# **North Somerset Council**

REPORT TO THE ADULT SERVICES AND HOUSING POLICY AND SCRUTINY PANEL

**DATE OF MEETING: 7 JULY 2022** 

SUBJECT OF REPORT: ADULT SOCIAL CARE FINANCE UPDATE

**TOWN OR PARISH: ALL** 

OFFICER/MEMBER PRESENTING: PRINICPAL ACCOUNTANT (ADULTS)

**KEY DECISION: NO** 

#### **RECOMMENDATIONS**

i. That the Panel notes the final net outturn for 21-22 spend against budget for adult services, the risks and opportunities associated with the medium-term financial position and the updates in relation to the financial aspects of the planned social care reforms and the planned investment to support the hospital discharge pathway.

#### 1. SUMMARY OF REPORT

- 1.1 This report summarises and discusses the current forecast spend against budget for adult services, highlighting key variances, movements, and contextual information.
- 1.2 The year-end position for Adult Social Services Directorate is a £0.349m net adverse variance (0.5% of the net budget).
- 1.3 In summary, the projected adverse variance is mainly associated with individual care and support packages £2.221m. However, there are mitigating underspends in other areas of the Directorate, notably in Commissioning (£1.251m) and Housing (648k), which reduce the overspend to the £0.349m quoted above. For 2022/23, one of the key actions will be to determine the extent to which these mitigating underspends can be sustained.
- 1.4 The 2022/23 budget includes £9.3m of additional spending plans in the adult social care budget, predominantly to provide funding for cost inflation, demographic growth and to close the current shortfall between budget and the demand for services. Much of this is not funded by central government and it is worth noting that the funding announcements in relation to the reform of social care do not address these issues. The draft budget also includes £1.4m of planned savings.

#### 2. POLICY

2.1 The Council's budget monitoring is an integral feature of its overall financial processes, ensuring that resources are planned, aligned, and managed effectively to achieve successful delivery of its aims and objectives. The 2021/22 revenue and capital budgets have been set within the context of the council's medium-term financial planning process, which support the adopted Corporate Plan 2020 to 2024.

#### 3. **DETAILS**

## **Budget Monitor**

3.1 The current overall year end position for Adult Social Care and Housing Directorate is £0.349m net adverse variance (0.5% of the net budget). In summary, the projected overspend is mainly associated with individual care packages and support and reflects an increase in acuity and complexity, partly associated with the impacts of the pandemic, but also associated with people living longer with more complex needs.

The table below illustrates the forecast spend compared with the budget split by high level service area.

					APPENDIX 2
FINANCIAL OVERVIEW OF THE	ADULTS SOCIAL SERV	ICES DIREC	TORATE		
AS AT 3	st March 2022 (P12)				
Directorate Summary					
•	Original	Virements	Revised	Projected	Projected Out-
	Budget		Budget	Out-turn	turn Variance
	2021/22		2021/22	2021/22	
	£000	£000	£000	£000	£000
- Gross Expenditure	105,411	8,080	113,490	112,821	(669)
- Income	(37,544)	(7,742)	(45,287)	(53,135)	(7,848)
- Transfers to / from Reserves	38	(287)	(248)	8,618	8,867
= Directorate Totals	67,905	51	67,955	68,305	349
		Proje	ected Out-tu	ırn Variance	0.51%
- Individual Care and Support Packages	63,327	0	63,327	65,547	2,221
- Assistive Equipment & Technology	420	0	420	418	(2)
- Information & Early Intervention	703	0	703	637	(66)
- Social Care Activities	8,122	322	8,444	8,525	81
- Covid Related Support	0	0	0	15	15
- Commissioning & Service Delivery Strategy	(5,670)	(294)	(5,963)	(7,215)	(1,252)
- Housing Services	1,004	22	1,026	378	(648)
= Directorate Totals	67,905	51	67,955	68,305	349

- 3.2 The extended narrative in relation to the key area of variance (Individual Care and Support Packages) is given in Appendix 1 and a summary of the issues is described below
  - 3.2.1 The main drivers of the overspend relate to increased complexity and package size, rather than increased numbers of long-term care packages. Indeed, the average number of long-term care packages was 4.2% lower than in 2021/22, with a continuation in the shift from residential care to more care in the community. The one material area where package numbers have increased is in supported living (from an average of 240 in 2019/20 and 263 in 2020/21 to an average of 281 in 2021/22); this

is an expected rise, which is particularly associated with bringing forward new schemes as a more cost-effective alternative to residential placements, predominantly to support the increasing number of younger adults with learning difficulties.

- 3.2.2 Increases in package size likely reflect deterioration and deconditioning (partly due to delays in elective surgery and other treatments and lock-down or isolation), earlier hospital discharge, increases in mental health support needs and family / carer breakdown. In overall terms, the average weekly unit cost of a long-term care package increased by c. 7% in 2021/22, with only around 2% of that reflecting price inflation as opposed to package size.
- 3.2.3 In addition, we have seen falls in levels of client income, especially in residential care; this is due to a change in the mix of care (client contributions cannot increase beyond the maximum charge even when the package size increases), a reduction in income from property debt and an increase in debt write off and provision for credit losses.
- 3.2.4 Finally, there have been increases in the number of short-term residential and nursing placements, which may reflect changes in hospital discharge processes, increased respite or rehabilitation use, a lack of capacity to secure long-term placements, and breakdown in carers' arrangements.
- 3.3 The final outturn also includes income from our NHS partners in the form of £5.821m s256 agreement for integrated care working tackling wider risks in the wider Health and Care system. Further income of £2.472m was also received for 'Healthier Together Match Funding'.
- 3.4 As the above funding is towards schemes that will occur in 2022/23 the funding was carried forward into earmarked reserves.
- 3.5 The table overleaf illustrates the spend compared with the budget with key variances against revised budget shown split by service area.

Extract showing material variances compared to the revised budget			
Service area and projected budget variance	Revised Budget 2021/22	Out-turn	Projected Out- turn Variance
	£000	£000	£000
- Individual Care and Support Packages  Expenditure - Long Term Care Packages (residential)	48,622	45,277	(3,345)
Client Income - Long Term Care Packages (residential)	(14,492)	(10,352)	4,140
Expenditure - Long Term Care Packages (non-residential)	32,913		1,402
Client Income - Long Term Care Packages (non-residential)  Expenditure - Short Term Care Packages	(4,379) 4,079	,	360 1,147
Client Income - Short Term Care Packages	(295)	(215)	80
Other income (including CCG contributions)	(2,983)	(4,569)	(1,585)
Other	(139)	(117)	22
Social Care Activities			
- Social Care Activities	484	516	22
DOLS, IMHA & Safeguarding (Including additional staffing resources)  Social Care Locality Teams	3,219		32 <sub>(51)</sub>
LD & MH Teams	2,835		108
Community Meals	(21)	110	131
Discharge & Reablement Therapy Teams	240	53	(187)
Single Point of Access (including additional staffing resources)	1,080	1,082	2
- Commissioning & Service Delivery Strategy			
Suppporting People Commissioning	1,581	1,346	(235)
Court of Protection - additional income	87	39	(48)
Brokerage & Personalisation Team - vacancies	378	293	(85)
Contracts & Commissioning - vacancies	366		(118)
Grants and NHS Health Contributions	(9,483)	(10,215)	(732)
Finance Fees & Interest Earned	0	` '	(48)
Blue Badge Admin Costs & Fees Earned	17 216	(29) 88	(46)
Property & Rechargable Support Costs IT costs	112		(128) 59
	''-		
- Covid Related Support			
Infection Control and Testing Grant - Payment to Providers	5,659	5,854	195
Infection Control and Testing Grant - Gvt Grant	(5,659)	(5,839)	(180)
Covid Recovery Fund - Payments to Providers	304	304	0
Covid Recovery Fund - Funding from Reserves Workforce Recruitment and Capacity Fund - Payment to Providers	(304) 1,781	(304) 1,798	0 17
Workforce Recruitment and Capacity Fund - Government Grant	(1,781)		(17)
	(1,1-1)	(1,100)	( /
- Integrated Care Funding			
s256 Agreement income from NHS	0	(-,)	
s256 Agreement income from NHS - HT Match Funding	0	(2,472)	(2,472)
-Transfer to Earmarked Reserves			
Appropriation to Earmarked Reserves -s256 Agreement	0	5,821	5,821
Appropriation to Earmarked Reserves - HT Match Funding	o	,	2,472
- Housing Services			
Housing Solutions - Homeless Prevention Additional Grant Refinancing (Costs offset)	(8)	(291)	(283)
Housing Solutions - Rough Sleepers Additional Grant (Costs offset)	0	( /	(290)
Housing Solutions - Refinancing of Prevention Costs (Cost offset) Housing Solutions - Operation Teams Vacancies	58 528	` ,	(100) (52)
Trousing Columns - Operation reality vacancies	320	470	(32)
- Housing Regulatory Services & Other			
Gypsy & Traveller Site Contract & Pitch Fees Collection	(19)	10	29
Sheltered Leasehold Sales Administration & Income Fees	(83)	, ,	18
Private Rented Housing & HMO Licensing	252		60
Housing Renewals & Private Sector Schemes	164	174	10
Sub total - material budget variances			282
Other minor variations to the budget			67
= Directorate Total			349

#### **Risks**

- 3.6 In broad terms, the Covid-19 pandemic has served to heighten several risks in the adult social care budget, the key ones being:
  - Supressed demand for and expenditure on, services in 2020/21 and 2021/22 due to CCG funding of hospital discharge cases.
  - Potential increased demand for support, to reflect long wait times for elective surgery, waiting lists for social care and OT assessments, deterioration and deconditioning, and the potential impacts of Long Covid, as well as likely increases in demand for mental health, carers and safeguarding.
  - Increased costs in, and financial stability of, the care market generally.
  - The extent to which the market can respond to significant rise in covid, or new outbreaks of variants.
  - The extent to which funding will be provided for future increases in cost and demand, particularly given the increase in the National Living Wage, the new Health and Social Care Levy and other inflationary pressures on providers.
  - The extent to which the additional costs and lost income in relation to the recently announced Social Care Funding Reforms will be fully funded by Government as promised.
  - Capacity to deliver transformation and MTFP savings.
- 3.7 Inflationary pressures from cost-of-living wage, will impact on demand for services, service provision and internal cost pressures within the council. Higher inflation for fuel, energy, food, employers NI will impact community meals and other service provision such as homecare.
- 3.8 Addressing the changing requirements in relation to hospital discharge will be supported by a new business case for Discharge to Access, which prioritises rehabilitation and reablement in the community. This work is in partnership with Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group will include an annual investment of £1.7m.
- 3.9 Progression on Social Care reforms will start towards a "Fair Price for Care" model and adoption based on the results. This is supported by the £626k Grant allocation for "Market Sustainability and Fair Cost of Care".
- 3.10 A key element of the funding reforms is to ensure that Self-funders can ask their Local Authority to arrange their care for them so that they can find better value care; and it is accepted that this will have the impact of driving up prices and ensuring that local authorities pay the "fair cost of care".

#### 4. CONSULTATION

Not applicable

## 5. FINANCIAL IMPLICATIONS

Financial implications are contained throughout the report.

#### 6. LEGAL POWERS & IMPLICATIONS

6.1 The Local Government Act 1972 lays down the fundamental principle by providing that every local authority shall make arrangements for the proper administration of their financial affairs, although further details and requirements are contained within related legislation. The setting of the council's budget for the forthcoming year, and the ongoing arrangements for monitoring all aspects of this, is an integral part of the financial administration process.

#### 7. CLIMATE CHANGE & ENVIRONMENTAL IMPLICATIONS

7.1 Adult Social Services is developing a Carbon Literacy and Climate Action Plan of which investment in TEC and other means of prevention and early intervention, will be critical to reducing the size and number of care packages/visits and therefore reducing carbon footprint.

## 8. RISK MANAGEMENT

8.1 See paragraph 3.19

## 9. EQUALITY IMPLICATIONS

9.1 Not applicable to this report directly. The 2021/22 revenue budget incorporates savings approved by Members in February 2021, all of which are supported by an equality impact assessment (EIA). These EIAs have been subject to consultation and discussion with a wide range of stakeholder groups to ensure all risks have been identified and understood; the same is true for 2022/23 savings. In addition, the main growth areas were also discussed with the Equality Stakeholder Group.

## 10. CORPORATE IMPLICATIONS

10.1 There are currently no specific corporate implications within the report.

# 11. OPTIONS CONSIDERED

# 11.1 Not applicable

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## APPENDIX 1 - NARRATIVE IN RELATION TO CARE AND SUPPORT PACKAGES

## **Key Variances**

## **Individual Care and Support Packages**

The predominant area of spend that exceeds budget relates to individual care and support packages, which is £2.221m. Whilst this excess demand is not tagged as directly related to Covid in our corporate monitoring, it is undoubtedly true that the changes in patterns of demand for, and take-up of services as described below, have Covid as their predominant causal factor.

## Overall Income and Expenditure Trends

end on care and support packages was c. £1.9m in excess of budget in 2020/21 and this gap was narrowed with £500k of budget growth for 2021/22; as a result, all other things being equal, we essentially began the financial year with an underlying demand gap against the budget of c. £1.4m, although clearly the position is much more complex than that.

Our gross expenditure on care packages for 2021/22 was just 3.9% more than in 2020/21. Given we passed on an average of around 2% in inflation to providers, this represents an increase in costs of less than 2% that materialised through a growth in care package numbers or size (although there is some anecdotal evidence that there are some rate increases outside of the main inflation provision, driven by availability of supply, which would make the demandled rise even smaller).

2021/22 saw client income levels fall by 4.3%. This was mostly driven by a large fall in income from residential placements (13%) due to a change in the mix of care, a reduction in income from property debt and an increase in debt write off and provision for credit losses. Income from non-residential placements increased by 32%, predominantly drive by the completion a programme of reviews to ensure that financial assessments are using up to date information. In addition, contributions from the NHS and other bodies have increased by 43%.

Details of all these trends are shown in Appendix 2.

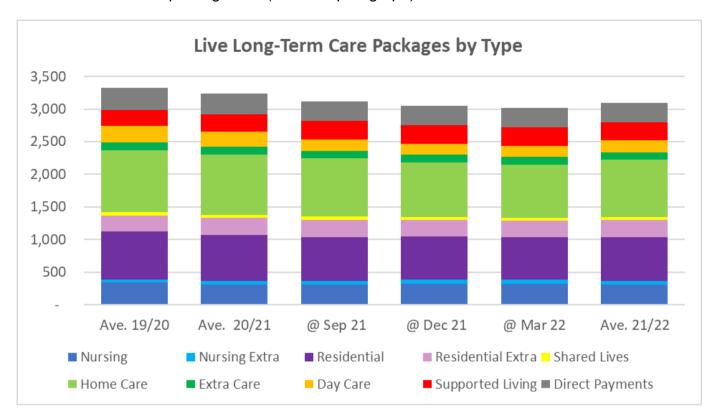
This means that the increase in total net spend from 2020/21 to 2021/22 was 3.6% (or £2.3m), which likely represents around 1.6% after accounting for price inflation.

	2019/20	2020/21	2021/22	2021/22	2021/	22
	Outturn	Outturn	Budget	Outturn	Change fr	om PY
Gross spend	80,276,370	82,235,155	86,058,509	85,455,607	3,220,452	3.9%
Client income	(16,283,001)	(15,238,747)	(19,167,404)	(14,584,456)	654,291	-4.3%
Other contributions	(3,975,908)	(3,718,816)	(3,564,600)	(5,323,988)	(1,605,172)	43.2%
Net spend	60,017,461	63,277,592	63,326,505	65,547,163	2,269,570	3.6%

In many ways, this is good news and is, in part, being delivered by mitigating demand and preventing escalation through the work of the Single Point of Access, Occupational Therapy clinics, reablement and TEC Services, the Wellness Services and creative solutions being offered by the locality assessment teams. However, some of the suppression of demand is unfortunately and inadvertently achieved through assessment waiting lists and lack of capacity in the care market, and eventually this demand is likely to materialise in the form of care packages (and potentially at higher levels than they would otherwise have been).

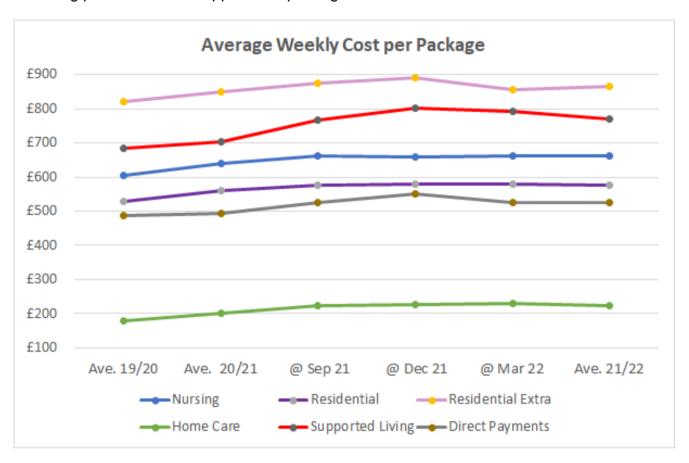
## Number of Care Packages

Where we are seeing cost increases beyond just price inflation, this is not generally because the number of packages is increasing; in fact, the average live long-term packages for 2021/22 are 4.2% lower than they were on average last year (3,098 compared with 3,234). Rather, increases relate to increases in package size (see next paragraph).



## Average Unit Costs of Packages

As the numbers of packages are falling, any cost increases are largely being driven by an increase in package size, and this is particularly evident in home care, supported living and direct payments, where the average unit costs have increased by 11%, 8% and 7% respectively in the last year. This is likely reflective of increased complexity and need driven by factors such as deterioration and de-conditioning (partly due to delays in elective surgery and other treatment, and lock-down / isolation), earlier hospital discharge, increases in mental health support needs, and family / carer breakdown. In overall terms, the average weekly unit cost of a long-term care package has increased by c. 7% in the last year, with only around 2% of that reflecting price inflation as opposed to package size.



#### Other Factors

## Supported Living

The one material area where package numbers are increasing is in supported living (from an average of 240 in 2019/20 and 263 in 2020/21 to an average of 281 in 2021/22; this is an expected rise, which is particularly associated with bringing forward new schemes as a more cost-effective alternative to residential placements and to support transitions from children's services.

## **Short-term Care**

In addition, there are increases in the number of short-term residential and nursing placements, which may reflect changes in hospital discharge processes, increased respite or rehabilitation use and capacity to secure long-term placements, but more work needs to be done in this area to fully understand the changes. Anecdotally, we are seeing more short-term placements due to pressures facing carers, with more emergency placements due to breakdown in carers care arrangements.

The table below shows that short-term care weeks in 21/22 exceeded 5,500 weeks, while this is still much lower than levels in 2019/20, the unit cost for complexity and emergency arrangements is higher at £573 on average compared to £384 in 2019/20.

When compared to 2020/21 the average unit cost has increased since in 2021/22 to £573 from £538, yet the care weeks is much higher at 5,546 care weeks compared to 4,732 in 2020/21.

In addition to this, the cost of existing and new educational placements is again higher in this year with outturn at £1.43 million compared to £0.94 million in 20/21.

#### **Short Term Spot Purchase Analysis on Controcc**

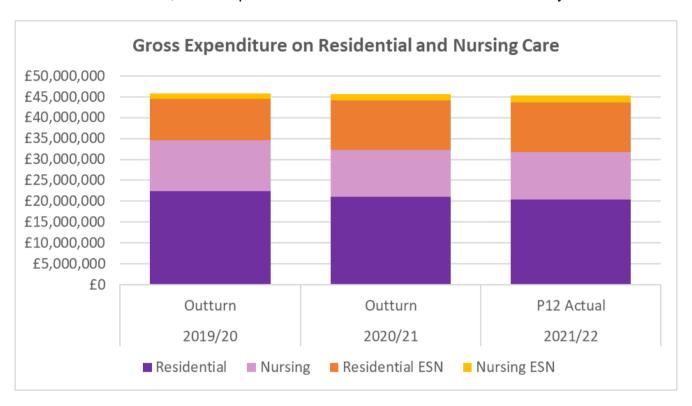
		2019/20	2020/21	2021/22	4 weekly Average	4 weekly Average	4 weekly Average
SubDetailCode	SubDetail			Care Weeks	2019/20	2020/21	2021/22
CST01	Nursing Enablement	574	116	665	44	9	51
CST05	Residential Enablement	867	155	616	67	12	47
CST11	Nursing Short Term	1,626	1,053	1,422	125	81	109
CST15	Residential Short Term	3,487	2,249	2,338	268	173	180
CST20	Reablement	864	1,159	505	66	89	39
Grand Total		7,418	4,732	5,546	571	364	427

		2019/20 Unit			2020/21 2020/21 Unit		2019/20		2020/21		2021/22 4		
		Cost Per			Unit Cost Cost Per		4 Weekly		4 Weekly		Weekly Ave		
SubDetailCode	SubDetail		Week	ı	Per Week		Week		Ave Cost	4	ve Cost		Cost
CST01	Nursing Enablement	£	482	£	638	£	665	£	21,291	£	5,697	£	33,984
CST05	Residential Enablement	£	428	£	535	£	566	£	28,560	£	6,393	£	26,824
CST11	Nursing Short Term	£	431	£	628	£	687	£	53,967	£	50,867	£	75,167
CST15	Residential Short Term	£	384	£	555	£	550		£102,898	£	91,652	£	98,871
CST20	Reablement	£	185	£	271	£	243	£	12,271	£	11,151	£	9,427
<b>Grand Total</b>		£	384	£	538	£	573		£218,986	£	165,710	£	244,273

## **Exceptional Special Needs**

Finally, it is worth noting that the increase in demand for residential and nursing placements with Exceptional Special Needs (ESN) which we experienced in 2020/21, has not reduced and, as a result, additional spend in this area continues to offset reductions in basic residential placements. The increased number of ESN packages may suggest higher commissioning costs, a difficulty in moving clients from CCG commissioned hospital discharge beds and / or increasing complexity of people's care needs as described above. It is now true to say that ESN represents 30% of total spend on residential and nursing care, compared with 24% in 2019/20.

In addition, the proportion of residential and nursing care costs that are recovered through client contributions are much lower for packages with ESN (due to clients reaching their maximum charge). Client income recovery rates have fallen from 28.3% in 2019/20, to 26.0% in 2020/21, and 22.9% in 2021/22, which represents a loss of income of c. £2.4m over 2 years.



## Demand at the Single Point of Access

By way of illustration of the demand pressures that are being managed, it is worth noting that contacts to the Council's Single Point of Access have risen by 24% when compared with the same period in 2019/20 as illustrated below.

	Contacts in th	e Single Point oril to March)	of Access
	2019/20	2020/21	2021/22
SPA Contacts	15,713	16,323	19,554
			24%

## **Other Budget Variances**

The main area of mitigating underspends is in <u>Commissioning and Service Delivery</u> and the main areas that make up the £1.237m positive variance - included supplies cost savings, additional income, and staff vacancy management savings. It is important to note that many of these mitigating underspends are one-off and, as such, may not be available for use in 2022/23 to mitigate the potential overspends in care and support packages. A thorough review will be undertaken during the early months of 2022/23 to establish where budgets may be able to be realigned to bolster those that are needed to support the costs of care packages.

## **Specific Covid-related budget impacts**

The revised budget includes an increase of c. £8m in costs and grant income from the original budget to reflect receipt of further rounds of the Infection Control and Testing Fund Grant, Workforce Recruitment and Retention Fund and Omicron Support Fund from Government, all of which have been distributed to care providers across North Somerset in accordance with the grant conditions. Covid Support also continues as part of the agreed recovery plan for care providers with £1.53m available. To date we have paid £200k for nursing care home premiums, £100k for insurance premiums, with other assistance due in relation to sustainability and innovation bids.

The overall payments made to providers since the start of the pandemic are as follows:

Type of Support	Year	TOTAL
Temporary Fee Uplifts	2020/21	£2,077,720
Infection Control Fund (Jun 20 - Sept 20)	2020/21	£3,860,635
Infection Control Fund (Oct 20 - Mar 21)	2020/21	£3,053,662
Rapid Testing Fund (Jan 21 - Mar 21)	2020/21	£982,246
Workforce Capacity Fund (Jan 21 - Mar 21	2020/21	£424,939
Infection Control Fund (Apr 21 - Jun 21)	2021/22	£1,181,680
Rapid Testing Fund (Apr 21 - Jun 21)	2021/22	£750,117
Nursing support 2021	2021/22	£200,000
Infection Control Fund (Jul 21 - Sep 21)	2021/22	£836,901
Testing Fund (Jul 21 - Sep 21)	2021/22	£623,018
Insurance support 2021	2021/22	£103,598
Infection Control and Vaccine Fund (Oct 21 - Mar 22)	2021/22	£1,489,219
Testing Fund (Oct 21 - Mar 22)	2021/22	£727,446
Workforce Recruitment & Retention Fund Round 1 (Oct 21 - Mar 22)	2021/22	£512,907
Workforce Recruitment & Retention Fund Round 2 (Dec 21 - Mar 22)	2021/22	£1,154,932
Omicron Support Grant	2021/22	£230,986
TOTAL		£18,210,007

Appendix 2 – Detailed Analysis of Expenditure and Income Forecast for Individual Packages of Care & Support

	2019/20	2020/21	2021/22	2021/22	2021,	/22	2021	/22
	Outturn	Outturn	Revised Budget	P12 Actual	Change fr	om PY	Variance fro	m budget
<u>Expenditure</u>								
Nursing	12,312,381	11,297,314	12,568,442	11,241,753	(55,562)	-0.5%	(1,326,690)	(10.6%)
Nursing ESN	1,277,316	1,641,031	1,668,500	1,728,176	87,145	5.3%	59,676	3.6%
Residential	22,315,815	20,979,629	22,814,385	20,459,192	(520,437)	-2.5%	(2,355,193)	(10.3%)
Residential ESN	9,853,644	11,792,743	11,570,859	11,848,126	55,383	0.5%	277,267	2.4%
Shared Lives	1,343,321	1,627,656	1,573,489	1,686,194	58,538	3.6%	112,705	7.2%
Homecare	7,664,954	8,968,914	8,517,666	9,340,179	371,265	4.1%	822,513	9.7%
Extra Care	1,598,083	1,712,432	1,890,083	1,602,612	(109,820)	-6.4%	(287,471)	(15.2%)
Daycare	1,492,815	1,495,512	1,581,801	1,330,715	(164,797)	-11.0%	(251,086)	(15.9%)
Supported Living	10,030,136	11,366,867	11,173,879	12,857,390	1,490,523	13.1%	1,683,511	15.1%
Direct Payments	8,093,138	7,729,415	8,108,039	7,416,395	(313,021)	-4.0%	(691,644)	(8.5%)
DPs Carers	29,427	7,295	70,340	31,636	24,341	333.7%	(38,704)	(55.0%)
Sub-total Long-Term	76,011,030	78,618,809	81,537,483	79,542,366	923,557	1.2%	(1,995,117)	(2.4%)
Enablement Nursing	279,388	57,178	261,445	411,730	354,552	620.1%	150,285	57.5%
Enablement Res	377,362	61,242	379,873	308,108	246,866	403.1%	(71,765)	(18.9%)
ST Nursing	652,723	858,075	834,971	1,522,904	664,829	77.5%	687,933	82.4%
ST Residential	2,093,425	2,009,944	2,410,533	2,716,947	707,003	35.2%	306,414	12.7%
Reablement	112,970	108,767	191,865	265,862	157,095	144.4%	73,997	38.6%
Sub-total Short-Term	3,515,868	3,095,206	4,078,687	5,225,551	2,130,345	68.8%	1,146,864	28.1%
Various Other CIC Expd	749,472	521,141	442,339	687,690	166,549	32.0%	245,351	55.5%
Income								
Daycare	(164,556)	(32,009)	(220,717)	(104,674)	(72,665)	227.0%	116,043	(52.6%)
Direct Payments	(573,810)	(389,961)	(754,688)	(714,951)	(324,990)	83.3%	39,737	(5.3%)
Extra Care	(322,391)	(351,391)	(508,701)	(380,133)	(28,742)	8.2%	128,568	(25.3%)
Homecare	(1,432,620)	(1,549,146)	(2,057,761)	(2,044,276)	(495,130)	32.0%	13,485	(0.7%)
Nursing	(4,663,446)	(4,076,181)	(5,044,898)	(3,084,340)	991,841	-24.3%	1,960,558	(38.9%)
Residential	(8,268,335)	(7,812,866)	(9,449,130)	(7,267,349)	545,517	-7.0%	2,181,781	(23.1%)
Shared Lives	(212,098)	(249,574)	(289,063)	(178,074)	71,500	-28.6%	110,989	(38.4%)
Supported Living	(436,617)	(469,663)	(547,806)	(595,979)	(126,316)	26.9%	(48,173)	8.8%
ST Nursing	(83,926)	(127,089)	(139,960)	(79,513)	47,576	-37.4%	60,447	(43.2%)
ST Residential	(125,202)	(180,867)	(154,680)	(135,168)	45,699	-25.3%	19,512	(12.6%)
Sub-total client income	(16,283,001)	(15,238,747)	(19,167,404)	(14,584,456)	654,291	-4.3%	4,582,948	(23.9%)
Contributions LA	(21,862)	0	0	(1,709)	(1,709)	0.0%	(1,709)	0.0%
NHS Cont Residential	(1,999,705)	(2,019,758)	(1,779,570)	(2,348,176)	(328,418)	16.3%	(568,606)	32.0%
Contributions Nursing	(207,043)	(295,899)	(344,640)	(454,449)	(158,550)	53.6%	(109,809)	31.9%
Contributions DPs	(111,210)	(163,277)	(204,655)	(182,819)	(19,542)	12.0%	21,836	(10.7%)
Contributions General	(809,126)	(718,741)	(654,415)	(955,738)	(236,997)	33.0%	(301,323)	46.0%
Contributions Other	(70,666)	0	0	(181,404)	(181,404)	0.0%	(181,404)	0.0%
Sub-total other income	(3,219,612)	(3,197,675)	(2,983,280)	(4,124,296)	(926,621)	29.0%	(1,141,016)	38.2%
Various Other CIC Inc	(756,296)	(521,141)	(581,320)	(1,199,693)	(678,552)	130.2%	(618,373)	106.4%
Gross spend	80,276,370	82,235,155	86,058,509	85,455,607	3,220,452	3.9%	(602,902)	(0.7%)
Client income	(16,283,001)	(15,238,747)	(19,167,404)	(14,584,456)	654,291	-4.3%	4,582,948	(23.9%)
Other contributions	(3,975,908)	(3,718,816)	(3,564,600)	(5,323,988)	(1,605,172)	43.2%	(1,759,388)	49.4%
Net spend	60,017,461	63,277,592	63,326,505	65,547,163	2,269,570	3.6%	2,220,658	3.5%

# Appendix 3 – Quarterly Activity and Unit Cost Data 2019/20 – 2021/22

# Activity

Provision Type		2 years ago	1 year ago	6 month	3 month	2month	1 month	current	YTD			
Long Term Care		Ave. 19/20	Ave. 20/21	@ Sep 21	@ Dec 21	@ Jan 22	@ Feb 22	@ Mar 22	Ave. 21/22 Trend Line (1Y)	Current	1Y Change Cha	nge Change
Nursing	CLT01	341	308	304	320	297	300	319	306	319	9 - 2 🌵	-1%
Nursing Extra	CLT02	51	55	62	63	62	65	72	61	7:	2 6 🏚	11%
Residential	CLT05	736	705	675	662	648	649	640	669	64	0 - 36 🏺	-5%
Residential Extra	CLT06	243	263	262	254	259	262	259_	260_	259	9 - 3 🌵	-1%
Shared Lives	CLT10	48	47	47	48	49	50	48	48	4	8 1 🏚	2%
Home Care	CLT20	949	924	891	832	819	803	807	875	80	7 - 48 🌵	-5%
Extra Care	CLT25	123	125	116	118	118	120	119	120	119	9 - 5 🌵	-4%
Day Care	CLT30	256	226	179	171	171	170	169	178	169	9 - 47 🌵	-21%
Supported Living	CLT40	240	263	281	284	284	289	289	281	289	9 18 🧌	7%
Direct Payment	VAA01	333	319	303	301	303	297	296	300	. 29	5 - 19 🌵	-6%
<b>Total Long Term Care</b>		3,321	3,234	3,120	3,053	3,010	3,005	3,018	3,098			
Short term Care		Ave. 19/20	Ave. 20/21	@ Sep 21	@ Dec 21	@ Jan 22	@ Feb 22	@ Mar 22	Ave. 21/22 Trend Line (1Y)	Current	1Y Change Cha	nge Change
<b>Enablement - Nursing</b>	CST01	10	2	11	15	16	16	21	13	2	1 11 🏚	480%
Enablement - Residentia	l CST05	14	3	11	12	18	20	17	14	1	7 12 🏚	455%
Short term - Nursing	CST11	18	19	21	34	27	25	31	24	3:	1 5 🏚	28%
Short term - Residential	CST15	43	35	43	50	53	46	44	40	4.	4 5 🏚	15%
Reablement	CST20	15	12	12	10	9	7	7	11	,	7 - 1 🌵	-8%
<b>Total Short Term Care</b>		100	70	98	121	123	114	120	103			
TOTAL		3,421	3,304	3,218	3,174	3,133	3,119	3,138	3,201			

## **Unit Cost Data**

Provision Type		2 years ago	1 year ago 6 r	month 3 month	2month 1 month	current	YTD		_
Long Term Care		_ Ave. 19/20	Ave. 20/21 @	Sep 21 @ Dec 21	@ Jan 22 @ Feb 22	@ Mar 22	Ave. 21/22 Trend Line (1Y)	Current 1Y Change Change Chang	зe
Nursing	CLT01	£ 603.75	£ 640.31 £ 6	663.16 £ 659.63	£ 664.94 £ 664.82	£ 662.50	£ 663.41	£663 £ 23.10 👚 4	%
Nursing Extra	CLT02	£ 464.92		491.53 £ 450.70	£ 492.86 £ 521.17	£ 485.49	£ 503.18	£485 -£ 47.93 🖐 -9	%
Residential	CLT05	£ 528.54		577.24 £ 578.20	£ 580.23 £ 579.75	£ 580.84	£ 577.53	£581 £ 18.21 👚 3'	8%
Residential Extra	CLT06	£ 820.73	E 850.80 £ 8	876.04 £ 889.49	£ 874.94 £ 853.04	£ 855.88	£ 864.74	£856 £ 13.94 👚 2'	2%
Shared Lives	CLT10	£ 445.84	£ 503.82 £ 5	503.11 £ 504.54	£ 509.66 £ 497.87	£ 497.14	£ 503.64	£497 -£ 0.18 🖐 0'	)%
Home Care	CLT20	£ 178.98		222.53 £ 226.98	£ 228.74 £ 226.32	£ 228.31	£ 224.21	£228 £ 23.93 🛖 12	.%
Extra Care	CLT25	£ 239.65		249.35 £ 254.09	£ 247.19 £ 242.50	£ 236.10	£ 245.81	£236 £ 3.15 🛖 1	.%
Day Care	CLT30	£ 135.21		150.58 £ 153.13	£ 162.08 £ 157.78	£ 167.76	f 153.32	£168 £ 9.08 🛖 6	5%
Supported Living	CLT40	£ 684.26		768.04 £ 802.41	£ 812.84 £ 811.55	£ 791.70	£ 770.62	£792 £ 68.79 🛖 10	%
Direct Payment	VAA01	£ 487.35	£ 495.12 £ 5	524.29 £ 550.56	£ 520.20 £ 519.91	£ 524.46	£ 525.91	£524 £ 30.78 🛖 6	5%
Ave. Long Term Care		£ 421.60	£ 451.32 £ 4	481.96 £ 494.93	£ 494.45 £ 494.03	£ 493.14	£ 483.01		
									_
Short term Care		Ave. 19/20	Ave. 20/21 @	Sep 21 @ Dec 21	@ Jan 22 @ Feb 22	@ Mar 22	Ave. 21/22 Trend Line (1Y)	Current 1Y Change Change Change	ge
Enablement - Nursing	CST01	£ 588.96		683.70 £ 677.07	£ 680.97 £ 656.53	£ 653.69	£ 666.24	£654 £ 77.28 🛖 13	%
Enablement - Residential	CST05	£ 487.63		573.24 £ 575.04	£ 558.77 £ 549.60	£ 563.18	£ 562.77	£563 £ 75.14 🛖 15	%
Short term - Nursing	CST11	£ 595.75	£ 595.75 £ 6	676.56 £ 673.32	£ 685.89 £ 676.14	£ 689.30	£ 681.90	£689 £ 86.15 🛖 14	%
Short term - Residential	CST15	£ 536.07	£ 536.07 £ 5	560.17 £ 540.28	£ 533.55 £ 529.22	£ 532.53	£ 553.97	£533 £ 17.90 🛖 3'	8%
Reablement	CST20	£ 224.42	£ 224.42 £ 2	277.53 £ 225.76	£ 207.88 £ 169.47	£ 124.32	f 242.79	£124 £ 18.37 🛖 8'	8%
Ave. Short Term Care		£ 498.81	£ 498.58 £ !	565.83 £ 572.07	£ 566.03 £ 560.79	£ 574.76	£ 566.00		
					·				
OVERALL WEIGHTED AVER	RAGE	£ 423.86	£ 452.33 £ 4	484.51 £ 497.87	£ 497.26 £ 496.47	£ 496.26	£ 485.67		