

# KENT ADULT SOCIAL SERVICES DIRECTORATE SUMMARY JULY 2010-11 FULL MONITORING REPORT

## 1. FINANCE

### 1.1 REVENUE

1.1.1 The cash limits that the Directorate is working to, **and upon which the variances in this report are based**, include adjustments for both formal virement and technical adjustments, the latter being where there is no change in policy. The Directorate would like to request formal virement through this report to reflect adjustments to cash limits required for the following changes required in respect of the allocation of previously unallocated budgets where further information regarding allocations and spending plans has become available since the budget setting process. This primarily relates to how the Directorate allocated demography/growth and savings, and how grant funding was allocated, decisions for which were made following a Special Budget SMT in January and subsequent detailed analysis by Areas. Where necessary allocations have been adjusted in light of the 2009-10 outturn expenditure and activity, whereas before they would have been based on forecasts from several months earlier. As a result, demography/growth and savings have in some cases been allocated across different headings to those assumed within budget build. Cash limits also need to be adjusted to reflect the changing trends in services over the past few years through modernisation of services and the move towards more self directed support. Services are now more likely to be community based, for example in supported accommodation, or through a domiciliary care package, or via a direct payment, rather than residentially based (although there are exceptions where very complex needs remain, e.g. many Older People with Mental Health Needs and clients with severe Learning or Physical Disabilities). The value of these changes is a decrease of £632k in gross and a £632k decrease in income.

Cash limits have also been adjusted to reflect a number of technical adjustments to budget, including realignment of gross and income to more accurately reflect current levels of services and the inclusion of a number of 100% grants/contributions (i.e. which fully fund the additional costs) awarded since the budget was set. These include the increase of £56k in the HIV/AIDS grant, and £95k for the Dementia Demonstrator funding, and reflects the receipts in advance carried forward from 2009-10 for Learning Disability Campus Re-provision Grant (£271k) and Social Care Reform Grant (£715k). Adjustments are also needed to reflect the further transfer of Learning Disability clients from Health under Section 256 arrangements; these adjustments increase both gross and income by £17,507k. It was previously acknowledged that some of the income budgets were not correctly aligned to where the gross budget was held. This should have been rectified in budget build but regrettably was not hence a number of adjustments are now required. The value of these changes is a £353k increase in gross and a £353k increase in income. Of this £557k relates to recharges to the Communities Directorate in respect of Supporting People costs which were not previously cash limited. The balance of -£204k is made up of small decreases in client, health and other income.

These adjustments have resulted in an overall increase in the gross expenditure budget of £18,365k (-£632k + £56k + £95k + £271k + £715k + £17,507k + £353k) and an increase in the income budget of an equal amount, giving a net nil effect.

In addition there has been an increase of £119k in the gross budget in relation to an approved roll-forward from 2009-10 together with £18k of other Corporate adjustments which together total £137k.

Therefore the overall movement in cash limits shown in table 1a below is an increase of £18,502k in gross expenditure (£18,365k + £137k) and an increase in income of £18,365k.

Table 1a shows:

- the published budget,
- the proposed budget following adjustments for both formal virement and technical adjustments, together with roll forward from 2009-10 as approved by Cabinet in July,
- the total value of the adjustments applied to each service line.

#### **Cabinet is asked to approve these revised cash limits:**

The changes to cash limits referred to above have also impacted on the 2010-11 affordable levels of activity and these have been updated within section 2 of this annex to reflect the revised cash limits outlined in Tables 1a and 1b.

1.1.2.1 Table 1a: Movement in cash limits since Published Budget

Budget Book Heading	Published Budget			Current Cash Limit			Movement in Cash Limit		
	G	I	N	G	I	N	G	I	N
	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s
<b>Adult Services portfolio</b>									
Older People:									
- Residential Care	88,305	-33,217	55,088	87,616	-33,310	54,306	-689	-93	-782
- Nursing Care	44,209	-20,201	24,008	45,690	-21,078	24,612	1,481	-877	604
- Domiciliary Care	47,882	-10,490	37,392	47,498	-10,044	37,454	-384	446	62
- Direct Payments	4,981	-452	4,529	5,062	-532	4,530	81	-80	1
- Other Services	19,582	-3,082	16,500	20,187	-3,137	17,050	605	-55	550
Total Older People	204,959	-67,442	137,517	206,053	-68,101	137,952	1,094	-659	435
People with a Learning Difficulty:									
- Residential Care	65,284	-12,791	52,493	71,361	-18,794	52,567	6,077	-6,003	74
- Domiciliary Care	7,827	-949	6,878	7,393	-1,122	6,271	-434	-173	-607
- Direct Payments	7,747	-185	7,562	7,865	-143	7,722	118	42	160
- Supported Accommodation	12,729	-2,140	10,589	23,317	-12,643	10,674	10,588	-10,503	85
- Other Services	21,110	-1,397	19,713	21,603	-1,232	20,371	493	165	658
Total People with a LD	114,697	-17,462	97,235	131,539	-33,934	97,605	16,842	-16,472	370
People with a Physical Disability									
- Residential Care	12,759	-2,136	10,623	12,526	-1,951	10,575	-233	185	-48
- Domiciliary Care	7,718	-459	7,259	7,661	-449	7,212	-57	10	-47
- Direct Payments	7,022	-269	6,753	7,132	-249	6,883	110	20	130
- Supported Accommodation	477	-18	459	394	-8	386	-83	10	-73
- Other Services	5,940	-715	5,225	5,805	-896	4,909	-135	-181	-316
Total People with a PD	33,916	-3,597	30,319	33,518	-3,553	29,965	-398	44	-354
All Adults Assessment & Related	36,550	-1,876	34,674	37,292	-2,020	35,272	742	-144	598
Mental Health Service									
- Residential Care	6,456	-772	5,684	6,416	-882	5,534	-40	-110	-150
- Domiciliary Care	725		725	623		623	-102	0	-102
- Direct Payments	602		602	606		606	4	0	4
- Supported Accommodation	435		435	435	0	435	0	0	0
- Assessment & Related	10,001	-876	9,125	10,001	-876	9,125	0	0	0
- Other Services	6,914	-902	6,012	7,180	-902	6,278	266	0	266
Total Mental Health Service	25,133	-2,550	22,583	25,261	-2,660	22,601	128	-110	18
Gypsy & Traveller Unit	647	-319	328	662	-333	329	15	-14	1
People with no recourse to Public Funds	100		100	100		100	0	0	0
Strategic Management	1,289	-27	1,262	1,249	-27	1,222	-40	0	-40
Strategic Business Support	24,525	-2,134	22,391	24,673	-2,007	22,666	148	127	275
Support Services purchased from CED	6,816		6,816	6,787		6,787	-29	0	-29
Specific Grants		-8,773	-8,773		-9,910	-9,910		-1,137	-1,137
<b>Adult Services controllable</b>	<b>448,632</b>	<b>-104,180</b>	<b>344,452</b>	<b>467,134</b>	<b>-122,545</b>	<b>344,589</b>	<b>18,502</b>	<b>-18,365</b>	<b>137</b>

1.1.2.2 Table 1b below details the revenue position by Service Unit against the revised cash limits shown in table 1a:

Budget Book Heading	Cash Limit			Variance			Comment
	G	I	N	G	I	N	
	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	
<b>Adult Services portfolio</b>							
Older People:							
- Residential Care	87,616	-33,310	54,306	663	-88	575	Price pressures due to dementia; staff cover for in-house; additional client/health income
- Nursing Care	45,690	-21,078	24,612	-260	24	-236	Forecast activity below affordable level
- Domiciliary Care	47,498	-10,044	37,454	-239	60	-179	Activity in independent in excess of affordable offset by underspend on in-house

## Appendix 1

Budget Book Heading	Cash Limit			Variance			Comment
	G	I	N	G	I	N	
	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	
- Direct Payments	5,062	-532	4,530	-97	-34	-131	
- Other Services	20,187	-3,137	17,050	-156	-7	-163	Small underspends on a number of lines
Total Older People	206,053	-68,101	137,952	-89	-45	-134	
People with a Learning Disability:							
- Residential Care	71,361	-18,794	52,567	3,777	-106	3,671	Demographic and placement pressures
- Domiciliary Care	7,393	-1,122	6,271	-85	-96	-181	
- Direct Payments	7,865	-143	7,722	97	-40	57	
- Supported Accommodation	23,317	-12,643	10,674	29	-119	-90	Demographic and placement pressures
- Other Services	21,603	-1,232	20,371	-981	-88	-1,069	Releasing of Managing Director's contingency to offset overall pressure; number of small underspends
Total People with a LD	131,539	-33,934	97,605	2,837	-449	2,388	
People with a Physical Disability							
- Residential Care	12,526	-1,951	10,575	224	253	477	Demographic and placement pressures
- Domiciliary Care	7,661	-449	7,212	98	23	121	
- Direct Payments	7,132	-249	6,883	95	-15	80	
- Supported Accommodation	394	-8	386	73	-12	61	
- Other Services	5,805	-896	4,909	-88	3	-85	
Total People with a PD	33,518	-3,553	29,965	402	252	654	
All Adults Assessment & Related	37,292	-2,020	35,272	334	95	429	Reduced turnover
Mental Health Service							
- Residential Care	6,416	-882	5,534	854	289	1,143	Forecast activity in excess of affordable level; increased proportion of S117 clients who do not contribute to costs
- Domiciliary Care	623		623	28	0	28	
- Direct Payments	606		606	-176	0	-176	Less than expected activity
- Supported Accommodation	435	0	435	94	0	94	
- Assessment & Related	10,001	-876	9,125	-95	30	-65	
- Other Services	7,180	-902	6,278	-523	-97	-620	Releasing of Managing Director's contingency/ other uncommitted monies to offset overall pressure
Total Mental Health Service	25,261	-2,660	22,601	182	222	404	
Gypsy & Traveller Unit	662	-333	329	60	-55	5	
People with no recourse to Public Funds	100		100	0	0	0	
Strategic Management	1,249	-27	1,222	-94	0	-94	
Strategic Business Support	24,673	-2,007	22,666	-905	91	-814	Uncommitted workforce development grant; vacancy management; non pay savings; grant funded posts

Budget Book Heading	Cash Limit			Variance			Comment
	G	I	N	G	I	N	
	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	
Support Services purchased from CED	6,787		6,787	0	0	0	
Specific Grants		-9,910	-9,910	0	0	0	
<b>Total Adult Services controllable</b>	<b>467,134</b>	<b>-122,545</b>	<b>344,589</b>	<b>2,727</b>	<b>111</b>	<b>2,838</b>	
<b>Assumed Management Action</b>				<b>-2,838</b>		<b>-2,838</b>	
<b>Forecast after Mgmt Action</b>				<b>-111</b>	<b>111</b>	<b>0</b>	

### 1.1.3 Major Reasons for Variance: *[provides an explanation of the 'headings' in table 2]*

Table 2, at the end of this section, details all forecast revenue variances over £100k. Each of these variances is explained further below:

#### 1.1.3.1 Older People:

The overall position for services for Older People is a net underspend of £134k.

##### a. Residential Care

This line is reporting a gross pressure of £663k and an over recovery of income of £88k. As at June there were 2,819 permanent clients in private and voluntary care compared with 2,751 in March which is an increase of 68 clients, 46 of whom were people with dementia. The forecast position is 155,570 weeks of care against an affordable level of 155,351, which is 219 weeks over budget. Using the forecast unit cost of £391.29, this increased level of activity generates a pressure of £86k. In addition the forecast unit cost is £1.38 higher than the affordable which results in a pressure of £214k and reflects the increasing numbers of clients with dementia as placements are more expensive. Although the higher level of activity generates increased income of £36k, the actual income per week is £162.60 against an expected level of £164.29. This gives an under-recovery in income of £262k.

In-house residential provision, including integrated care centres, is showing a pressure of £390k on gross primarily on staffing because of the continuing need to cover sickness and absence with agency staff in order to meet care standards, as well as meeting increased occupancy levels. The pressure on gross is offset by an additional £285k of income due to increased occupancy levels and recharges to health.

The forecast for Preserved Rights clients is showing minor variances on both gross and income.

##### b. Nursing Care

There is an underspend of £260k on gross expenditure and an under recovery of income of £24k against this line. The number of permanent clients in private and voluntary placements has increased to 1,417 in June compared to the 1,374 reported in March. The forecast is currently coming in 770 weeks under budget at a saving of £363k. The unit cost is currently forecast to be slightly more than budget, £470.67 instead of £470.01, which gives a pressure by £53k. The reduced activity has resulted in decreased income of £123k. The actual income per week is £159.79 against an expected level of £158.30. This gives an over-recovery in income of £118k.

The forecast for Preserved Rights clients is showing minor variances on both gross and income.

##### c. Domiciliary Care

Overall there is currently an underspend of £239k on gross with an under-recovery in income of £60k. Domiciliary care continues to be the most difficult to forecast as activity can be volatile; the continuing trend in the number of clients remains uncertain and the number receiving a domiciliary care package from the independent sector remains below the average of last year. The number of clients in receipt of a package through the private and voluntary sector decreased in June to 6,298 following two months of increases, compared with 6,227 clients in March. The current forecast assumes that 2,493,266 hours will be purchased against an affordable level of 2,476,546, generating a pressure of £259k. The forecast unit cost is only marginally more expensive than

affordable generating an additional cost of £68k. This will relate to the fact that people who do receive domiciliary care, in its traditional sense, are more likely to have higher needs and require more intense packages.

There is also a significant underspend of £490k relating to the in-house domiciliary service as the number of clients remains well below that afforded within the budget. There is also a minor underspend of £95k against block contracts.

There are a number of small variances across the various lines within domiciliary care which add up to an under-recovery of income of £60k.

d. Other Services

This line is showing a gross underspend of £156k due to small variances against a number of budgets including payments to voluntary organisations, day-care, and meals.

1.1.3.2 People with a Learning Disability:

Overall the position for this client group is a net pressure of £2,388k. Services for this client group remain under extreme pressure, particularly within residential care as a result of both demographic and placement price pressures. This includes the impact of young adults transferring from Children's Services, many of whom have very complex needs and require a much higher level of support. There are also increasing numbers of older learning disabled clients who are cared for at home by ageing parents who will begin to require more support. Cases of clients becoming/ or who could become "ordinarily resident" in Kent continue to be a problem. A client would become "ordinarily resident" when placed by another local authority in Kent and following de-registration of the home, the individual moves into supported accommodation. We have accepted responsibility for a number of clients, and we are still contesting a number of other applications. The issue of ordinary residence has been discussed nationally through the Association of Directors of Adult Social Services as the current system penalises those authorities, such as Kent, who have historically been a net importer of residential clients.

a. Residential Care

The overall forecast for residential care, including preserved rights clients, is a pressure on gross of £3,777k partially offset by an over recovery of income of £106k, giving a net pressure of £3,671k. Details of the individual pressures and savings contributing to this position are provided below.

The number of clients has increased from 632 in March to 703 in June which includes the transfer of a further 69 clients from Health under Section 256 arrangements. This is part of the overall transfer of responsibility for most Learning Disability placements from Health and these clients are 100% funded by Health. Both the costs and income relating to this transfer of clients are included in the cash limits and the additional activity is reflected in the affordable levels. The forecast assumes 1,133 weeks more than is affordable at a cost of £1,429k, and includes those known young people who are in the "transition" process and will be coming to adult social services before the end of the year. The actual unit cost is £1,261.46 which is £58.19 higher than the affordable level and adds £2,089k to the forecast. It should be noted that both the affordable and forecast unit costs have increased significantly from last year as a result of the placements transferred from Health under S256 arrangements. The additional client weeks add £359k of income, although the actual income per week is slightly lower than the expected level which generates an under-recovery in income of £40k.

The forecast number of client weeks of service provided to Preserved Rights clients is 97 lower than the affordable level because of increased attrition which is over and above that assumed in the budget; this reduced activity gives an underspend of £79k. The unit cost is £814.35 which is higher than the affordable level of £805.28 creating a pressure of £285k. The reduced level of activity has resulted in an under-recovery of income of £22k, and the actual income per week is less than expected which gives a pressure of £132k.

There is a small gross pressure of £60k against in house residential provision because of the need to cover sickness and absence with agency staff to meet national care standards.

b. Supported Accommodation

The current position is a gross pressure of £29k and an over recovery of income of £119k giving a net underspend of £90k with the number of clients having increased from 309 in March to 408 in June following the transfer of a number of clients from Health under Section 256 arrangements. As with residential care, both the costs and income relating to this transfer of clients are included in the cash limits and the additional activity is reflected in the affordable levels. The forecast shows 41 weeks more than affordable creating a pressure of £44k. This is based on a unit cost of £1,060.59 which is £1.93 per week lower than is affordable and this reduces the pressure by £39k. It should be noted that both the affordable and forecast unit costs have increased significantly from last year as a result of the placements transferred from Health under S256 arrangements as many of these clients cost over £1,200 per week. The extra activity generates increased income of £26k and the average income per week is higher than the level expected resulting in an over recovery in income of £103k.

There are also small variances against group homes and the adult placement scheme.

c. Other Services

This line is showing a gross underspend of £981k following the release of £830k of the Contingency held by the Managing Director to offset the overall pressure within this client group. The remaining underspend of £151k relates to small variances against a number of budgets including payments to voluntary organisations, day-care, and supported employment.

1.1.3.3 People with a Physical Disability:

Overall the position for this client group is a net pressure of £654k. Services for this client group remain under pressure as a result of both demographic and placement price pressures.

a. Residential Care

The overall forecast for residential care, including preserved rights clients, is a pressure on gross of £224k and an under recovery of income of £253k. Although the number of clients has reduced from 222 in March to 218 the forecast assumes 70 weeks more than is affordable giving a pressure of £63k. The actual unit cost is £904.33 which is £26.67 higher than the affordable which increases the pressure by £324k. The additional client weeks add £8k of income to the position however the income per week is less than the level expected which causes a pressure of £181k.

The forecast number of client weeks of service provided to Preserved Rights clients is 176 lower than the affordable level because of increased attrition which is over and above that assumed in the budget. This reduced activity gives an underspend of £152k and the unit cost is slightly lower than the affordable level which further reduces the position by £12k. The reduced activity and a lower average of income per week means an under-recovery in income of £76k.

1.1.3.4 All Adults & Assessment:

This budget is forecasting a gross pressure of £334k with an under-recovery in income of £95k. Although it is hoped that this pressure will reduce through vacancy management, it should be noted that the level of staff turnover in June for the Directorate as a whole had reduced to just 0.39% which is the lowest it has been in over 15 months. This low turnover increases the pressure on all staffing budgets as it is expected to fund the cost of performance related pay progression.

### 1.1.3.5 **Mental Health:**

The overall position for Mental Health is a net pressure of £404k.

#### a. Residential Care

The forecast for residential care, including preserved rights clients, is a pressure on gross of £854k and an under recovery of income of £289k. The affordable level for non-preserved rights was previously reduced following the decision to realign budgets to reflect the changed priorities in the Directorate to keep clients, wherever possible, within a community based setting such as supported accommodation or via direct payments, rather than residential care, however this change has not happened as quickly as anticipated. The intention to keep clients in the community remains, so budgets have been left as they are rather than adjusted back. The result is a forecast which is 1,681 weeks more than is affordable at a cost of £920k. The actual unit cost is £547.57 which is £1.83 lower than the affordable which reduces the pressure by £16k. The forecast also assumes a significant under-recovery in income as an increasing proportion of clients fall under Section 117 legislation meaning that they do not contribute towards the cost of their care. This has added £274k to the pressure.

The forecast for Preserved Rights clients reflects a small underspend of £50k because of increased attrition which is over and above that assumed in the budget. The reduced activity also means an under-recovery in income of £15k.

#### b. Direct Payments

As referred to above the affordable level was increased in both 2008-09 and 2009-10 to reflect the changed priorities in the Directorate to keep clients, wherever possible, within a community based setting such as supported accommodation or via direct payments, rather than residential care, however this change has not happened as quickly as anticipated. The intention to keep clients in the community remains so budgets have been left as they are rather than adjusted back. The result is a gross forecast which is underspending against budget by £176k.

#### c. Other Services

This line is showing an underspend on gross of £523k following the release of £520k of Contingency and other uncommitted funding held by the Managing Director to offset the overall pressure within this client group.

### 1.1.3.6 **Strategic Business Support:**

This line is forecasting a significant underspend of £905k against gross expenditure with an under recovery in income of £91k. Of the gross underspend £250k relates to uncommitted funding held by the Managing Director and this has been released to reduce the overall pressure within the Directorate. The remainder of the underspend results from savings in a number of areas including £345k of vacancy management through continuing to hold posts vacant and delaying the recruitment process, £146k of printing, stationery, rent and room hire and reduced Girobank charges, and £91k of posts funded externally and not backfilled, with the other £73k made up of numerous small savings.

**Table 2: REVENUE VARIANCES OVER £100K IN SIZE ORDER**

(shading denotes that a pressure has an offsetting saving, which is directly related, or vice versa)

Pressures (+)			Underspends (-)		
portfolio		£000's	portfolio		£000's
KASS	LD Residential Gross - Independent sector unit cost higher than affordable	+2,089	KASS	LD Other Services Gross - Release of contingency	-830
KASS	LD Residential Gross - Independent sector activity beyond affordable level	+1,429	KASS	MH Other Services Gross - Release of uncommitted funding and contingency	-520
KASS	MH Residential Gross - Slower than anticipated change to community based services creating activity higher than affordable	+920	KASS	OP Domiciliary Gross - In house provision client numbers below affordable level	-490
KASS	OP Residential Gross - In House provision Staffing	+390	KASS	OP Nursing Gross - Independent sector activity lower than affordable	-363
KASS	Adults Assessment Gross - reduced staff turnover & pressure of pay progression	+334	KASS	LD Residential Income - Additional income attributable to increased activity	-359
KASS	PD Residential Gross - Unit cost higher than affordable	+324	KASS	SBS Gross - vacancy management	-345
KASS	LD Residential Gross - Independent sector Preserved Right clients unit cost higher than affordable	+285	KASS	OP Residential Income - In House provision, recharges to health	-285
KASS	MH Residential Income - Increased incidence of clients classed at Section 117 causing a drop in average income collected	+274	KASS	SBS Gross - Uncommitted funding held by Managing Director	-250
KASS	OP Residential Income - Income per week lower than budgeted	+262	KASS	MH Direct Payments Gross - Slower than expected take up of community based services	-176
KASS	OP Domiciliary Care Gross - Increased activity beyond affordable level in independent sector provision	+259	KASS	PD Residential Gross - Preserved Rights clients increase in actual attrition rate	-152
KASS	OP Residential Gross - Change in unit cost of Independent Sector placements	+214	KASS	SBS Gross - Reduced costs of room hire, printing, stationery, rent and bank Giro charges	-146
KASS	PD Residential Income - Weekly income lower than expected	+181	KASS	OP Nursing Income - Increase in income per week compared to budgeted	-118
KASS	LD Residential Income - Independent sector Preserved Rights clients weekly income lower than affordable	+132	KASS	LD Supported Accommodation Income - additional income due to higher than expected average weekly income	-103
KASS	OP Nursing Income - reduced income from reduced Independent sector activity	+123			
		<b>+7,216</b>			<b>-4,137</b>

**1.1.4 Actions required to achieve this position:**

The forecast pressure of £2,838k assumes that the savings identified within the MTP will be achieved and the Directorate remains confident that all savings will be achieved. 'Guidelines for Good Management Practice', also referred to below, are in place across the Directorate, and these, together with vacancy management, are anticipated to address the overall pressure.

### 1.1.5 Implications for MTP:

The MTP assumes a breakeven position for 2010-11.

The base budget implications of issues identified in this monitoring report will be a call on the amounts identified in the 2010/13 MTP as emerging pressures in 2011/12 and 2012/13. The details of individual amounts will be included when the revised plan is published for consultation in January 2011 together with any new pressures forecast for 2011/12 and 2012/13. The significant issues for the KASS portfolio arising from 2010/11 budget monitoring are related to demography.

It is assumed that the demographic pressures for KASS are likely to be £8.7m in future years. This is based on detailed calculations, on trends over the past year of increased clients and complexity. Clearly this will be reviewed on an on-going basis as part of the monitoring process.

The revised MTP will include proposals on how the in-year cuts in Government grants will be accommodated in base budgets once it has been confirmed that these reductions are permanent following the announcement of the provisional local government finance settlement for 2011/12 which we anticipate will be in late November/Early December. The revised plan will also include the strategy to address the likely reductions in funding over the lifetime of the current parliament following the Chancellor's emergency budget statement on 22<sup>nd</sup> June in which he outlined his plans to address the national budget deficit.

### 1.1.6 Details of re-phasing of revenue projects:

No revenue projects have been identified for re-phasing.

### 1.1.7 Details of proposals for residual variance: *[eg roll forward proposals; mgmt action outstanding]*

*This section should provide details of the management action outstanding, as reflected in the assumed management action figure reported in table 1.*

The KASS Directorate is wholly committed to delivering a balanced outturn position by the end of the financial year. KASS has 'Guidelines for Good Management Practice' in place across all teams in order to help us manage demand on an equitable basis consistent with policy and legislation. Robust monitoring arrangements are in place on a monthly basis to ensure that forecasts and expenditure are closely monitored and where necessary challenged. Through these arrangements the Directorate expects to balance the £2,838k pressure by the end of the year.

## 1.2 CAPITAL

### 1.2.1 All changes to cash limits are in accordance with the virement rules contained within the constitution and have received the appropriate approval via the Leader, or relevant delegated authority.

The capital cash limits have been adjusted since last reported to Cabinet on 12<sup>th</sup> July 2010, as detailed in section 4.1.

1.2.2 **Table 3** below provides a portfolio overview of the latest capital monitoring position excluding PFI projects.

	Prev Yrs Exp £000s	2010-11 £000s	2011-12 £000s	2012-13 £000s	Future Yrs £000s	TOTAL £000s
<b>Kent Adult Social Services portfolio</b>						
Budget	5,796	14,455	7,285	2,640	1,162	31,338
Adjustments:						
- completed projects	-1,620					-1,620
Revised Budget	4,176	14,455	7,285	2,640	1,162	29,718
Variance		-5,108	3,109	1,530	379	-90
<b>split:</b>						
- real variance		-90				-90
- re-phasing		-5,018	+3,109	+1,530	+379	0

<b>Real Variance</b>	<b>0</b>	<b>-90</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>-90</b>
<b>Re-phasing</b>	<b>0</b>	<b>-5,018</b>	<b>+3,109</b>	<b>+1,530</b>	<b>+379</b>	<b>0</b>

### 1.2.3 Main Reasons for Variance

Table 4 below, details all forecast capital variances over £250k in 2010-11 and identifies these between projects which are:

- part of our year on year rolling programmes e.g. maintenance and modernisation;
- projects which have received approval to spend and are underway;
- projects which are only at the approval to plan stage and
- Projects at preliminary stage.

The variances are also identified as being either a real variance i.e. real under or overspending which has resourcing implications, or a phasing issue i.e. simply down to a difference in timing compared to the budget assumption.

Each of the variances in excess of £1m which is due to phasing of the project, excluding those projects identified as only being at the preliminary stage, is explained further in section 1.2.4 below.

All real variances are explained in section 1.2.5, together with the resourcing implications.

Table 4: CAPITAL VARIANCES OVER £250K IN SIZE ORDER

portfolio	Project	real/ phasing	Project Status			
			Rolling Programme £'000s	Approval to Spend £'000s	Approval to Plan £'000s	Preliminary Stage £'000s
<b>Overspends/Projects ahead of schedule</b>						
			<b>+0</b>	<b>+0</b>	<b>+0</b>	<b>+0</b>
<b>Underspends/Projects behind schedule</b>						
	Learning Disability Good Day programme Board	phasing			-2,613	
	Op-Integrated Care Centres	phasing			-1,082	
	Eastern Quarry	phasing			-521	
			<b>0</b>	<b>-0</b>	<b>-4,216</b>	<b>-0</b>
			<b>-0</b>	<b>-0</b>	<b>-4,216</b>	<b>-0</b>

#### 1.2.4 Projects re-phasing by over £1m:

##### 1.2.4.1 Modernisation of LD Services (Learning Disability Good Day Programme Board) – re-phasing of -£2.613m

Following extensive consultation of day care services for people with learning disabilities and recommending a way forward, the current forecast represents the revised timescale for this project.

Revised phasing of the scheme is now as follows:

	Prior Years £'000s	2010-11 £'000s	2011-12 £'000s	2012-13 £'000s	future years £'000s	Total £'000s
<b>BUDGET &amp; FORECAST</b>						
Budget		3,853	749	1,152	1,162	6,916
Forecast		1,240	2,535	1,600	1,541	6,916
Variance	0	-2,613	1,786	448	379	0
<b>FUNDING</b>						
<b>Budget:</b>						
PEF 2		3,251	681	1,152	1,162	6,246
Prudential		210				210
Capital Receipts		392	68			460
TOTAL	0	3,853	749	1,152	1,162	6,916
<b>Forecast:</b>						
PEF 2		1,060	2,325	1,530	1,331	6,246
prudential		110	100			210
Capital Receipts		70	110	70	210	460
TOTAL	0	1,240	2,535	1,600	1,541	6,916
Variance	0	-2,613	+1,786	+448	+379	-0

##### 1.2.4.2 OP Integrated Care Centres – re-phasing of -£1.082m

In light of the recent Directorate's over-arching strategy around its older persons services, this element has been re-phased.

Revised phasing of the scheme is now as follows:

	Prior Years	2010-11	2011-12	2012-13	future years	Total
	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s
<b>BUDGET &amp; FORECAST</b>						
Budget		1,082				1,082
Forecast				1,082		1,082
Variance	0	-1,082	0	+1,082	0	0
<b>FUNDING</b>						
<b>Budget:</b>						
PEF 2		1,082				1,082
TOTAL	0	1,082	0	0	0	1,082
<b>Forecast:</b>						
PEF 2				1,082		1,082
TOTAL	0	0	0	1,082	0	1,082
<b>Variance</b>	<b>0</b>	<b>-1,082</b>	<b>0</b>	<b>+1,082</b>	<b>0</b>	<b>0</b>

### 1.2.5 Projects with real variances, including resourcing implications:

There is a real variance of -£0.090m (in 2010-11) which is detailed as follows:

**Modernisation of Assets -£0.090m** (in 2010-11): The PCT was funding the Broadmeadow extension with £0.180m, but have only paid £0.090m. We are proposing to cover this external funding pressure by underspending on the modernisation of assets budget.

Taking this into account, there is no underlying variance.

### 1.2.6 General Overview of capital programme:

#### (a) Risks

The risks linked to KASS must be similar to those felt throughout the Authority in this current financially suppressed climate. As a Directorate that works alongside many partners such as District Councils, Private/Voluntary Organisations and Primary Care Trusts (PCT) in order to provide the most comprehensive service delivery to our users, the risks to KASS are potentially compounded.

#### (b) Details of action being taken to alleviate risks

The Directorate continues to closely monitor those risks associated with our partnership working arrangements on a regular basis through Area Asset Management Boards which run alongside its over-arching capital strategy. However, the Directorate may not always be able to influence/control the final outcome.

### 1.2.7 PFI projects

- The £44.3m investment in the PFI Excellent Homes for All project represents investment by a third party. No payment will be made by KCC for the newly built assets until they are ready for use. Again this will be by way of an annual unitary charge to the revenue budget.

	Previous years	2010-11	2011-12	2012-13	TOTAL
	£000s	£000s	£000s	£000s	£000s
<b>Budget</b>			22,300	22,000	44,300
<b>Forecast</b>			22,300	22,000	44,300
<b>Variance</b>					

(a) **Progress and details of whether costings are still as planned (for the 3<sup>rd</sup> party)**

Overall costings still as planned.

(b) **Implications for KCC of details reported in (a) ie could an increase in the cost result in a change to the unitary charge ?**

This contract has not been signed yet although the procurement is in the advanced stages of competitive dialogue. It is likely that the unitary charge is fixed for the duration of the contract period. Deductions will be made during the contract period if performance falls below the standards agreed or if the facilities are unavailable for use.

During the contract period if one of the partners proposes a change that either results in increased costs or a change in the balance of risk, this will need to be taken to the Project Board for agreement. Each partner will have a vote and any decision resulting in a change to the costs or risks would need unanimous approval.

**1.2.8 Project Re-Phasing**

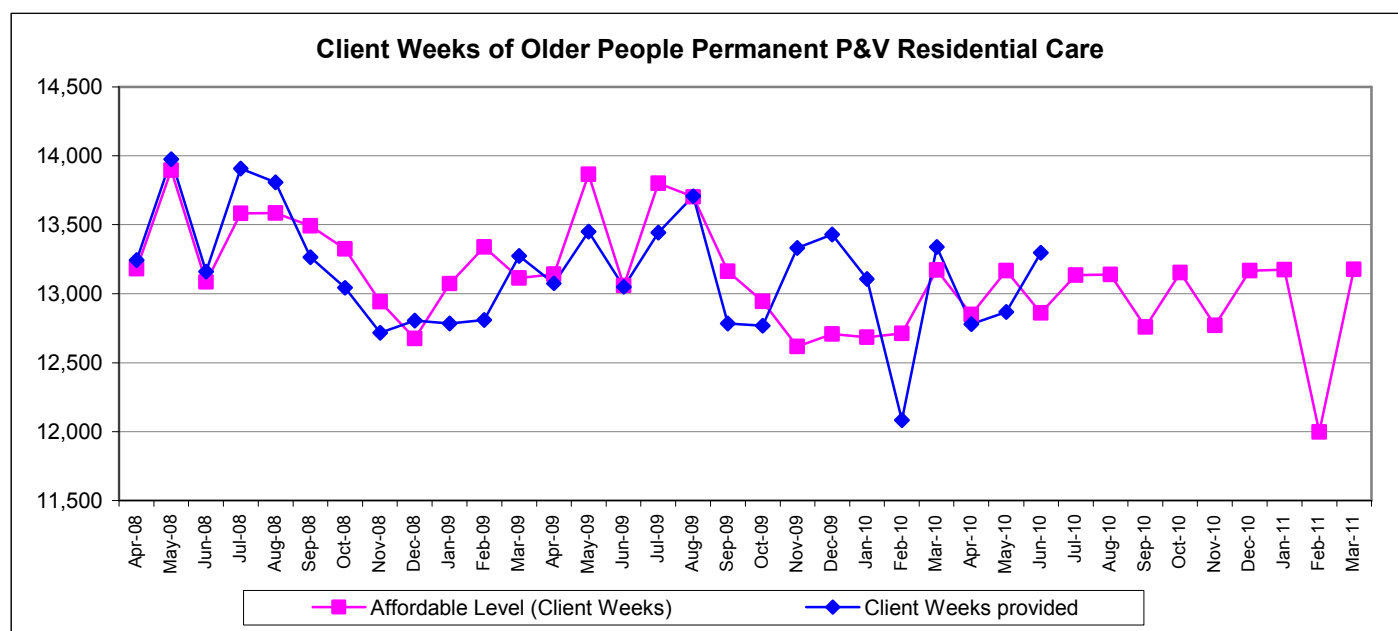
Cash limits are changed for projects that have re-phased by greater than £0.100m to reduce the reporting requirements during the year. Any subsequent re-phasing greater than £0.100m will be reported and the full extent of the rephasing will be shown. The proposed re-phasing is detailed in the table below.

	2010-11	2011-12	2012-13	Future Years	Total
	£k	£k	£k	£k	
<b>Modernisation of Assets</b>					
Amended total cash limits	+1,163	+267	+275		+1,705
re-phasing	-221	+221			0
<b>Revised project phasing</b>	<b>+942</b>	<b>+488</b>	<b>+275</b>	<b>0</b>	<b>+1,705</b>
<b>Mental Health</b>					
Amended total cash limits	+316				+316
re-phasing	-142	+142			0
<b>Revised project phasing</b>	<b>+174</b>	<b>+142</b>	<b>0</b>	<b>0</b>	<b>+316</b>
<b>IT Infrastructure Grant</b>					
Amended total cash limits	+511				+511
re-phasing	-162	+162			0
<b>Revised project phasing</b>	<b>+349</b>	<b>+162</b>	<b>0</b>	<b>0</b>	<b>+511</b>
<b>Modernisation of LD Services</b>					
Amended total cash limits	+3,853	+749	+1,152	+1,162	+6,916
re-phasing	-2,613	+1,786	+448	+379	0
<b>Revised project phasing</b>	<b>+1,240</b>	<b>+2,535</b>	<b>+1,600</b>	<b>+1,541</b>	<b>+6,916</b>
<b>Strategy for new OP Integrated Care Centres</b>					
Amended total cash limits	+1,082				+1,082
re-phasing	-1,082		+1,082		0
<b>Revised project phasing</b>	<b>0</b>	<b>0</b>	<b>+1,082</b>	<b>0</b>	<b>+1,082</b>
<b>Community Care Centres - Thameside - East Quarry &amp; Ebbsfleet</b>					
Amended total cash limits	+521	+897			+1,418
re-phasing	-521	+521			0
<b>Revised project phasing</b>	<b>0</b>	<b>+1,418</b>	<b>0</b>	<b>0</b>	<b>+1,418</b>
<b>Total re-phasing &gt;£100k</b>	<b>-4,741</b>	<b>+2,832</b>	<b>+1,530</b>	<b>+379</b>	<b>0</b>
<b>Other re-phased Projects below £100k</b>					
	-277	+277			
<b>TOTAL RE-PHASING</b>	<b>-5,018</b>	<b>+3,109</b>	<b>+1,530</b>	<b>+379</b>	<b>0</b>

## 2. KEY ACTIVITY INDICATORS AND BUDGET RISK ASSESSMENT MONITORING

### 2.1.1 Number of client weeks of older people permanent P&V residential care provided compared with affordable level:

	2008-09		2009-10		2010-11	
	Affordable Level (Client Weeks)	Client Weeks of older people permanent P&V residential care provided	Affordable Level (Client Weeks)	Client Weeks of older people permanent P&V residential care provided	Affordable Level (Client Weeks)	Client Weeks of older people permanent P&V residential care provided
April	13,181	13,244	13,142	13,076	12,848	12,778
May	13,897	13,974	13,867	13,451	13,168	12,866
June	13,084	13,160	13,059	13,050	12,860	13,298
July	13,581	13,909	13,802	13,443	13,135	
August	13,585	13,809	13,703	13,707	13,141	
September	13,491	13,264	13,162	12,784	12,758	
October	13,326	13,043	12,943	12,768	13,154	
November	12,941	12,716	12,618	13,333	12,771	
December	12,676	12,805	12,707	13,429	13,167	
January	13,073	12,784	12,685	13,107	13,175	
February	13,338	12,810	12,712	12,082	11,998	
March	13,114	13,275	13,172	13,338	13,176	
<b>TOTAL</b>	<b>159,287</b>	<b>158,793</b>	<b>157,572</b>	<b>157,568</b>	<b>155,351</b>	<b>38,942</b>

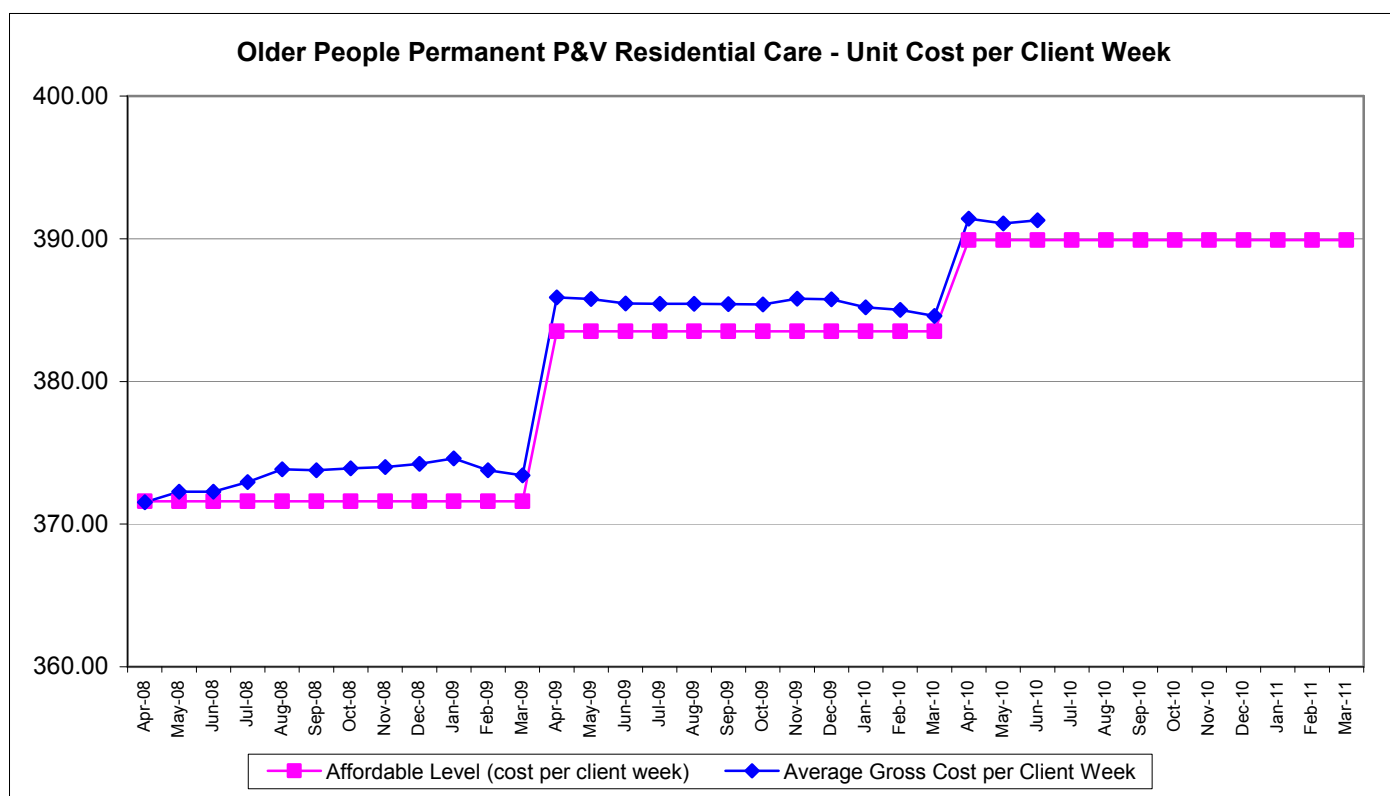


#### Comments:

- The above graph reflects the number of client weeks of service provided as this has a greater influence on cost than the actual number of clients. The actual number of clients in older people permanent P&V residential care at the end of 2008-09 was 2,832, at the end of 2009-10 it was 2,751 and at the end of June 2010 it was 2,819. It is evident that there are ongoing pressures relating to clients with dementia. During this year, the number of clients with dementia has increased from 1,195 in March to 1,217 in April to 1,241 in June, and the other residential clients have increased from 1,556 in March to 1,575 in April to 1,578 in June.
- The current forecast is 155,570 weeks of care against an affordable level of 155,351; a difference of 219 weeks. Using the forecast unit cost of £391.29 this increase in activity increases the forecast by £86k, as highlighted in section 1.1.3.1.a
- To the end of June 38,942 weeks of care have been delivered against an affordable level of 38,876; a difference of 66 weeks.

2.1.2 Average gross cost per client week of older people permanent P&V residential care compared with affordable level:

	2008-09		2009-10		2010-11	
	Affordable Level (Cost per Week)	Average Gross Cost per Client Week	Affordable Level (Cost per Week)	Average Gross Cost per Client Week	Affordable Level (Cost per Week)	Average Gross Cost per Client Week
April	371.60	371.54	383.52	385.90	389.91	391.40
May	371.60	372.28	383.52	385.78	389.91	391.07
June	371.60	372.27	383.52	385.47	389.91	391.29
July	371.60	372.94	383.52	385.43	389.91	
August	371.60	373.84	383.52	385.44	389.91	
September	371.60	373.78	383.52	385.42	389.91	
October	371.60	373.91	383.52	385.39	389.91	
November	371.60	374.01	383.52	385.79	389.91	
December	371.60	374.22	383.52	385.76	389.91	
January	371.60	374.61	383.52	385.20	389.91	
February	371.60	373.78	383.52	385.01	389.91	
March	371.60	373.42	383.52	384.59	389.91	

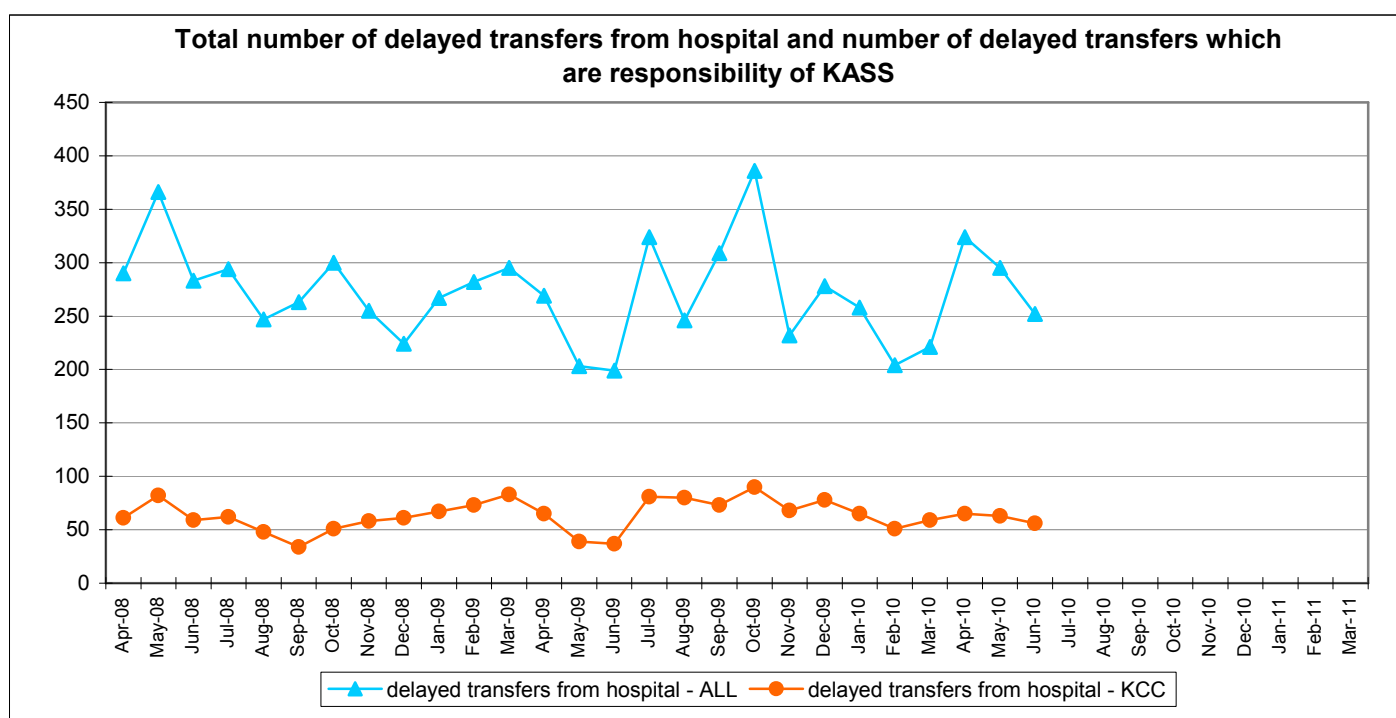


Comments:

- Average unit cost per week has increased more than inflation and is likely to reflect the increasing numbers of clients with dementia.
- The forecast unit cost of £391.29 is higher than the affordable cost of £389.91 and this difference of £1.38 adds £214k to the position when multiplied by the affordable weeks, as highlighted in section 1.1.3.1.a

### 2.1.3 Total of All Delayed Transfers from hospital compared with those which are KASS responsibility:

	2008-09		2009-010		2010-11	
	ALL	KASS responsibility	ALL	KASS responsibility	ALL	KASS responsibility
April	290	61	269	65	324	65
May	366	82	203	39	295	63
June	283	59	199	37	252	56
July	294	62	324	81		
August	247	48	246	80		
September	263	34	309	73		
October	300	51	386	90		
November	255	58	232	68		
December	224	61	278	78		
January	267	67	258	65		
February	282	73	204	51		
March	295	83	221	59		

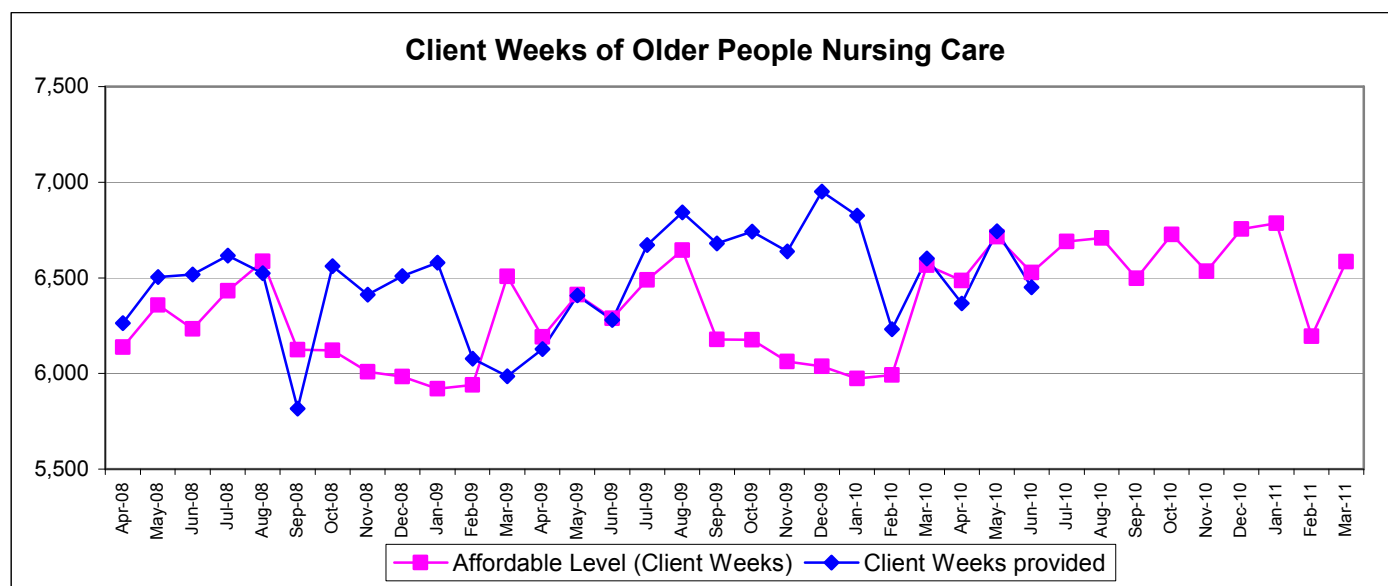


#### Comments:

- The Delayed Transfers of Care (DTCs) show the numbers of people whose movement from an acute hospital has been delayed. Generally, the main reasons for delay are 'Patient Choice' (just over 25%), 'Awaiting non-acute NHS care' (just under 25%) and 'Awaiting assessment' (20%). This figure shows all delays, but those attributable to Adult Social Services, and therefore subject to the reimbursement regime, are a minority. There are many reasons for fluctuations in the number of DTCs which result from the interaction of various different factors within a highly complex system across both Health and Social Care.
- This activity information is obtained from a national database based on data provided by the PCTs.

## 2.2.1 Number of client weeks of older people nursing care provided compared with affordable level:

	2008-09		2009-10		2010-11	
	Affordable Level (Client Weeks)	Client Weeks of older people nursing care provided	Affordable Level (Client Weeks)	Client Weeks of older people nursing care provided	Affordable Level (Client Weeks)	Client Weeks of older people nursing care provided
April	6,137	6,263	6,191	6,127	6,485	6,365
May	6,357	6,505	6,413	6,408	6,715	6,743
June	6,233	6,518	6,288	6,279	6,527	6,450
July	6,432	6,616	6,489	6,671	6,689	
August	6,586	6,525	6,644	6,841	6,708	
September	6,124	5,816	6,178	6,680	6,497	
October	6,121	6,561	6,175	6,741	6,726	
November	6,009	6,412	6,062	6,637	6,535	
December	5,984	6,509	6,037	6,952	6,755	
January	5,921	6,580	5,973	6,824	6,784	
February	5,940	6,077	5,992	6,231	6,194	
March	6,507	5,985	6,566	6,601	6,584	
<b>TOTAL</b>	<b>74,351</b>	<b>76,367</b>	<b>75,008</b>	<b>78,992</b>	<b>79,199</b>	<b>19,558</b>

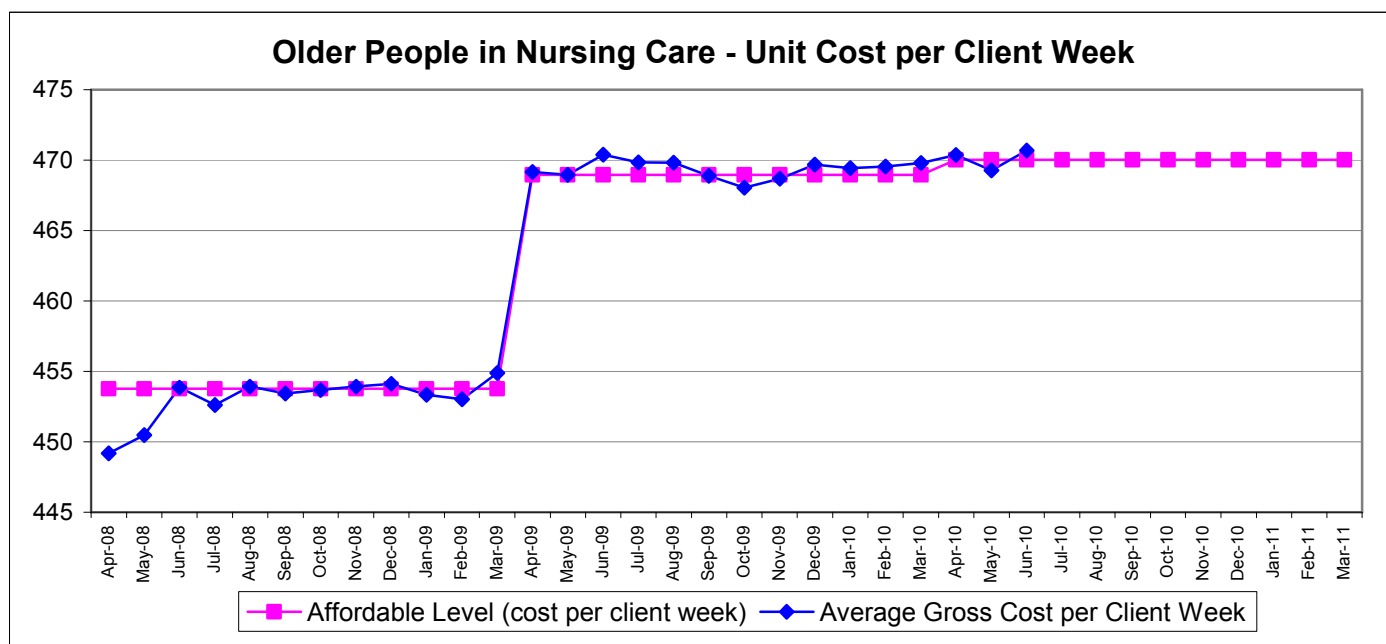


### Comment:

- The above graph reflects the number of client weeks of service provided as this has a greater influence on cost than the actual number of clients. The actual number of clients in older people nursing care at the end of 2008-09 was 1,332, at the end of 2009-10 it was 1,374 and at the end of June 2010 it was 1,417. In nursing care, there is not the same distinction between clients with dementia, as with residential care. The difference in intensity of care for nursing care and nursing care with dementia is not as significant as it is for residential care.
- The current forecast is 78,429 weeks of care against an affordable level of 79,199; a difference of 770 weeks. Using the forecast unit cost of £470.67, this reduction in activity reduces the forecast by £363k, as highlighted in section 1.1.3.1.b
- To the end of June 19,558 weeks of care have been delivered against an affordable level of 19,727, a difference of -169 weeks.
- There are always pressures in permanent nursing care which may occur for many reasons. Increasingly, older people are entering nursing care only when other ways of support have been explored. This means that the most dependent are those that enter nursing care and consequently are more likely to have dementia. In addition, there will always be pressures which the directorate face, for example the knock on effect of minimising delayed transfers of care. Demographic changes – increasing numbers of older people with long term illnesses – also means that there is an underlying trend of growing numbers of people needing nursing care.

## 2.2.2 Average gross cost per client week of older people nursing care compared with affordable level:

	2008-09		2009-10		2010-11	
	Affordable Level (Cost per Week)	Average Gross Cost per Client Week	Affordable Level (Cost per Week)	Average Gross Cost per Client Week	Affordable Level (Cost per Week)	Average Gross Cost per Client Week
April	453.77	449.18	468.95	469.15	470.01	470.36
May	453.77	450.49	468.95	468.95	470.01	469.27
June	453.77	453.86	468.95	470.37	470.01	470.67
July	453.77	452.61	468.95	469.84	470.01	
August	453.77	453.93	468.95	469.82	470.01	
September	453.77	453.42	468.95	468.88	470.01	
October	453.77	453.68	468.95	468.04	470.01	
November	453.77	453.92	468.95	468.69	470.01	
December	453.77	454.13	468.95	469.67	470.01	
January	453.77	453.33	468.95	469.42	470.01	
February	453.77	453.02	468.95	469.55	470.01	
March	453.77	454.90	468.95	469.80	470.01	

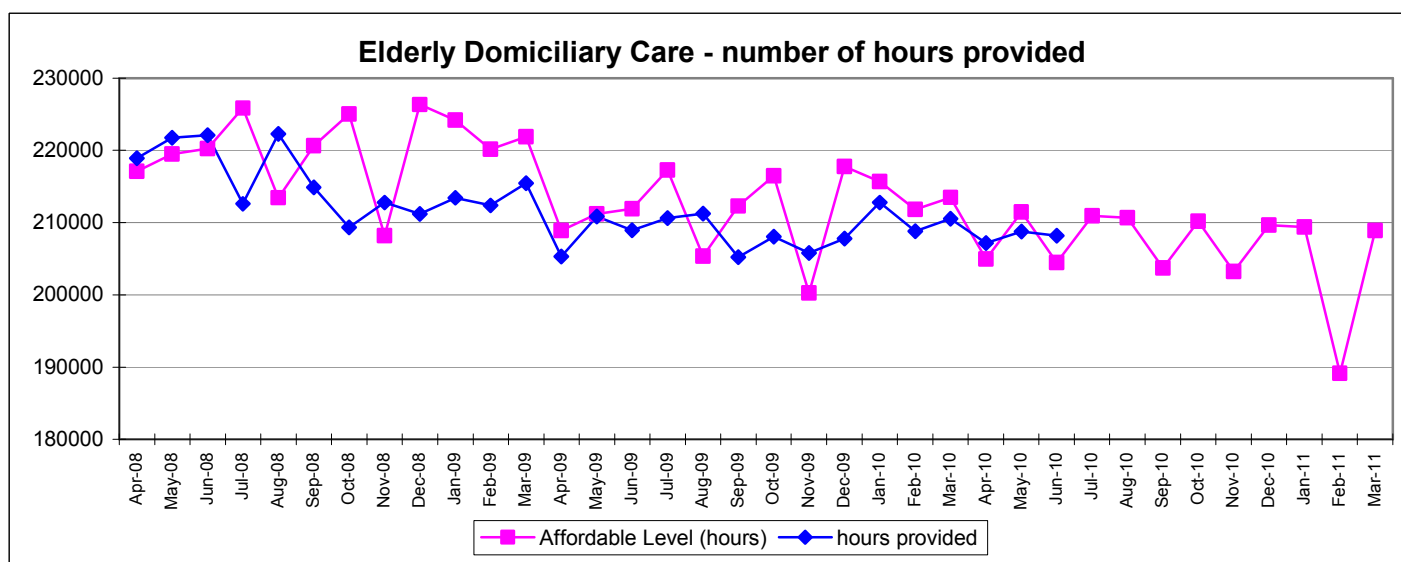
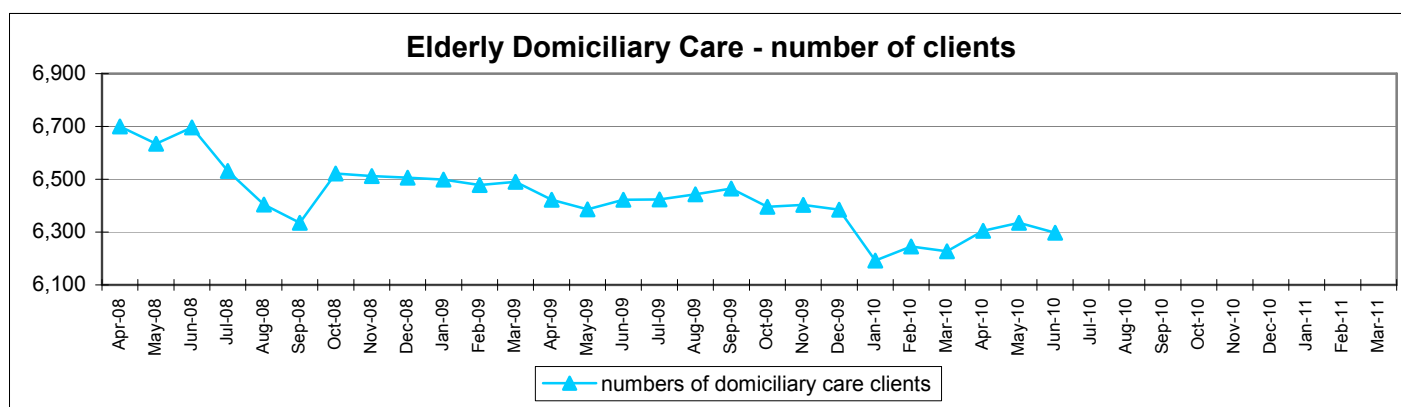


### Comments:

- As with residential care, the unit cost for nursing care will be affected by the increasing proportion of older people with dementia who need more specialist and expensive care.
- The forecast unit cost of £470.67 is slightly higher than the affordable cost of £470.01 and this difference of £0.66 adds £53k to the position when multiplied by the affordable weeks, as highlighted in section 1.1.3.1.b

## 2.3.1 Elderly domiciliary care – numbers of clients and hours provided:

	2008-09			2009-10			2010-11		
	Affordable level (hours)	hours provided	number of clients	Affordable level (hours)	hours provided	number of clients	Affordable level (hours)	hours provided	number of clients
April	217,090	218,929	6,700	208,869	205,312	6,423	204,948	207,167	6,305
May	219,480	221,725	6,635	211,169	210,844	6,386	211,437	208,757	6,335
June	220,237	222,088	6,696	211,897	208,945	6,422	204,452	208,177	6,298
July	225,841	212,610	6,531	217,289	210,591	6,424	210,924		
August	213,436	222,273	6,404	205,354	211,214	6,443	210,668		
September	220,644	214,904	6,335	212,289	205,238	6,465	203,708		
October	225,012	209,336	6,522	216,491	208,051	6,396	210,155		
November	208,175	212,778	6,512	200,292	205,806	6,403	203,212		
December	226,319	211,189	6,506	217,749	207,771	6,385	209,643		
January	224,175	213,424	6,499	215,686	212,754	6,192	209,387		
February	220,135	212,395	6,478	211,799	208,805	6,246	189,143		
March	221,875	215,488	6,490	213,474	210,507	6,227	208,869		
<b>TOTAL</b>	<b>2,642,419</b>	<b>2,587,139</b>		<b>2,542,358</b>	<b>2,505,838</b>		<b>2,476,546</b>	<b>624,101</b>	



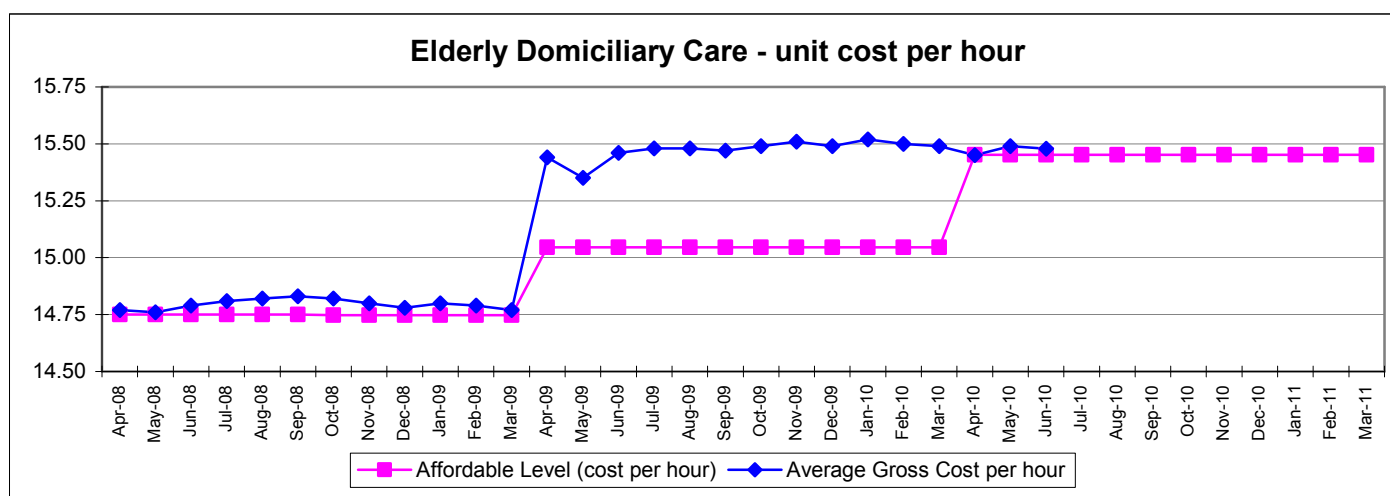
## Comment:

- Figures exclude services commissioned from the Kent Enablement At Home service.
- The current forecast is 2,493,266 hours of care against an affordable level of 2,476,546, a difference of 16,720 hours. Using the forecast unit cost of £15.479 this additional activity increases the forecast by £259k, as highlighted in section 1.1.3.1.c
- To the end of June 624,101 hours of care have been delivered against an affordable level of 620,837, a difference of 3,264 hours.

- The number of people receiving domiciliary care has decreased since 2008/09, and we would not expect the number of domiciliary care clients to be significantly increasing for several reasons. Firstly, the success of preventative services such as intermediate care, rapid response and ongoing service developments with the voluntary sector and other organisations mean that we continue to prevent people from needing 'mainstream' domiciliary care. The LAA target focuses on how we can ensure that people are helped back to their own homes successfully with very minimal support. In the voluntary sector, people can access services, very often involving social inclusion (e.g. luncheon clubs and other social activities), without having to undergo a full care management assessment. Secondly, public health campaigns and social marketing aimed at improving people's health is already starting to result in healthier older people. Increase in the use of Telecare and Telehealth similarly reduces the need for domiciliary care, and it is possible that this trend will continue despite the growth in numbers of older people. Thirdly, in Kent, as well as nationwide, the take up of direct payments by older people, has for the first time, reached similar levels as people with physical disabilities.
- With the implementation of Self directed support within the Directorate and a key emphasis on enablement services, which is a short term but intensive service, we would expect the average hours per person to increase and this is starting to happen.

2.3.2 Average gross cost per hour of older people domiciliary care compared with affordable level:

	2008-09		2009-10		2010-11	
	Affordable Level (Cost per Hour)	Average Gross Cost per Hour	Affordable Level (Cost per Hour)	Average Gross Cost per Hour	Affordable Level (Cost per Hour)	Average Gross Cost per Hour
April	14.75	14.77	15.045	15.44	15.45	15.45
May	14.75	14.76	15.045	15.35	15.45	15.49
June	14.75	14.79	15.045	15.46	15.45	15.48
July	14.75	14.81	15.045	15.48	15.45	
August	14.75	14.82	15.045	15.48	15.45	
September	14.75	14.83	15.045	15.47	15.45	
October	14.75	14.82	15.045	15.49	15.45	
November	14.75	14.80	15.045	15.51	15.45	
December	14.75	14.78	15.045	15.49	15.45	
January	14.75	14.80	15.045	15.52	15.45	
February	14.75	14.79	15.045	15.50	15.45	
March	14.75	14.77	15.045	15.49	15.45	

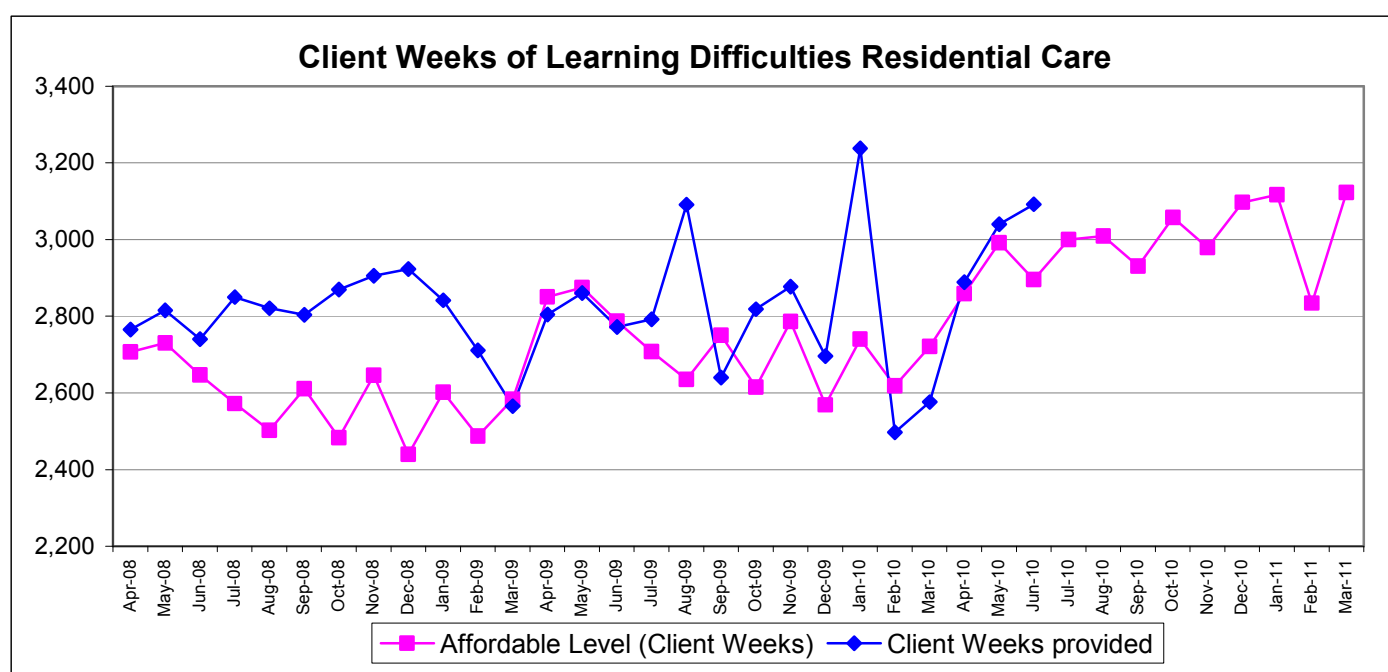


Comments:

- Average unit cost per week is increasing and may reflect the same issues outlined above concerning more intense packages and higher levels of need.
- The forecast unit cost of £15.479 is slightly higher than the affordable cost of £15.452 and this difference of £0.027 increases the pressure by £68k when multiplied by the affordable hours, as highlighted in section 1.1.3.1.c

### 2.4.1 Number of client weeks of learning difficulties residential care provided compared with affordable level (non preserved rights clients):

	2008-09		2009-10		2010-11	
	Affordable Level (Client Weeks)	Client Weeks of LD residential care provided	Affordable Level (Client Weeks)	Client Weeks of LD residential care provided	Affordable Level (Client Weeks)	Client Weeks of LD residential care provided
April	2,707	2,765	2,851	2,804	2,859	2,889
May	2,730	2,815	2,875	2,861	2,991	3,040
June	2,647	2,740	2,787	2,772	2,896	3,092
July	2,572	2,850	2,708	2,792	3,000	
August	2,502	2,821	2,635	3,091	3,009	
September	2,611	2,803	2,750	2,640	2,931	
October	2,483	2,870	2,615	2,818	3,057	
November	2,646	2,906	2,786	2,877	2,979	
December	2,440	2,923	2,569	2,696	3,097	
January	2,602	2,842	2,740	3,238	3,117	
February	2,487	2,711	2,619	2,497	2,834	
March	2,584	2,565	2,721	2,576	3,123	
<b>TOTAL</b>	<b>31,011</b>	<b>33,611</b>	<b>32,656</b>	<b>33,662</b>	<b>35,893</b>	<b>9,021</b>

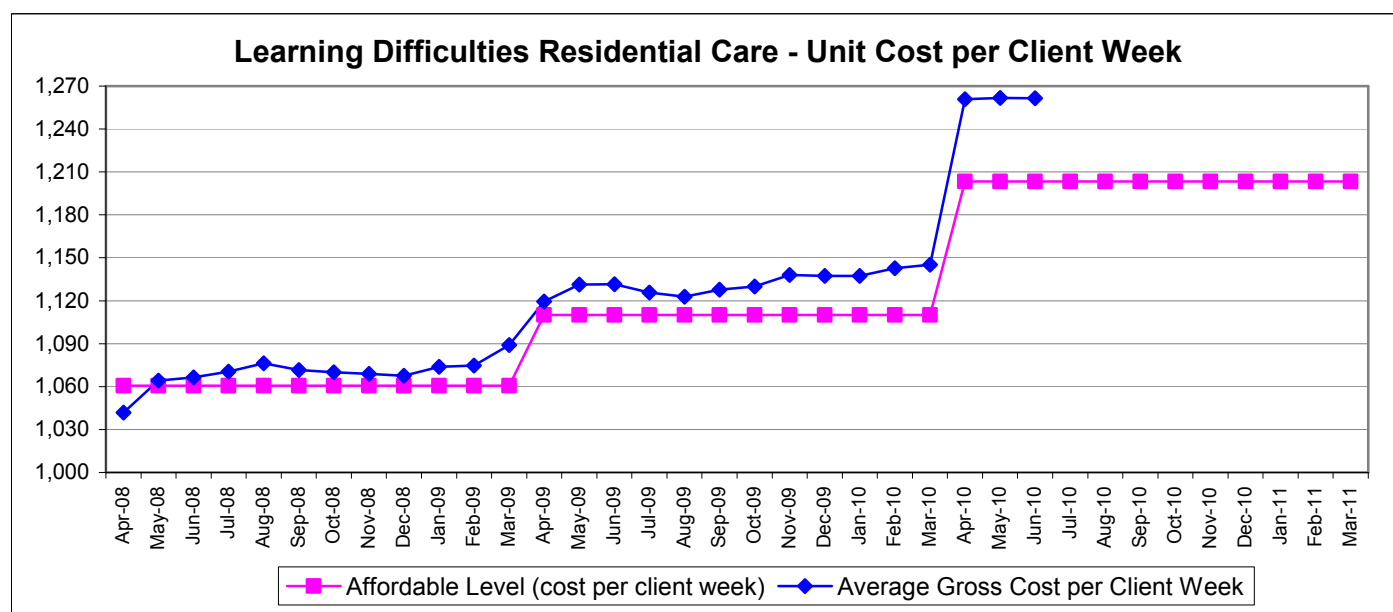


#### Comments:

- The above graph reflects the number of client weeks of service provided as this has a greater influence on cost than the actual number of clients. The actual number of clients in LD residential care at the end of 2008-09 was 640, at the end of 2009-10 it was 632 and at the end of June 2010 it was 703. This increase in clients includes 69 new S256 clients.
- The current forecast is 37,026 weeks of care against an affordable level of 35,893, a difference of 1,133 weeks. Using the forecast unit cost of £1,261.46 this additional activity adds £1,429k to the forecast, as highlighted in section 1.1.3.2.a
- To the end of June 9,021 weeks of care have been delivered against an affordable level of 8,746, a difference of 275 weeks.

## 2.4.2 Average gross cost per client week of Learning Difficulties residential care compared with affordable level (non preserved rights clients):

	2008-09		2009-10		2010-11	
	Affordable Level (Cost per Week)	Average Gross Cost per Client Week	Affordable Level (Cost per Week)	Average Gross Cost per Client Week	Affordable Level (Cost per Week)	Average Gross Cost per Client Week
April	1,060.70	1,041.82	1,110.15	1,119.42	1,203.27	1,260.82
May	1,060.70	1,064.19	1,110.15	1,131.28	1,203.27	1,261.67
June	1,060.70	1,066.49	1,110.15	1,131.43	1,203.27	1,261.46
July	1,060.70	1,070.50	1,110.15	1,125.65	1,203.27	
August	1,060.70	1,076.27	1,110.15	1,122.81	1,203.27	
September	1,060.70	1,071.59	1,110.15	1,127.79	1,203.27	
October	1,060.70	1,070.02	1,110.15	1,130.07	1,203.27	
November	1,060.70	1,068.95	1,110.15	1,137.95	1,203.27	
December	1,060.70	1,067.59	1,110.15	1,137.28	1,203.27	
January	1,060.70	1,073.71	1,110.15	1,137.41	1,203.27	
February	1,060.70	1,074.67	1,110.15	1,142.82	1,203.27	
March	1,060.70	1,089.10	1,110.15	1,145.12	1,203.27	

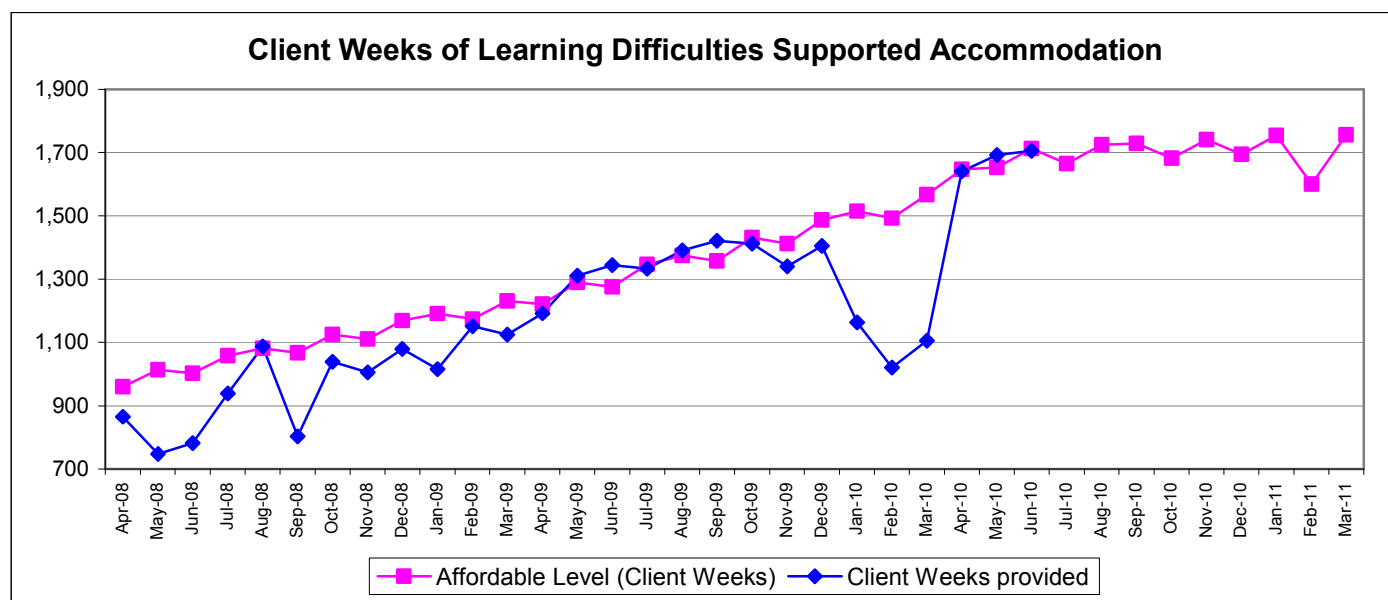


### Comments:

- Clients being placed in residential care are those with very complex and individual needs which makes it difficult for them to remain in the community, in supported accommodation/supporting living arrangements, or receiving a domiciliary care package. These are therefore placements which attract a very high cost, with the average now being over £1,200 per week. It is expected that clients with less complex needs, and therefore less cost, can transfer from residential into supported living arrangements. This would mean that the average cost per week would increase over time as the remaining clients in residential care would be those with very high cost – some of whom can cost up to £2,000 per week. In addition, no two placements are alike – the needs of people with learning disabilities are unique and consequently, it is common for average unit costs to increase or decrease significantly on the basis of one or two cases.
- The forecast unit cost of £1,261.46 is higher than the affordable cost of £1,203.27 and this difference of £58.19 adds £2,089k to the position when multiplied by the affordable weeks, as highlighted in section 1.1.3.2.a

## 2.5.1 Number of client weeks of learning difficulties supported accommodation provided compared with affordable level:

	2008-09		2009-10		2010-11	
	Affordable Level (Client Weeks)	Client Weeks of LD supported accommodation provided	Affordable Level (Client Weeks)	Client Weeks of LD supported accommodation provided	Affordable Level (Client Weeks)	Client Weeks of LD supported accommodation provided
April	960	865	1,221	1,192	1,647	1,641
May	1,014	747	1,290	1,311	1,653	1,692
June	1,003	782	1,276	1,344	1,712	1,705
July	1,058	939	1,346	1,333	1,665	
August	1,081	1,087	1,375	1,391	1,725	
September	1,067	803	1,357	1,421	1,729	
October	1,125	1,039	1,431	1,412	1,682	
November	1,110	1,006	1,412	1,340	1,741	
December	1,169	1,079	1,487	1,405	1,694	
January	1,191	1,016	1,515	1,163	1,754	
February	1,174	1,151	1,493	1,021	1,601	
March	1,231	1,125	1,567	1,105	1,756	
<b>TOTAL</b>	<b>13,183</b>	<b>11,639</b>	<b>16,770</b>	<b>15,438</b>	<b>20,359</b>	<b>5,038</b>

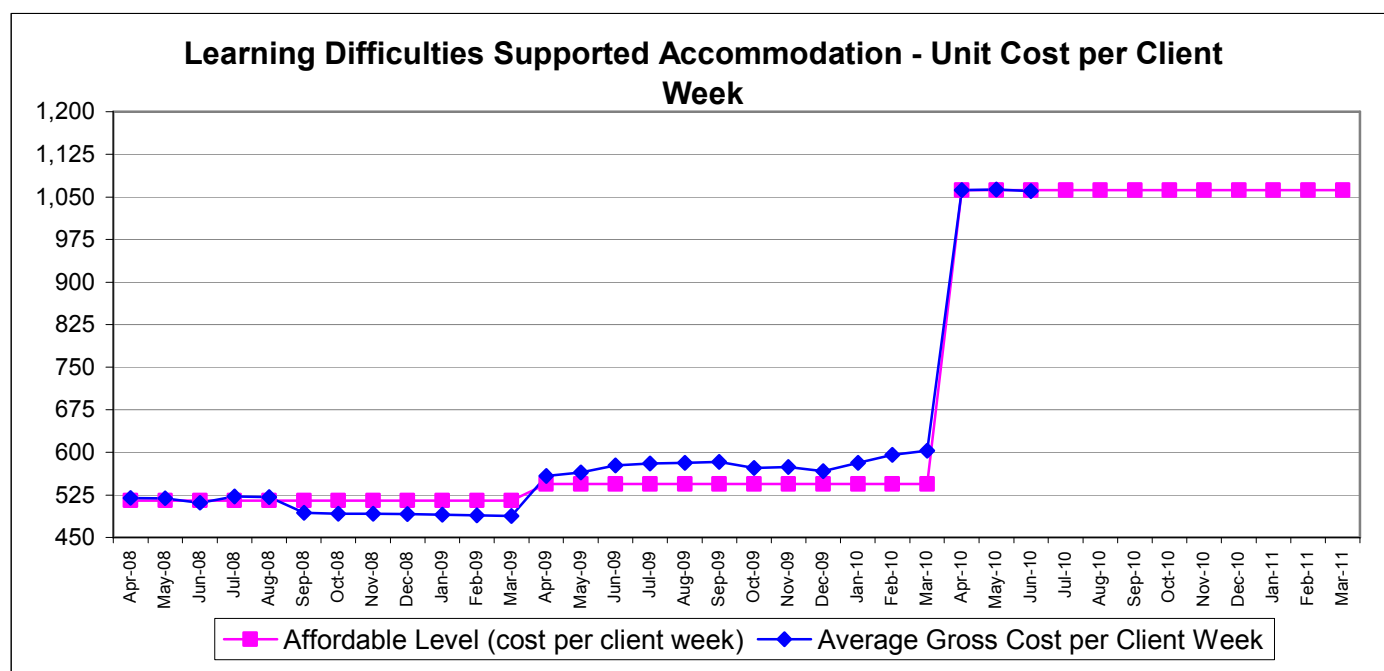


### Comments:

- The above graph reflects the number of client weeks of service provided. The actual number of clients in LD supported accommodation at the end of 2008-09 was 233, at the end of 2009-10 it was 309 and at the end of June 2010 it was 408.
- The current forecast is 20,400 weeks of care against an affordable level of 20,359, a difference of 41 weeks. Using the forecast unit cost of £1,060.59 this increased activity creates a pressure of £44k as highlighted in section 1.1.3.2.b.
- To the end of June 5,038 weeks of care have been delivered against an affordable level of 5,012, a difference of 26 weeks.
- Like residential care for people with a learning disability, every case is unique and varies in cost, depending on the individual circumstances. Although the quality of life will be better for these people, it is not always significantly cheaper. The focus to enable as many people as possible to move from residential care into supported accommodation means that increasingly complex and unique cases will be successfully supported to live independently.

## 2.5.2 Average gross cost per client week of Learning Difficulties supported accommodation compared with affordable level (non preserved rights clients):

	2008-09		2009-10		2010-11	
	Affordable Level (Cost per Week)	Average Gross Cost per Client Week	Affordable Level (Cost per Week)	Average Gross Cost per Client Week	Affordable Level (Cost per Week)	Average Gross Cost per Client Week
April	515.41	519.60	544.31	558.65	1,062.52	1,062.38
May	515.41	519.40	544.31	564.49	1,062.52	1,063.22
June	515.41	511.10	544.31	577.33	1,062.52	1,060.59
July	515.41	522.30	544.31	580.27	1,062.52	
August	515.41	521.40	544.31	581.76	1,062.52	
September	515.41	493.33	544.31	583.26	1,062.52	
October	515.41	491.85	544.31	572.59	1,062.52	
November	515.41	491.47	544.31	574.24	1,062.52	
December	515.41	490.83	544.31	566.87	1,062.52	
January	515.41	489.75	544.31	581.53	1,062.52	
February	515.41	488.90	544.31	595.89	1,062.52	
March	515.41	487.60	544.31	603.08	1,062.52	

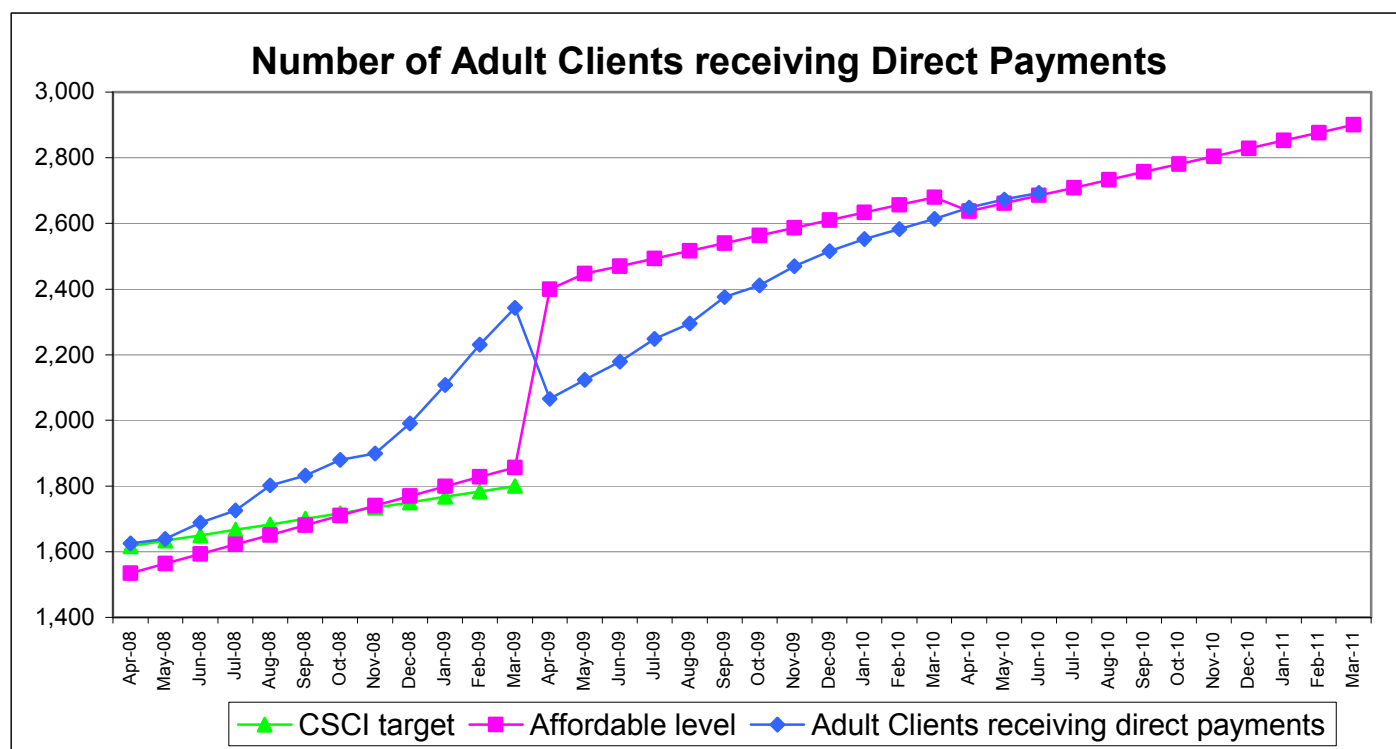


### Comments:

- The forecast unit cost of £1,060.59 is higher lower than the affordable cost of £1,062.52 and this difference of £1.93 creates a saving of £39k when multiplied by the affordable weeks, as highlighted in section 1.1.3.2.b.
- The costs associated with these placements will vary depending on the complexity of each case and the type of support required in each placement. This varies enormously between a domiciliary type support to life skills and daily living support.

## 2.6 Direct Payments – Number of Adult Social Services Clients receiving Direct Payments:

	2008-09			2009-10		2010-11	
	CSCI Target	Affordable Level	Adult Clients receiving Direct Payments	Affordable Level	Adult Clients receiving Direct Payments	Affordable Level	Adult Clients receiving Direct Payments
April	1,617	1,535	1,625	2,400	2,065	2,637	2,647
May	1,634	1,564	1,639	2,447	2,124	2,661	2,673
June	1,650	1,593	1,689	2,470	2,179	2,685	2,693
July	1,667	1,622	1,725	2,493	2,248	2,709	
August	1,683	1,651	1,802	2,516	2,295	2,733	
September	1,700	1,681	1,832	2,540	2,375	2,757	
October	1,717	1,710	1,880	2,563	2,411	2,780	
November	1,734	1,740	1,899	2,586	2,470	2,804	
December	1,750	1,769	1,991	2,609	2,515	2,828	
January	1,767	1,799	2,108	2,633	2,552	2,852	
February	1,783	1,828	2,231	2,656	2,582	2,876	
March	1,800	1,857	2,342	2,679	2,613	2,900	



## Comments:

- The activity being reported is as per the Department of Health definition for counting Direct Payments, which includes anyone who has received a Direct Payment during the preceding 12 months, but includes only those that are 'on-going'. i.e. in April the figures include clients who have received an on-going Direct Payment between 1<sup>st</sup> May 2009 and 30<sup>th</sup> April 2010, and the June figures includes clients who have received an on-going Direct Payment between 1<sup>st</sup> July 2009 and 30<sup>th</sup> June 2010. This compares with what was reported last year.

### 3. SOCIAL CARE DEBT MONITORING

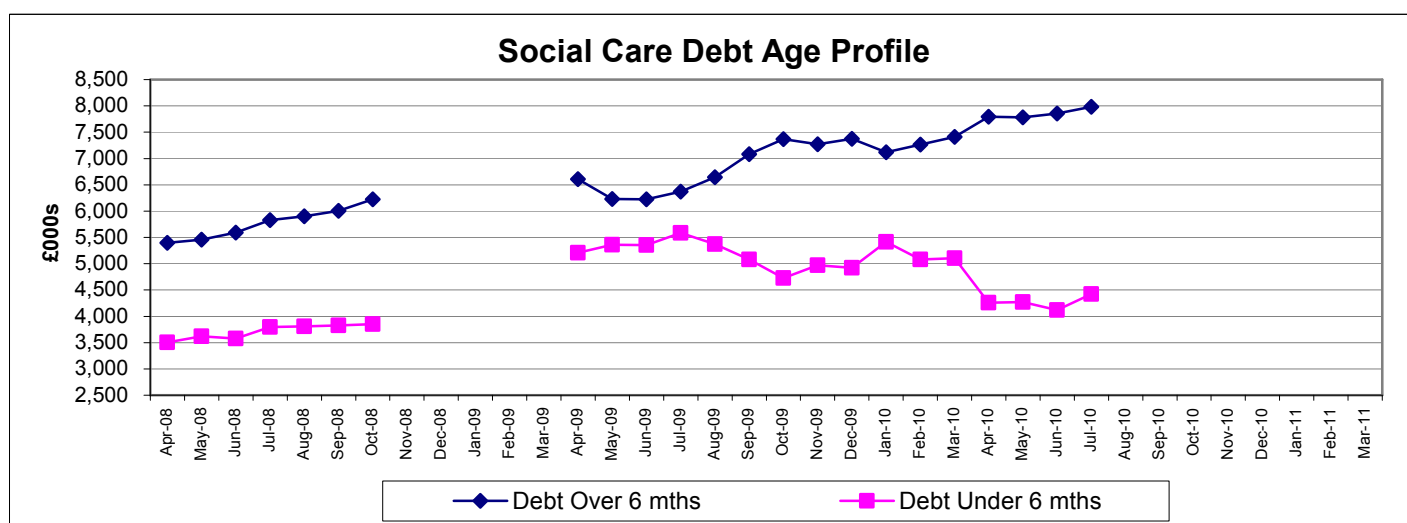
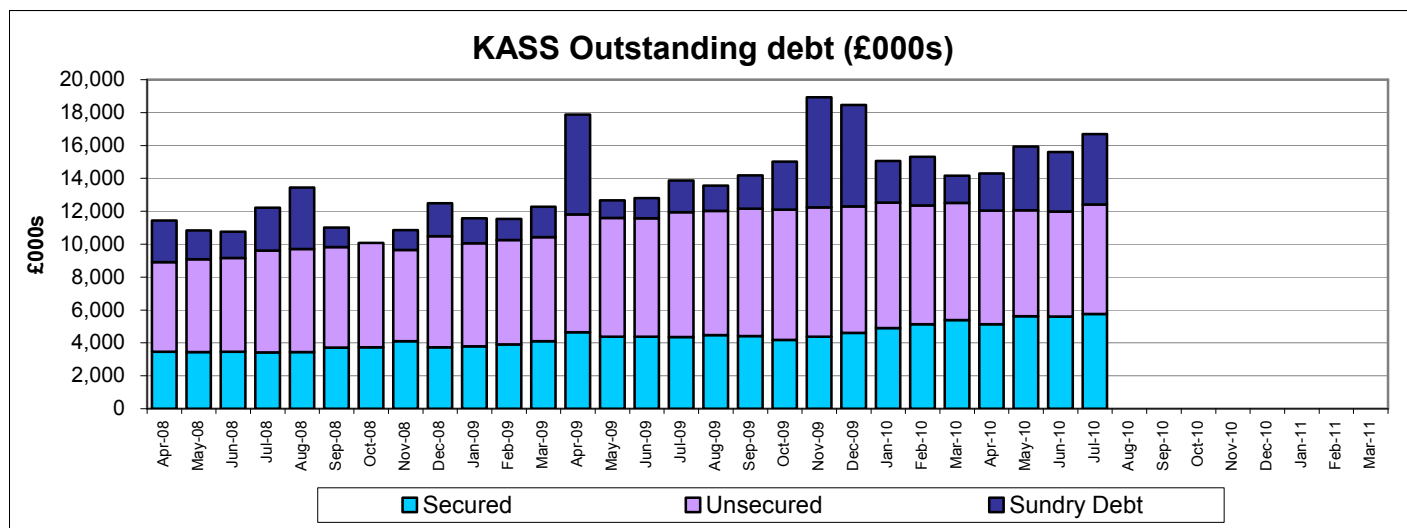
The outstanding debt as at the end of July was £16.689m compared with March's figure of £14.157m (reported to Cabinet in June) excluding any amounts not yet due for payment (as they are still within the 28 day payment term allowed). Within this figure is £4.285m of sundry debt compared to £1.643m at the end of March. The amount of sundry debt can change significantly for large invoices to health. Also within the outstanding debt is £12.404m relating to Social Care (client) debt which is a reduction of £0.110m from the last reported position to Cabinet in June (March position). The following table shows how this breaks down in terms of age and also whether it is secured (i.e. by a legal charge on the client's property) or unsecured, together with how this month compares with previous months. For most months the debt figures refer to when the four weekly invoice billing run interfaces with Oracle (the accounting system) rather than the calendar month, as this provides a more meaningful position for Social Care Client Debt. This therefore means that there are 13 billing invoice runs during the year. It also means that as the Directorate moved onto the new Client Billing system in October 2008, the balance will differ from that reported by Corporate Exchequer who report on a calendar month basis, apart from the period November 2008 to March 2009, when the figures are based on calendar months, as provided by Corporate Exchequer, because reports at that time were not aligned with the four weekly billing runs. From April 2009 the debt figures revert back to being on a four weekly basis to coincide with invoice billing runs. The age of debt cannot be completed for the months between November 2008 and March 2009 as the switch to Client Billing meant that all debts transferring on to the new system became "new" for purposes of reporting therefore it was not possible to show ageing until April.

Now that the full client debt monitoring and recovery function has been fully integrated into KASS, we have been able to develop bespoke reports that accurately reflect the ageing of Social Care debt. This has therefore meant that since April there has been some slight changes to how debt is categorised between that which is over six months and that which is under six months and this has resulted in slightly more debt being classed as over six months.

Debt Month	Total Due Debt (Social Care & Sundry Debt) £000s	Sundry Debt £000s	Social Care Debt				
			Total Social Care Due Debt £000s	Debt Over 6 mths £000s	Debt Under 6 mths £000s	Secured £000s	Unsecured £000s
Apr-08	11,436	2,531	8,905	5,399	3,506	3,468	5,437
May-08	10,833	1,755	9,078	5,457	3,621	3,452	5,626
Jun-08	10,757	1,586	9,171	5,593	3,578	3,464	5,707
Jul-08	12,219	2,599	9,620	5,827	3,793	3,425	6,195
Aug-08	13,445	3,732	9,713	5,902	3,811	3,449	6,264
Sep-08	11,004	1,174	9,830	6,006	3,824	3,716	6,114
Oct-08	*	*	10,071	6,223	3,848	3,737	6,334
Nov-08	10,857	1,206	9,651			4,111	5,540
Dec-08	12,486	2,004	10,482			3,742	6,740
Jan-09	11,575	1,517	10,058			3,792	6,266
Feb-09	11,542	1,283	10,259			3,914	6,345
Mar-09	12,276	1,850	10,426			4,100	6,326
Apr-09	17,874	6,056	11,818	6,609	5,209	4,657	7,161
May-09	12,671	1,078	11,593	6,232	5,361	4,387	7,206
Jun-09	12,799	1,221	11,578	6,226	5,352	4,369	7,209
Jul-09	13,862	1,909	11,953	6,367	5,586	4,366	7,587
Aug-09	13,559	1,545	12,014	6,643	5,371	4,481	7,533
Sep-09	14,182	2,024	12,158	7,080	5,078	4,420	7,738
Oct-09	15,017	2,922	12,095	7,367	4,728	4,185	7,910
Nov-09	18,927	6,682	12,245	7,273	4,972	4,386	7,859
Dec-09	18,470	6,175	12,295	7,373	4,922	4,618	7,677
Jan-10	15,054	2,521	12,533	7,121	5,412	4,906	7,627
Feb-10	15,305	2,956	12,349	7,266	5,083	5,128	7,221
Mar-10	14,157	1,643	12,514	7,411	5,103	5,387	7,127

Debt Month	Total Due Debt (Social Care & Sundry Debt) £000s	Sundry Debt £000s	Social Care Debt				
			Total Social Care Due Debt £000s	Debt Over 6 mths £000s	Debt Under 6 mths £000s	Secured £000s	Unsecured £000s
Apr-10	14,294	2,243	12,051	7,794	4,257	5,132	6,919
May-10	15,930	3,873	12,057	7,784	4,273	5,619	6,438
Jun-10	15,600	3,621	11,979	7,858	4,121	5,611	6,368
Jul-10	16,689	4,285	12,404	7,982	4,442	5,752	6,652
Aug-10							
Sep-10							
Oct-10							
Nov-10							
Dec-10							
Jan-11							
Feb-11							
Mar-11							

\* In October 2008, KASS Social Care debt transferred from the COLLECT system to Oracle. The new reports were not available at this point, hence there is no data available for this period. The October Social Care debt figures relate to the last four weekly billing run in the old COLLECT system.



\* The age of debt cannot be completed for the months between November 2008 and March 2009 as the switch to Client Billing meant that all debts transferring on to the new system became “new” for purposes of reporting therefore it was not possible to show ageing until April (i.e. once these debts became 6 months old in the new system).

