

## KENT ADULT SOCIAL SERVICES DIRECTORATE SUMMARY JULY 2009-10 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 2008-09 outturn, 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 couple of 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 an increase of £3,283k in gross and a £3,283k increase 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 in the HIV/AIDS grant £45k, new grants for 'P Plate' adult social workers to support newly qualified staff £22k and £150k for Minor repairs and adaptations 'handyperson' grant, and reflects the receipts in advance carried forward from 2008-09 for Learning Disability Campus Reprovision Grant £174k and Social Care Reform Grant £761k. 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 £5,133k increase in gross and a £5,133k increase in income. Of this approximately £3.5m relates to additional funding from Health, and a further £1m relates to the correct accounting treatment for recharges.

These adjustments have resulted in an overall increase in the gross expenditure budget of £9,568k (£3,283k + £45k + £22k + £150k + £174k + £761k + £5,133k) and an increase in the income budget of an equal amount, giving a net nil effect.

In addition there has been an increase of £553k in the gross budget in relation to approved roll-forwards from 2008-09.

Therefore the overall movement in cash limits shown in table 1a below is an increase of £10,121k in gross expenditure (£9,568k + £553k) and an increase in income of £9,568k.

Table 1a shows:

- the published budget,
- the proposed budget following adjustments for both formal virement and technical adjustments, together with roll forward from 2008-09 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 2009-10 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	84,184	-29,330	54,854	88,635	-31,724	56,911	4,451	-2,394	2,057
- Nursing Care	43,004	-19,176	23,828	43,647	-19,507	24,140	643	-331	312
- Domiciliary Care	48,539	-9,807	38,732	47,233	-10,317	36,916	-1,306	-510	-1,816
- Direct Payments	4,372	-455	3,917	4,638	-436	4,202	266	19	285
- Other Services	20,006	-3,027	16,979	21,607	-4,645	16,962	1,601	-1,618	-17
<b>Total Older People</b>	<b>200,105</b>	<b>-61,795</b>	<b>138,310</b>	<b>205,760</b>	<b>-66,629</b>	<b>139,131</b>	<b>5,655</b>	<b>-4,834</b>	<b>821</b>
People with a Learning Difficulty:									
- Residential Care	66,316	-10,975	55,341	64,909	-12,119	52,790	-1,407	-1,144	-2,551
- Domiciliary Care	7,356	-850	6,506	6,704	-650	6,054	-652	200	-452
- Direct Payments	6,012	-122	5,890	5,465	-84	5,381	-547	38	-509
- Supported Accommodation	7,547	-1,044	6,503	9,582	-1,151	8,431	2,035	-107	1,928
- Other Services	19,493	-1,356	18,137	20,326	-1,924	18,402	833	-568	265
<b>Total People with a LD</b>	<b>106,724</b>	<b>-14,347</b>	<b>92,377</b>	<b>106,986</b>	<b>-15,928</b>	<b>91,058</b>	<b>262</b>	<b>-1,581</b>	<b>-1,319</b>
People with a Physical Disability:									
- Residential Care	12,501	-2,022	10,479	12,254	-1,987	10,267	-247	35	-212
- Domiciliary Care	7,568	-459	7,109	7,317	-439	6,878	-251	20	-231
- Direct Payments	6,401	-280	6,121	6,697	-250	6,447	296	30	326
- Supported Accommodation	418	-13	405	394	-8	386	-24	5	-19
- Other Services	5,644	-741	4,903	6,530	-1,237	5,293	886	-496	390
<b>Total People with a PD</b>	<b>32,532</b>	<b>-3,515</b>	<b>29,017</b>	<b>33,192</b>	<b>-3,921</b>	<b>29,271</b>	<b>660</b>	<b>-406</b>	<b>254</b>
<b>All Adults Assessment &amp; Related</b>	<b>36,084</b>	<b>-1,670</b>	<b>34,414</b>	<b>37,205</b>	<b>-1,917</b>	<b>35,288</b>	<b>1,121</b>	<b>-247</b>	<b>874</b>
Mental Health Service:									
- Residential Care	6,610	-992	5,618	6,456	-974	5,482	-154	18	-136
- Domiciliary Care	903		903	627		627	-276	0	-276
- Direct Payments	386		386	602		602	216	0	216
- Supported Accommodation	355	-63	292	435	0	435	80	63	143
- Assessment & Related	10,060	-876	9,184	9,982	-876	9,106	-78	0	-78
- Other Services	6,545	-904	5,641	6,736	-904	5,832	191	0	191
<b>Total Mental Health Service</b>	<b>24,859</b>	<b>-2,835</b>	<b>22,024</b>	<b>24,838</b>	<b>-2,754</b>	<b>22,084</b>	<b>-21</b>	<b>81</b>	<b>60</b>
Supporting People	32,882		32,882	33,033	-150	32,883	151	-150	1
Gypsy & Traveller Unit	630	-289	341	630	-289	341	0	0	0
People with no recourse to Public Funds	100		100	100		100	0	0	0
Strategic Management	1,303		1,303	1,339		1,339	36	0	36
Strategic Business Support	21,844	-519	21,325	24,219	-1,971	22,248	2,375	-1,452	923
Support Services purchased from CED	7,462		7,462	7,344		7,344	-118	0	-118
Specific Grants		-38,637	-38,637		-39,616	-39,616		-979	-979
<b>Adult Services controllable</b>	<b>464,525</b>	<b>-123,607</b>	<b>340,918</b>	<b>474,646</b>	<b>-133,175</b>	<b>341,471</b>	<b>10,121</b>	<b>-9,568</b>	<b>553</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	88,635	-31,724	56,911	-616	-76	-692	Reducing clients but price pressures due to complexity
- Nursing Care	43,647	-19,507	24,140	303	-225	78	Demographic and placement pressures offset with additional income
- Domiciliary Care	47,233	-10,317	36,916	-926	103	-823	Reducing clients but price pressures due to complexity
- Direct Payments	4,638	-436	4,202	-67	-25	-92	
- Other Services	21,607	-4,915	16,692	124	-17	107	Small gross variances against a number of lines
Total Older People	205,760	-66,899	138,861	-1,182	-240	-1,422	
People with a Learning Difficulty:							
- Residential Care	64,909	-12,119	52,790	1,704	-135	1,569	Demographic and placement pressures
- Domiciliary Care	6,704	-650	6,054	97	-71	26	
- Direct Payments	5,465	-84	5,381	62	-14	48	
- Supported Accommodation	9,582	-1,151	8,431	643	-215	428	Demographic and placement pressures
- Other Services	19,908	-1,506	18,402	-488	-25	-513	Release of Managing Director's Contingency to offset overall pressure
Total People with a LD	106,568	-15,510	91,058	2,018	-460	1,558	
People with a Physical Disability							
- Residential Care	12,254	-1,987	10,267	780	-128	652	Demographic and placement pressures
- Domiciliary Care	7,318	-439	6,879	95	-9	86	
- Direct Payments	6,697	-250	6,447	-34	9	-25	
- Supported Accommodation	394	-8	386	-99	5	-94	
- Other Services	6,033	-692	5,341	-342	13	-329	Release of Managing Director's Contingency to offset overall pressure
Total People with a PD	32,696	-3,376	29,320	400	-110	290	
All Adults Assessment & Related	37,155	-1,918	35,237	63	-95	-32	
Mental Health Service			0			0	
- Residential Care	6,456	-974	5,482	585	276	861	Forecast activity in excess of affordable level; increased proportion of S117 clients
- Domiciliary Care	540		540	27	0	27	
- Direct Payments	602		602	-357	0	-357	Less than expected activity
- Supported Accommodation	585	-63	522	27	-51	-24	
- Assessment & Related	9,982	-876	9,106	-90	-24	-114	
- Other Services	6,736	-904	5,832	-96	-48	-144	
Total Mental Health Service	24,901	-2,817	22,084	96	153	249	

Budget Book Heading	Cash Limit			Variance			Comment
	G	I	N	G	I	N	
	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	
Supporting People	32,883	0	32,883	0	0	0	
Gypsy & Traveller Unit	630	-289	341	0	0	0	
People with no recourse to Public Funds	100		100	0	0	0	
Strategic Management	1,339		1,339	8	3	11	
Strategic Business Support	23,486	-1,238	22,248	-64	-94	-158	
Support Services purchased from CED	7,344		7,344	0	0	0	
Specific Grants		-39,616	-39,616	0	0	0	
<b>Total Adult Services controllable</b>	<b>472,862</b>	<b>-131,663</b>	<b>341,199</b>	<b>1,339</b>	<b>-843</b>	<b>496</b>	
<b>Assumed Management Action</b>				<b>-496</b>		<b>-496</b>	
<b>Forecast after Mgmt Action</b>				<b>843</b>	<b>-843</b>	<b>0</b>	

### 1.1.3 Major Reasons for Variance:

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 net position is an underspend of £1,422k. Although there are underlying pressures remaining within in-house residential care, nursing care, and Older People with Mental Health Needs, the Directorate is reporting an underspend against domiciliary care and a continuing reduction in the number of Older People who do not have a Mental Health Need requiring independent permanent residential care.

##### a. Residential Care

This line is reporting a gross underspend of £616k as the number of clients in permanent care continues to reduce, with the June figure of 2,733 down from 2,832 in March. The forecast position is 155,824 weeks of care against an affordable level of 157,572, which is a difference of 1,748 weeks. Using the forecast unit cost of £385.47, this reduced level of activity generates an under spend of £674k. In addition the forecast unit cost is £1.95 higher than the affordable which results in a pressure of £307k. This pressure reflects the increasing number of clients with dementia as placements are more expensive, and this trend can clearly be seen in table 2.1.2. Although the reduction in activity also means a reduced level of income of £270k, the actual income per week is £154.45 against an expected level of £150.13. This gives an over-recovery in income of £681k.

The forecast number of client weeks of service provided to Preserved Rights clients is 1,195 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 £479k with a further reduction of £19k because the unit cost is slightly below the affordable level. The reduction in activity also results in an under-recovery in income of £237k.

In house residential provision is showing a pressure of £275k on staffing because of the continuing need to cover sickness and absence with agency staff in order to meet care standards.

##### b. Nursing Care

There is a pressure of £303k on gross expenditure and client numbers have increased from 1,332 in March to 1,340 in June. The forecast is assuming 324 weeks more than budget at a cost of £152k. The unit cost is also forecast to be higher than budget, £470.37 instead of £468.95, which increases the pressure by £106k. The additional activity has resulted in increased income of £49k. Also the actual income per week is £151.53 against an expected level of £148.81. This gives an over-recovery in income of £204k.

Preserved Rights is showing a small pressure of £45k against gross and a small under-recovery in income of £13k.

There is currently an underspend of £25k against Registered Nursing Care Contributions with an identical under-recovery of income and is based on the latest estimates of client activity.

c. Domiciliary Care

This service remains the most volatile and difficult to forecast and currently this line is forecasting an underspend against gross of £926k. The numbers of people receiving a domiciliary care package from the independent sector has decreased over the last year, but stabilised in the first quarter this year and the continuing trend remains uncertain. However the budget still allows for significantly more hours than is being delivered and the current forecast under-delivery is over 122,000 hours, giving a saving of £1,893k. The forecast unit cost is also £0.415 per hour more expensive than affordable generating an additional cost of £1,057k. 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 small underspend of £90k relating to the in-house domiciliary service.

The reduced level of activity has meant a corresponding under-recovery in income of £103k.

d. Other Services

A small pressure of £124k is forecast against gross expenditure which relates to a number of small variances, both over and under, against the remaining services, including meals, payments to voluntary organisations, occupational therapy and day-care.

1.1.3.2 People with a Learning Difficulty:

Overall the position for this client group is a net pressure of £1,558k. Services for this client group remain under extreme pressure, particularly within residential care and supported accommodation, as a result of both demographic and placement price pressures.

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, continues to be felt. Alongside these so-called "transitional" placements are the increasing number of older learning disabled clients who are cared for at home by ageing parents who will begin to require more support. There are also more cases of clients becoming "ordinarily resident" in Kent. 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.

a. Residential Care

The overall forecast for residential care, including preserved rights clients, is an overspend on gross of £1,704k partially offset by over recovery of income of £135k, giving a net pressure of £1,569k. Details of the individual pressures and savings contributing to this position are provided below.

Although the number of clients has reduced from 640 in March to 632 in June, the forecast assumes 652 weeks more than is affordable at a cost of £738k. This position 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 £1,131.43 which is £21.28 higher than the affordable which adds £695k to the forecast. The additional client weeks adds £117k of income with a further £41k of income resulting from slightly more income per week than expected.

As with Older People, in house residential provision is showing a pressure of £183k on staffing because of the need to cover sickness and absence with agency staff to meet national care standards.

There has also been a contribution of £170k to a provision for a potential future liability.

b. Supported Accommodation

The current position is a net pressure of £428k with the number of clients having increased from 233 in March to 276 in June, although it is not expected that this large increase in clients over the first three months will be repeated throughout the rest of the year. The forecast for activity is 128

weeks over the affordable level which generates a pressure of £74k. The unit cost of £577.33 is also £33.02 per week higher than is affordable and this increases the pressure by £554k. The additional activity and a higher than expected average contribution per week generates an additional £190k of income.

c. Other Services

This line is showing a gross underspend of £488k following the release of £600k of the Contingency held by the Managing Director to offset the overall pressure within the Directorate. There are also small variances, both over and under, against the remaining services, 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 £290k. Services for this client group remain under pressure as a result of both demographic and placement price pressures. As a result there continues to be a significant forecast pressure against residential care.

a. Residential Care

The overall forecast for residential care, including preserved rights clients, is a pressure on gross of £780k partially offset by over recovery of income of £128k, giving a net pressure of £652k.

Although the number of clients has reduced from 222 in March to 213 in June, the forecast assumes 552 weeks more than is affordable at a cost of £495k. The actual unit cost is £896.33 which is £20.44 higher than the affordable which adds £241k to the forecast. The additional client weeks adds £95k of income to the position.

b. Other Services

This line is showing a gross underspend of £342k following the release of £200k of the Contingency held by the Managing Director to offset the overall pressure within the Directorate. There are also small variances, both over and under, against the remaining services, including payments to voluntary organisations, day-care and occupational therapy.

1.1.3.4 **Mental Health:**

Overall the position for this client group is a net pressure of £249k.

a. Residential Care

The overall forecast for residential care, including preserved rights clients, is a pressure on gross of £585k. The affordable level was reduced as a result of the decision in both 2008-09 and 2009-10 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 result is a forecast which is 1,153 weeks more than is affordable at a cost of £622k. The actual unit cost is £539.70 which is £7.80 higher than the affordable which adds £68k to the forecast. 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 £276k to the pressure.

b. Direct Payments

As referred to above the affordable level has been 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 result is a gross forecast which is significantly underspending against budget by £357k.

**Table 2: REVENUE VARIANCES OVER £100K IN SIZE ORDER**  
(shading denotes that a pressure/saving has an offsetting entry which is directly related)

Pressures (+)			Underspends (-)		
portfolio		£000's	portfolio		£000's
KASS	Older People Domiciliary gross - pressure relating to change in unit cost in independent sector hours	+1,057	KASS	Older People Domiciliary gross - activity lower than anticipated	-1,893
KASS	LD Residential gross - activity in excess of affordable level in independent sector placements	+738	KASS	Older People Residential income resulting from higher unit cost	-681
KASS	LD Residential gross - pressure relating to change in unit cost in independent sector care	+695	KASS	Older People Residential gross - activity below affordable level	-674
KASS	MH Residential gross - transfer of clients to community based care/direct payments not yet happened	+622	KASS	LD Other Services gross - release of the balance of the Managing Director's contingency	-600
KASS	LD Supported Accommodation gross - pressure relating to change in unit cost	+554	KASS	Older People Residential gross - Preserved Rights increased attrition	-479
KASS	PD Residential gross - activity in excess of affordable level in independent sector placements	+495	KASS	MH Direct Payments gross - increase in expected activity in community based care/direct payments not yet happened	-357
KASS	Older People Residential gross - change in unit cost in independent sector placements	+307	KASS	Older People Nursing income resulting from higher unit cost	-204
KASS	MH Residential income - reduced income due to increasing proportion of clients who are S117, and therefore do not contribute towards costs	+276	KASS	PD Other Services gross - release of the balance of the Managing Director's contingency	-200
KASS	Older People Residential gross - in house provision staffing	+275	KASS	LD Support Accommm income - addit activity/higher contribution	-190
KASS	Older People Residential income - under-recovery of income due to lower activity	+270	KASS	LD Residential income - additional income resulting from additional activity	-117
KASS	PD Residential gross - change in unit cost of independent sector placements	+241			
KASS	Older People Residential income - Preserved rights reduced income due to higher attrition	+237			
KASS	LD Residential gross - in house provision staffing	+183			
KASS	LD Residential gross - contribution to provision for potential future liability	+170			
KASS	Older People Nursing gross - activity in excess of affordable level in independent sector placements	+152			
KASS	Older People Nursing gross - change in unit cost in independent sector placements	+106			
KASS	Older People Domiciliary income - reduced due to lower activity	+103			
		+6,481			-5,395

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

The forecast pressure of £496k assumes that the savings identified within the MTP will be achieved and the Directorate remains confident that all savings will be achieved.

#### 1.1.5 Implications for MTP:

The MTP assumes a breakeven position for 2009-10.

#### 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:

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 £496k 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 13<sup>th</sup> July 2009, as detailed in section 4.1.

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

	Prev Yrs Exp £000s	2009-10 £000s	2010-11 £000s	2011-12 £000s	Future Yrs £000s	TOTAL £000s
<b>Kent Adult Social Services portfolio</b>						
Budget	18,023	11,267	17,130	13,770	12,651	72,841
Additions:						
- roll forward	-1,386	1,387	-1			0
- Outturn and pre-outturn changes	-13,770					-13,770
- Flexible & Mobile Engagement		-1,161				-1,161
- Edenbridge Community Centre			26			26
Revised Budget	2,867	11,493	17,155	13,770	12,651	57,936
Variance		-4,987	2,677	2,310		0
<b>split:</b>						
- real variance		-25	+25			0
- re-phasing		-4,962	+2,652	+2,310		0
<b>Real Variance</b>	<b>0</b>	<b>-25</b>	<b>+25</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Re-phasing</b>	<b>0</b>	<b>-4,962</b>	<b>+2,652</b>	<b>+2,310</b>	<b>0</b>	<b>0</b>

### 1.2.3 Main Reasons for Variance

Table 4 below, details all forecast capital variances over £250k in 2009-10 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>						
KASS						
			<b>+0</b>	<b>+0</b>	<b>+0</b>	<b>+0</b>
<b>Underspends/Projects behind schedule</b>						
KASS	Dartford Town Centre	Phasing			-2,600	
KASS	Broadmeadow Extension	Phasing		-1,530		
KASS	FAME	Phasing		-480		
			<b>-0</b>	<b>-2,010</b>	<b>-2,600</b>	<b>-0</b>
			<b>+0</b>	<b>+2,010</b>	<b>+2,600</b>	<b>+0</b>

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

#### 1.2.4.1 Dartford Town Centre; -£2.6 million

The Dartford Town Centre Project is a new Health and Social Care Centre aiming to relocate and modernise a number of existing day care services into a new building incorporating voluntary services, independent living flats, social enterprise and potentially health care services. The project is largely dependent upon a retail and residential development.

It has rephased by £2.6m representing 48% of the scheme's budget. It has been delayed in starting, as due to the present economic climate, the developer has delayed submitting the planning application to the Borough Council's Planning Committee. This has had the effect of delaying the possible start date of any build on site, and this in turn has delayed the negotiation process for securing developer contributions and suitable space on the site to construct a Health and Social Care Centre. As a result, indications are that should the planning application be approved in the coming months, the earliest anticipated start date would be into the next financial year, hence the rephasing request.

There are currently no financial implications caused by this delay, the project is funded by Capital Receipts which have already been realised, and developer contributions that have been signed and secured from developments in close proximity to the site. Revised phasing of the scheme is now as follows:

	Prior Years	2009-10	2010-11	2011-12	future years	Total
	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s
<b>BUDGET &amp; FORECAST</b>						
Budget	125	2,610	2,310	500		5,545
Forecast	125	10	2,600	2,810		5,545
Variance	0	-2,600	+290	+2,310	0	0
<b>FUNDING</b>						
<b>Budget:</b>						
prudential	5		500			505
external		470	1,810			2,280
capital receipts	120	2,140		500		2,760
TOTAL	125	2,610	2,310	500	0	5,545
<b>Forecast:</b>						
prudential	5			500		505
external			470	1,810		2,280
capital receipts	120	10	2,130	500		2,760
TOTAL	125	10	2,600	2,810	0	5,545
<b>Variance</b>	<b>0</b>	<b>-2,600</b>	<b>+290</b>	<b>+2,310</b>	<b>0</b>	<b>0</b>

#### 1.2.4.2 Broadmeadow Extension; -£1.5 million

This scheme is the construction of an extension to the Broadmeadow Registered Care Centre, with the objective of developing a more cohesive approach towards service commissioning for people with Dementia and OPMH (over the age of 65) and their carers by ensuring that these are more localised, responsive and flexible.

It has rephased by £1.5 million representing 85% of the total value of the scheme. Whilst the rest of the scheme is on track, submission for planning permission for the extension will now take place in September. This means the completion of the project is anticipated to be 4 months behind schedule; expected in December 2010. During this time, services will be accommodated within existing KASS homes, the impact of which is already included within the revenue forecast. Revised phasing of the scheme is now as follows:

	Prior Years	2009-10	2010-11	2011-12	future years	Total
	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s
<b>BUDGET &amp; FORECAST</b>						
Budget		1,800				1,800
Forecast		270	1,530			1,800
Variance	0	-1,530	+1,530	0	0	0
<b>FUNDING</b>						
<b>Budget:</b>						
prudential		1,800				1,800
TOTAL	0	1,800	0	0	0	1,800
<b>Forecast:</b>						
prudential		270	1,530			1,800
TOTAL	0	270	1,530	0	0	1,800
<b>Variance</b>	<b>0</b>	<b>-1,530</b>	<b>+1,530</b>	<b>0</b>	<b>0</b>	<b>0</b>

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

There is anticipated pressure of £0.025m on the Edenbridge project, this is being offset by an underspend against the Public Access project. Taking this into account, there is zero real variance in the KASS capital programme.

### 1.2.6 General Overview of capital programme:

#### (a) Risks

The main risk to the Adult Services Capital Programme is the funding from Developer Contributions. There are risks around the timing of the receipts, and the degree to which Developers may try to avoid the payment of contributions.

KASS Capital programme currently includes the following in relation to developer contributions

	2009/10	2010/11	2011/12	Future Years	Total
	£'m	£'m	£'m	£'m	£'m
<b>Budget</b>	0.470	2.336	0.865	0.000	3.671
<b>Forecast</b>	0.000	0.996	2.675	0.000	3.671
<b>Variance</b>	-0.470	-1.340	1.810	0.000	-0.000

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

In order to reduce the risk, KASS are developing a transparent and effective working relationship with third parties, including District and Borough Councils. The aim of this is to ensure KASS are fully aware of any changes to the agreements as they arise, and can plan around the changes. As can be seen from the table above, KASS require £3.671m of developer contributions to fund their current commitments; however, KASS have £6.364m of developer contributions agreed.

### 1.2.7 PFI projects

- PFI Housing

1. The £72.489m investment in the PFI Housing project represents investment by a third party. No payment is made by KCC for the new/refurbished assets until the asset are ready for use and this is by way of an annual unitary charge to the revenue budget. The completion of the assets is phased over two years and some are now operational.

	Previous years	2009-10	2010-11	2011-12	TOTAL
	£000s	£000s	£000s	£000s	£000s
<b>Budget</b>	8,892	51,818	11,779	0	72,489
<b>Forecast</b>	8,892	51,818	11,779		72,489
<b>Variance</b>	0	0	0	0	0

#### (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 ?

The unitary charge is not subject to indexation as the contractor has agreed to a fixed price for the duration of the contract. 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 must be taken to the Project Board for agreement. Each partner has a vote and any decision resulting in a change to the costs or risks would need unanimous approval.

2. The £44.300m investment in the PFI Excellent Homes for All project also represents investment by a third party. No payment is made by KCC for the new/refurbished assets until the asset are ready for use and this is by way of an annual unitary charge to the revenue budget.

	Previous years	2009-10	2010-11	-23	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 ?**

The unitary charge is not subject to indexation as the contractor has agreed to a fixed price for the duration of the contract. 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 must be taken to the Project Board for agreement. Each partner has a vote and any decision resulting in a change to the costs or risks would need unanimous approval.

### 1.2.8 Project Re-Phasing

It is proposed that a cash limit change be recommended for the following projects that have rephased by greater than £0.100m to reduce the reporting requirements during the year. Any subsequent re-phasing greater than £0.100m can be requested but the full extent of the rephasing will have to be shown. The possible re-phasing is detailed in the table below.

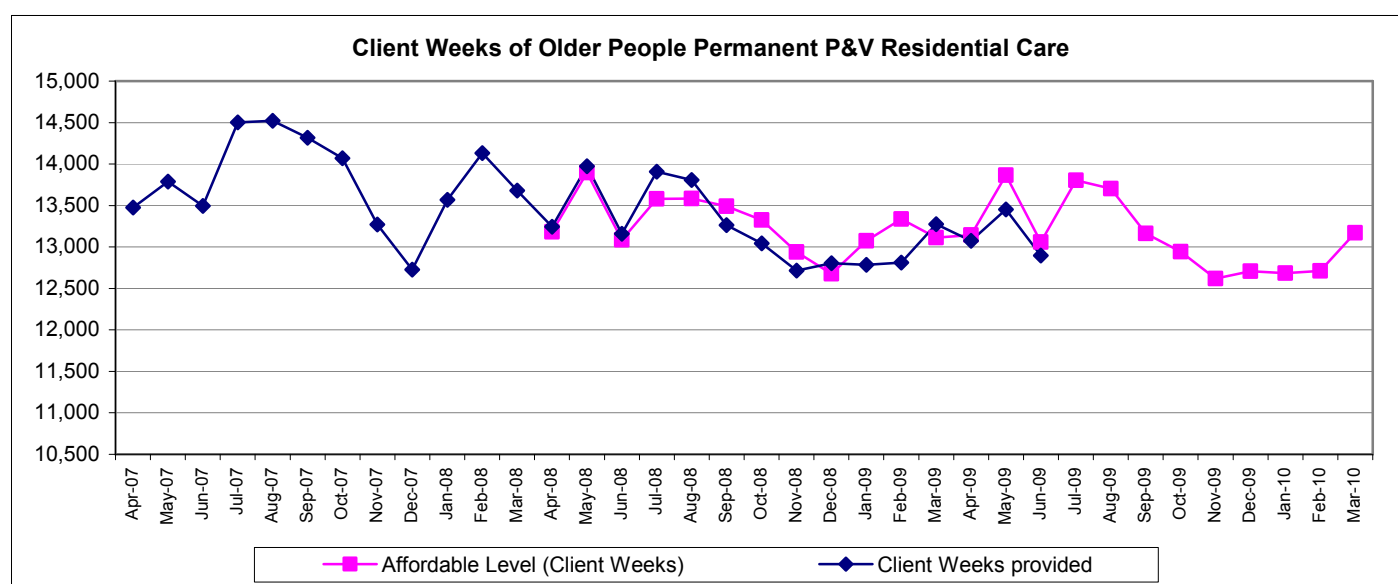
	2009-10	2010-11	2011-12	Future Years	Total
	£k	£k	£k	£k	
<b>Modernisation of Assets</b>					
Amended total cash limits	+1,172	+406	+533	+1,119	+3,230
re-phasing	-143	+143			0
<b>Revised project phasing</b>	<b>+1,029</b>	<b>+549</b>	<b>+533</b>	<b>+1,119</b>	<b>+3,230</b>
<b>Flexible and Mobile Engagement</b>					
Amended total cash limits	+715				+715
re-phasing	-480	+480			0
<b>Revised project phasing</b>	<b>+235</b>	<b>+480</b>	<b>0</b>	<b>0</b>	<b>+715</b>
<b>Edenbridge Community &amp; Leisure Centre</b>					
Amended total cash limits	+225	+26			+251
re-phasing	-209	+209			0
<b>Revised project phasing</b>	<b>+16</b>	<b>+235</b>	<b>0</b>	<b>0</b>	<b>+251</b>
<b>Broadmeadow Extension</b>					
Amended total cash limits	+1,800				+1,800
re-phasing	-1,530	+1,530			0
<b>Revised project phasing</b>	<b>+270</b>	<b>+1,530</b>	<b>0</b>	<b>0</b>	<b>+1,800</b>
<b>Dartford Town Centre</b>					
Amended total cash limits	+2,610	+2,310	+500		+5,420
re-phasing	-2,600	+290	+2,310		0
<b>Revised project phasing</b>	<b>+10</b>	<b>+2,600</b>	<b>+2,810</b>	<b>0</b>	<b>+5,420</b>
<b>Total re-phasing &gt;£100k</b>	<b>-4,962</b>	<b>+2,652</b>	<b>+2,310</b>	<b>0</b>	<b>0</b>
<b>Other re-phased Projects below £100k</b>					
Amended total cash limits					0
re-phasing					0
<b>Revised phasing</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>TOTAL RE-PHASING</b>	<b>-4,962</b>	<b>+2,652</b>	<b>+2,310</b>	<b>0</b>	<b>0</b>

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

The changes to cash limits referred to in section 1.1.1 above have impacted on the 2009-10 affordable levels of activity and these have been updated from what was reported to Cabinet within the outturn report in July to reflect the revised cash limits outlined in Tables 1a and 1b.

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

	2007-08		2008-09		2009-10	
	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		13,476	13,181	13,244	13,142	13,076
May		13,789	13,897	13,974	13,867	13,451
June		13,495	13,084	13,160	13,059	12,898
July		14,502	13,581	13,909	13,802	
August		14,520	13,585	13,809	13,703	
September		14,316	13,491	13,264	13,162	
October		14,069	13,326	13,043	12,943	
November		13,273	12,941	12,716	12,618	
December		12,728	12,676	12,805	12,707	
January		13,568	13,073	12,784	12,685	
February		14,131	13,338	12,810	12,712	
March		13,680	13,114	13,275	13,172	
<b>TOTAL</b>	<b>169,925</b>	<b>165,546</b>	<b>159,287</b>	<b>158,793</b>	<b>157,572</b>	<b>39,425</b>

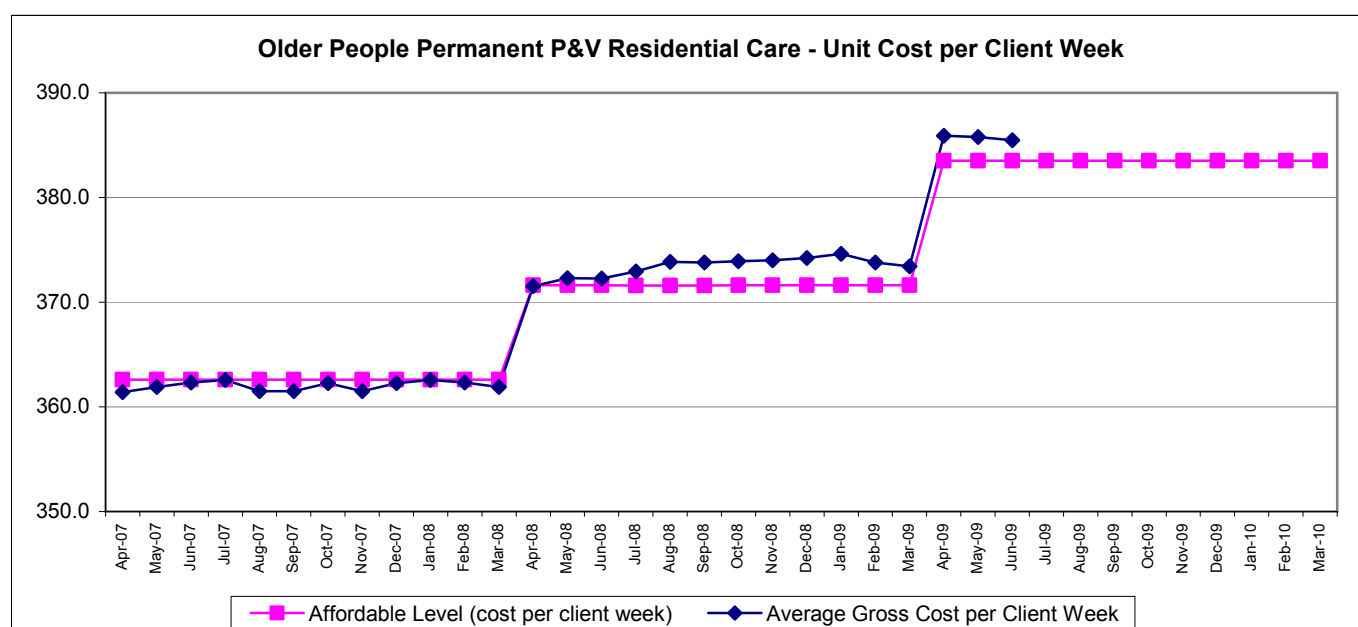


#### Comments:

- 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 2007-08 was 2,917 and at the end of March 2009 it was 2,832. In June, the number was 2,733. This reduction relates to clients without dementia as the number of older people with mental health needs remains stable.
- The forecast position is 155,824 weeks of care against an affordable level of 157,572, which is a difference of 1,748 weeks. Using the actual unit cost of £385.47, this reduced level of activity generates an underspend of £674k as highlighted in section 1.1.3.1.a.
- To the end of June 39,425 weeks of care have been delivered against an affordable level of 40,068, a difference of 643 weeks.

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

	2007-08		2008-09		2009-10	
	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	362.60	361.41	371.60	371.54	383.52	385.90
May	362.60	361.90	371.60	372.28	383.52	385.78
June	362.60	362.31	371.60	372.27	383.52	385.47
July	362.60	362.56	371.60	372.94	383.52	
August	362.60	361.50	371.60	373.84	383.52	
September	362.60	361.50	371.60	373.78	383.52	
October	362.60	362.27	371.60	373.91	383.52	
November	362.60	361.50	371.60	374.01	383.52	
December	362.60	362.27	371.60	374.22	383.52	
January	362.60	362.56	371.60	374.61	383.52	
February	362.60	362.31	371.60	373.78	383.52	
March	362.60	361.90	371.60	373.42	383.52	

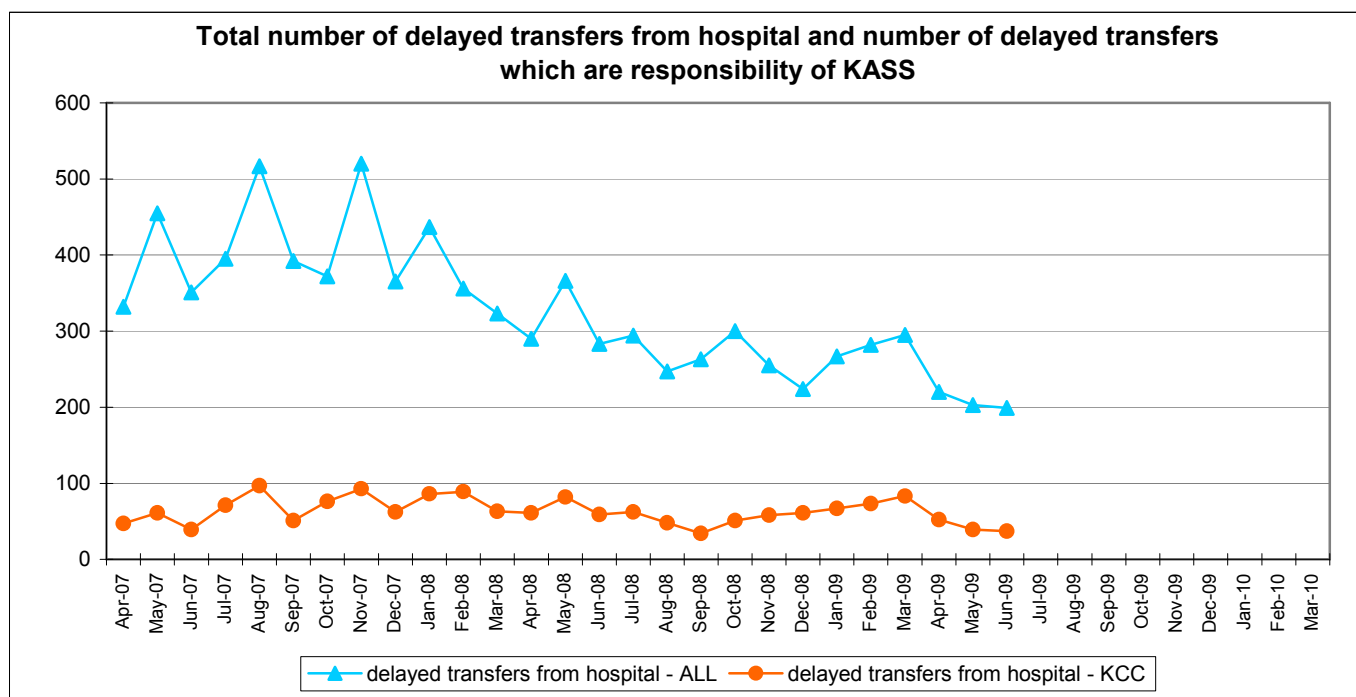


### Comments:

- The increase in unit cost over the last year is higher than inflation, but reflects the increasing proportion of clients with dementia.
- The forecast unit cost of £385.47 is higher than the affordable cost of £383.52 and this difference of £1.95 adds £307k 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:

	2007-08		2008-09		2009-10	
	ALL	KASS responsibility	ALL	KASS responsibility	ALL	KASS responsibility
April	332	47	290	61	220	52
May	455	61	366	82	203	39
June	351	39	283	59	199	37
July	395	71	294	62		
August	517	97	247	48		
September	392	51	263	34		
October	372	76	300	51		
November	520	93	255	58		
December	365	62	224	61		
January	437	86	267	67		
February	356	89	282	73		
March	323	63	295	83		

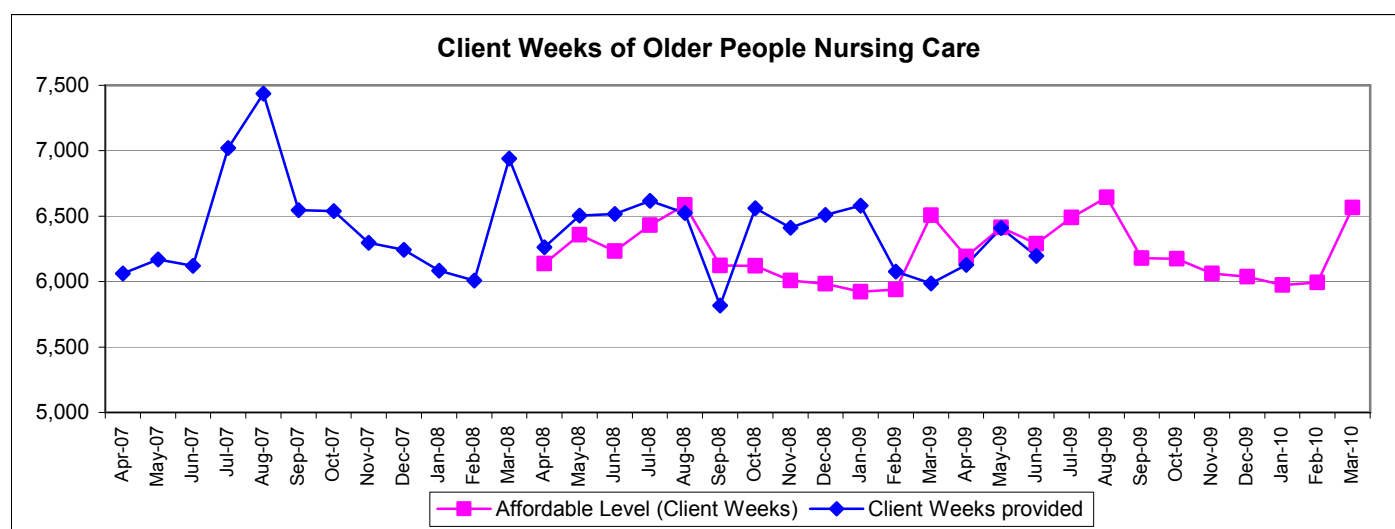


#### Comments:

- The Delayed Transfers of Care (DTCs) show the numbers of people whose movement from an acute hospital has been delayed. Typically this may be because they are waiting for an assessment to be completed, they are choosing a residential or nursing home placement, or waiting for a vacancy to become available. 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. The average number of delayed transfers per week is on a steadily reducing trend from a peak in the second quarter of 2007/08.

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

	2007-08		2008-09		2009-10	
	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		6,062	6,137	6,263	6,191	6,127
May		6,170	6,357	6,505	6,413	6,408
June		6,120	6,233	6,518	6,288	6,195
July		7,020	6,432	6,616	6,489	
August		7,436	6,586	6,525	6,644	
September		6,546	6,124	5,816	6,178	
October		6,538	6,121	6,561	6,175	
November		6,298	6,009	6,412	6,062	
December		6,243	5,984	6,509	6,037	
January		6,083	5,921	6,580	5,973	
February		6,008	5,940	6,077	5,992	
March		6,941	6,507	5,985	6,566	
<b>TOTAL</b>	<b>74,707</b>	<b>77,463</b>	<b>74,351</b>	<b>76,367</b>	<b>75,008</b>	<b>18,730</b>

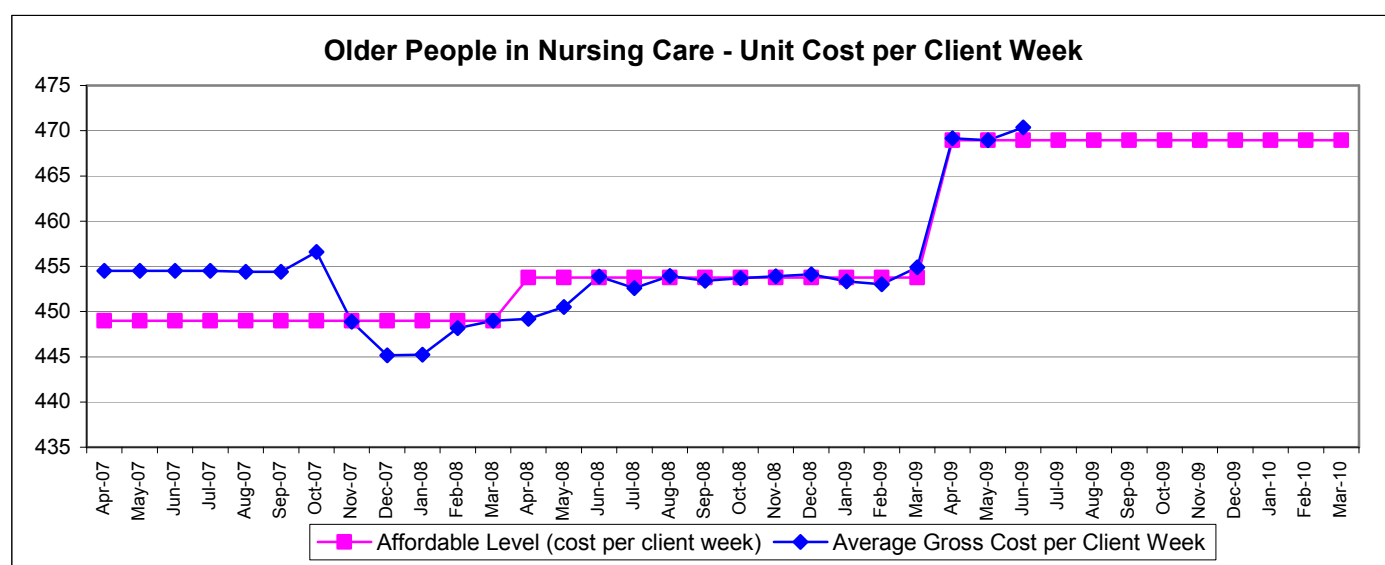


### Comment:

- 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 2007-08 was 1,386, at the end of March 2009, it had decreased to 1,332 and in June, it had increased slightly to 1,340. This increase is attributable to people with dementia.
- To the end of June 18,730 weeks of care have been delivered against an affordable level of 18,892, a difference of -162 weeks.
- The forecast position is 75,332 weeks of care against an affordable level of 75,008, a difference of +324 weeks. Using the actual unit cost of £470.37, this additional activity adds £152k to the forecast as highlighted in section 1.1.3.1.b.
- 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:

	2007-08		2008-09		2009-10	
	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	448.98	454.50	453.77	449.18	468.95	469.15
May	448.98	454.50	453.77	450.49	468.95	468.95
June	448.98	454.50	453.77	453.86	468.95	470.37
July	448.98	454.50	453.77	452.61	468.95	
August	448.98	454.40	453.77	453.93	468.95	
September	448.98	454.40	453.77	453.42	468.95	
October	448.98	456.60	453.77	453.68	468.95	
November	448.98	448.88	453.77	453.92	468.95	
December	448.98	445.16	453.77	454.13	468.95	
January	448.98	445.22	453.77	453.33	468.95	
February	448.98	448.17	453.77	453.02	468.95	
March	448.98	449.00	453.77	454.90	468.95	

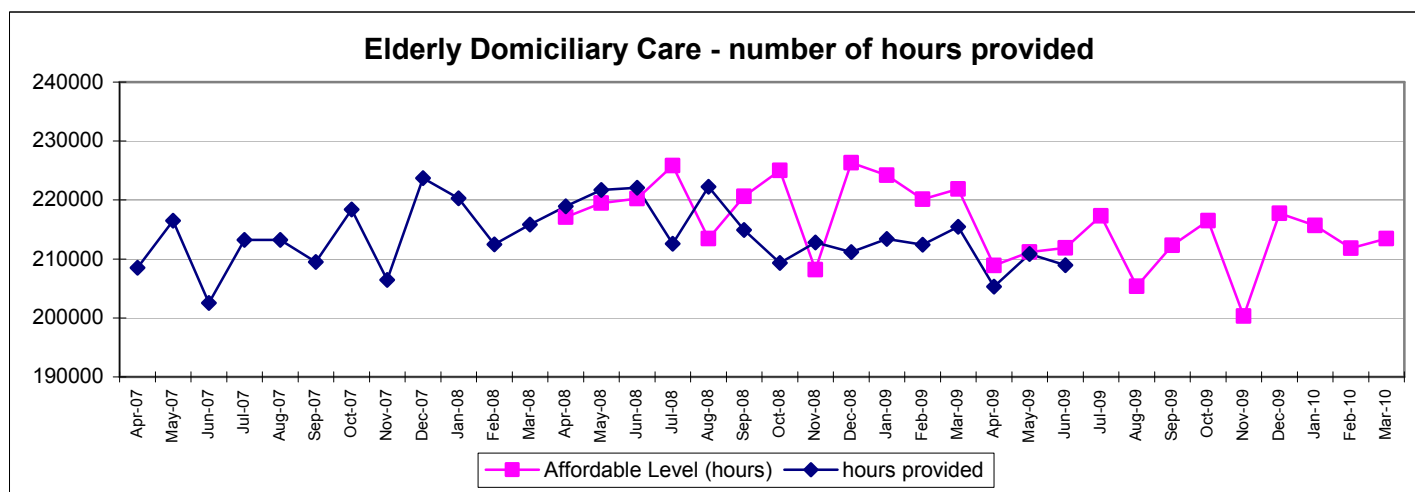
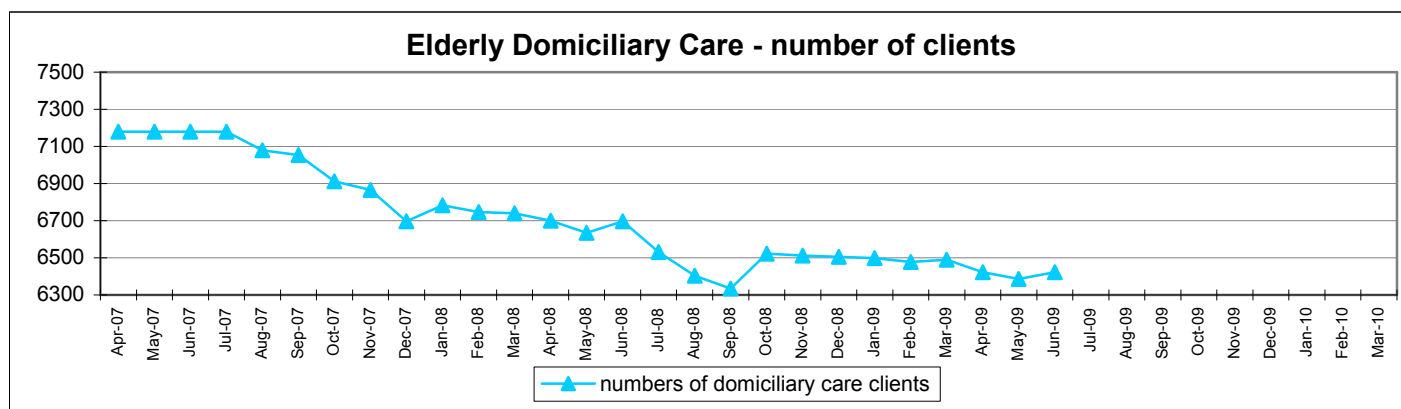


### Comments:

- 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 £470.37 is slightly higher than the affordable cost of £468.95 and this difference of £1.42 adds £106k 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:

	2007-08			2008-09			2009-10		
	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		208,524	7,179	217,090	218,929	6,700	208,869	205,312	6,423
May		216,477	7,180	219,480	221,725	6,635	211,169	210,844	6,386
June		202,542	7,180	220,237	222,088	6,696	211,897	208,945	6,422
July		213,246	7,180	225,841	212,610	6,531	217,289		
August		213,246	7,079	213,436	222,273	6,404	205,354		
September		209,504	7,054	220,644	214,904	6,335	212,289		
October		218,397	6,912	225,012	209,336	6,522	216,491		
November		206,465	6,866	208,175	212,778	6,512	200,292		
December		223,696	6,696	226,319	211,189	6,506	217,749		
January		220,313	6,782	224,175	213,424	6,499	215,686		
February		212,499	6,746	220,135	212,395	6,478	211,799		
March		215,865	6,739	221,875	215,488	6,490	213,474		
<b>TOTAL</b>	<b>2,610,972</b>	<b>2,560,774</b>		<b>2,642,419</b>	<b>2,587,139</b>		<b>2,542,358</b>	<b>625,101</b>	



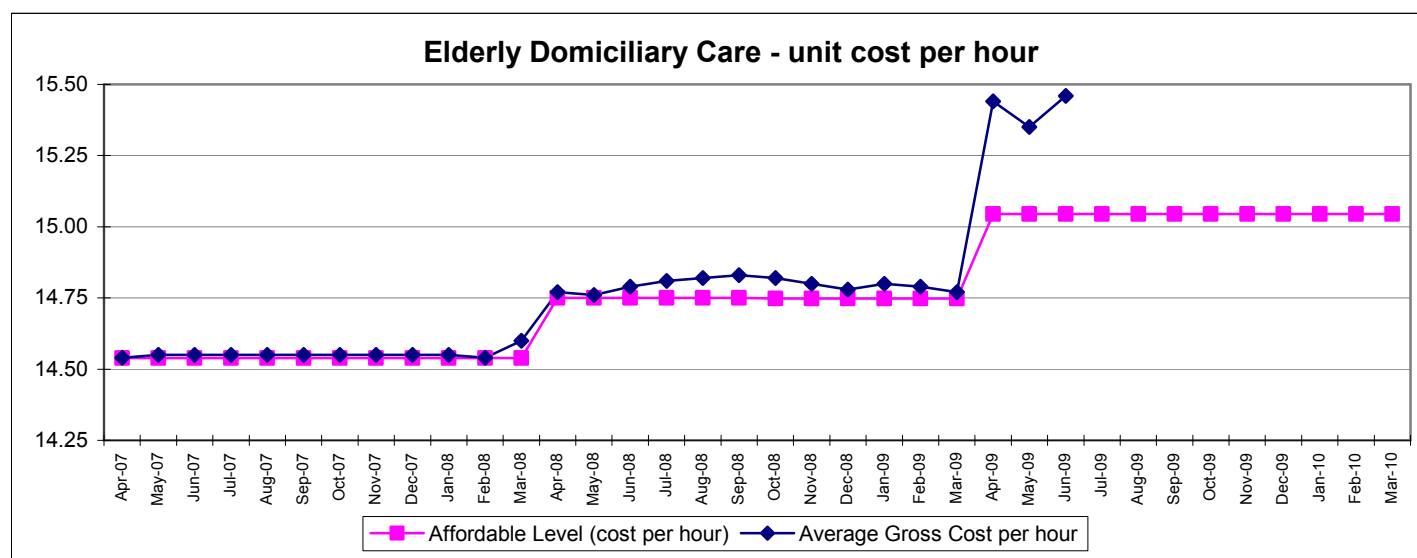
## Comment:

- Figures exclude services commissioned from the Kent HomeCare Service.
- The current forecast is 2,419,893 hours of care set against an affordable level of 2,542,358, a difference of 122,465 hours. Using the forecast unit cost of £15.46, this reduction in activity indicates a £1,893k underspend, as highlighted in section 1.1.3.1.c.
- The number of people receiving domiciliary care has decreased over the last year, but stabilised in the first quarter this year. We would not expect the number of domiciliary care clients to be 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.

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

	2007-08		2008-09		2009-10	
	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	14.50	14.54	14.75	14.77	15.045	15.44
May	14.50	14.55	14.75	14.76	15.045	15.35
June	14.50	14.55	14.75	14.79	15.045	15.46
July	14.50	14.55	14.75	14.81	15.045	
August	14.50	14.55	14.75	14.82	15.045	
September	14.50	14.55	14.75	14.83	15.045	
October	14.50	14.55	14.75	14.82	15.045	
November	14.50	14.55	14.75	14.80	15.045	
December	14.50	14.55	14.75	14.78	15.045	
January	14.50	14.55	14.75	14.80	15.045	
February	14.50	14.54	14.75	14.79	15.045	
March	14.50	14.60	14.75	14.77	15.045	

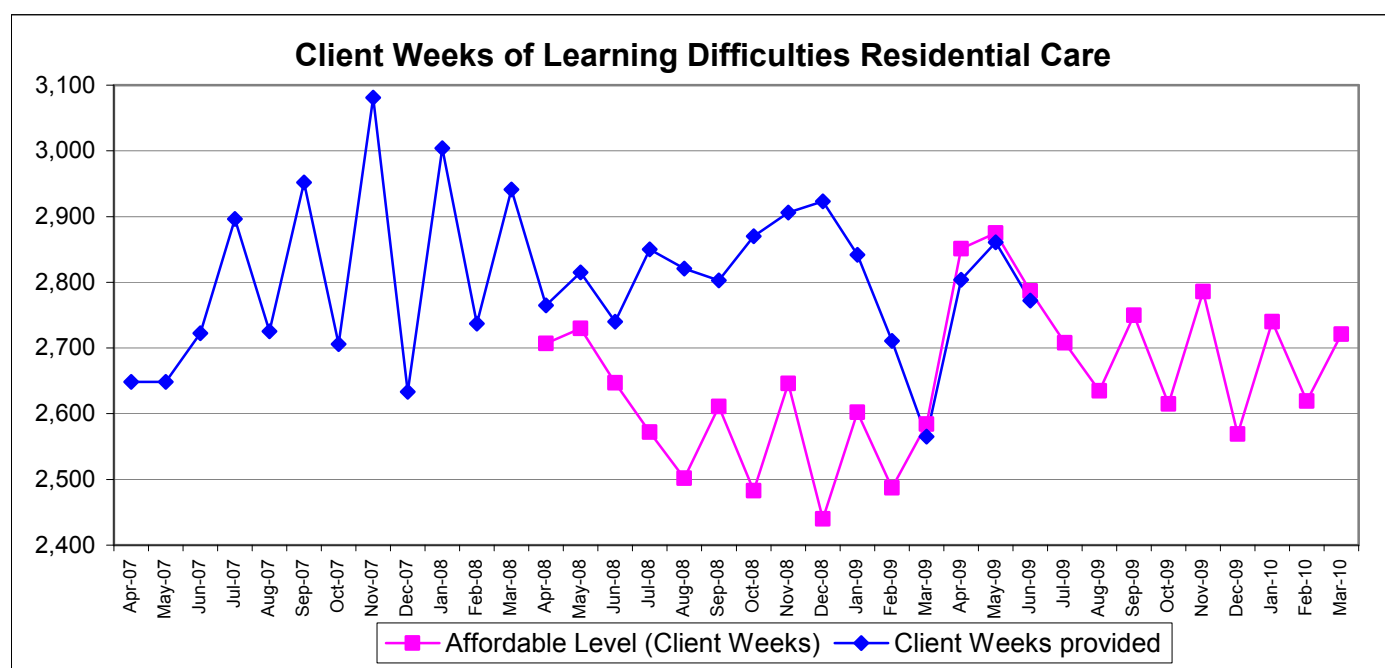


#### Comments:

- The 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 £15.46 is higher than the affordable cost of £15.045 and this difference of £0.415 increases the pressure by £1,057k 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):

	2007-08		2008-09		2009-10	
	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		2,648	2,707	2,765	2,851	2,804
May		2,648	2,730	2,815	2,875	2,861
June		2,722	2,647	2,740	2,787	2,772
July		2,897	2,572	2,850	2,708	
August		2,725	2,502	2,821	2,635	
September		2,952	2,611	2,803	2,750	
October		2,706	2,483	2,870	2,615	
November		3,081	2,646	2,906	2,786	
December		2,633	2,440	2,923	2,569	
January		3,004	2,602	2,842	2,740	
February		2,737	2,487	2,711	2,619	
March		2,941	2,584	2,565	2,721	
<b>TOTAL</b>	<b>30,984</b>	<b>33,695</b>	<b>31,011</b>	<b>33,611</b>	<b>32,656</b>	<b>8,437</b>

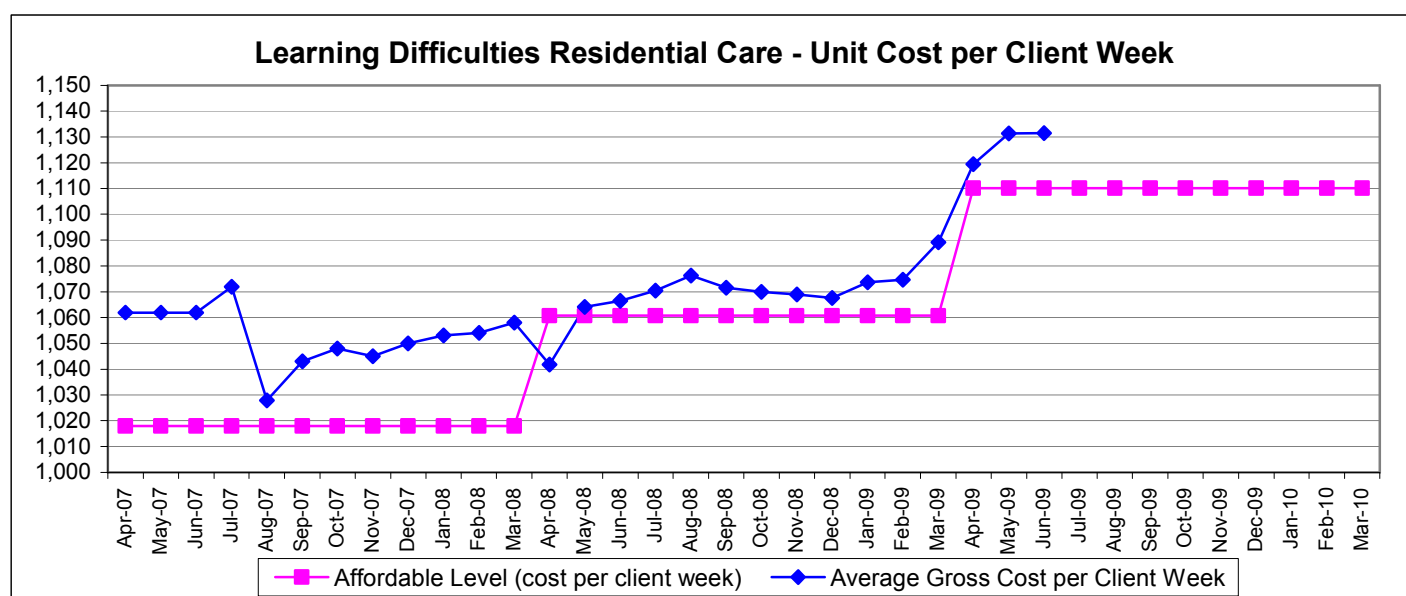


#### Comments:

- 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 2007-08 was 633, at the end of 2008-09 it was 640 (with some much higher numbers during the year) and at the end of June, 632.
- The forecast position of 33,308 weeks of care is some 652 weeks over the affordable level, indicating a pressure of £738k using a unit cost of £1,131.43. The forecast is based on the current activity as well as those known young people that will be coming to adult social services before the end of the year, plus an assumption about clients transferring out of residential care to supported living arrangements. Those young people in the “transition” process are known to Social Services as young as 14 and so they can be planned for, as highlighted in section 1.1.3.2.a.
- To the end of June 8,437 weeks of care have been delivered against an affordable level of 8,513, a difference of 76 weeks.

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

	2007-08		2008-09		2009-10	
	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	1,018.00	1,062.00	1,060.70	1,041.82	1,110.15	1,119.42
May	1,018.00	1,062.00	1,060.70	1,064.19	1,110.15	1,131.28
June	1,018.00	1,062.00	1,060.70	1,066.49	1,110.15	1,131.43
July	1,018.00	1,072.00	1,060.70	1,070.50	1,110.15	
August	1,018.00	1,028.00	1,060.70	1,076.27	1,110.15	
September	1,018.00	1,043.00	1,060.70	1,071.59	1,110.15	
October	1,018.00	1,048.00	1,060.70	1,070.02	1,110.15	
November	1,018.00	1,045.00	1,060.70	1,068.95	1,110.15	
December	1,018.00	1,050.00	1,060.70	1,067.59	1,110.15	
January	1,018.00	1,053.00	1,060.70	1,073.71	1,110.15	
February	1,018.00	1,054.00	1,060.70	1,074.67	1,110.15	
March	1,018.00	1,058.00	1,060.70	1,089.10	1,110.15	

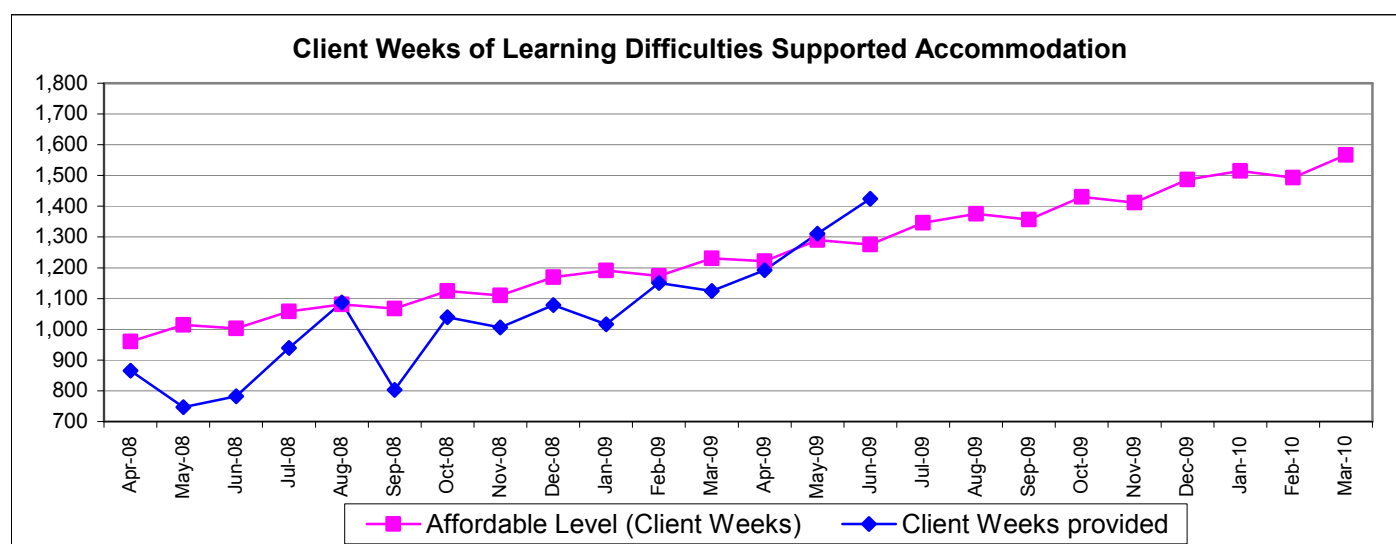


### Comments:

- 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 £1,100 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 costs – 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 £1,131.43 is higher than the affordable cost of £1,110.15 and this difference of £21.28 adds £695k 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:

	2007-08		2008-09		2009-10	
	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
May			1,014	747	1,290	1,311
June			1,003	782	1,276	1,424
July			1,058	939	1,346	
August			1,081	1,087	1,375	
September			1,067	803	1,357	
October			1,125	1,039	1,431	
November			1,110	1,006	1,412	
December			1,169	1,079	1,487	
January			1,191	1,016	1,515	
February			1,174	1,151	1,493	
March			1,231	1,125	1,567	
<b>TOTAL</b>	<b>7,618</b>	<b>11,156</b>	<b>13,183</b>	<b>11,639</b>	<b>16,770</b>	<b>3,927</b>

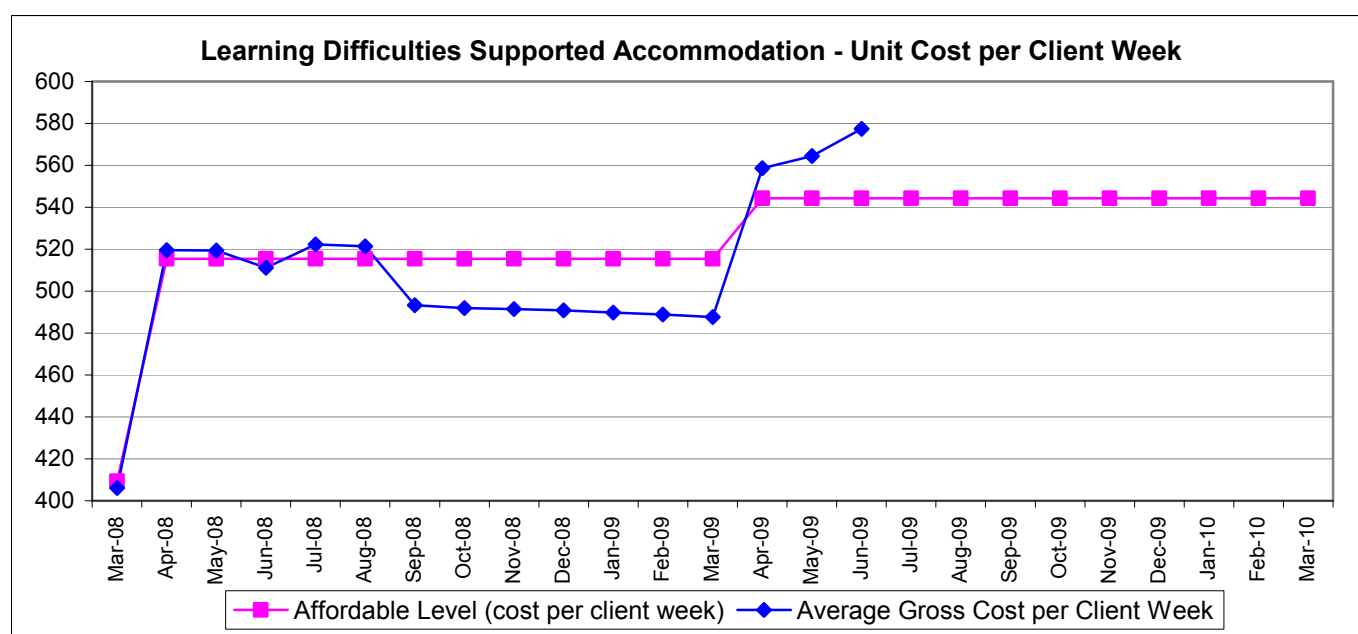


#### Comments:

- The above graph reflects the number of client weeks of service. The actual number of clients in LD supported accommodation at the end of 2007-08 was 193 and at the end of March 2009 it was 233. As at the end of June, the numbers had increased to 276.
- The latest forecast position of 16,898 weeks against an affordable level of 16,770 weeks shows a difference of 128 weeks, which indicates a pressure of £74k using a unit cost of £577.33.
- 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. The forecast assumes further small increases in clients in the year.

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

	2007-08		2008-09		2009-10	
	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
May			515.41	519.40	544.31	564.49
June			515.41	511.10	544.31	577.33
July			515.41	522.30	544.31	
August			515.41	521.40	544.31	
September			515.41	493.33	544.31	
October			515.41	491.85	544.31	
November			515.41	491.47	544.31	
December			515.41	490.83	544.31	
January			515.41	489.75	544.31	
February			515.41	488.90	544.31	
March	409.31	406.18	515.41	487.60	544.31	

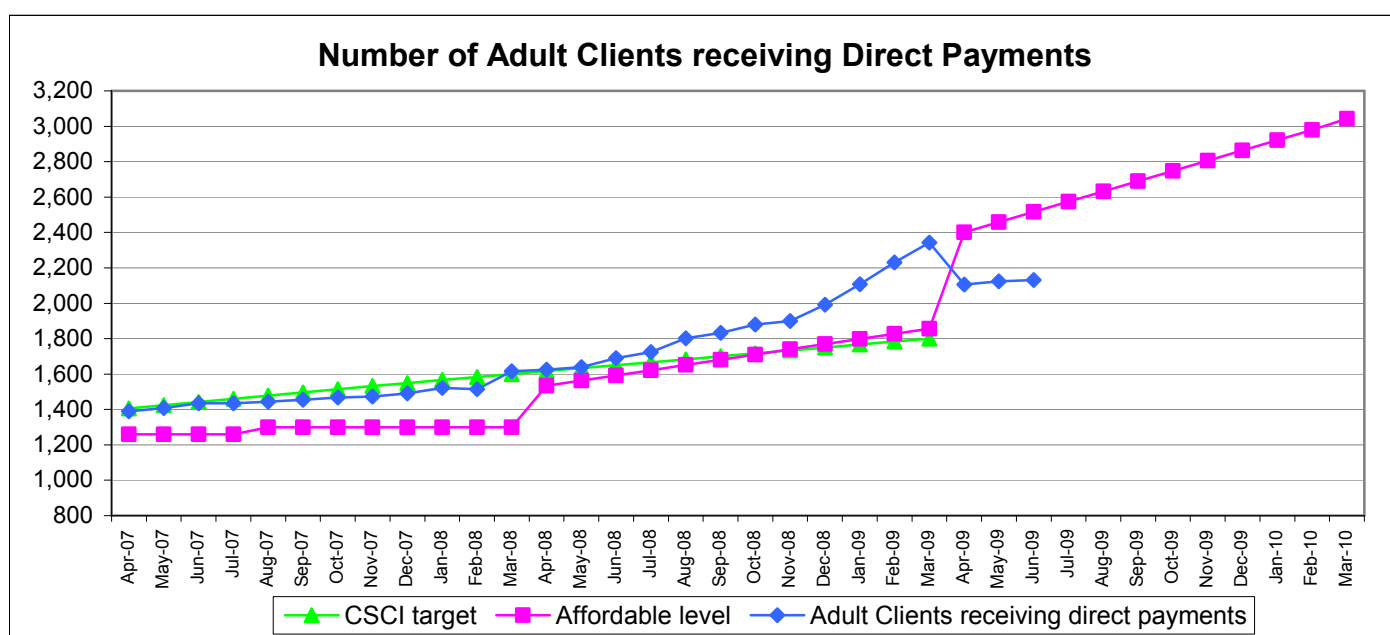


### Comments:

- The forecast unit cost of £577.33 is higher than the affordable cost of £544.31 and this difference of £33.02 adds £554k to the position 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:

	2007-08			2008-09			2009-10	
	CSCI Target	Affordable Level	Adult Clients receiving Direct Payments	CSCI Target	Affordable Level	Adult Clients receiving Direct Payments	Affordable Level	Adult Clients receiving Direct Payments
April	1,406	1,259	1,390	1,617	1,535	1,625	2,400	2,106
May	1,424	1,259	1,407	1,634	1,564	1,639	2,458	2,124
June	1,442	1,259	1,434	1,650	1,593	1,689	2,516	2,131
July	1,460	1,259	1,434	1,667	1,622	1,725	2,574	
August	1,478	1,299	1,444	1,683	1,651	1,802	2,632	
September	1,496	1,299	1,454	1,700	1,681	1,832	2,690	
October	1,514	1,299	1,467	1,717	1,710	1,880	2,748	
November	1,532	1,299	1,472	1,734	1,740	1,899	2,806	
December	1,549	1,299	1,491	1,750	1,769	1,991	2,864	
January	1,566	1,299	1,522	1,767	1,799	2,108	2,922	
February	1,583	1,299	1,515	1,783	1,828	2,231	2,980	
March	1,600	1,299	1,615	1,800	1,857	2,342	3,042	



## Comments:

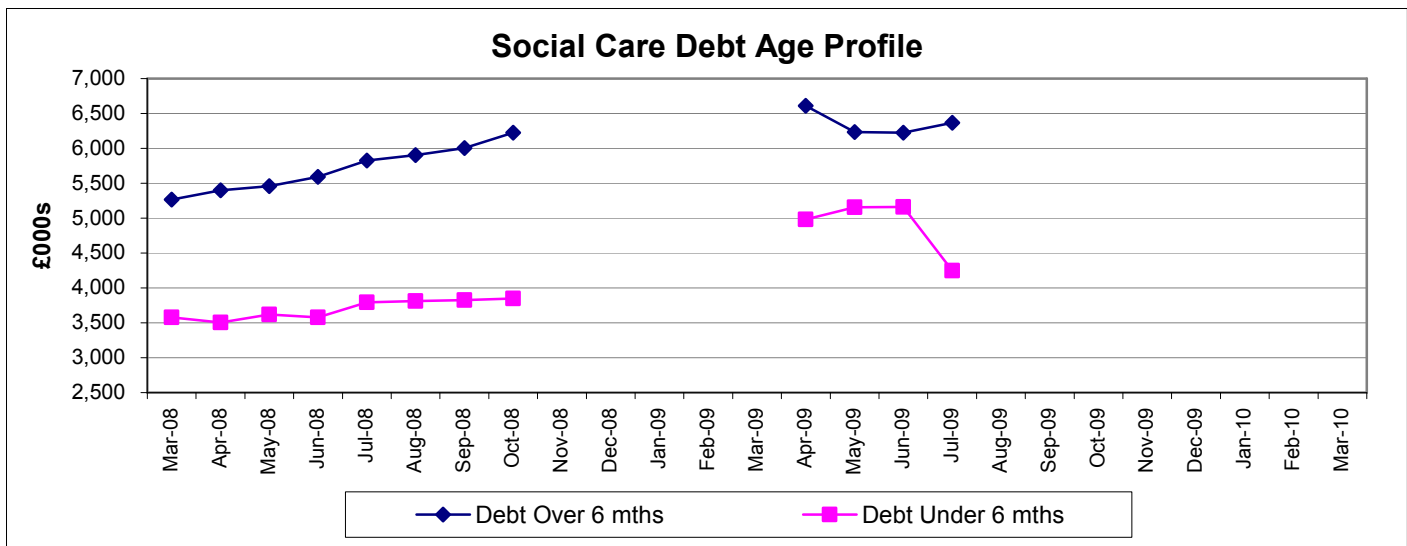
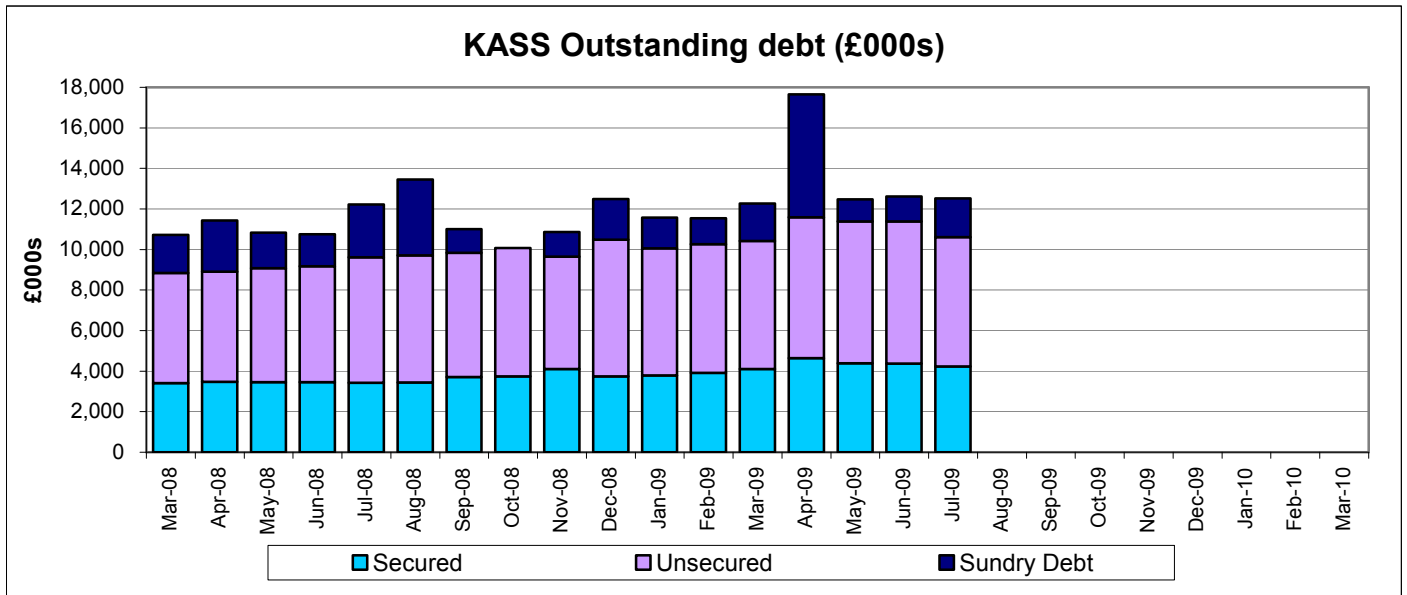
- From April 2008, the national measure for direct payments counted the permanent placements and the number of one-off payments within the year. The position reported for March 2009 represented the total activity for 2008-09 ie of the 2,342 adult clients reported as receiving a direct payment, 2,055 were in receipt of ongoing payments and 287 were clients that had received one-off payments at some point throughout the year. From April 2009, we are again counting the permanent placements and any one-off placements since April. However, this will not be directly comparable with the March 2009 position as we currently have only three months worth of one-off payments in the 2009-10 data compared to 12 months worth included in the March 2009 figure, and therefore it will appear lower. For purposes of comparison, the ongoing placements as at March were 2,055, as at June this had increased to 2,065.
- From 2009-10, we no longer have a CSCI target for direct payments.

### 3. KASS OUTSTANDING DEBT

The outstanding debt as at July was £13.9m excluding any amounts not yet due for payment (as they are still within the 28 day payment term allowed). Within this is £12.0m relating to Social Care (client) debt and 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.

Debt Month	Total Due Debt (Social Care & Sundry Debt) £000	Sundry Debt £000	Social Care Debt				
			Total Social Care Due Debt £000	Debt Over 6 mths £000	Debt Under 6 mths £000	Secured £000	Unsecured £000
Mar-08	10,727	1,882	8,845	5,268	3,577	3,410	5,435
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	0						
Sep-09	0						
Oct-09	0						
Nov-09	0						
Dec-09	0						
Jan-10	0						
Feb-10	0						
Mar-10	0						

\* 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).