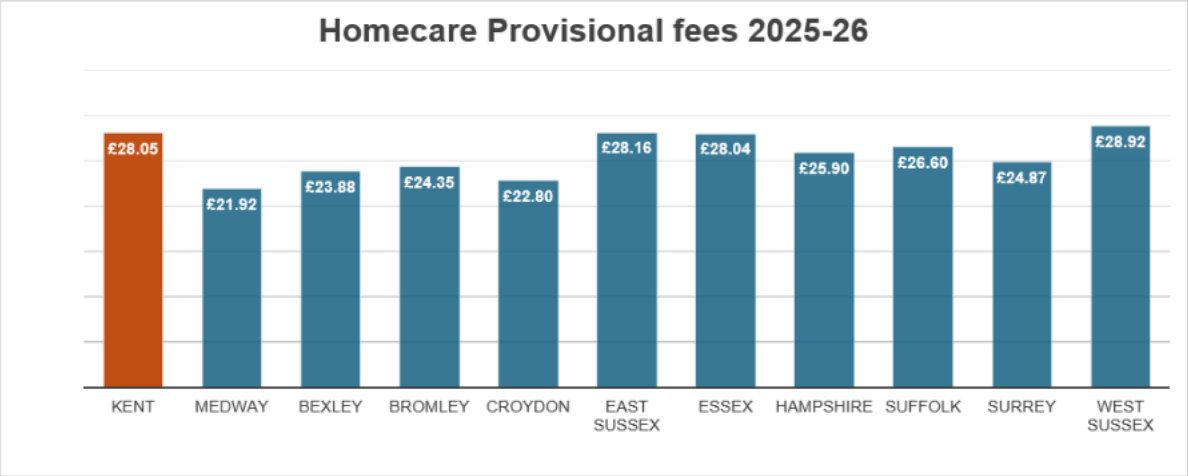
9

Benchmarking for working age adult services, including supported living and Learning Disability, Physical Disability and Mental Health (LDPDMH) residential provision, is not directly comparable across local authorities due to differences in the treatment of Section 117 joint funding.

In Kent, the Council pays only its local authority contribution, with the NHS funding its share directly. In contrast, many other local authorities pay the full provider fee and subsequently reclaim the NHS contribution. This results in headline unit costs for Kent appearing artificially lower than those reported by comparator authorities, despite reflecting equivalent overall system costs once NHS funding is taken into account. As a consequence, direct comparison of published rates risks

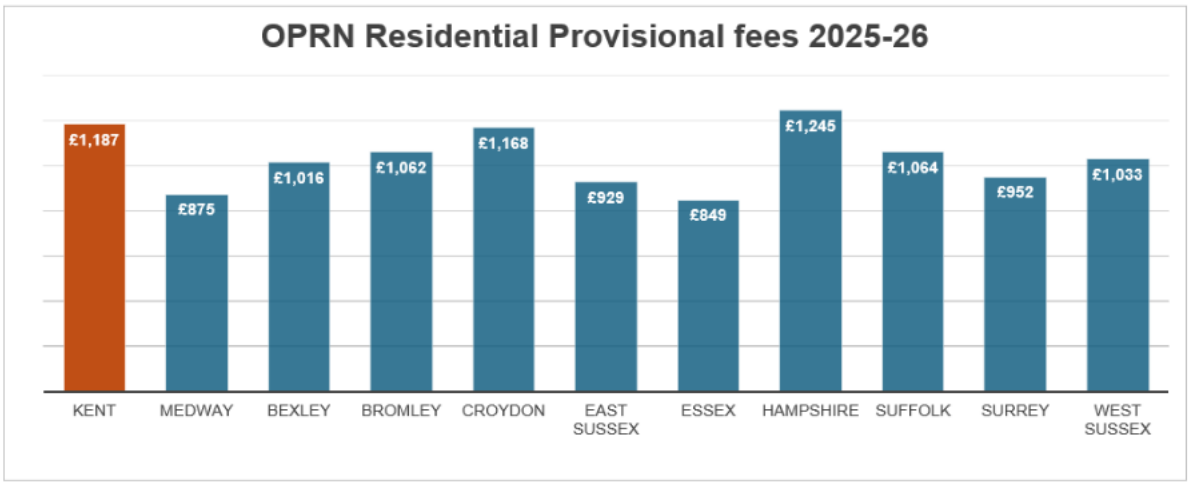
misrepresenting the true cost of care and drawing inaccurate conclusions about relative funding levels or market sustainability.

Benchmarking: Homecare



Source: Market Sustainability and Improvement Fund: Provider fee reporting 2025 to 2026

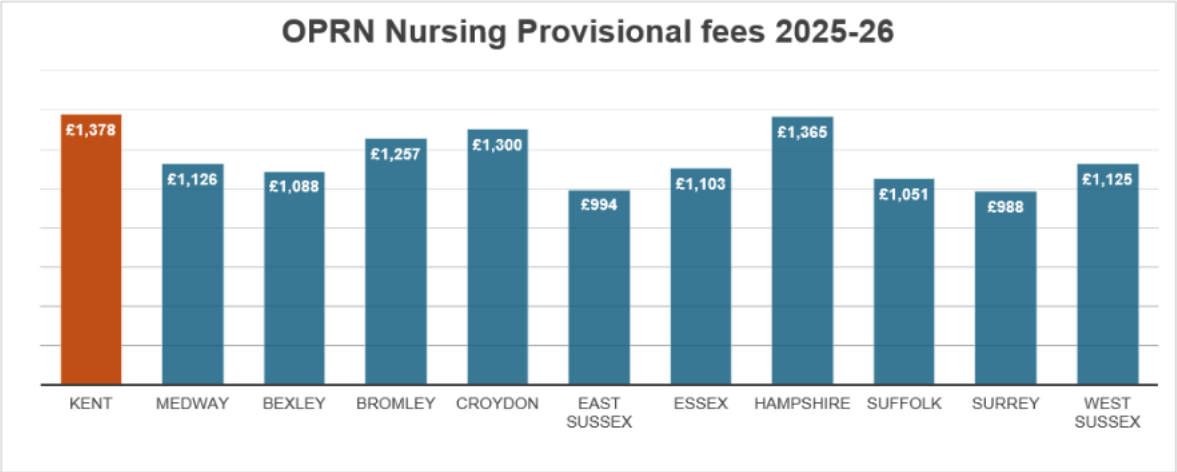
Benchmarking: Older People Residential and Nursing – Residential



Source: Market Sustainability and Improvement Fund: Provider fee reporting 2025 to 2026

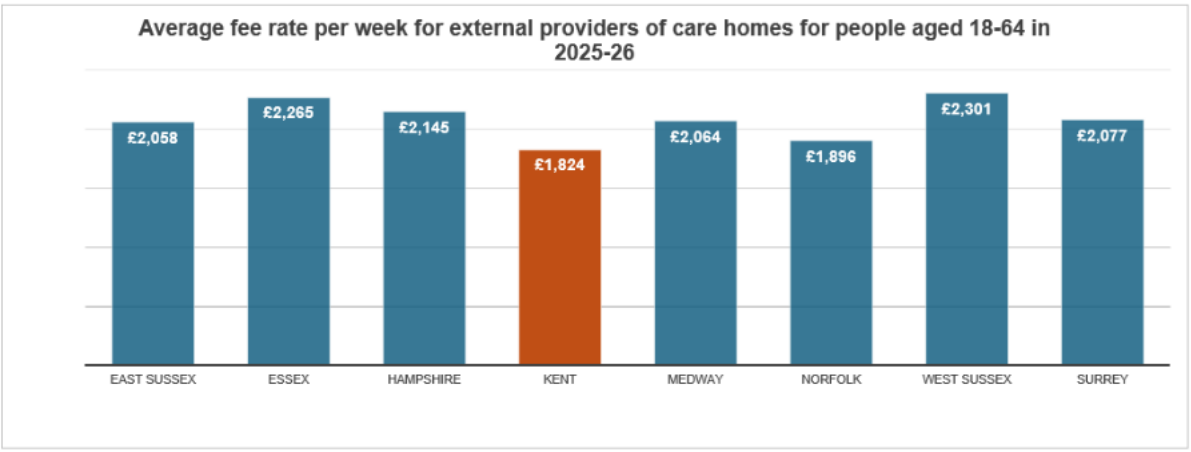
Appendix 1 – Benchmarking Data

Benchmarking: Older People Residential and Nursing – Nursing



Source: Market Sustainability and Improvement Fund: Provider fee reporting 2025 to 2026

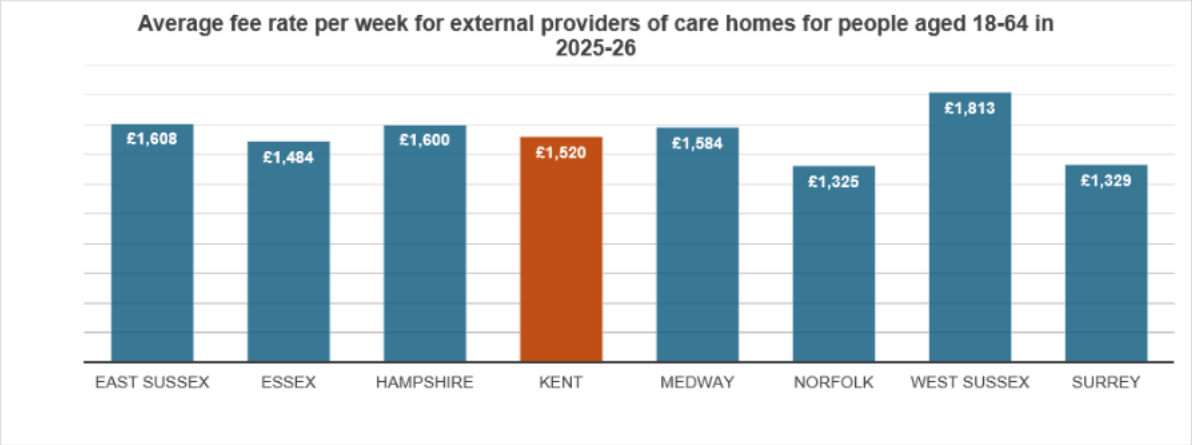
Benchmarking: Learning Disability, Physical Disability and Mental Health (LDPDMH) Residential



Source: Market Sustainability and Improvement Fund: Provider fee reporting 2025 to 2026

Appendix 1 – Benchmarking Data

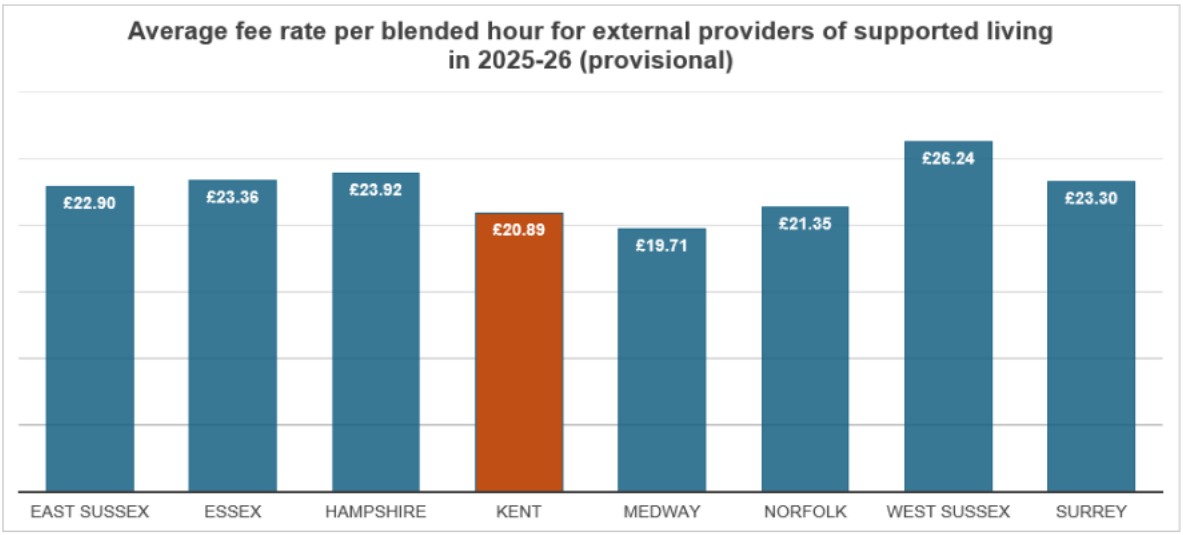
Benchmarking: Learning Disability, Physical Disability and Mental Health (LDPDMH) Nursing



Source: Market Sustainability and Improvement Fund: Provider fee reporting 2025 to 2026

Source: Market Sustainability and Improvement Fund: Provider fee reporting 2025 to 2026

Benchmarking: Supported Living



Source: Market Sustainability and Improvement Fund: Provider fee reporting 2025 to 2026