Report to Scrutiny Commission

Adult Social Care Scrutiny Commission Date of Commission meeting: 15th May 2014

Personal Budgets Update: Resource Allocation System (RAS)

Report of the Director of Adult Social Care & Safeguarding



Useful Information:

- Ward(s) affected: All
- Report author: Ruth Lake, Director of Adult Social Care & Safeguarding
- Author contact details: 37 5551 ruth.lake@leicester.gov.uk
- Date of Exec meeting: n/a

1. Summary

Putting People First (2007) set out a vision of greater choice and control for people needing to use social care services. This vision included Personal Budgets as a key element, giving people an allocation of money which they could then use to meet their social care needs and outcomes.

The development of a Resource Allocation System (RAS) – the system that translates the person's assessed needs into an indicative amount of money that will be given as a Personal Budget – was central to the delivery of *Putting People First*.

The RAS has now been rolled out across Adult Social Care and has become embedded into mainstream practice for all customer groups, excluding those in permanent residential and nursing care.

This report outlines the Resource Allocation System (RAS) used within Adult Social Care in Leicester, and its role within the Personal Budget process. It also explains how ASC ensures that the RAS is working effectively to produce indicative Personal Budgets.

2. Recommendation(s) to scrutiny

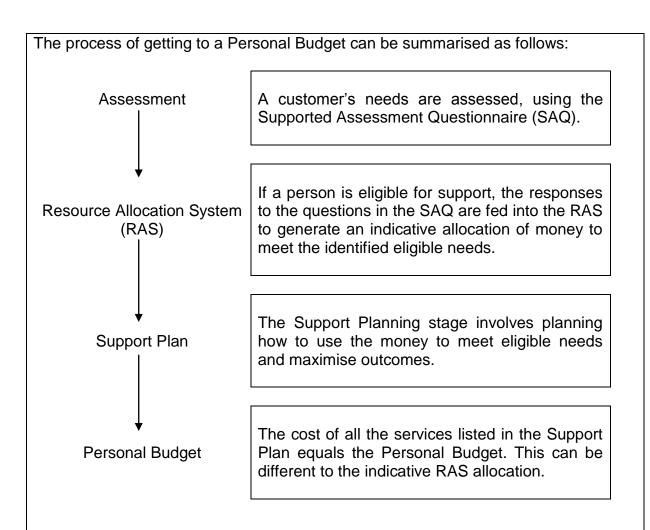
Adult Social Care Scrutiny Commission is recommended to note the contents of this report.

3. Supporting Information

Personal Budgets – The Wider Context

The RAS is one element within the process of a customer receiving a Personal Budget, and the RAS can only be understood within this context.

A Personal Budget is a pot of money to meet a person's eligible social care needs and outcomes, with the intention of maximising choice and control for the customer. The scope of Personal Budgets does not extend to permanent residential or nursing care, but encompasses almost all non-emergency community care services.



A customer may choose to take their Personal Budget as a Direct Payment, in which cash is paid into a bank account (either their own or that of a third party) so that they may procure the support they need. A customer may, alternatively, request that the Council manages the Personal Budget on their behalf, in which case Council contracts are used to procure services. A third option is for the customer to take a Direct Payment for part of the support they need, and use council contracts for the remainder.

The Role of the RAS

The RAS exists to provide an indicative, up-front allocation to inform support planning. Some of the key principles that have governed the development of the RAS include:

- Sufficiency the RAS should allocate a sufficient amount of money to meet the needs identified in the assessment, for the greatest number of people;
- Fairness the RAS should be equitable in allocating the same amount for customers with the same level of needs;
- Simplicity the RAS and associated processes should not be overly complicated or bureaucratic;
- Transparency the workings of the RAS should be made available to those who wish to know them, and explained to customers;

 Financial Sustainability – the RAS should not result in a cost pressure for Adult Social Care by allocating more than is required to meet assessed eligible needs.

How the Leicester City RAS Works

The RAS is an electronic calculator based within an Excel spreadsheet. It is a pointsbased system, meaning that each response to questions in the assessment has a number of points associated with it. A response which identifies a higher level of need attracts a higher number of points. These points are adjusted downwards where the customer already receives some or all of the support they require to meet their needs through informal arrangements. Further adjustments take account of whether or not the carer can continue to provide support. Appendix A summarises the points weightings and the associated adjustments.

Formulae within the RAS calculator add up the total number of points for all questions. The total number of points corresponds to an indicative weekly allocation, which is found by looking up the final points score on the allocation table shown in Appendix B.

What if the RAS is not Enough?

There is no such thing as a perfect RAS. It is not possible to develop a tool to generate allocations which perfectly reflect the cost of support for all customers. This is due to variation in needs, the options available for meeting those needs and differences in the cost of services.

It is important to stress the indicative nature of the RAS and reiterate that Councils have a legal duty to meet assessed eligible needs. As such, a robust process needs to be in place to ensure that Councils effectively discharge their statutory duties.

Where the cost of support exceeds the indicative RAS by more than 5% or £10 (whichever is greater), a submission is made to the Quality Assurance Panel for consideration of contingency release. The role of the panel is to ensure consistency across Care Management and to evidence high quality professional practice.

Where the indicative RAS is insufficient to meet assessed eligible needs, the Quality Assurance Panel releases a contingency payment, which in effect, tops up the indicative RAS to enable assessed support needs to be met.

Appendix C provides two case examples of situations in which the RAS was insufficient.

Review & Assurance

In order to ensure that the RAS allocations are as accurate as possible, twice yearly reviews are undertaken. This process involves analysis of Assessments and Support Plans completed during the period under review, alongside contingency releases authorised by the Quality Assurance Panel.

If any significant issues of over or under- allocation are identified as a result of the review, then the points weightings are adjusted to ensure that the indicative RAS allocations are as accurate as possible for the greatest number of customers. Complaints received are another useful source of information used to inform reviews of the RAS.

The most recent review undertaken considered the changes required for implementation at the end of April 2014. Evidence indicated that the RAS was underallocating for those individuals requiring personal care 3 or more times a day, and over-allocating in the area of transport. The weightings for these areas were adjusted to take account of this.

In order to ensure that customers have a sufficient amount within their indicative RAS allocation to meet their identified eligible needs, the weightings were further amended to reflect inflationary changes to the cost of services.

4. Financial, legal and other implications

4.1 Financial implications

There are no direct financial implications arising from the content of this report.

Rod Pearson Head of Finance – Health & Wellbeing (37 4001)

4.2 Legal implications

As outlined in this report the Resource Allocation Scheme (RAS) provides an indicative amount which assists in the determination of an individual's personal budget and should be considered as a starting point bearing in mind individuals' assessed needs. It is not a Statutory requirement for a Local Authority to utilise such an assessment tool, however it is a duty to ensure an individual's needs, subject to assessment and eligibility are met. When setting any weighting to a RAS, it must be done with due regard to the Public law duty, namely eliminating discrimination and to promoting equality of opportunity as established under section 149 of the Equality Act 2010, amongst other considerations.

The role of the QAP as highlighted within this report ensures that where cases do fall outside of a RAS allocation and there is a shortfall in meeting the eligible needs of a service user that discretion will be exercised accordingly.

Pretty Patel Principal Lawyer – Social Care & Safeguarding (37 1457)

4.3. Climate Change implications

None identified.

4.4 Equality Impact Assessment

An Equality Impact Assessment has been completed in respect of the RAS and the impacts of any proposed changes to the weightings are considered at each review.

4.5 Other Implications

None identified.

5. Background information and other papers:

None

6. Summary of appendices:

Appendix A – RAS Points Weightings Appendix B – Allocation Table Appendix C – Case Examples

7. Is this a private report?

No

Appendix A – RAS Points Weightings

Q1. MAKING DECISIONS	
A - I don't need any support	0.00
B - I need some support	0.44
C - I need support most of the time	1.26
D - I need a high level of support	2.14
E - I need a very high level of support	2.96

Q2. SUPPORT WITH PERSONAL CARE		
A - I do not need any support	0.00	
B - I need support 1-3 times a week	1.90	
C - I need support 4-6 times a week	4.79	
D - I need support every day - once a day	6.79	
E - I need support every day - twice a day	11.48	
F - I need support every day - 3 times a day	21.91	
G - I need support every day - 4 times a day	27.37	

Where the customer requires 2:1 support, then the basic points allocated are increased by 100%. Where the customer **sometimes** requires 2:1 support, then the basic points allocated are increased by 14%

Q3. SUPPORT WITH PRACTICAL DOMESTIC TASKS		
A - I do not need any support	0.00	
B - I need occasional support	0.48	
C - I need support once a week	2.09	
D - I need support twice a week	2.38	
E - I need support every day	3.22	

Q4. MEALS & NUTRITION	
Preparing Main Meals	
A - I do not need any support	0.00
B - I occasionally need support	0.40
C - I always need support	2.90
Eating Food & Drinking	
A - I do not need any support	0.00
B - I occasionally need support	1.10
C - I always need support	8.18

		Q7. Transport
Q5. FRIENDS & SOCIAL INVOLVEMENT		Transport Required
A - I do not need any support	0.00	0.00
B - I need occasional support	1.46	0.00
C - I need support for up to 4 hrs per week	4.25	1.80
D - I need support between 4 and 7 hrs per wk	8.41	3.60
E - I need support for more than 7 hrs per week	11.32	5.30

Where the customer requires 2:1 support, then the basic points allocated are increased by 100%. Where the customer **sometimes** requires 2:1 support, then the basic points allocated are increased by 25%

Q6. ACCESS TO WORK, EDUCATION AND LEARNING		Q7. Transport Transport Required
A - I do not need any support	0.00	0.00
B - I need occasional support	1.42	0.00
C - I need support for up to 4 hrs per week	4.17	1.80
D - I need support between 4 and 7 hrs per wk	8.24	3.60
E - I need support for more than 7 hrs per week	11.09	5.30

Where the customer requires 2:1 support, then the basic points allocated are increased by 100%. Where the customer sometimes requires 2:1 support, then the basic points allocated are increased by 25%

There are limits to the number of points that the RAS allocates for guestion 5 and 6 combined. Where a person requires 2:1 support for either question the maximum allocation is 28 points; where a person does not require 2:1 support the maximum is 14 points. The maximum points allocation for transport is 7.1 points.

Q8. BEING A PARENT OR FAMILY CARER		
0.00		
0.00		
1.16		
3.70		
6.34		
9.08		

Q9. STAYING SAFE FROM HARM	Concerns about needs causing a risk to safety		
Need for support	No Concerns	Some Concerns	Significant Concerns
		CONCEINS	
A - I do not need any support	0.00	0.00	0.00
B - I need support 1-2 times a week	0.00	0.72	0.99
C - I need support 3-4 times a week	0.00	0.99	1.44
D - I need support 5 or more times a week	0.00	1.44	1.93

Where the customer requires 2:1 support, then the basic points allocated are increased by 100%. Where the customer sometimes requires 2:1 support, then the basic points allocated are increased by 25%

Adjustment for Support from Carers

The Council is only expected to provide support where needs cannot be met by existing support networks (e.g. unpaid friends and family carers, or other organisations). Therefore, where a customer receives some or all support from a friend, family carer, or other organisation then the points allocated are reduced on a percentage basis. The reductions are made as follows:

- Where the customer gets enough of the support they need from others, the points are reduced by 100%
- Where the customer gets **most** of the support they need from others, the points are reduced by 65%
- Where the customer gets some of the support they need from others, the points are reduced by 35%
- Where the customer gets **none** of the support they need from others, the points are not reduced.

Where the main carer is unable to continue to provide the current level of support, account is taken of this by returning a percentage of the points that were lost due to the deductions outlined in section 2.4. The percentage of points added back is as follows:

- Where the carer can continue to provide the current support, then no points are returned
- Where the carer struggles at times, but is happy to continue providing the current level of support, then no points are returned
- Where the carer is unable to continue providing some of the support that they currently provide, then 35% of the lost points are returned
- Where the carer is unable to continue providing most of the support that they currently provide, then 65% of the lost points are returned
- Where the carer is unable to provide any future support, then 100% of the lost points are returned.

Appendix B – Allocation Table

Number of Points	Weekly RAS Allocation
0	£0
1 to 3 points	£0 to £10
4 to 5 points	£10 to £20
6 to 7 points	£20 to £30
8 to 9 points	£30 to £40
10 to 11 points	£40 to £50
12 to 14 points	£50 to £60
15 to 17 points	£60 to £75
18 to 20 points	£75 to £90
21 to 23 points	£90 to £105
24 to 27 points	£105 to £120
28 to 30 points	£120 to £135
31 to 33 points	£135 to £150
34 to 37 points	£150 to £170
38 to 41 points	£170 to £190
42 to 45 points	£190 to £210
46 to 49 points	£210 to £230
50 to 53 points	£230 to £250
54 to 57 points	£250 to £275
58 to 61 points	£275 to £300
62 to 65 points	£300 to £325
66 to 69 points	£325 to £350
70 to 72 points	£350 to £375
73 to 76 points	£375 to £400
77 to 79 points	£400 to £425
80 to 82 points	£425 to £450
83 to 85 points	£450 to £475
86 to 89 points	£475 to £500
90 points or more	£500

Appendix C – Case Examples

Case Example 1

Mr H is an 80 year old man who lives with his wife. Due to a combination of age-related health conditions, Mr H had been receiving support with personal care from an agency twice a day, which supplemented the informal support provided by his wife.

The needs of Mr H were reassessed following deterioration in his health. Based on his reassessed level of needs, the indicative RAS banding was £150 - £170 per week. In order to meet the eligible needs that were identified, Mr H required 3 personal care calls per day (including a lunch time call to assist with continence needs), as well as one day a week Day support, including transport. The total cost of this support is £175 per week.

Although the cost of support is marginally above the top of the RAS banding, the line manager was able to authorise the final Personal Budget of £175 per week because the difference was less than £10.

Case Example 2

Mr W is a 25 year old man with a Learning Disability, who lives in a supported living scheme. He was assessed as requiring some support with managing his daily routines, finances and correspondence, all aimed at maximising his independence and reducing risks associated with his vulnerability, as well as some shared night support.

Based on his assessed needs, Mr W's RAS banding was £90 - £105. In order to meet his assessed eligible needs, the services required by Mr W would cost £122 per week. This is more than £10 or 5% above the top of the indicative RAS banding. The case was submitted to the Quality Assurance Panel and, because the needs were properly evidenced, contingency of £17 per week was released, resulting in a final Personal Budget of £122.