



*Meeting:* **Adults and Communities Overview and Scrutiny Committee**

*Date/Time:* **Monday, 9 March 2020 at 2.00 pm**

*Location:* **Sparkenhoe Committee Room, County Hall, Glenfield**

*Contact:* **Mrs L. Walton (0116 305 2583)**

*Email:* **lauren.walton@leics.gov.uk**

### Membership

Mr. T. J. Richardson CC (Chairman)

Dr. P. Bremner CC    Mr. W. Liquorish JP CC  
Ms. L. Broadley CC    Mr. J. Miah CC  
Mr. B. Crooks CC    Mr. T. Parton CC  
Mrs. H. J. Fryer CC    Mrs. M. Wright CC

**Please note: this meeting will be filmed for live or subsequent broadcast via the Council's web site at <http://www.leicestershire.gov.uk>  
– Notices will be on display at the meeting explaining the arrangements.**

### AGENDA

<u>Item</u>	<u>Report by</u>
1. Minutes of the meeting held on 20 January 2020.	(Pages 5 - 12)
2. Question Time.	
3. Questions asked by members under Standing Order 7(3) and 7(5).	
4. To advise of any other items which the Chairman has decided to take as urgent elsewhere on the agenda.	
5. Declarations of interest in respect of items on the agenda.	
6. Declarations of the Party Whip in accordance with Overview and Scrutiny Procedure Rule	



16.

7. Presentation of Petitions under Standing Order 36.

8. Residential and Nursing Care for Older People. Director of Adults and Communities

A PowerPoint presentation will be given at the meeting.

9. Progress on the Decommissioning of the CareOnline Service. Director of Adults and Communities (Pages 13 - 16)

10. Use of Resources in Adult Social Care. Director of Adults and Communities (Pages 17 - 88)

11. Smart Libraries - Performance Review. Director of Adults and Communities (Pages 89 - 96)

12. Date of next meeting.

The next meeting of the Committee is scheduled to take place on 8 June 2020 at 2.00pm.

13. Any other items which the Chairman has decided to take as urgent.

## **QUESTIONING BY MEMBERS OF OVERVIEW AND SCRUTINY**

The ability to ask good, pertinent questions lies at the heart of successful and effective scrutiny. To support members with this, a range of resources, including guides to questioning, are available via the Centre for Public Scrutiny website [www.cfps.org.uk](http://www.cfps.org.uk). The following questions have been agreed by Scrutiny members as a good starting point for developing questions:-

- Who was consulted and what were they consulted on? What is the process for and quality of the consultation?
- How have the voices of local people and frontline staff been heard?
- What does success look like?
- What is the history of the service and what will be different this time?
- What happens once the money is spent?
- If the service model is changing, has the previous service model been evaluated?
- What evaluation arrangements are in place – will there be an annual review?

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Minutes of a meeting of the Adults and Communities Overview and Scrutiny Committee held at County Hall, Glenfield on Monday, 20 January 2020.

PRESENT

Mr. T. J. Richardson CC (in the Chair)

Dr. P. Bremner CC  
Mr. B. Crooks CC  
Mrs. H. J. Fryer CC  
Mr. D. Harrison CC

Mr. J. Miah CC  
Mr. L. Phillimore CC  
Mrs. M. Wright CC

In attendance

Mr. R. Blunt CC – Cabinet Lead Member  
Mrs. C. M. Radford – Cabinet Support Member  
Micheal Smith – Healthwatch Leicester and Leicestershire

51. Minutes.

The minutes of the meeting held on 11 November 2019 were taken as read, confirmed and signed.

52. Question Time.

The Chief Executive reported that no questions had been received under Standing Order 35.

53. Questions asked by members under Standing Order 7(3) and 7(5).

The Chief Executive reported that no questions had been received under Standing Order 7(3) and 7(5).

54. Urgent Items.

There were no urgent items for consideration.

55. Declarations of interest.

The Chairman invited members who wished to do so to declare any interest in respect of items on the agenda for the meeting.

Mr D Harrison CC declared a personal interest in the report on the Adults and Communities Department Performance 2019/20 as he was a carer for his wife (minute 60 refers).

56. Declarations of the Party Whip in accordance with Overview and Scrutiny Procedure Rule 16.

There were no declarations of the party whip.

57. Presentation of Petitions under Standing Order 36.

The Chief Executive reported that no petitions had been received under Standing Order 36.

58. Medium Term Financial Strategy 2020/21 - 2023/24

The Committee considered a joint report of the Director of Adults and Communities and the Director of Corporate Resources which provided information on the proposed 2020/21 to 2023/24 Medium Term Financial Strategy (MTFS) as it related to the Adults and Communities Department. A copy of the report marked 'Agenda Item '8' is filed with these minutes.

The Committee also noted a question that had been received from Dr Eynon relating to the acquisition of the Thomas Cook archive by the Leicester, Leicestershire and Rutland Records Office, and the response provided by the Director. A copy of the question and response is filed with these minutes.

The Chairman welcomed Mr R Blunt CC, Cabinet Lead Member, to the meeting for this item.

Arising from the comments and questions raised, the Committee was advised as follows:

Service Transformation

The Service Transformation details were noted.

Proposed Revenue Budget

- i) The revenue budget took demographic growth and known budget pressures into account. Cost and price pressures for 2020/22 onwards had not been factored in but would be provided for centrally.
- ii) Whilst the Adult Social Care Precept monies helped with financial pressures in the short-term, it was felt this was not a sustainable solution for the long-term.

Growth

- iii) Some disappointment was expressed that more growth was not provided to support communities. However, the details reported related only to the work the Adults and Communities Department held responsibility for. The Director advised that work was also being carried out in other departments such as Public Health and the Chief Executive's Department and suggested a joint report could be presented to the Commission at a future meeting to provide an overview of the work the Council had been undertaking with respect of Communities, as a whole.

### Adult Social Care – Savings

- iv) AC4 – Place to Live – The forecasted social care saving of £50,000 per annum associated with the “Place to Live” Brookfield development project was included in the Adults and Communities MTFs. The estimated net rental income of £150,000 pa which the project was also expected to deliver would form part of the savings for the Corporate Resources Department.
- v) AC5 Implementation of revised Target Operating Model (TOM) – The Programme was currently in the early stages of implementation and was on track to achieve the savings predicted. It was not yet possible to assess whether the Programme would over-achieve against the savings target. The Committee praised the work of all involved, noted the significant positive impact the TOM was expected to make and asked to receive regular updates on progress.

### Communities and Wellbeing – Savings

- vi) Restructure of Communities and Wellbeing Service – Approximately £410,000 savings had been identified, which was nearly 10% of the total budget for the service. It was confirmed that the level of restructure required would be significant and a reduction in the number of posts was to be expected. A Human Resources action plan was in the process of being finalised which would confirm the detail.
- vii) Collections Hub – Timescales for the development of the Collections Hub (Phase 2) on the County Hall campus were dependent on the success and completion of (Phase 1) the relocation of the Record Office.

### Savings Under Development

- viii) Social Care Investment Plan (SCIP) – Although the overall strategic aim was to reduce the number of people placed in residential care and increase the number supported in community settings, it was acknowledged there would always be a need for residential and nursing care provision, particularly where night time needs were concerned. In recognition of this, the Department had identified several specialised services as part of its upcoming Home Care Services procurement, which included a service that specifically focussed on providing night time support.
- ix) Digital Technology – With consideration to the review of the use of assistive technology and the Department’s digital offer to local residents, a range of initiatives were being tried and tested. In response to comments raised, the Director provided assurance that not all equipment being considered relied on an individual having to operate it. For example, monitoring equipment was available which could work in the background to provide updates on a service user’s condition. It would be key to strike a balance to ensure that personalisation of service was not replaced with technology as this would increase levels of social isolation.

### Health and Social Care Integration

- x) Better Care Fund (BCF) – The current BCF was expected to rollover for another 12 months. Work would be taking place at a national level over the next few months to review outcomes and governance arrangements. It was anticipated that there would be a further three-year programme, but this had not yet been confirmed.

### Other External Influences and Other Funding Sources

- xi) In terms of Government funding for the Department in the long-term, it was confirmed that, whilst funding up to March 2021 was certain, there was a lack of clarity regarding funding arrangements for future years.
- xii) Care Act 2014 - Changes in Social Care Legislation – Changes that were originally set take effect in April 2016 had been postponed to 2020. Concern was raised around the proposals to cap the costs of care and accommodation and the impact this could have on the Department and the local care market. The Director confirmed that the Department had previously (in 2015) undertaken an analysis of the care market and the level of provision required to manage the changes. The analysis at that time concluded that the changes would significantly increase costs for local authorities and reduce costs for self-funders. The changes would also be resource intensive as they would result in triple the number of assessments currently carried out. If the changes were implemented, a further analysis would need to be undertaken to reflect current market prices.
- xiii) It was noted that the increases to the Living Wage would have a significant impact on the Adults and Communities Department. It would be important to ensure that the budget for central items contained sufficient contingency to be able to respond to the increase. This point would be drawn to the attention of the Scrutiny Commission.

### Capital Programme

- xiv) The Trees Refurbishment was currently in the development phase. Residents had been moved into alternative accommodation to allow for the building works to commence. It was anticipated that the refurbishment would be complete towards the end of the summer 2020.

### RESOLVED:

- a) That the Scrutiny Commission be recommended to consider a report on how the Council supports communities at a future meeting;
- b) That the report and information now provided be noted;
- c) That the Committee's comments be submitted to the Scrutiny Commission for consideration at its meeting on 27 January 2020.

### 59. Commissioning and Procurement of Home Care Services: Post November 2020

The Committee considered a report of the Director of Adults and Communities which provided an update and recommendation for the re-procurement of home care services, post November 2020. A copy of the report marked 'Agenda Item 9' is filed with these minutes.

In his introduction to the report, the Director explained there had been some revisions made to the milestones tabled in paragraph 44 of the report; additional flexibility had been built into the procurement and implementation dates to ensure that preparations



were fully robust and tested. There had also been changes to the NHS CCGs (Clinical Commissioning Groups) governance, which had now been factored in.

A revised table of milestones would be circulated to members of the Committee after the meeting for information.

The Cabinet Lead Member for Adults and Communities, Mr. R. Blunt CC, confirmed his support for the service proposals and said that due to the nature of the service, there would always be a significant level of risk. However, it was pleasing to see that every effort was being made to learn from past experiences and find pragmatic solutions to design a new and improved service. He was hopeful that the future service would be successful.

Arising from discussion and questions, the following points arose:

- i) The Committee was pleased to note that consideration was being given to carers receiving the appropriate remuneration for non-contact time such as travel. Discussions would be held with providers to determine sustainability in this regard. The Department was in consultation with the Council's Internal Audit Team to determine how the remuneration could be effectively measured and monitored.
- ii) It was anticipated that a level of stabilisation would be required between each phase of the implementation period. The actual phasing and level of stabilisation required would be determined following the procurement, using a risk-based approach dependent on the number of existing providers bidding successfully for the new contract or exiting the market. The Committee supported the phased approach to implementation.
- iii) Members welcomed the introduction of four pricing levels (urban, fringe, rural and isolated) for the new service, which had been developed following a comprehensive benchmarking analysis. The Department had brought in an independent consultancy company called Care Analytics, which specialised in cost and pricing models for care and support services and had undertaken the same exercise in several areas of the Country. A substantial amount of work with existing providers had been completed as part of the benchmarking process.
- iv) The new Home Care Service contract would provide for the joint commissioning of services between the Council and the NHS, which was expected to align better future costs for core home care services where there had previously been disparity. However, there would still be elements of provision, such as the development or establishment of specialist services, which may need to be separately undertaken.
- v) Provider performance would continue to be managed under existing processes. The Department's Quality Improvement Team monitored and worked closely with providers especially where there were performance issues. Flexibility had been built in to the new service agreement so that other providers could be brought in to meet capacity requirements if a provider contract could no longer be sustained, for example due to consistent underperformance. Providers could move between "prime" or "supplementary" status depending on the quality of their service.
- vi) It was expected that all providers would have the ability to take on "high dependency" service users as required. Support and training would continue to be available to providers from the Council wherever necessary.

- vii) Members felt assured that lessons learnt from the previous procurement were being used to strengthen and shape future plans and practices. The Committee commended officers on what it felt was an excellent report and confirmed its support for the service proposals.

RESOLVED:

- a) That a revised timetable of milestones be circulated to Committee members for information;
- b) That the update on the Home Care service proposals be noted as part of the forthcoming re-procurement;
- c) That the Committee's comments on the Home Care service proposals be submitted to the Cabinet for consideration.

60. National Performance Benchmarking 2018/19 and Performance Report 2019/20 - Position at November 2019

The Committee considered a joint report of the Chief Executive and the Director of Adults and Communities, which highlighted the Adults and Communities Department's performance position in 2018/19 through national benchmarking, and which also provided an update of the Department's performance at the end of November 2019. A copy of the report marked 'Agenda Item 10' is filed with these minutes.

With regard to Smart Libraries, it was the intention that the Committee would receive further reports as the transition progressed. A member suggested that when the figures on the number of visits were available, officers consider making the distinction in future reports between the number of web visits and the number of people that had physically visited a library.

The survey results under the Adult Social Care Outcomes Framework (ASCOF) where the Council had fallen below the national average did not necessarily mean that the Council's performance was poor, but rather that it required improvement in comparison to other high performing authorities. It was recognised that surveys, for many reasons, did not always provide an accurate reflection and unfortunately the Council had no control over the metrics as these were set nationally. A dedicated officer had been appointed to work on addressing the lower performing areas. Discussions were also taking place with Healthwatch to see how it could be of support to improve the process.

A member queried if the public received feedback on the results, it was confirmed that the survey, which was written by Central Government, did include an option to enable survey respondents to request feedback if they so wished. Headline results were also published online, and the next round of results was due to be available in early February 2020.

RESOLVED

That the Adults and Communities Department's performance position in 2018/19, and the update of the Department's performance at the end of November 2019 be noted.

61. Date of next meeting.

It was noted that the next meeting of the Committee would be held on 9 March 2020 at 2.00pm.

2.00-3.32pm  
20 January 2020

CHAIRMAN

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**ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE**  
**9 MARCH 2020**

**PROGRESS ON THE DECOMMISSIONING OF THE**  
**CAREONLINE SERVICE**

**REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES**

**Purpose of report**

- 1 The purpose of this report is to provide an update to the Committee on progress following the decision to decommission the CareOnline (COL) Service in 2019 and to report on the consequent activity undertaken by the Enrych Connect service.

**Policy Framework and Previous Decisions**

- 2 Following a high-level review of the COL Service in 2017, and due to budgetary pressures, the continuance of the service in its established form was not viable and plans were put in place to consult on options.
- 3 In September 2017, the Cabinet considered a report on the Communities and Wellbeing Strategy and requested that the Director of Adults and Communities undertake the necessary consultation and engagement with partners, stakeholders and service users to develop proposals to decommission the COL Service.
- 4 A consultation took place between 11 April and 22 May 2018 with service users and stakeholders to explore alternative methods of delivering the service.
- 5 The results of the consultation were reported to the Committee at its meeting of 5 June 2018 and proposed the decommissioning of the service.
- 6 On 6 July 2018, the Cabinet made the decision to decommission COL and put in place measures to mitigate the effect of the cessation of the service. This included the provision of a transitional fund of £10,000 per annum for two years to help alternative organisations develop their capacity of their support offer similar to that of COL.
- 7 The Committee was updated on the decommissioning of COL at its meeting of 11 March 2019. The report detailed that the transitional funding had been allocated to Enrych, who proposed to develop an extension of its offer called Enrych Connect. Additional funding from the Big Lottery fund had also been confirmed by Enrych giving them three years of secure funding to develop their project.

**Background**

- 8 The COL Service sat within the Communities and Wellbeing Service of the Adults and Communities Department. It was a non-statutory service with an aim of providing

training, ICT equipment and telephone support to enable people to use IT to increase their independence. Service users with limiting conditions such as frailty, mental health problems, visual impairments and long-term health conditions or a disability used the service.

- 9 Following a high-level review of the service in 2017, the Cabinet was advised that due to budgetary pressures the continuance of the service in its established form was not viable and plans were put in place to consult on options to decommission the service and look at alternatives.
- 10 As part of the review undertaken in 2017, a range of third-party organisations were identified that although not operating a like for like service, could support people with IT needs. A transitional fund of £10,000 for two years was offered to help interested third parties to develop plans to meet the objectives of COL.
- 11 Following an application process, Enrych was successful in securing the transition funding of £10,000 over two years. Enrych is a national organisation with 30 years' experience of supporting people with disabilities to lead active and independent lives. They planned to develop a similar service to COL, called Enrych Connect.
- 12 Enrych Connect also secured Big Lottery funding for three years helping to sustain the funding and were confident of their developmental plans.
- 13 Enrych Connect was established in February 2019. It supports people with physical disabilities, learning disabilities and/or mental health needs and their carers who are at risk of or experiencing isolation or social disadvantage. This may be eased by support and access to digital interfaces/internet technology (building on the service model established by COL). The project has a focus on "hardest to reach" groups.
- 14 All COL staff (four in total) successfully secured posts with Enrych Connect and the County Council additionally supported the project by enabling the transfer of COL's stock of specialist hardware and software so that Enrych could loan equipment to their service users.
- 15 The remainder of this report sets out the progress that Enrych Connect have made since its operational inception in March 2019.

### **Update on progress**

- 16 Enrych has been working to address the digital issues faced by service users by providing expert trained staff who have identified and assessed needs, provided training and support to individuals to access IT solutions and trained volunteers. IT equipment has also been loaned.
- 17 Its staff have continued to offer one to one support to people requesting digital assistance directly or who have been referred by other stakeholders. In addition, four volunteers have been recruited to assist in the work. Enrych Connect has plans in place to increase the volunteer base to ten.
- 18 During its first three months of operation, Enrych managed the transfer of those COL service users who requested continued support into the new arrangements. They enrolled 77 service users, received 58 enquiries and provided 174 home training visits. It is currently averaging ten new referrals per month. As at January 2020,

Enrych has made 888 visits to clients, and responded to 242 general phone enquiries.

- 19 Enrych Connect is establishing a contact network of potential referrers through visits to social care locality teams, Local Area Co-ordinators, GP practices, NHS services and stakeholder charities. A new initiative is developing digital help and support in a group of residential care homes. This has been well received and has delivered additional benefits through increasing social interaction amongst the residents.
- 20 The service is operating within its resources and has started discussions with a local corporate organisation who has expressed an interest in supporting the work of Enrych Connect. It remains confident of its ability to sustain the service beyond the three year funding received from the Big Lottery.

### **Resource Implications**

- 21 The net budget for the Department's Communities and Wellbeing Service for 2020-21 is £5.1m. In line with the Council's Medium-Term Financial Strategy this will reduce to approximately £5m per annum by 2023/24. It is recognised that given the scale of these reductions, service delivery will change significantly.
- 22 The decommissioning of the COL Service delivered £113,000 of ongoing savings to the Community and Wellbeing Service's overall savings target of £1.3 million.
- 23 Transitional funds of £10,000 per annum for two years have been set aside to assist organisations with the transition of service users to alternative services (granted to Enrych).
- 24 The transitional phase has not impacted on established social care budgets.
- 25 The Director of Corporate Resources has been consulted on the content of this report.

### **Conclusions**

- 26 Enrych Connect has made positive progress in the establishment of a service which has ensured that clients of COL have been able to continue to be supported by experienced staff in meeting their digital requirements. Former COL clients have played a positive role in a monthly user forum established by Enrych Connect. Enrych Connect is developing plans for the longer-term sustainability of the service and the service continues to thrive.

### **Background Papers**

- Report to the Cabinet: 15 September 2017 – Progress with the Implementation of the Communities and Wellbeing Strategy 2016-20 - <https://bit.ly/2GC2yxR>
- Report to the Adults and Communities Overview and Scrutiny Committee: 5 June 2018 – CareOnline Service <http://politics.leics.gov.uk/mgAi.aspx?ID=55901>
- Report to Cabinet: 6 July 2018 – 'CareOnline' Service – <https://bit.ly/2GYOXUL>
- Report to the Adults and Communities Overview and Scrutiny Committee: 11 March 2019 – Decommissioning of CareOnline Service – <http://politics.leics.gov.uk/ieListDocuments.aspx?CId=1040&MId=5687&Ver=4>

## **Circulation under the Local Issues Alert Procedure**

None.

## **Equality and Human Rights Implications**

- 27 The Equalities Challenge Group reviewed the COL Service proposals from an equalities perspective on 8 June 2018. The Group welcomed the efforts made to consult with service users over the proposals and broadly supported the mitigation measures put forward.
- 28 A full Equality and Human Rights Impact Assessment (EHRIA) was prepared for the Cabinet report on 6 July 2018 and is available upon request. The EHRIA indicated that the proposal to decommission COL impacted on older people and those with a disability. These were mitigated by the establishment of Enrych Connect who took up the support of those COL service users who requested it.

## **Partnership Working and Associated Issues**

- 29 Enrych Connect is working actively with partners and stakeholders, including Local Area Co-ordinators and other social prescribers in growing its user base.

## **Officers to Contact**

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**ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE**  
**9 MARCH 2020**

**USE OF RESOURCES IN ADULT SOCIAL CARE**

**REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES**

**Purpose of report**

1. The purpose of this report is to share with the Committee, the outcome of the Local Government Association (LGA) report on Use of Resources in Adult Social Care and seek the Committee's views on the Use of Resources within Leicestershire.

**Policy Framework and Previous Decisions**

2. This Committee received a report in June 2019, titled "Provision of Services", which considered the demand on services in Leicestershire, how needs were assessed and met and current service challenges. The report noted that individual needs appear to be being met despite the County Council's funding position, but that service user and carer satisfaction levels remained low by comparison to other authorities.

**Background**

3. In 2018, the LGA developed the first Adult Social Care Use of Resources reports for all 152 councils responsible for adult social care. Following consultation and discussion with local authorities, a second report was published in November 2019 based on finance and activity data relating to 2018/19.
4. The report compares activity and expenditure for councils based on each council's submissions to NHS Digital.
5. National data suggests that average spending per adult has increased by 4%, but there is a higher increase in spending on younger adults (aged 18-64) of 4.7% than for older adults, which has increased by 3.1%.
6. The report provides information pertaining to Leicestershire which is benchmarked against the England average, Chartered Institute of Public Finance and Accountancy (CIPFA) comparator authorities and the East Midlands region.
7. However, as noted within the report, comparisons between local authorities should be viewed with the following caveats:
  - Data recording is not fully consistent across England, so two figures from two different councils are not necessarily fully comparable;
  - No one metric alone gives a complete picture of a council's situation;
  - These metrics are the starting point, not the end point, of a conversation about use of resources. There is a potential for metrics to be used to arrive at

misleading conclusions where they are not discussed and considered in the light of local contexts;

- This report represents a starting point beyond which further analysis and research will be required;
- Trying to evaluate how much is spent compared to need is not possible in a completely quantitative way. A detailed understanding of the nuances of each individual local authority's circumstances is necessary to gain a full understanding of this topic;
- Figures for gross current expenditure have been used, which do not account for income raised by and for adult social care;
- In most cases, there is no assumed polarity to the metrics. For example, it is not necessarily the case that a low figure for spend per adult is 'good' and a high score 'bad'. The needs and priorities of local contexts can vary, and different levels of spending and activity can be necessary, appropriate and desirable considering these differing contexts.

## **Summary of Leicestershire's Use of Resources**

### Expenditure

8. Leicestershire has the fifth lowest spend on adult social care, per adult, (total spend divided by the number of people aged 18 years and over) overall. Analysis by short and long term care for Leicestershire shows that the County Council has the second lowest spend on long term care and is roughly average for short term care spend.
9. Spend on older adults (aged 65+) per adult is the lowest in the country, whilst expenditure on people aged 18-64 shows that Leicestershire ranks at position 138 out of the total 152 councils.
10. Expenditure on Older Adults when compared to other authorities, shows that Leicestershire spends 43% less than the average for all England based authorities, and 27% less than the CIPFA nearest neighbouring authorities.
11. Another way of analysing total expenditure is to consider spend per client; i.e. total spend divided by the number of clients served. On this measure, Leicestershire is ranked at position 136 overall. For adults aged 18-64, Leicestershire is in the third quartile (113/152) and for adults aged 65+ is in the bottom quartile (140/152).

### Demand

12. Leicestershire has a relatively high number of requests for support from older adults (> 14% compared to under 13%), however, the number of people supported with long term care in Leicestershire as a percentage of the population is lower than the England total, but consistent with the average for nearest neighbouring authorities.
13. When considering care settings, the Use of Resources report considers two indicators which are judged to promote independence and have an impact on resource utilisation; the proportion of people receiving Direct Payments, and people with learning disability living in their own homes.
14. On the first indicator, Leicestershire is ranked 2/152 with 49% of people in receipt of a Direct Payment, and on the second, is ranked 55/152 with 81% of people living in settled accommodation.

15. The report also compares rates of admission to residential care homes, which shows Leicestershire has average rates of admission for older people (76/152) and relatively low rates of admission for younger adults (103/152).

### Costs

16. One further area of analysis pertains to the cost of care. The LGA compare unit costs for home care, residential care, and nursing care based upon the total spend in these areas divided by the number of hours of home care, and the number of weeks of care in care homes respectively.
17. The results show that Leicestershire has an average cost of home care (72/152) which is below that of its CIPFA neighbours, but broadly equivalent to all England related costs, whilst care home costs are below those of both the CIPFA nearest neighbour councils and the England average with Leicestershire ranked 107/152 for older people and 95/152 for people aged 18-64 years.
18. The final area of analysis within the Use of Resources report concerns income. The report finds that income received in Leicestershire is higher than average. For both income from client contributions and income from the NHS (including the Better Care Fund), Leicestershire is in the top quartile when compared with other councils.

### Analysis

19. Leicestershire has the lowest spending power when compared to other local authorities. Expenditure on adult social care is reflective of the overall funding position of the Authority.
20. Spend on services for people aged 65+ is the lowest of all local authorities, and the difference in spend is increasing as nationally, regionally and in the CIPFA comparator group there has been an increase in expenditure which has not been replicated in Leicestershire.
21. Factors affecting spend on older adults include the demography of the population and the level of deprivation. Leicestershire has a lower percentage of people over the age of 65 than comparator authorities, although the rate against all English councils is higher. It could be argued that a lower percentage of adults over 65 years would lead to lower spend, however as noted above, the proportion of people over 65 in receipt of services is low in comparison to the overall position for England, but consistent with the average in comparator authorities and therefore age alone cannot account for lower expenditure.
22. Equally, the proportion of the population aged 18-64 is slightly higher in Leicestershire than comparator authorities, but this is not reflected in the number of people in receipt of services.
23. Deprivation levels in Leicestershire are considerably lower than the national average and remain comparatively low against comparator authorities. Deprivation levels are known to influence expenditure due to the proportion of people who fund their own care and the level of income that an authority can achieve. Whilst this relationship is not linear (there are low spending councils which have high deprivation, and high spending authorities who have low deprivation), it is considered that this is a factor in

the levels of spend in Leicestershire. Deprivation is not thought to influence demand or service provision for people aged 18-64 to the same extent, where expenditure on services is largely a reflection of learning disability spend. There is little evidence that the prevalence of learning disability is affected by deprivation, although prevalence of mental ill health may have a stronger correlation.

24. The fact that Leicestershire's spend per client is higher than spend per person suggests that the County is providing people with a service which is commensurate with levels of need. However, the relatively low spend across both categories with average to above average numbers of clients may suggest that Leicestershire has a number of people who have relatively low personal budgets. This could be an efficient use of resources or could be due to many people with low level needs who perhaps could be supported through prevention and other services without the need for social care provision.
25. Leicestershire appears to have a high number of requests for support from older adults, the reason for which is not fully understood; however, whilst the number of people receiving services is higher than average, it is not reflective of the higher number of requests, which suggests that the front door process and systems are effective to some degree in managing demand.
26. The Use of Resources report contains further detailed information in relation to the sequel of activity following request for support; however, the wide variation in recording practice between authorities makes direct comparison of this data difficult to achieve with any confidence. There is an indication that Leicestershire provides higher levels of low-level ongoing support than other authorities, but lower levels of long term and short term care.
27. The report supports the previous view held that Leicestershire is having some success with promoting independence in respect to adults aged 18-64 regarding Direct Payment take up, people living in settled accommodation and finding alternatives to long term care, although there is room for further improvement if the County Council was to reach top decile performance across all indicators.
28. Admissions to care for people aged 65 and over is an area for improvement in terms of individual outcomes; however, progress in this area is likely to increase unit costs in both home care and residential care as people with higher levels of need are provided with services at home, whilst those remaining in residential placements are likely to have higher levels of need.
29. Over the last few years, Leicestershire has managed demand well which has in turn reduced growth requirements from £24m to £9m within the Medium Term Financial Strategy (MTFS). This has led to a position whereby savings have outstripped growth in many areas (not including cost growth) together with an end of year underspend of between 3-8% against budget. This may explain why Leicestershire has seen a reduction in spend when other authorities are experiencing increased expenditure.
30. It should also be noted that the Use of Resources report is based upon data from 2018/19 at which point Leicestershire had comparatively low residential and nursing care fee rates. However, the 2019 fee review of residential care will increase the cost of care for both older and younger adults thus increasing the unit costs.

## **Resource Implications**

31. The Use of Resources report is helpful in identifying areas for further consideration of potential saving and efficiency as we prepare for the future delivery of the County Council's MTFS.
32. The report highlights the relative lower levels of expenditure across all adult social care, but also the absolute low levels of expenditure on older adults in particular. The future focus of MTFS requirements may therefore need to be on services to people aged 18-64.
33. Planned MTFS savings are largely predicated against the Target Operating Model (TOM); the savings profile of which is constructed to deliver the most saving against services for people over 65 years. This will further reduce the levels of expenditure and may further increase the gap between expenditure in Leicestershire and national and comparator authorities.
34. Maintaining a focus of reducing growth through managing demand and maximising income is also an important factor in ensuring a balanced budget especially given the low level of funding available to the County Council.
35. The Director of Corporate Resources has been consulted on the content of this report.

## **Conclusions**

36. The continued low level of spending power within Leicestershire, because of the current funding formula, will continue to frame the delivery of adult social care services. Findings from this report must be considered in the context of the financial pressures facing adult social care. Furthermore, the financial pressures on adult social care are increasing. The County Council must do all it can to continue to improve its use of resources. Central Government must also deliver a sustainable financial settlement for the Council, and for social care.

## **Background Papers**

Report Adults and Communities Overview and Scrutiny Committee: 10 June 2019 - Provision of Services

<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=1040&MId=5688&Ver=4>

## **Circulation under the Local Issues Alert Procedure**

37. None.

## **Equality and Human Rights Implications**

38. The measures in this report are not to be used or interpreted as measures of good or bad performance. The ratio of spending per unit of adult population may vary for any number of necessary, appropriate or desirable reasons, in response to local needs and local priorities.
39. Most of the spending on younger adults, aged between 18 and 64, is on people with learning disabilities. However, reliable data on the number of people with learning

disabilities is not yet available at a local authority level. It is also important to review the smaller but still significant areas of spending on those with physical disabilities and with mental health care needs.

40. Care needs among adults aged 65 and over are not uniform but tend to be lower among those aged 65 to 74 than those aged 75 to 84 and, especially, those aged 85 and over. Although, recent analysis in Leicestershire shows a growth in long term care placements for people aged 65-74 and a reduction in people aged over 85 years.

### **Officer to Contact**

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### **Appendix**

LGA Adult Social Care Use of Resources Report for Leicestershire 2018/19 (November 19)

# Adult Social Care Use of Resources Report for Leicestershire 2018/19 (November 19)

## Adult Social Care Use of Resources Report 2018/19

### Report for Leicestershire

This report looks at a variety of cost and activity metrics to help review and understand the use of resources in the provision of adult social care. This report focuses on Leicestershire compared to the average for its ADASS region and its CIPFA nearest neighbours group.

Data used in this report comes from the Adult Social Care Activity and Finance Report Reference Tables, published annually by [NHS Digital](#). This file contains selected reference tables providing an overview of Short and Long Term Support (SALT) and Adult Social Care Finance Return (ASC-FR) collections, as part of the Adult Social Care Activity and Finance publication. A summary of the quality of this data is available [here](#).

Throughout this report, measures are shown as 'per adult' and 'per client'. Where the measure is 'per adult' it is based on adults of the relevant age group living in the local authority. Where the measure is 'per client' it is based on clients receiving care (for the relevant age group and type of care specified) commissioned by the selected local authority.

'90th percentile' and '10th percentile' have been used instead of 'minimum' and 'maximum' scores. These measures are similar to the minimum and maximum, but ignore the lowest and highest ten per cent of councils respectively. This is to provide a more reliable picture of what a low and high score generally look like, without distortion by councils with extremely low or high scores which are not representative of local authorities in general.

### How to use this report

Working collaboratively with councils, government departments and specialist consultancies and contractors, the LGA and ADASS have led the development of a robust and transparent approach to evaluating the use of resources in adult social care to support sector led improvement. The 13-step approach uses a set of questions to promote informed self-assessment and improvement, taking into account local conditions and bringing in challenge at each step. It helps councils to identify areas for further exploration, where spend and/or performance is significantly different to regional or national averages.

The methodology starts with the traditional approach to value for money as set out by the National Audit Office, then sets that in the context of what happens in practice, looking at comparative spending against comparative need and why spending may be higher or lower than elsewhere. Not all of these steps rely on data available from LG Inform; some steps require a more detailed consideration of the situation of the authority in question.

**This approach does not lead to a definitive statement that one authority is more efficient than another because we believe that this is impossible, at least in terms of the data currently available. It should encourage all local authorities, those advising them and those to whom they are accountable to continue to look carefully at how resources are used and to seek to improve value for money wherever possible.**

Findings from this approach must be considered in the context of the financial pressures facing adult social care. It is clear from what has happened since 2010 that the heroic efforts of local government to make savings in adult social care cannot be sustained at the same level. Furthermore, the financial pressures on adult social care are increasing. Local government must do all it can to continue to improve use of resources. Central Government must also deliver a sustainable financial settlement for

adult social care. Local authorities will need more resources. Improvements in use of resources have the potential to reduce, slightly, the amount of extra money that will be required.

When comparing councils with one another, please bear the following in mind:

- Data recording is not fully consistent across England, so two figures from two different councils are not necessarily fully comparable.
- No one metric alone gives a complete picture of a council's situation.
- These metrics are the starting point, not the end point, of a conversation about use of resources. There is a potential for metrics to be used to arrive at misleading conclusions where they are not discussed and considered in the light of local contexts.
- This report represents a starting point beyond which further analysis and research will be required.
- Trying to evaluate how much is spent compared to need is not possible in a completely quantitative way. A detailed understanding of the nuances of each individual local authority's circumstances is necessary to gain a full understanding of this topic.
- Figures for gross current expenditure have been used, which do not account for income raised by and for adult social care. This measure also excludes spending funded by certain income sources, chiefly the NHS. Step 13 of the report proposes an alternative measure including all income sources and compares this measure to the original gross current expenditure measure.
- In most cases, there is no assumed polarity to the metrics. For example, it is not necessarily the case that a low figure for spend per adult is 'good' and a high score 'bad'. The needs and priorities of local contexts can vary, and different levels of spending and activity can be necessary, appropriate and desirable in light of these differing contexts.

**Please note that this is NOT the correct report to refer to for authorities in the South West ADASS region. Due to the 2019/20 authority changes in this region, a separate version of this report was created for authorities in the South West region to refer to. This report can be found [here](#).**



In their [Adult Social Care Activity and Finance Report: Detailed Analysis England 2017-18](#) NHS Digital provide the following advice for using the source data:

## How can the data be used?



- ✓ **Do** use this report to consider similarities and differences in the trends shown in the data for example, where expenditure has increased or decreased for a particular type of social care provision, it is also important to consider trends in activity for that same type of care to fully understand the whole picture.
- ✓ **Do** use this data to increase your understanding of the approaches to the commissioning and delivery of social care, by local authority.
- ✓ **Do** contact the NHS Digital Social Care Statistics Team if you have any questions around the data published
- ✗ **Do not** divide expenditure by activity to derive a cost per person. For example, the SALT return does not differentiate between a long term client receiving one week of care during the reporting period, and a client receiving long term support for the full year.
- ✗ **Do not** use this data to attempt to identify good or bad performance.
- ✗ **Do not** directly compare long term SALT and long term ASC-FR. Activity data includes those receiving long term care with a Primary Support Reason (PSR) of Social Support, whereas this PSR is not included in long term expenditure (instead being recorded as a combined short term/long term spend on the PSR).

## Step 1: Comparison of spend per adult

Whilst many adults do not require adult social care services at a given point in time, the measure of gross current expenditure per adult in the population is a useful measure of how an authority's level of spending compares to the size of their applicable population. However, it is important to note that Step 1 takes no account of differing levels of need if considered in isolation. Furthermore, there are technical issues with the measure of gross current expenditure used in this step which mean that spending funded by income from the National Health Service and certain other sources are not included. A comparison between gross current expenditure and an alternative measure which includes spending funded from all income sources is available in Step 13.

**The measures below are not to be used or interpreted as measures of good or bad performance.** *The ratio of spending per unit of adult population may vary for any number of necessary, appropriate or desirable reasons, in response to local needs and local priorities.* Most of the spending on younger adults, aged between 18 and 64, is on people with learning disabilities. However, reliable data on the number of people with learning disabilities is not yet available at a local authority level. It is also important to review the smaller but still significant areas of spending on those with physical disabilities and with mental health care needs. Care needs among adults aged 65 and over are not uniform but tend to be lower among those aged 65 to 74 than they are among those aged 75 to 84 and, especially, those aged 85 and over. An age breakdown for Leicestershire is available in Step 2 below.

## Part 1A & 1Bi, Spend on adult social care per adult, all adults, all care

### Spend per adult by short and long term care and overall for Leicestershire

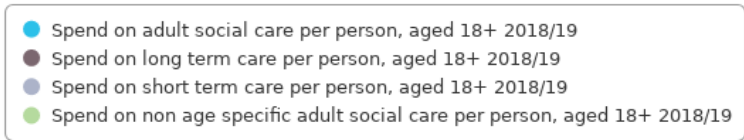
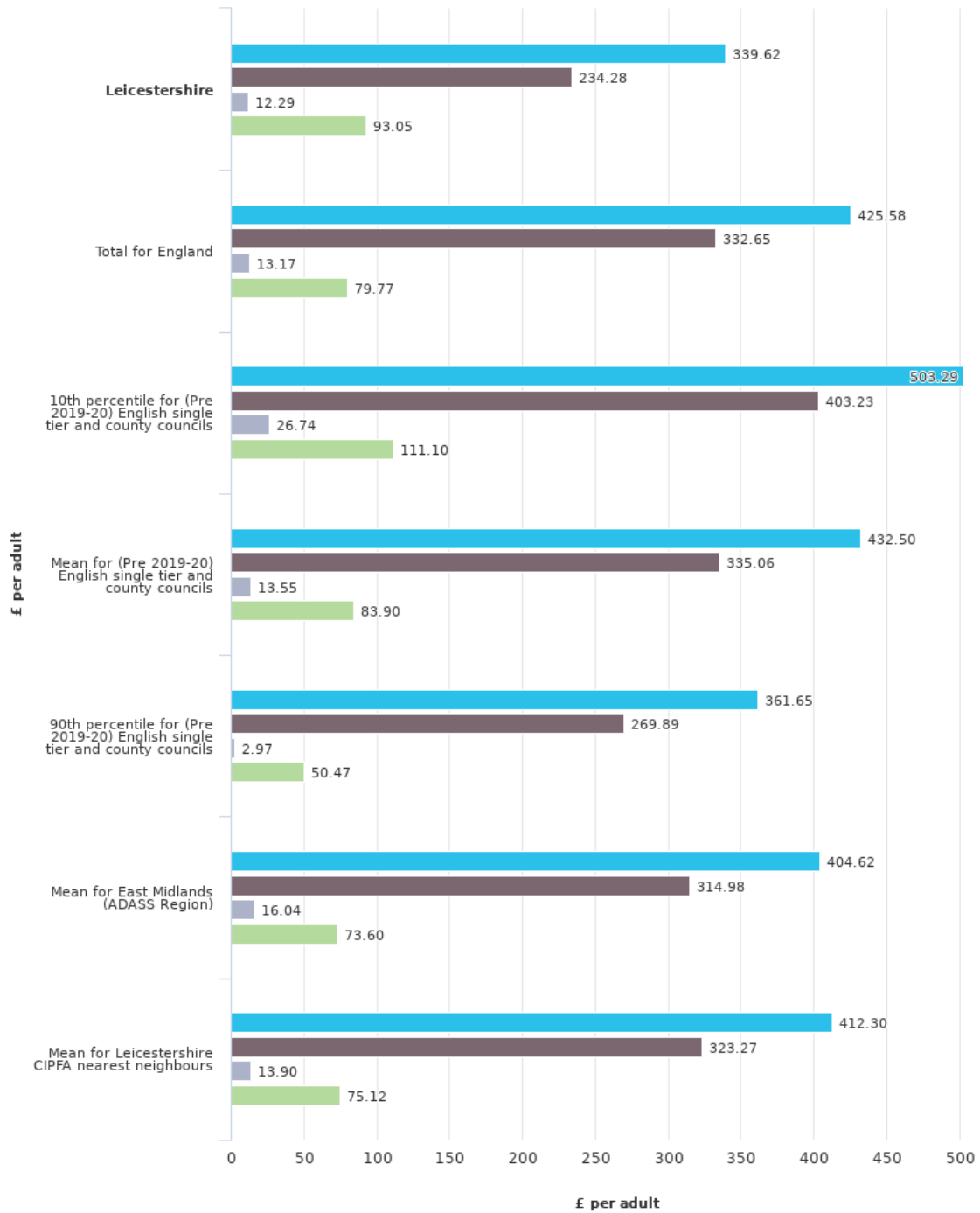
Area	<a href="#">Spend on adult social care per person, aged 18+</a>	<a href="#">Spend on long term care per person, aged 18+</a>	<a href="#">Spend on short term care per person, aged 18+</a>	<a href="#">Spend on non age specific adult social care per person, aged 18+</a>
	<b>2018/19</b>			
	<b>GBP per person</b>			<b>GBP</b>
Leicestershire	339.62	234.28	12.29	93.05
Total for England	425.58	332.65	13.17	79.77
10th percentile for (Pre 2019-20) English single tier and county councils	503.29	403.23	26.74	111.10
Mean for (Pre 2019-20) English single tier and county councils	432.50	335.06	13.55	83.90
90th percentile for (Pre 2019-20) English single tier and county councils	361.65	269.89	2.97	50.47
Mean for East Midlands (ADASS Region)	404.62	314.98	16.04	73.60
Mean for Leicestershire CIPFA nearest neighbours	412.30	323.27	13.90	75.12

Note: spend on non age specific adult social care is also equivalent to spend on adult social care that is not classified as either short or long term.

### Spend per adult by short and long term care and overall for Leicestershire - ranks

Area	<a href="#">Spend on adult social care per person, aged 18+</a>	<a href="#">Spend on long term care per person, aged 18+</a>	<a href="#">Spend on short term care per person, aged 18+</a>	<a href="#">Spend on non age specific adult social care per person, aged 18+</a>
	<b>2018/19</b>			
	<b>Rank within (Pre 2019-20) English single tier and county councils</b>			
Leicestershire	147	151	78	46

## Spend per adult by short and long term care and overall for Leicestershire



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## Part 1Bii, Spend on adult social care, per adult aged 18 to 64

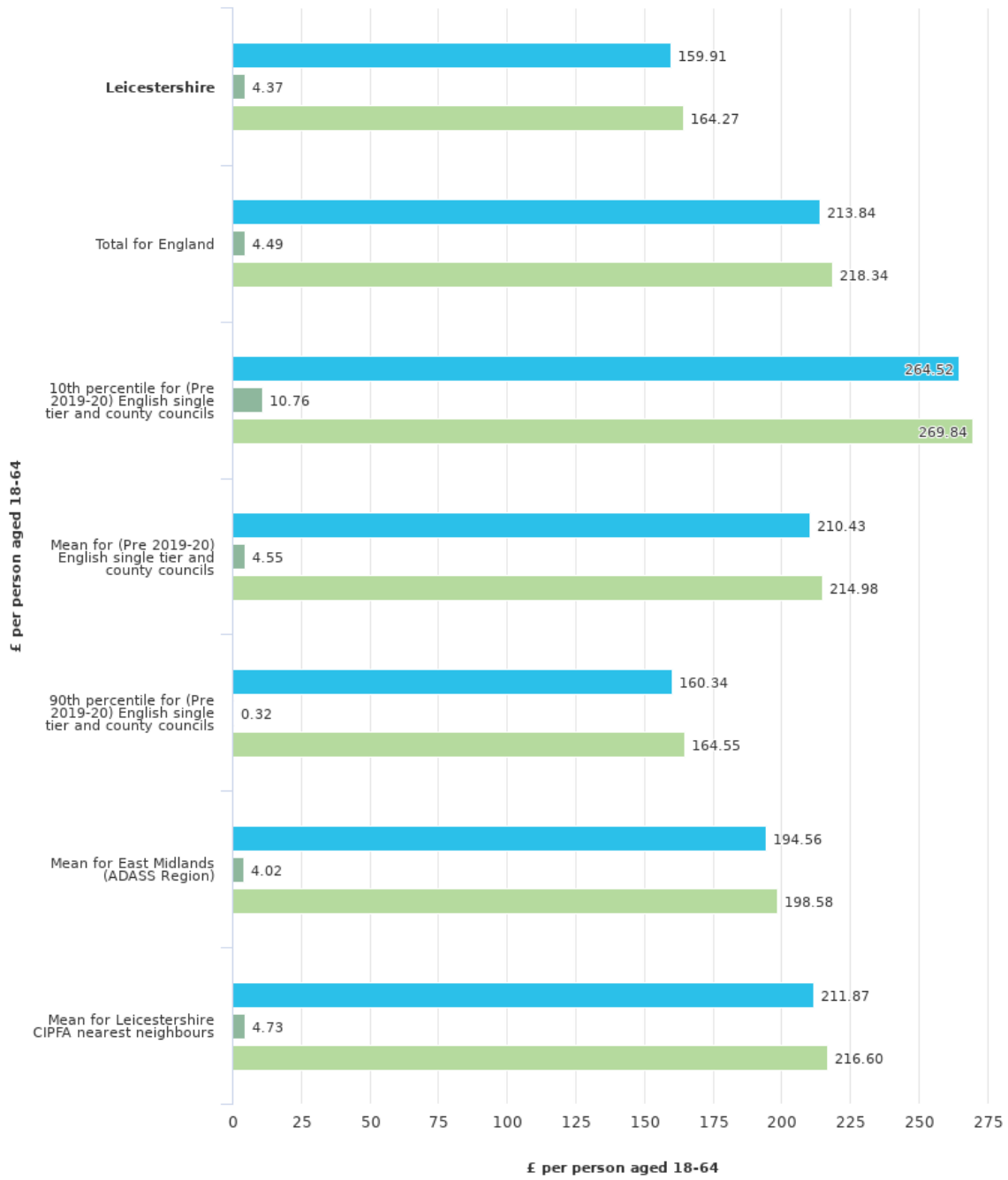
### Spend per adult aged 18-64 by short and long term care and overall for Leicestershire

Area	<a href="#">Spend on long term care per person, aged 18-64</a>	<a href="#">Spend on short term care per person, aged 18-64</a>	<a href="#">Spend on long and short term care per person, aged 18-64</a>
	<b>2018/19</b>		
	<b>GBP per person</b>		
Leicestershire	<a href="#">159.91</a>	<a href="#">4.37</a>	<a href="#">164.27</a>
Total for England	213.84	4.49	218.34
10th percentile for (Pre 2019-20) English single tier and county councils	264.52	10.76	269.84
Mean for (Pre 2019-20) English single tier and county councils	210.43	4.55	214.98
90th percentile for (Pre 2019-20) English single tier and county councils	160.34	0.32	164.55
Mean for East Midlands (ADASS Region)	194.56	4.02	198.58
Mean for Leicestershire CIPFA nearest neighbours	211.87	4.73	216.60

### Spend per adult aged 18-64 by short and long term care and overall for Leicestershire - ranks

Area	<a href="#">Spend on long term care per person, aged 18-64</a>	<a href="#">Spend on short term care per person, aged 18-64</a>	<a href="#">Spend on long and short term care per person, aged 18-64</a>
	<b>2018/19</b>		
	<b>Rank within (Pre 2019-20) English single tier and county councils</b>		
Leicestershire	<a href="#">137</a>	<a href="#">57</a>	<a href="#">138</a>

## Spend per adult aged 18-64 by short and long term care and overall for Leicestershire



- Spend on long term care per person, aged 18-64 2018/19
- Spend on short term care per person, aged 18-64 2018/19
- Spend on long and short term care per person, aged 18-64 2018/19

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### Part 1Biii, Spend on adult social care, per adult aged 65 and over

#### Spend per adult aged 65+ by short and long term care and overall for Leicestershire

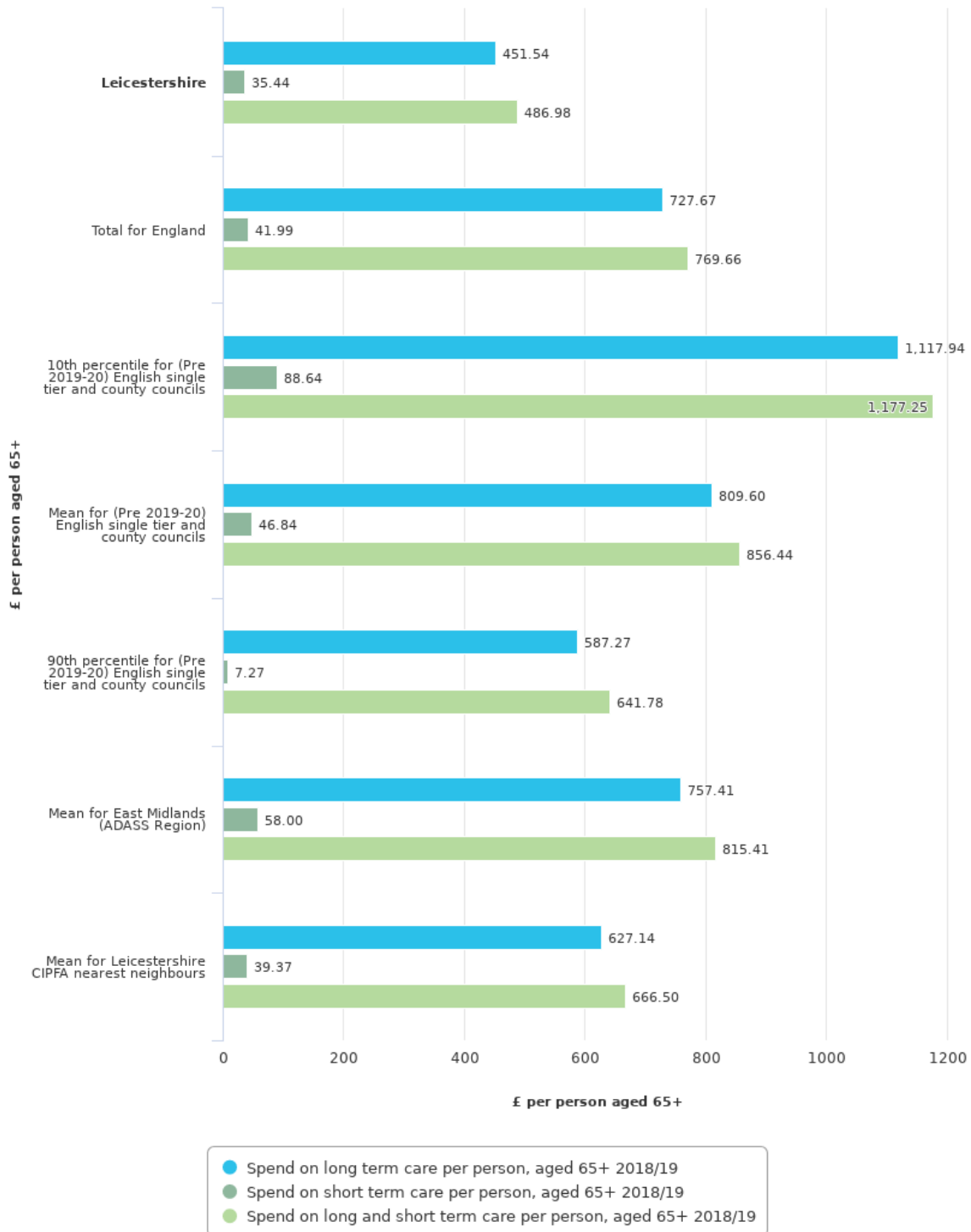
Area	<a href="#">Spend on long term care per person, aged 65+</a>	<a href="#">Spend on short term care per person, aged 65+</a>	<a href="#">Spend on long and short term care per person, aged 65+</a>
	<b>2018/19</b>		
	<b>GBP per person</b>		
Leicestershire	<a href="#">451.54</a>	<a href="#">35.44</a>	<a href="#">486.98</a>
Total for England	727.67	41.99	769.66
10th percentile for (Pre 2019-20) English single tier and county councils	1,117.94	88.64	1,177.25
Mean for (Pre 2019-20) English single tier and county councils	809.60	46.84	856.44
90th percentile for (Pre 2019-20) English single tier and county councils	<a href="#">587.27</a>	<a href="#">7.27</a>	<a href="#">641.78</a>
Mean for East Midlands (ADASS Region)	757.41	58.00	815.41
Mean for Leicestershire CIPFA nearest neighbours	627.14	39.37	666.50

#### Spend per adult aged 65+ by short and long term care and overall for Leicestershire - ranks

Area	<a href="#">Spend on long term care per person, aged 65+</a>	<a href="#">Spend on short term care per person, aged 65+</a>	<a href="#">Spend on long and short term care per person, aged 65+</a>
	<b>2018/19</b>		
	<b>Rank within (Pre 2019-20) English single tier and county councils</b>		
Leicestershire	<a href="#">152</a>	<a href="#">85</a>	<a href="#">152</a>



## Spend per adult aged 65+ by short and long term care and overall for Leicestershire



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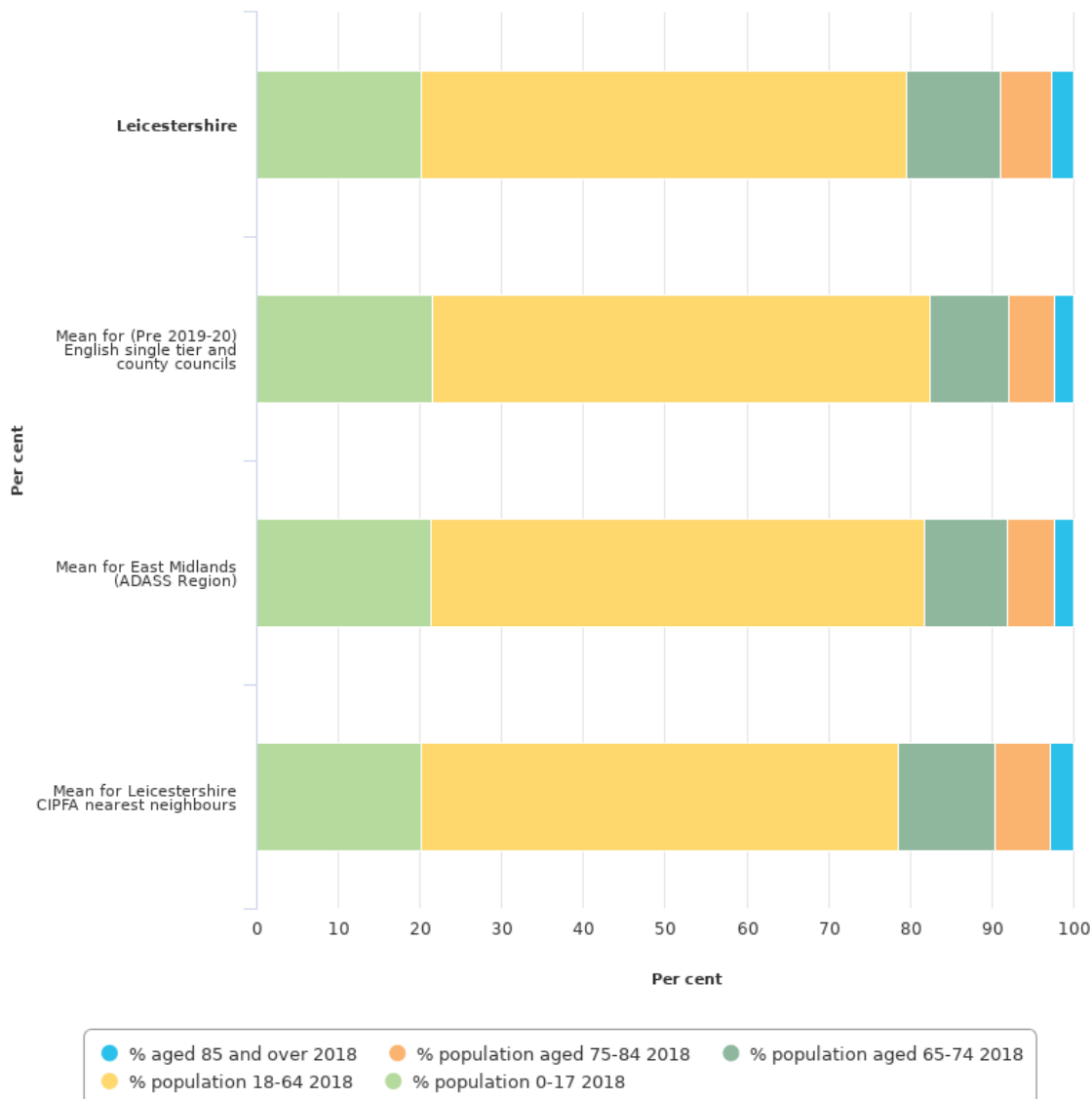
## Step 2: Factors which might influence spending

As noted in Step 1, spending per adult may vary between councils for a wide range of reasons. One of the chief reasons why spending per adult may vary is due to differing levels of local need. It is natural and expected for a council in an area with higher rates of need for adult social care to spend more on adult social care per person than a council in an area with lower needs.

Measuring level of need is not straightforward, but two widely discussed indicators of need for social care are age distribution and deprivation. In general, areas with older populations and with greater levels of deprivation are considered more likely to have higher levels of need for adult social care services. As such, these metrics provide a vital context for the metrics in the rest of this report.

The need for adult social care is increasing due to an ageing population, which impacts not just on the number of older people who need care but also an increasing number of younger adults who have care needs. Support needs from adult social care are also higher in more deprived areas, because more people in more prosperous areas are likely to fund their own care without direct funding required from the local authority.

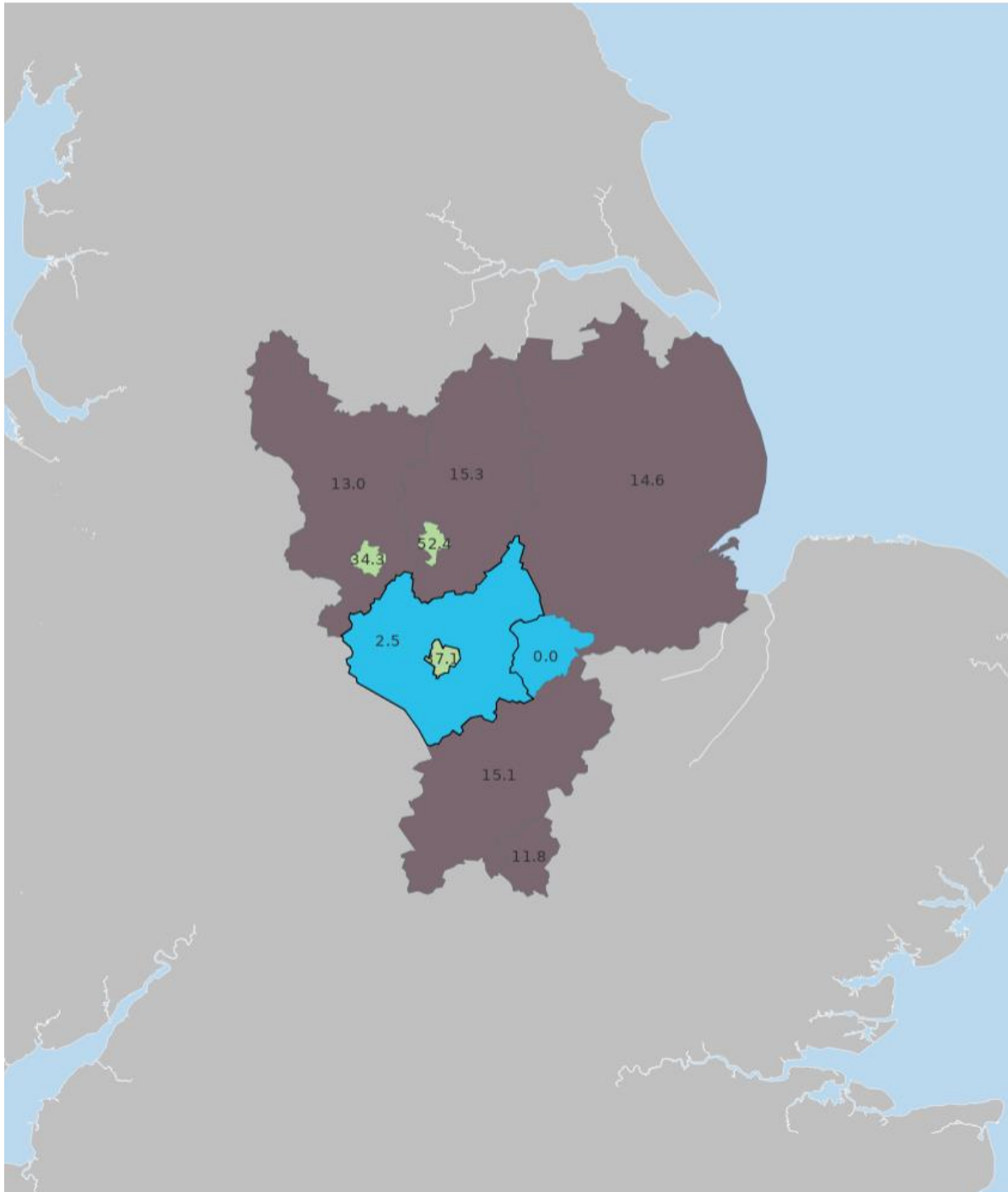
### Age breakdown for Leicestershire



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## IMD - Overall - extent (%) (2019) for East Midlands (ADASS Region)

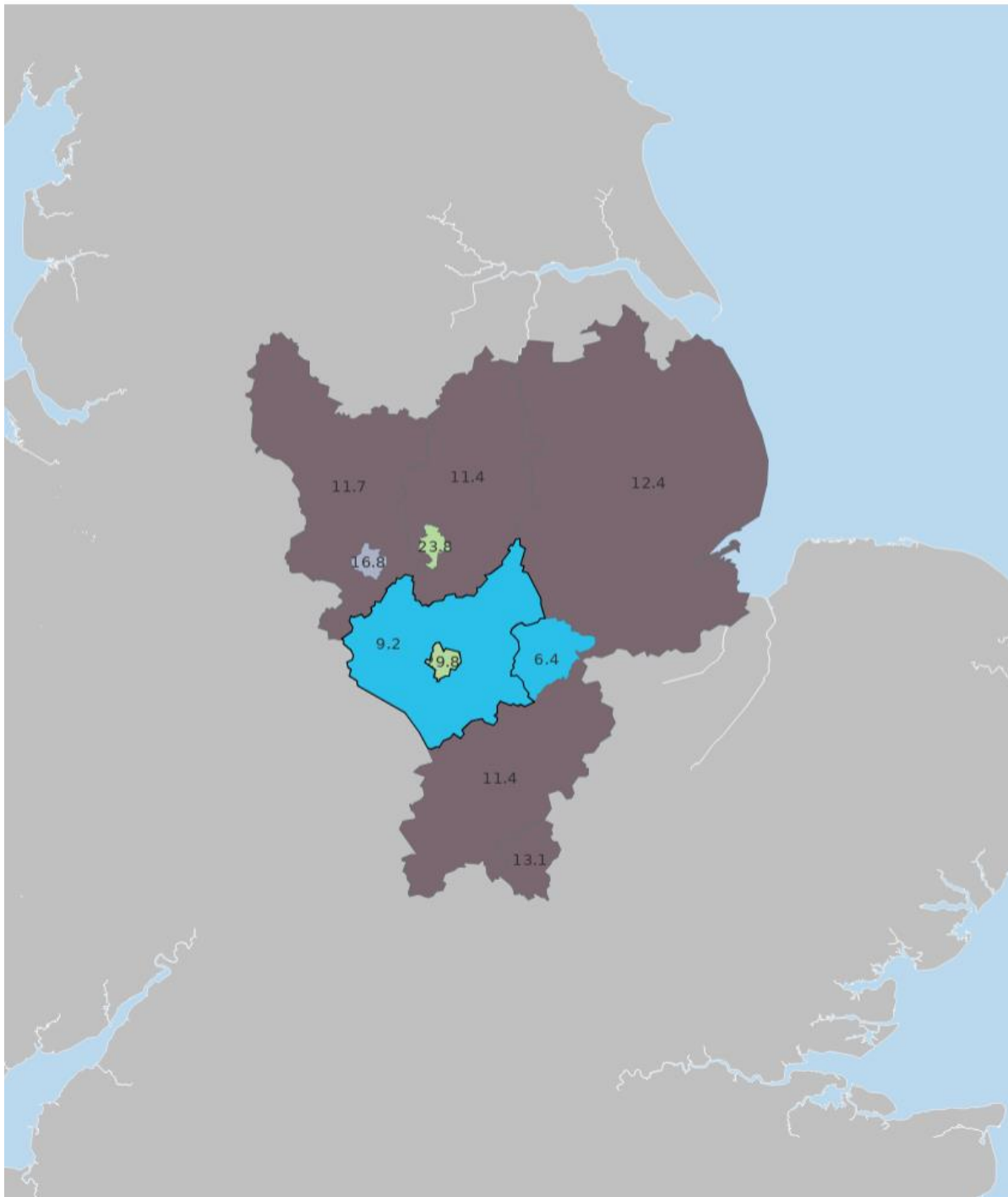
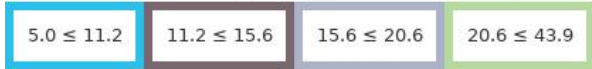
Quartiles within All English single tier and county councils



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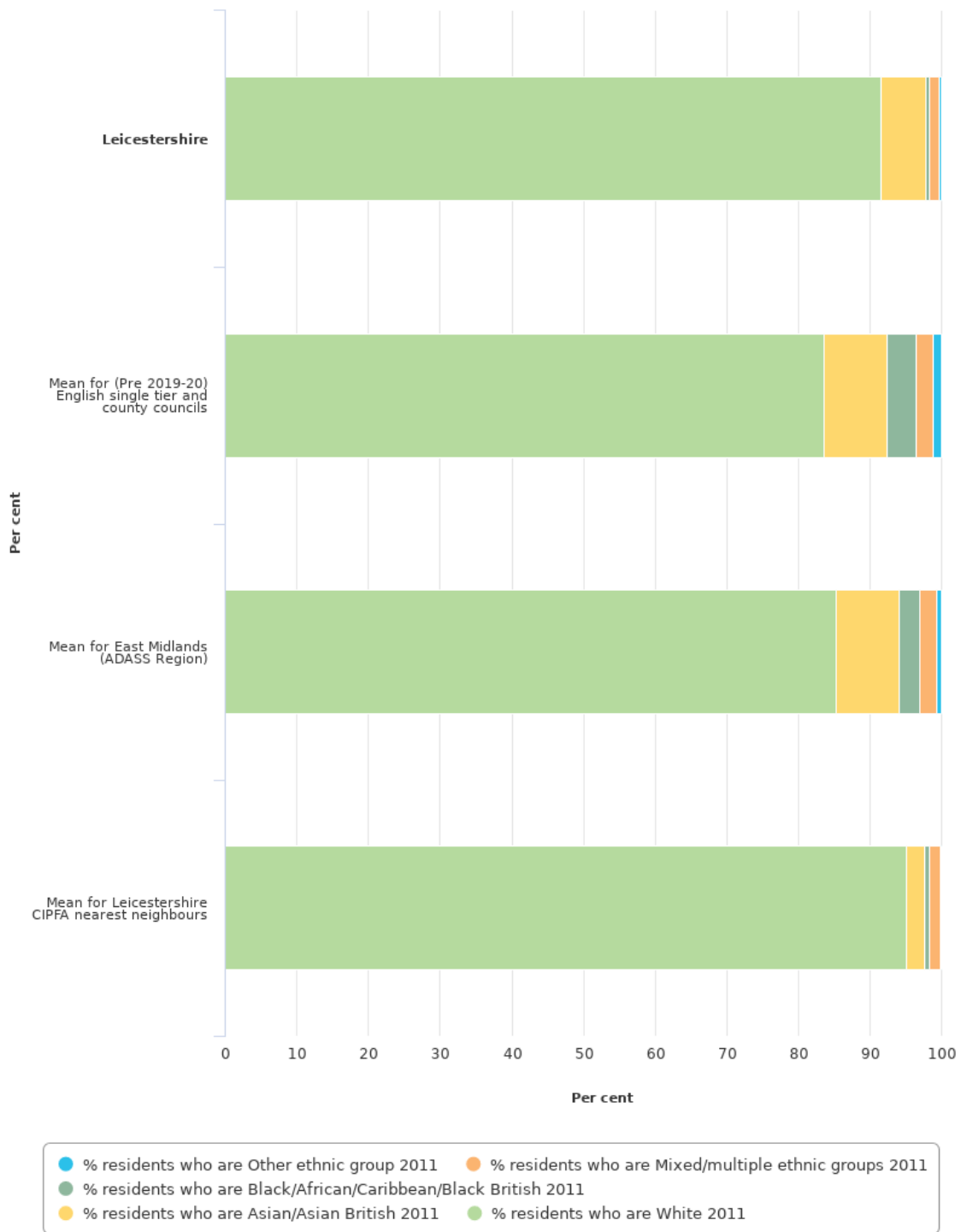
## IMD - Income Deprivation Affecting Older People Index (IDAOPI) - score (%) (2019) for East Midlands (ADASS Region)

Quartiles within All English single tier and county councils



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### Ethnic breakdown for Leicestershire



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## Age breakdown for Leicestershire

Area	<a href="#">% population 0-17</a>	<a href="#">% population 18-64</a>	<a href="#">% population aged 65-74</a>	<a href="#">% population aged 75-84</a>	<a href="#">% aged 85 and over</a>
	<b>2018</b>				
	%				
Leicestershire	<a href="#">20.1</a>	<a href="#">59.5</a>	<a href="#">11.4</a>	<a href="#">6.4</a>	<a href="#">2.6</a>
Total for England	21.4	60.5	9.9	5.8	2.4
Mean for (Pre 2019-20) English single tier and county councils	21.5	61.0	9.6	5.6	2.3
Mean for East Midlands (ADASS Region)	21.4	60.3	10.2	5.8	2.4
Mean for Leicestershire CIPFA nearest neighbours	20.2	58.3	11.8	6.9	2.9

## Index of Multiple Deprivation for Leicestershire

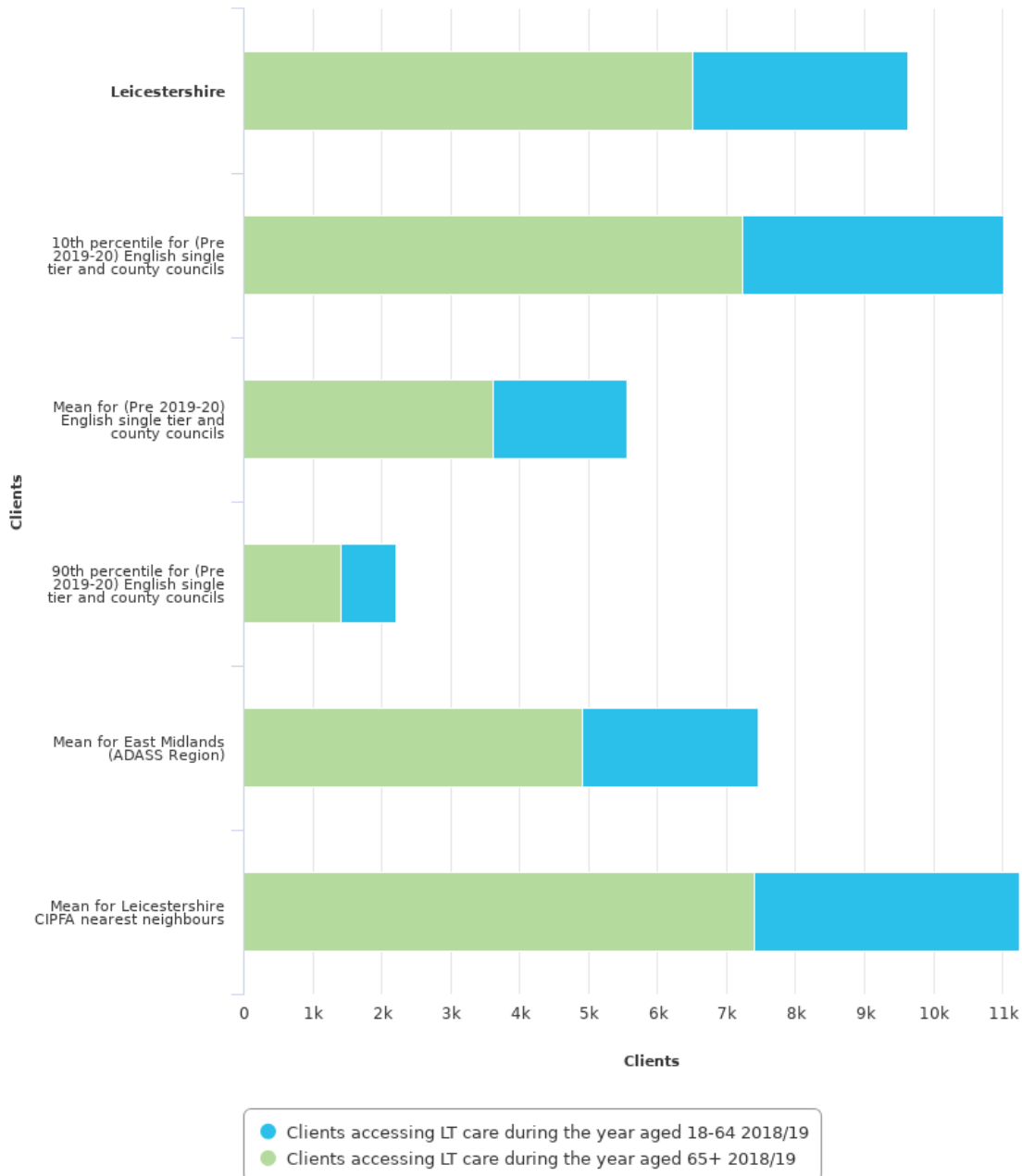
Area	<a href="#">IMD: Overall - extent (%)</a>	<a href="#">IMD: IDAOPI - score (%)</a>
	<b>2019</b>	
	%	
Leicestershire	<a href="#">2.5</a>	<a href="#">9.2</a>
Mean for East Midlands (ADASS Region)	19.6	14.6
Mean for Leicestershire CIPFA nearest neighbours	8.8	10.3

Note: IMD figures are compared to the new cohort of single tier and county councils, not to pre 2019-20 single tier and county councils as are all other figures in this report. The reason for this is that the latest IMD figures apply to 2019

### Step 3: Client numbers

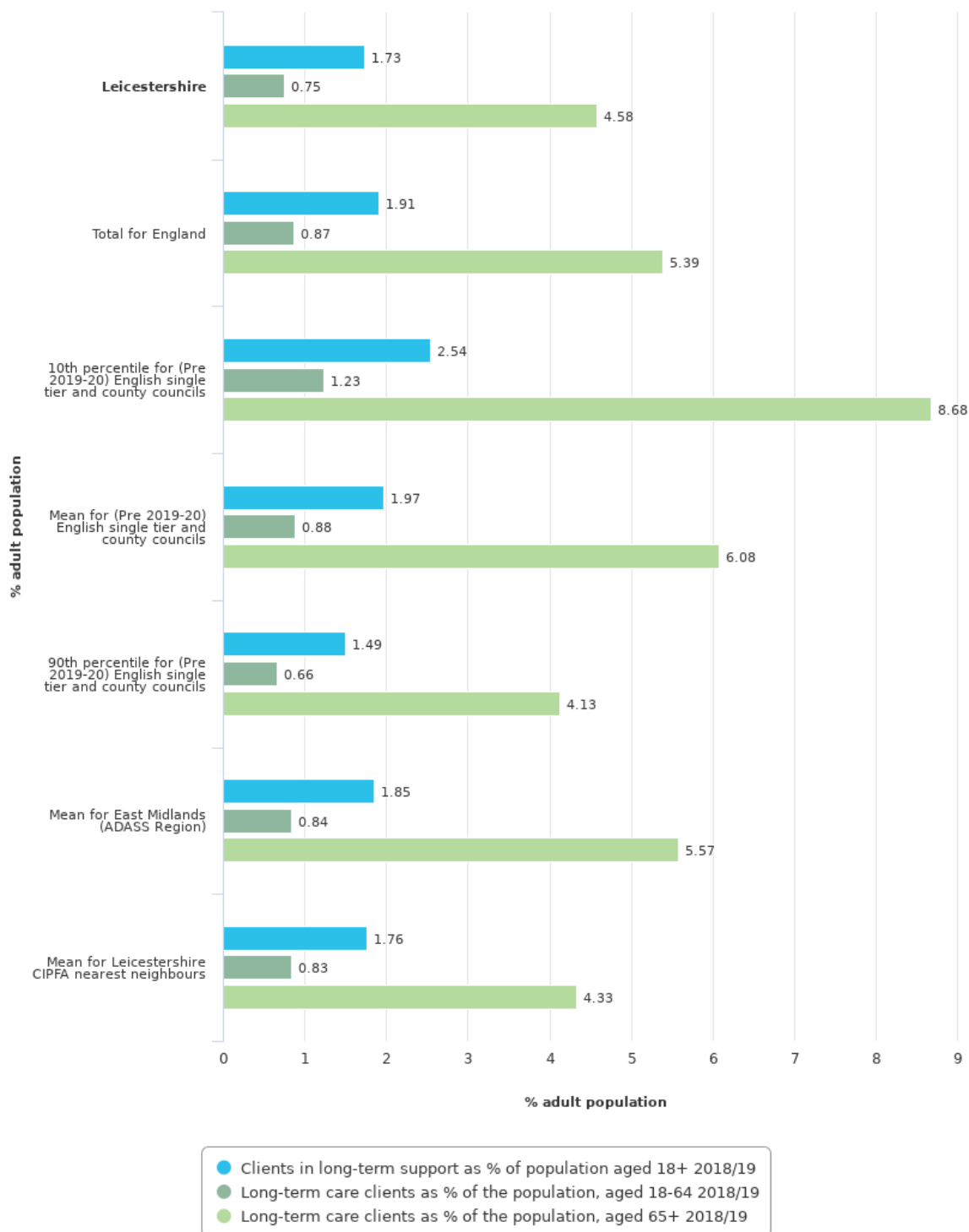
Clients in long-term care, both as absolute numbers and as a per cent of the population, vary considerably between authorities. Consideration of an authority's long-term client population is vital for understanding that authority's use of resources.

#### Number of clients accessing long term support during the year, by age for Leicestershire



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## Long term clients as a per cent of the adult population, by age for Leicestershire



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## Number of clients in long term support, by age for Leicestershire

Area	<a href="#">Clients in long-term support</a>	<a href="#">Clients accessing LT care during the year aged 18-64</a>	<a href="#">Clients accessing LT care during the year aged 65+</a>
	<b>2018/19</b>		
	<b>Count</b>		
Leicestershire	<a href="#">9,625</a>	<a href="#">3,110</a>	<a href="#">6,515</a>
10th percentile for (Pre 2019-20) English single tier and county councils	11,245	3,795	7,228
Mean for (Pre 2019-20) English single tier and county councils	5,575	1,943	3,608
90th percentile for (Pre 2019-20) English single tier and county councils	2,220	795	1,407
Mean for East Midlands (ADASS Region)	7,465	2,560	4,906
Mean for Leicestershire CIPFA nearest neighbours	11,254	3,859	7,394

## Clients in long-term support as a per cent of the population, by age for Leicestershire

Area	<a href="#">Clients in long-term support as % of population aged 18+</a>	<a href="#">Long-term care clients as % of the population, aged 18-64</a>	<a href="#">Long-term care clients as % of the population, aged 65+</a>
	<b>2018/19</b>		
	<b>%</b>		
Leicestershire	<a href="#">1.73</a>	<a href="#">0.75</a>	<a href="#">4.58</a>
Total for England	1.91	0.87	5.39
10th percentile for (Pre 2019-20) English single tier and county councils	2.54	1.23	8.68
Mean for (Pre 2019-20) English single tier and county councils	1.97	0.88	6.08
90th percentile for (Pre 2019-20) English single tier and county councils	1.49	0.66	4.13
Mean for East Midlands (ADASS Region)	1.85	0.84	5.57
Mean for Leicestershire CIPFA nearest neighbours	1.76	0.83	4.33

#### Step 4: Requests for support and what happened next

Requests for support from local authority adult social care are important to consider when investigating use of resources, particularly considering the outcomes of these requests for support. Local authorities aim to maximise the independence of their populations, but in many cases substantial intervention is required to ensure that those with high needs have an acceptable quality of life.

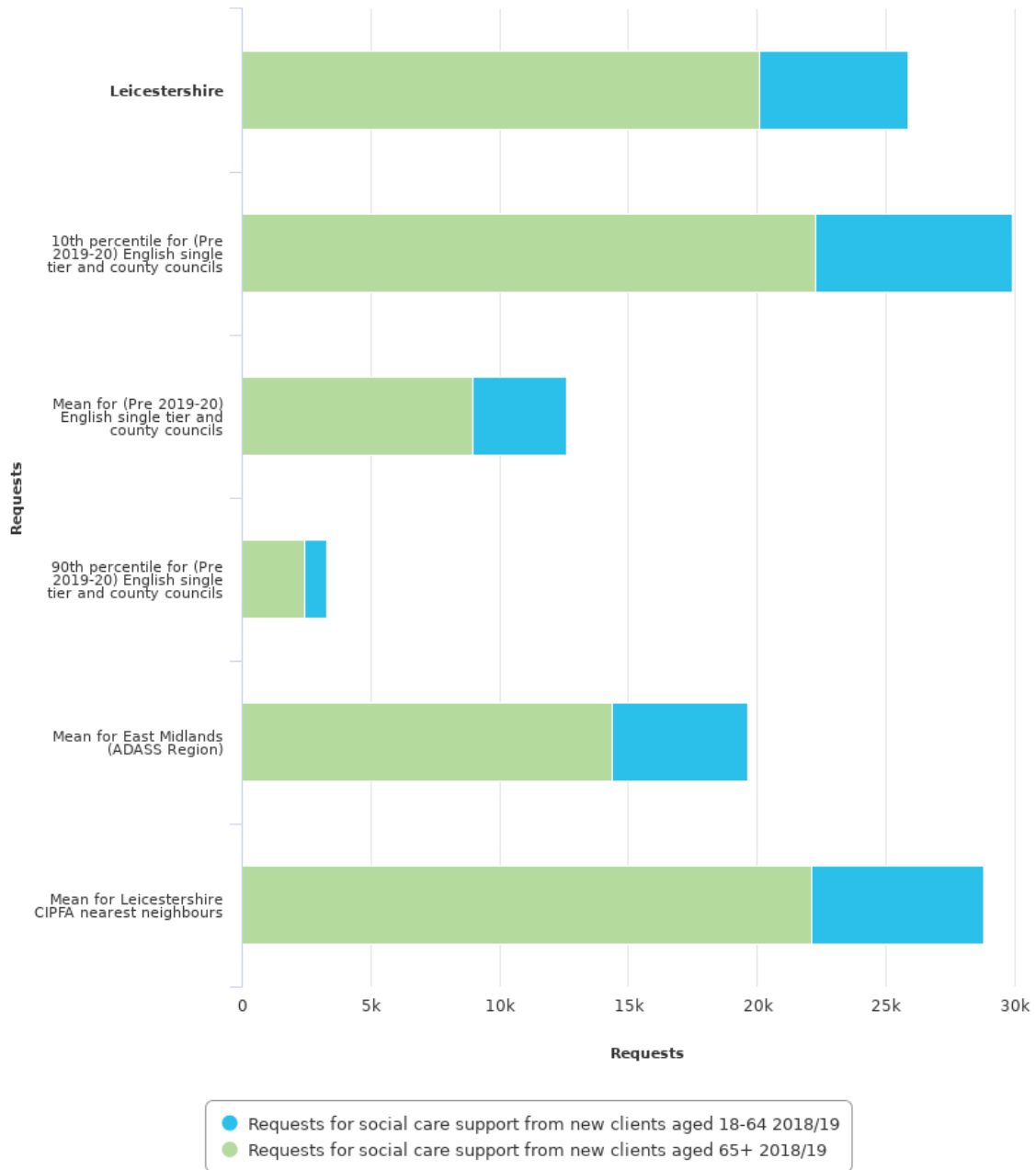
Both the number of requests as a proportion of the applicable adult population, and the per cent breakdown of what happened following these requests, vary across authorities, partly as a result of different 'front door' delivery models which manage entry into the social care system. Whilst there may be some limited scope to manage demand by modifying these delivery models, it is important to ensure that those in need are not excluded from receiving help and support as a result.

The what happened next categories reported below have been aggregated from more detailed categories as follows:

- "Long Term Care: Nursing", "Long Term Care: Residential", and "Long Term Care: Community" have been aggregated into "Long term care (excluding prison)"
- "Short Term Care: to maximise independence" and "Short Term Care: other short term" have been aggregated into "Short term care"
- "Ongoing Low Level Support" has been kept separate
- "Universal Services/Signposted to other services" has been kept separate
- "100% NHS Funded Care" has been kept separate
- "No Services Provided" has been kept separate
- "Long Term Care: Prison", "End of Life", and "No Services Provided - Deceased" have been aggregated into "Other outcomes"

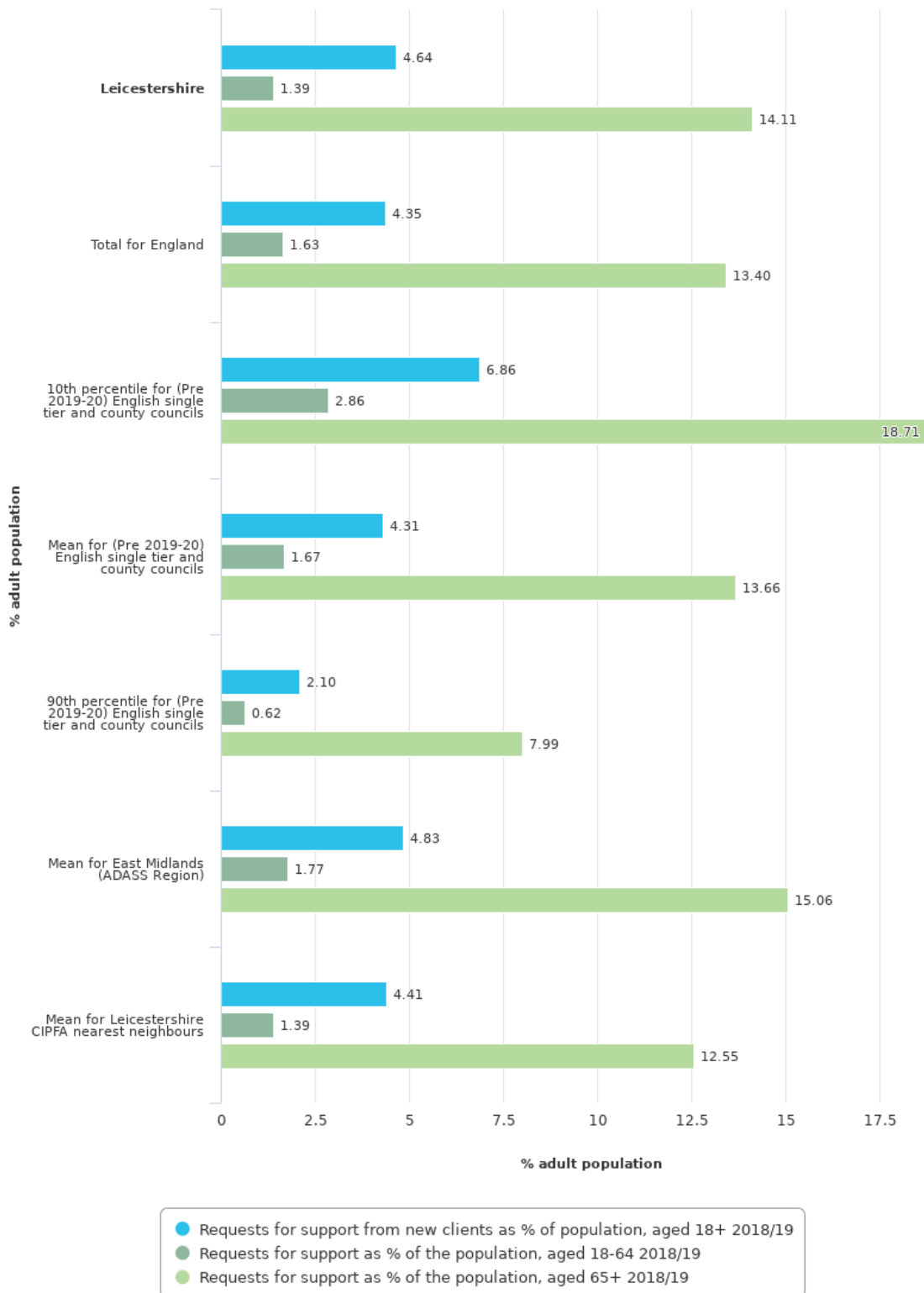
Part 4a. Requests for support from new clients

Number of requests for support received, by age for Leicestershire



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## Requests for support as a per cent of the adult population, by age for Leicestershire



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### Number of requests for support received, by age for Leicestershire

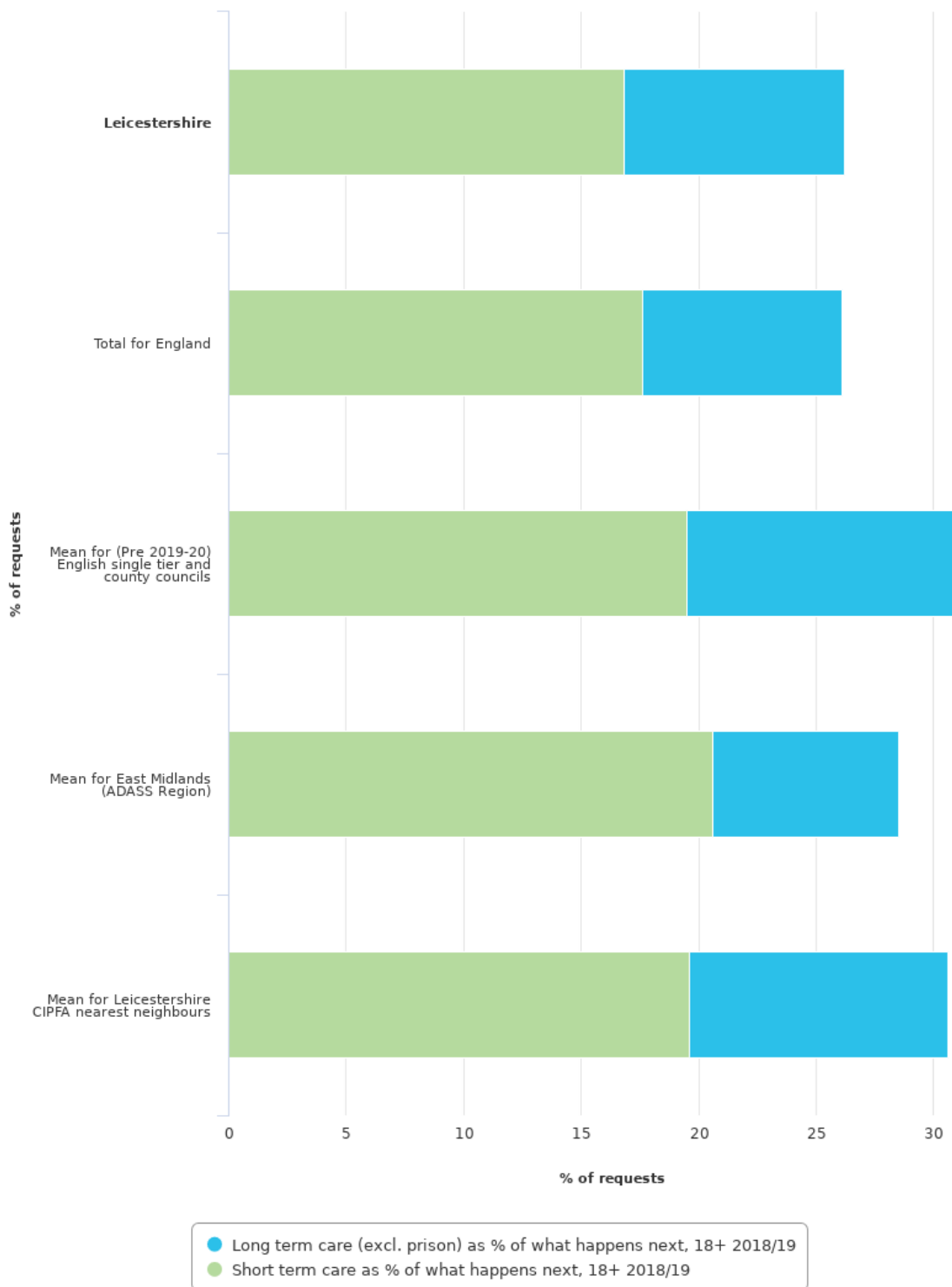
Area	<a href="#">Requests for support from new clients, aged 18+</a>	<a href="#">Requests for social care support from new clients aged 18-64</a>	<a href="#">Requests for social care support from new clients aged 65+</a>
	<b>2018/19</b>		
	<b>Count</b>		
Leicestershire	<a href="#">25,870</a>	<a href="#">5,790</a>	<a href="#">20,080</a>
10th percentile for (Pre 2019-20) English single tier and county councils	28,869	7,657	22,280
Mean for (Pre 2019-20) English single tier and county councils	12,596	3,621	8,974
90th percentile for (Pre 2019-20) English single tier and county councils	3,481	846	2,425
Mean for East Midlands (ADASS Region)	19,660	5,261	14,399
Mean for Leicestershire CIPFA nearest neighbours	28,785	6,654	22,130

## Requests for support as a per cent of the adult population, by age for Leicestershire

Area	<a href="#">Requests for support from new clients as % of population, aged 18+</a>	<a href="#">Requests for support as % of the population, aged 18-64</a>	<a href="#">Requests for support as % of the population, aged 65+</a>
	<b>2018/19</b>		
	<b>%</b>		
Leicestershire	<a href="#">4.64</a>	<a href="#">1.39</a>	<a href="#">14.11</a>
Total for England	4.35	1.63	13.40
10th percentile for (Pre 2019-20) English single tier and county councils	6.86	2.86	18.71
Mean for (Pre 2019-20) English single tier and county councils	4.31	1.67	13.66
90th percentile for (Pre 2019-20) English single tier and county councils	2.10	0.62	7.99
Mean for East Midlands (ADASS Region)	4.83	1.77	15.06
Mean for Leicestershire CIPFA nearest neighbours	4.41	1.39	12.55

**Part 4bi. What happened next per cent breakdown, aged 18 and over**

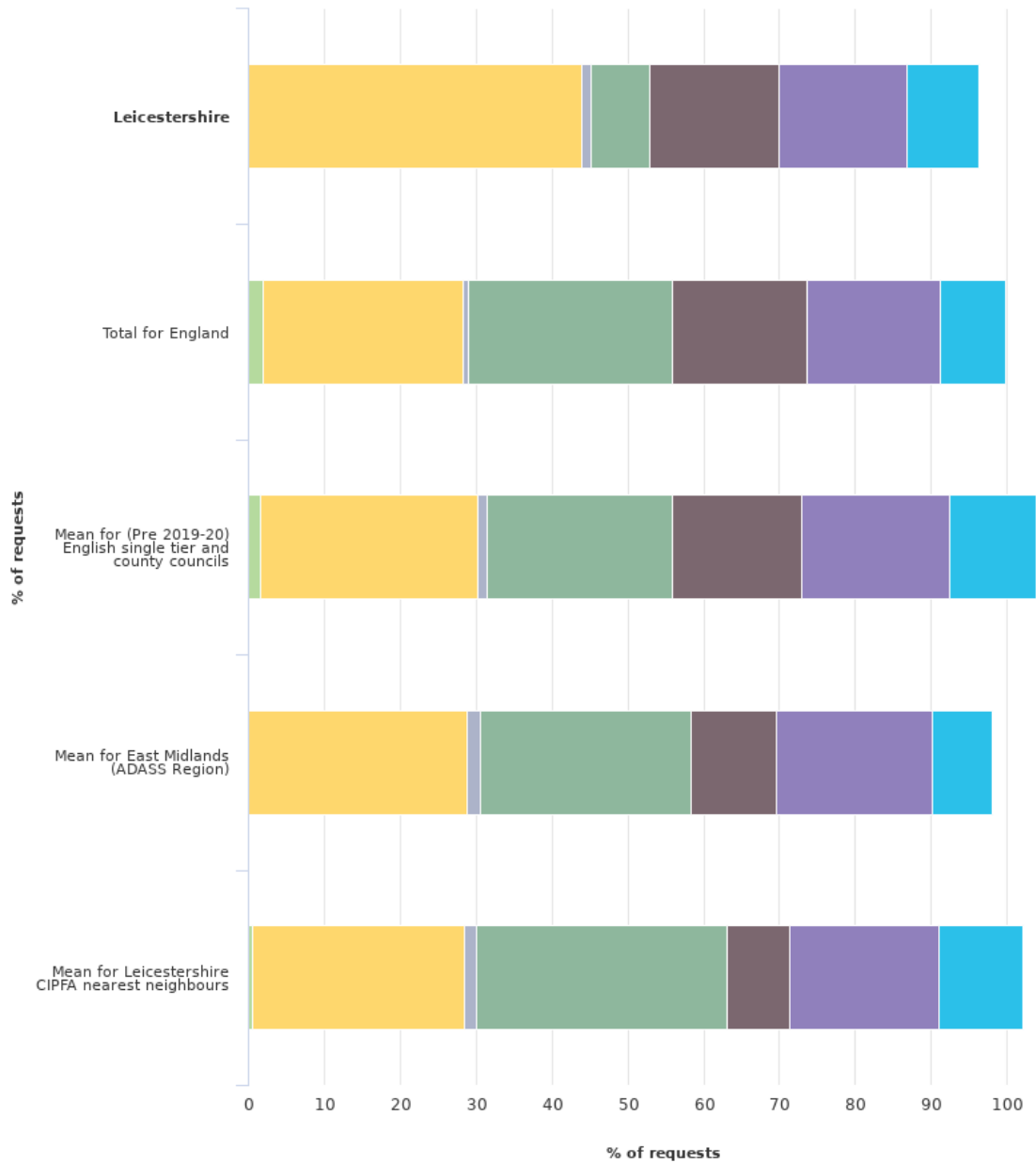
**Proportion of requests for support from new clients that resulted in long and short term care, aged 18 and over for Leicestershire**



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### What happened next full per cent breakdown, aged 18 and over for Leicestershire



- Long term care (excl. prison) as % of what happens next, 18+ 2018/19
- Short term care as % of what happens next, 18+ 2018/19
- Ongoing low level support as % of what happens next, 18+ 2018/19
- Universal or signposted services as % of what happens next, 18+ 2018/19
- Entirely NHS funded care as % of what happens next, 18+ 2018/19
- No services provided as % of what happens next, 18+ 2018/19
- Other outcomes as % of what happens next, 18+ 2018/19

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## What happened next per cent breakdown, aged 18 and over for Leicestershire, part 1 of 2

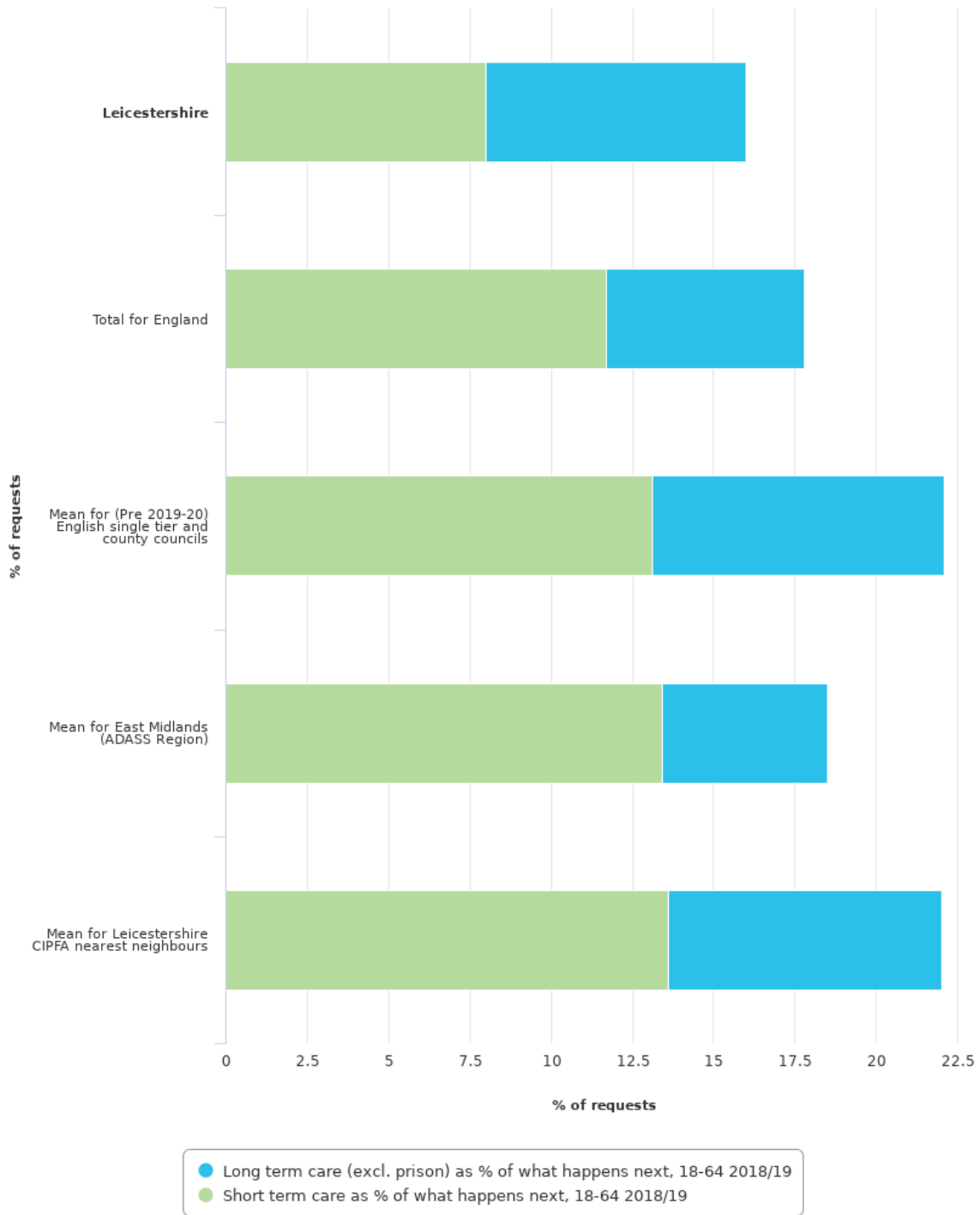
Area	<a href="#">Long term care (excl. prison) as % of what happens next, 18+</a>	<a href="#">Short term care as % of what happens next, 18+</a>	<a href="#">Ongoing low level support as % of what happens next, 18+</a>
	<b>2018/19</b>		
	<b>%</b>		
Leicestershire	<a href="#">9.4</a>	<a href="#">16.8</a>	<a href="#">17.2</a>
Total for England	8.5	17.6	17.7
10th percentile for (Pre 2019-20) English single tier and county councils	21.7	31.9	34.4
Mean for (Pre 2019-20) English single tier and county councils	11.5	19.5	17.0
90th percentile for (Pre 2019-20) English single tier and county councils	5.1	8.7	3.0
Mean for East Midlands (ADASS Region)	7.9	20.6	11.2
Mean for Leicestershire CIPFA nearest neighbours	11.0	19.6	8.4

## What happened next per cent breakdown, aged 18 and over for Leicestershire, part 2 of 2

Area	<a href="#">Universal or signposted services as % of what happens next, 18+</a>	<a href="#">Entirely NHS funded care as % of what happens next, 18+</a>	<a href="#">No services provided as % of what happens next, 18+</a>	<a href="#">Other outcomes as % of what happens next, 18+</a>
	<b>2018/19</b>			
	<b>%</b>			
Leicestershire	7.6	1.2	44.0	Suppressed
Total for England	27.0	0.7	26.3	1.9
10th percentile for (Pre 2019-20) English single tier and county councils	46.7	3.0	45.4	2.6
Mean for (Pre 2019-20) English single tier and county councils	24.4	1.3	28.7	1.5
90th percentile for (Pre 2019-20) English single tier and county councils	4.4	0.2	8.4	0.6
Mean for East Midlands (ADASS Region)	27.7	1.8	28.8	Missing
Mean for Leicestershire CIPFA nearest neighbours	33.0	1.5	28.0	0.5

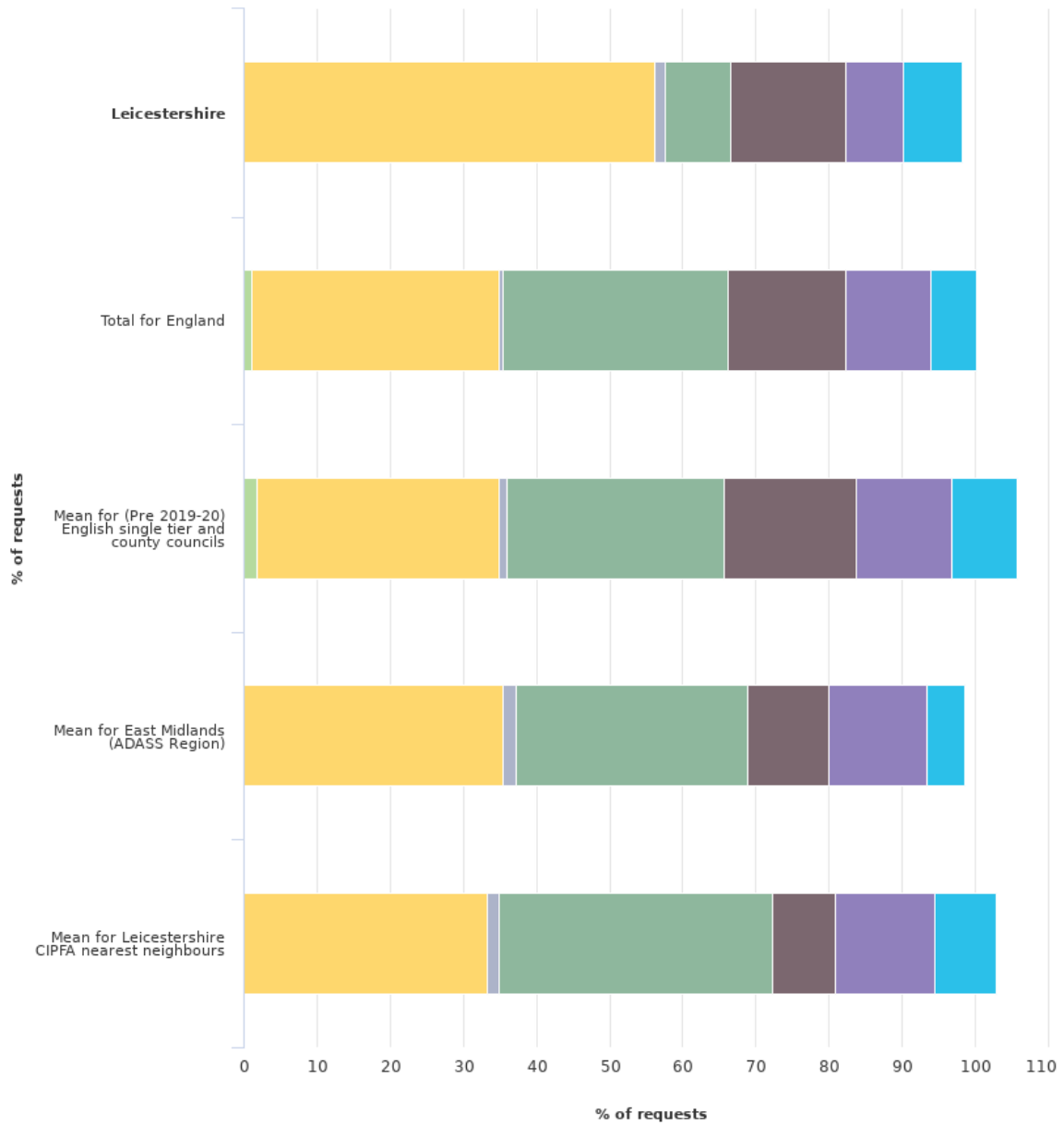
**Part 4bii. What happened next per cent breakdown, adults aged 18 to 64**

**Proportion of requests for support from new clients that resulted in long and short term support for adults aged 18 to 64 for Leicestershire**



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### What happened next full per cent breakdown, aged 18 to 64 for Leicestershire



- Long term care (excl. prison) as % of what happens next, 18-64 2018/19
- Short term care as % of what happens next, 18-64 2018/19
- Ongoing low level support as % of what happens next, 18-64 2018/19
- Universal or signposted services as % of what happens next, 18-64 2018/19
- Entirely NHS funded care as % of what happens next, 18-64 2018/19
- No services provided as % of what happens next, 18-64 2018/19
- Other outcomes as % of what happens next, 18-64 2018/19

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## What happened next per cent breakdown, aged 18 to 64 for Leicestershire, part 1 of 2

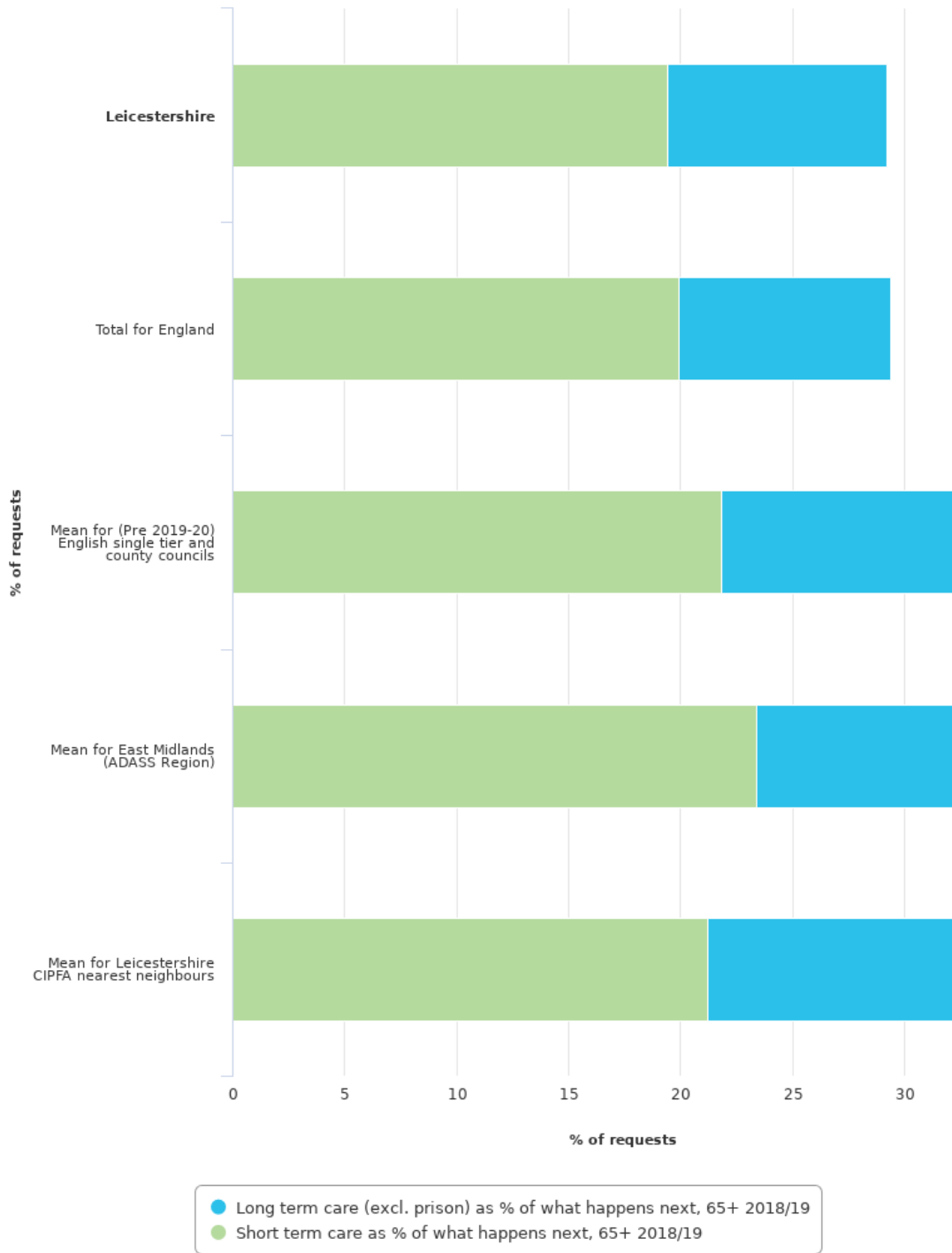
Area	<a href="#">Long term care (excl. prison) as % of what happens next, 18-64</a>	<a href="#">Short term care as % of what happens next, 18-64</a>	<a href="#">Ongoing low level support as % of what happens next, 18-64</a>
	<b>2018/19</b>		
	%		
Leicestershire	8.0	8.0	15.6
Total for England	6.1	11.7	16.1
10th percentile for (Pre 2019-20) English single tier and county councils	21.1	29.5	36.2
Mean for (Pre 2019-20) English single tier and county councils	9.0	13.1	18.1
90th percentile for (Pre 2019-20) English single tier and county councils	3.3	3.3	3.1
Mean for East Midlands (ADASS Region)	5.1	13.4	11.2
Mean for Leicestershire CIPFA nearest neighbours	8.4	13.6	8.7

## What happened next per cent breakdown, aged 18 to 64 for Leicestershire, part 2 of 2

Area	<a href="#">Universal or signposted services as % of what happens next, 18-64</a>	<a href="#">Entirely NHS funded care as % of what happens next, 18-64</a>	<a href="#">No services provided as % of what happens next, 18-64</a>	<a href="#">Other outcomes as % of what happens next, 18-64</a>
	<b>2018/19</b>			
	<b>%</b>			
Leicestershire	<a href="#">9.0</a>	<a href="#">1.4</a>	<a href="#">56.2</a>	<a href="#">Suppressed</a>
Total for England	30.8	0.6	33.8	1.0
10th percentile for (Pre 2019-20) English single tier and county councils	56.4	1.9	56.9	1.9
Mean for (Pre 2019-20) English single tier and county councils	29.7	1.1	33.0	1.8
90th percentile for (Pre 2019-20) English single tier and county councils	6.4	0.2	8.3	1.7
Mean for East Midlands (ADASS Region)	31.6	1.7	35.5	Missing
Mean for Leicestershire CIPFA nearest neighbours	37.4	1.6	33.2	Suppressed

**Part 4biii. What happened next per cent breakdown, adults aged 65 and over**

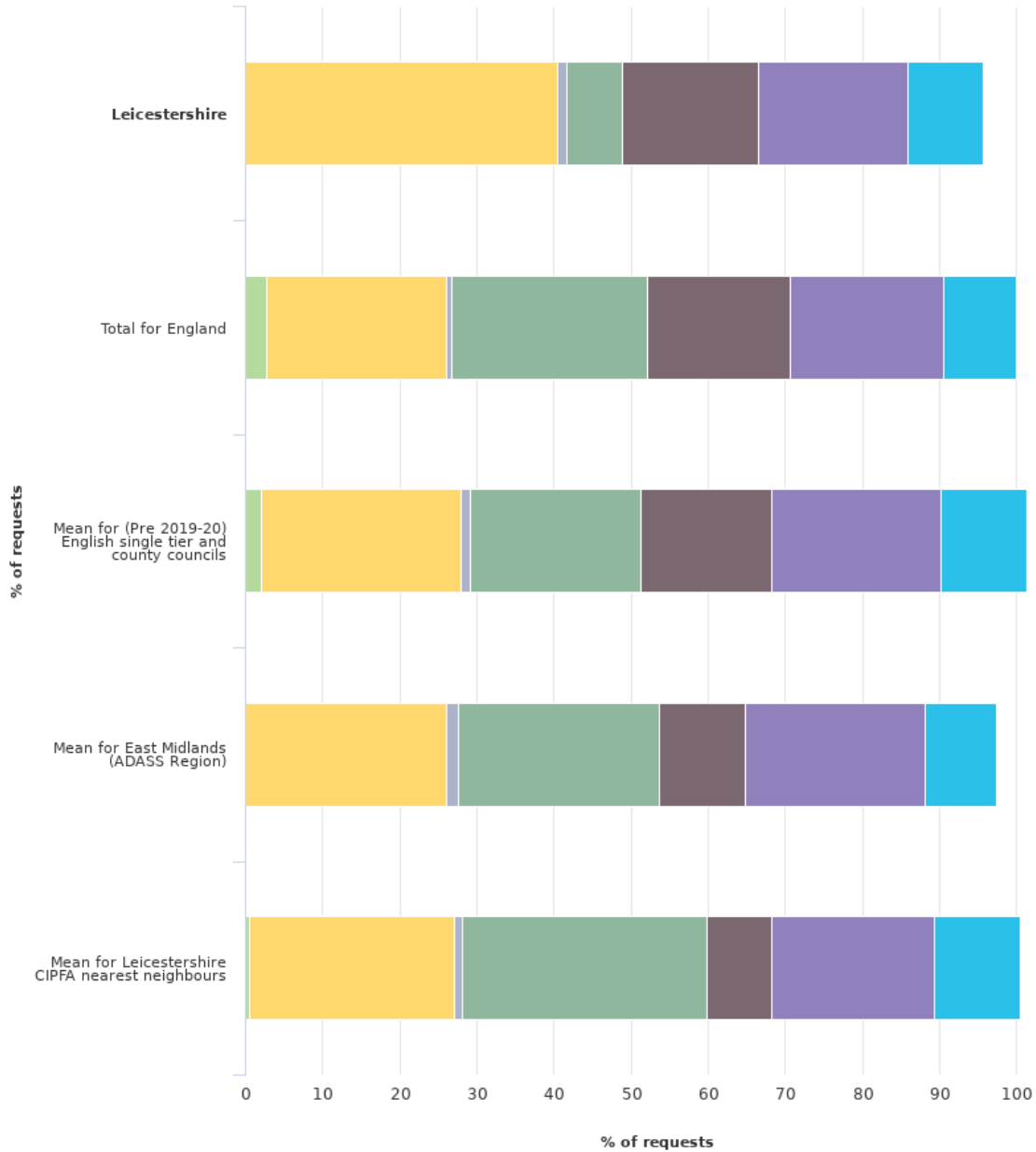
**Proportion of requests for support from new clients that resulted in long and short term support, for adults aged 65 and over for Leicestershire**



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### What happened next full per cent breakdown, aged 65 and over for Leicestershire



- Long term care (excl. prison) as % of what happens next, 65+ 2018/19
- Short term care as % of what happens next, 65+ 2018/19
- Ongoing low level support as % of what happens next, 65+ 2018/19
- Universal or signposted services as % of what happens next, 65+ 2018/19
- Entirely NHS funded care as % of what happens next, 65+ 2018/19
- No services provided as % of what happens next, 65+ 2018/19
- Other outcomes as % of what happens next, 65+ 2018/19

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## What happened next per cent breakdown, aged 65 and over for Leicestershire, part 1 of 2

Area	<a href="#">Long term care (excl. prison) as % of what happens next, 65+</a>	<a href="#">Short term care as % of what happens next, 65+</a>	<a href="#">Ongoing low level support as % of what happens next, 65+</a>
	<b>2018/19</b>		
	<b>%</b>		
Leicestershire	<a href="#">9.8</a>	<a href="#">19.4</a>	<a href="#">17.7</a>
Total for England	9.5	19.9	18.4
10th percentile for (Pre 2019-20) English single tier and county councils	18.9	35.4	34.1
Mean for (Pre 2019-20) English single tier and county councils	11.3	21.8	17.0
90th percentile for (Pre 2019-20) English single tier and county councils	4.9	9.9	2.8
Mean for East Midlands (ADASS Region)	9.1	23.4	11.1
Mean for Leicestershire CIPFA nearest neighbours	11.0	21.2	8.3

## What happened next per cent breakdown, aged 65 and over for Leicestershire, part 2 of 2

Area	<a href="#">Universal or signposted services as % of what happens next, 65+</a>	<a href="#">Entirely NHS funded care as % of what happens next, 65+</a>	<a href="#">No services provided as % of what happens next, 65+</a>	<a href="#">Other outcomes as % of what happens next, 65+</a>
	<b>2018/19</b>			
	<b>%</b>			
Leicestershire	<a href="#">7.2</a>	<a href="#">1.2</a>	<a href="#">40.4</a>	<a href="#">Suppressed</a>
10th percentile for (Pre 2019-20) English single tier and county councils	44.1	2.2	43.7	3.4
Mean for (Pre 2019-20) English single tier and county councils	22.1	1.2	26.0	2.0
90th percentile for (Pre 2019-20) English single tier and county councils	3.4	0.2	7.0	0.8
Mean for East Midlands (ADASS Region)	26.1	1.5	26.1	Missing
Mean for Leicestershire CIPFA nearest neighbours	31.7	1.1	26.5	0.6
Total for England	25.4	0.8	23.3	2.7

## Step 5: Comparison of performance measures

### Note: this step does not make use of LG Inform measures.

The Institute of Public Care (IPC) suggest in their report 'Six Steps to Managing Demand in Adult Social Care – A Performance Management Approach' that a number of locally available measures be considered to help understand a council's use of resources. The measures, with benchmarks suggested by the IPC in brackets, include:

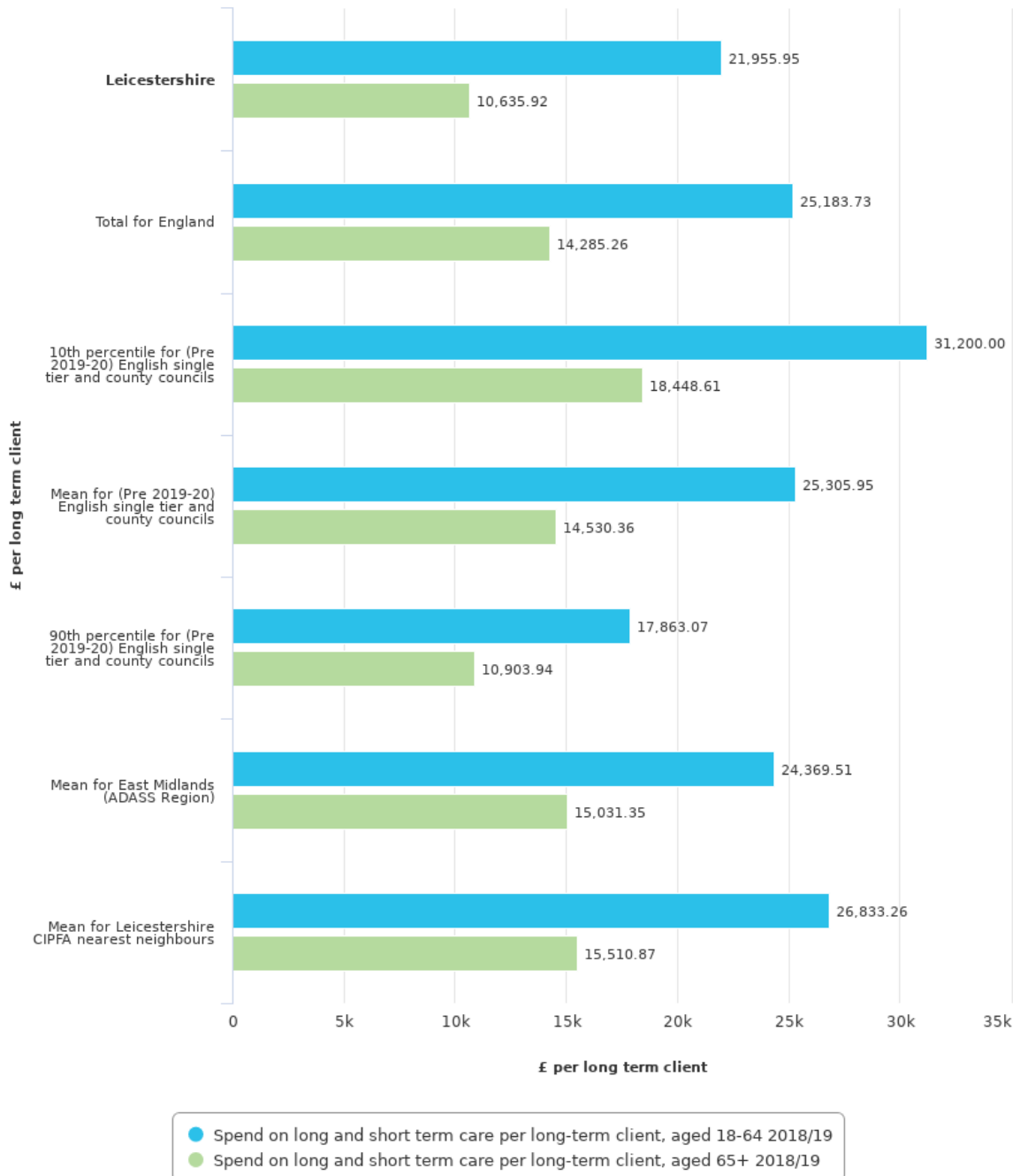
- The proportion of people who approach the council for help who go on to receive a full assessment (about 25%)
- The proportion of acute patients who are discharged to a permanent residential care bed without any opportunity for short-term recovery (close to zero)
- The proportion of acute patients who return home after a short-term period (no more than six weeks) in a residential care bed (close to 75%)
- The proportion of older people who receive less than 10 hours of domiciliary care as a proportion of all older people receiving domiciliary care (no more than 15%)
- The proportion of older people who are assessed as having care needs, who were offered a re-ablement based service (more than 70%)
- The proportion of those who are assessed as needing domiciliary care who receive their care within 48 hours of the assessment being completed (over 90%)
- The proportion of older people receiving longer term care whose care needs have decreased from their initial assessment or last review (around 15%)
- The proportion of younger adults receiving longer-term care whose care needs have decreased from their last review (around 66%)
- The proportion of older people receiving longer term care whose needs have increased since their initial assessment or latest review (no more than 25%)
- The proportion of older people (with or without a diagnosis of dementia) who enter residential care after receiving domiciliary care (no more than 20%)
- The proportion of older people with a requirement for palliative care who died at home (at least 75% of those who stated that they wanted to die at home)
- The proportion of younger adults receiving longer-term services who are living in registered residential care (less than 10%)
- Total spend by a council on all adult residential care (no more than 30% of the gross adult social care budget)
- The proportion of older people living in extra-care housing who are receiving more than 14 hours of care (no more than 10% of those living in an extra-care facility at any one time)

Whilst these measures are unavailable on LG Inform, it is suggested that they are considered locally and, where possible, regionally, to aid understanding of use of resources in this area.

## Step 6: Comparison of spend per client

### Part 6. Spend on adult social care per long-term care client, with age breakdown

#### Spend on long and short term care per long term client, by age for Leicestershire



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## Spend on long and short term care per long term client, by age for Leicestershire

Area	<a href="#">Spend on long and short term care per long-term client, aged 18+</a>	<a href="#">Spend on long and short term care per long-term client, aged 18-64</a>	<a href="#">Spend on long and short term care per long-term client, aged 65+</a>
	<b>2018/19</b>		
	<b>GBP per person</b>		
Leicestershire	<a href="#">14,293.61</a>	<a href="#">21,955.95</a>	<a href="#">10,635.92</a>
Total for England	18,083.77	25,183.73	14,285.26
10th percentile for (Pre 2019-20) English single tier and county councils	22,505.65	31,200.00	18,448.61
Mean for (Pre 2019-20) English single tier and county councils	18,134.37	25,305.95	14,530.36
90th percentile for (Pre 2019-20) English single tier and county councils	<a href="#">14,293.61</a>	<a href="#">17,863.07</a>	<a href="#">10,903.94</a>
Mean for East Midlands (ADASS Region)	18,241.80	24,369.51	15,031.35
Mean for Leicestershire CIPFA nearest neighbours	19,284.00	26,833.26	15,510.87

Note: spend on long and short term care per long term client aged 18+ is not the same measure as the measure of spend on adult social care per long term client aged 18+ featured in Step 13. The numerator in Step 13 includes spending on adult social care that is not categorised by long or short term care, whereas the numerator in this step excludes this expenditure. The figures will therefore be different between the two steps.

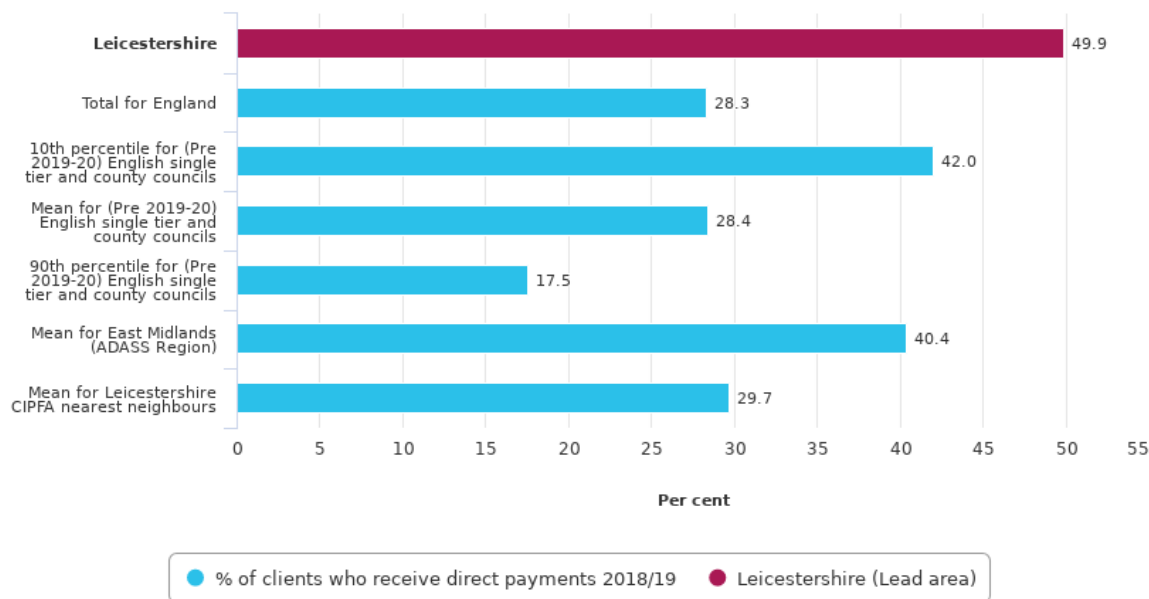
## Spend on short and long term care per long term client, by age for Leicestershire - ranks

Area	<a href="#">Spend on long and short term care per long-term client, aged 18+</a>	<a href="#">Spend on long and short term care per long-term client, aged 18-64</a>	<a href="#">Spend on long and short term care per long-term client, aged 65+</a>
	<b>2018/19</b>		
	<b>Rank within (Pre 2019-20) English single tier and county councils</b>		
Leicestershire	<a href="#">136</a>	<a href="#">113</a>	<a href="#">140</a>

## Step 7: Measures of care methods and settings

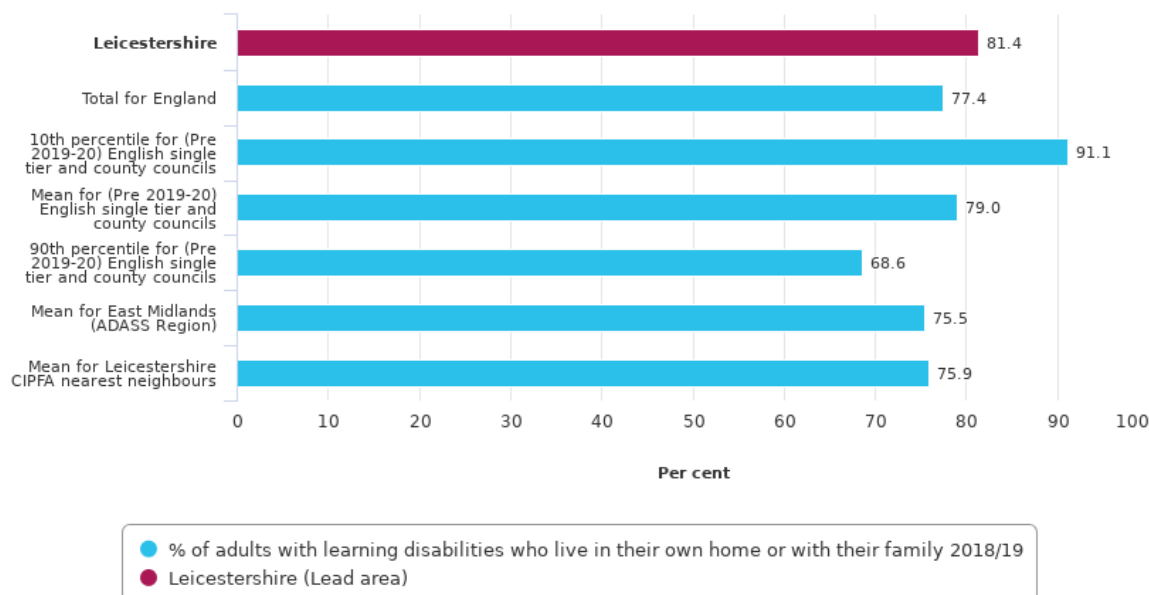
Different authorities may employ different methods and settings of care to best reflect the needs, preferences and priorities of their communities. These different measures and settings may result in different amounts and types of resources being used, and may explain why some areas have different patterns of resource usage than others.

### Proportion of people using social care receiving direct payments for Leicestershire



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### Proportion of adults with learning disabilities who live in their own home or with their family for Leicestershire

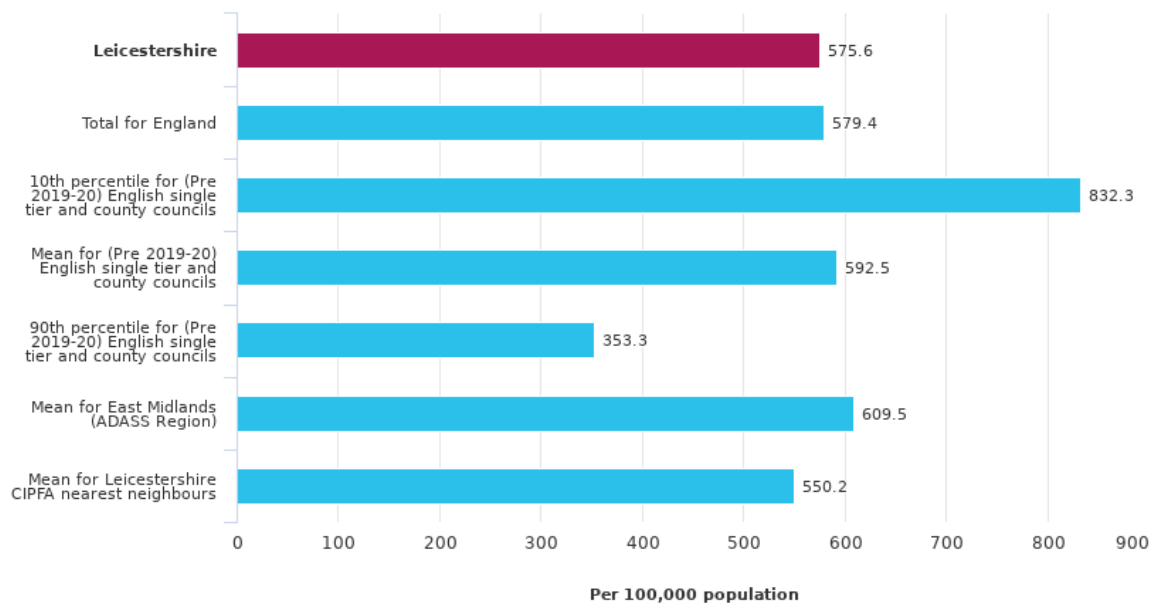


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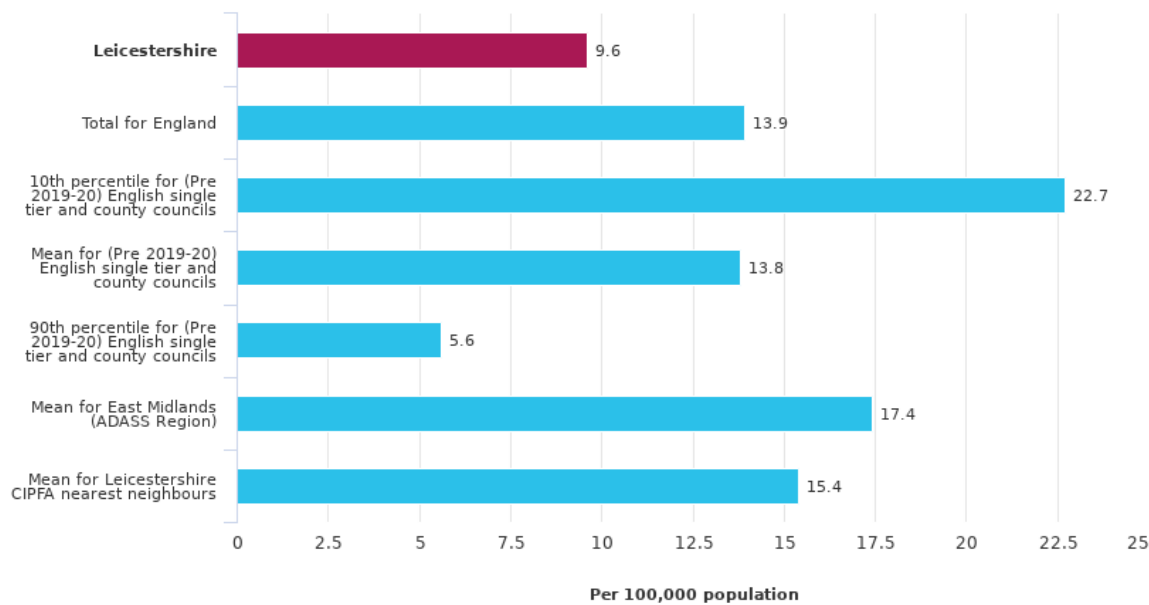
## Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population for Leicestershire



- Long-term support needs of older adults met by admission to residential and nursing care homes per 100,000 2018/19
- Leicestershire (Lead area)

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## Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population for Leicestershire



- Long-term support needs of younger adults met by admission to residential and nursing care homes per 100,000 population 2018/19
- Leicestershire (Lead area)

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## Measures of care methods and settings for Leicestershire

Area	<a href="#">% of clients who receive direct payments</a>	<a href="#">% of adults with learning disabilities who live in their own home or with their family</a>	<a href="#">Long-term support needs of older adults met by admission to residential and nursing care homes per 100,000</a>	<a href="#">Long-term support needs of younger adults met by admission to residential and nursing care homes per 100,000 population</a>
	2018/19			
	%		Ratio per 100,000	
Leicestershire	<a href="#">49.9</a>	<a href="#">81.4</a>	<a href="#">575.6</a>	<a href="#">9.6</a>
Total for England	28.3	77.4	579.4	13.9
10th percentile for (Pre 2019-20) English single tier and county councils	42.0	91.1	832.3	22.7
Mean for (Pre 2019-20) English single tier and county councils	28.4	79.0	592.5	13.8
90th percentile for (Pre 2019-20) English single tier and county councils	17.5	68.6	353.3	5.6
Mean for East Midlands (ADASS Region)	40.4	75.5	609.5	17.4
Mean for Leicestershire CIPFA nearest neighbours	29.7	75.9	550.2	15.4

### Measures of care methods and settings for Leicestershire - ranks

Area	<a href="#">% of clients who receive direct payments</a>	<a href="#">% of adults with learning disabilities who live in their own home or with their family</a>	<a href="#">Long-term support needs of older adults met by admission to residential and nursing care homes per 100,000</a>	<a href="#">Long-term support needs of younger adults met by admission to residential and nursing care homes per 100,000 population</a>
<b>2018/19</b>				
<b>Rank within (Pre 2019-20) English single tier and county councils</b>				
Leicestershire	2	55	76	103

## Step 8: Plans for less expensive care methods

**Note: this step does not make use of LG Inform measures.**

It is important to consider whether less expensive methods of care would, in some cases, still meet care needs. Making these considerations may help resources to go further in the long run. The long term strategy of the council for the next ten years should be set out by the council and reflected in the Market Position Statement.

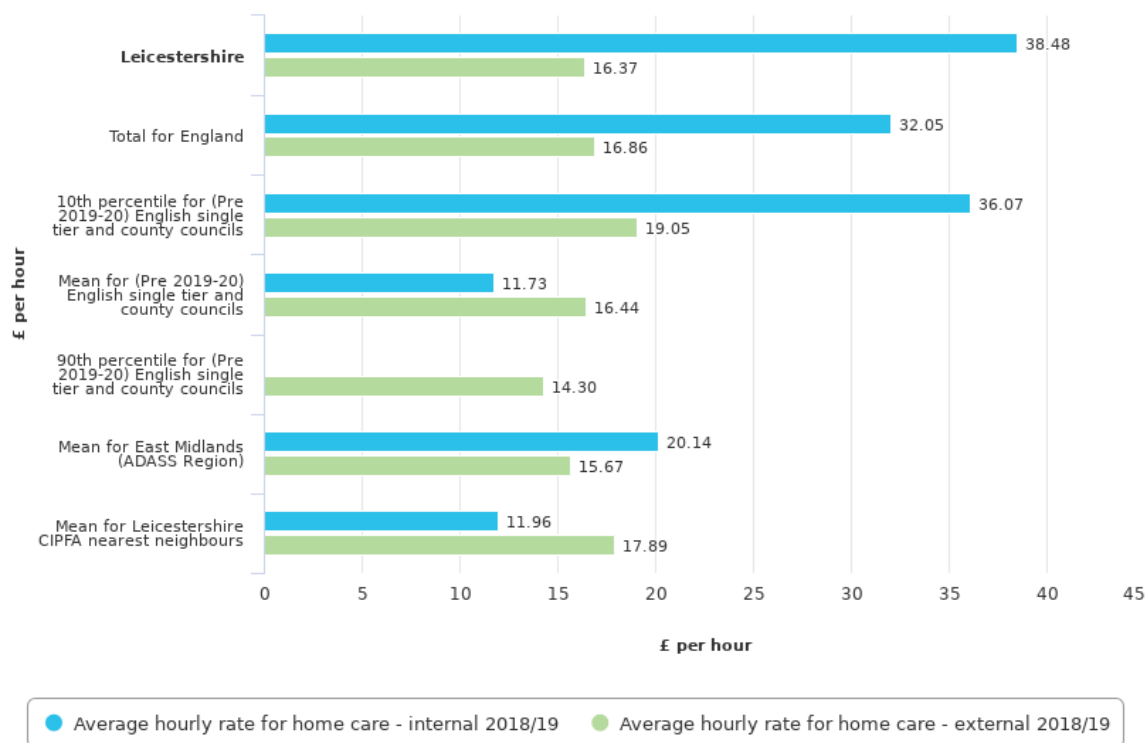
## Step 9: Local unit costs

The cost of providing the same amount of care varies from area to area, due to local economic conditions, sparsity and rurality, and a range of other factors. This may mean that one council is required to spend more money than another to provide the same care.

There are a number of complexities in a consideration of unit costs. Moving someone from an expensive setting such as a care home and supporting them in the community can often reduce the cost of the care whilst giving them the opportunity to have more independence and live a more normal life. However, this can also mean that the unit costs of both types of care can increase. Only those with the most complex care needs are supported in care homes, so the unit cost for each care home resident will be higher. Similarly, community care packages may be greater than they used to be, although they are still less expensive than supporting someone in a care home.

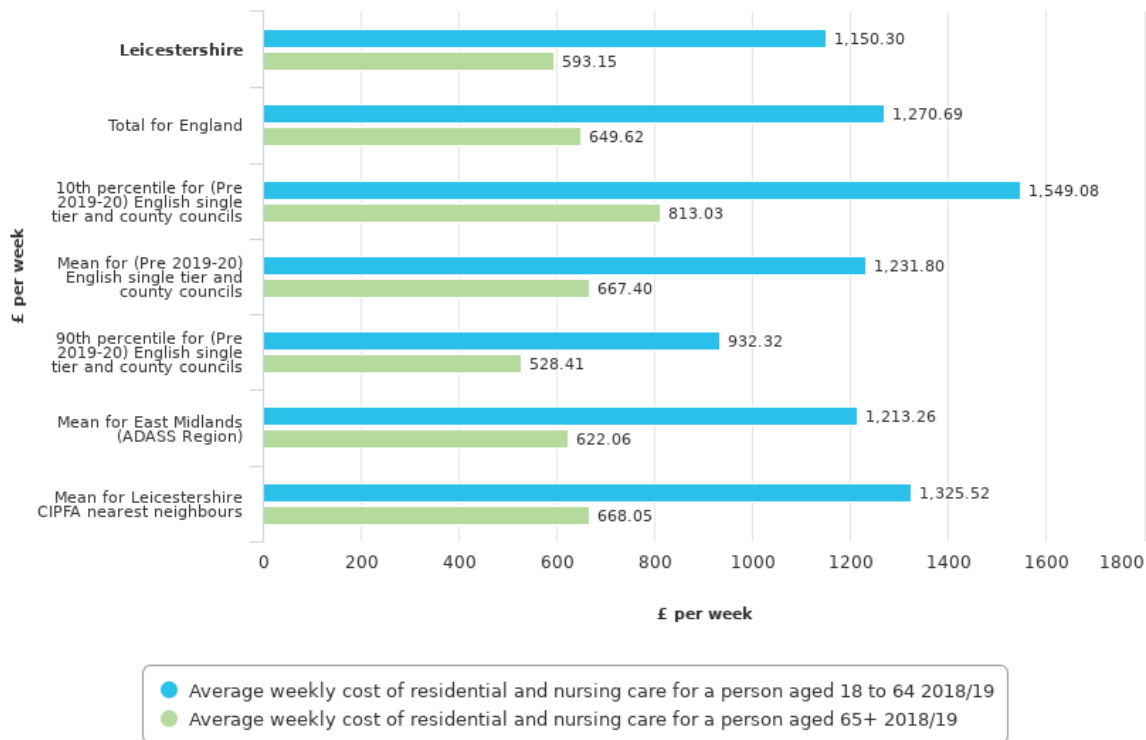
It is also possible that there may be local factors which increase the cost of providing social care. Examples include low unemployment, which means that wages are generally higher. Equally, tourist areas experience problems with labour availability during the busiest periods. The cost of home care will vary depending on the sparsity of an area. Property costs vary considerably across the country. Prices in an area can be forced up if there is very strong self-funder demand or NHS activity which is not co-ordinated with the local authority.

## Average hourly rates for home care for Leicestershire



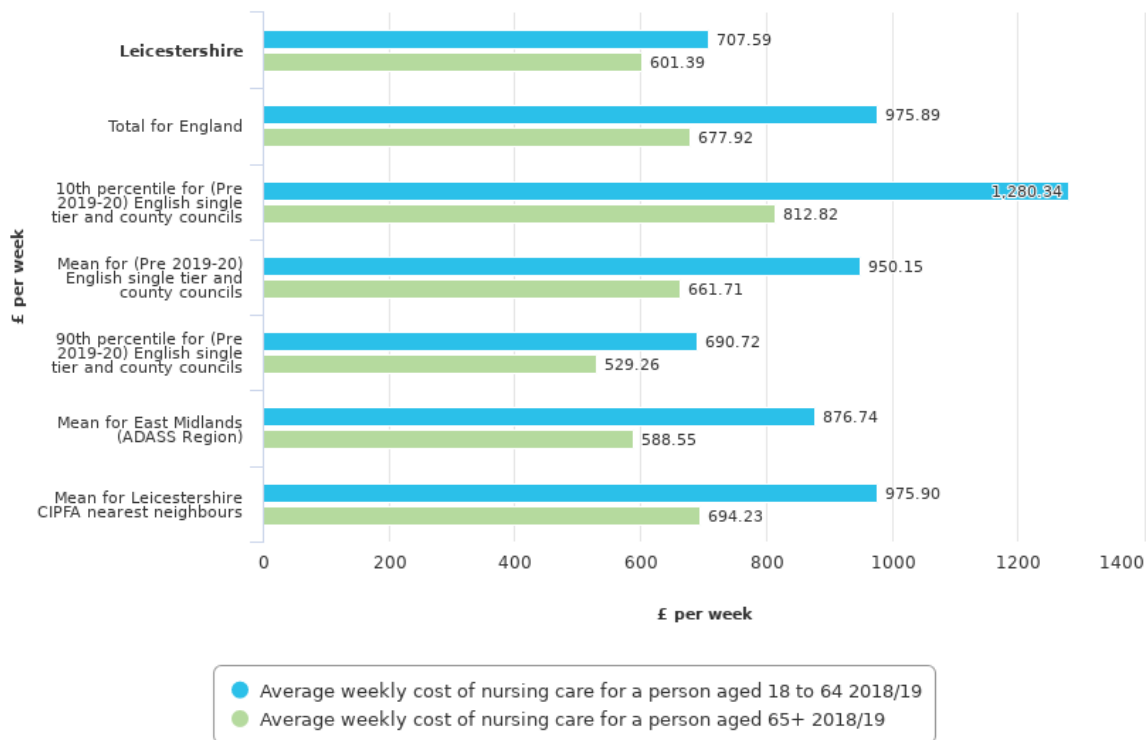
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### Average weekly rate for residential and nursing care by age for Leicestershire



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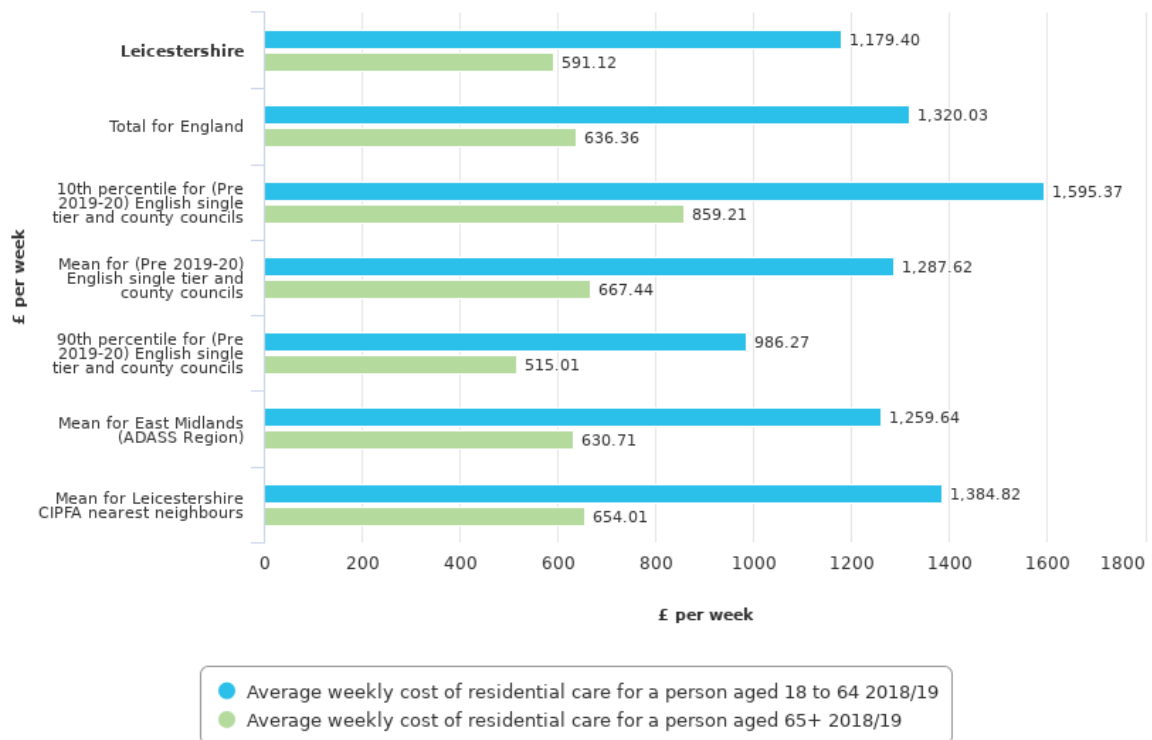
### Average weekly rate for nursing care by age for Leicestershire



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## Average weekly rate for residential care by age for Leicestershire



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### Unit costs for Leicestershire, part 1 of 2

Area	<a href="#">Average hourly rate for home care - internal</a>	<a href="#">Average hourly rate for home care - external</a>	<a href="#">Average weekly cost of residential and nursing care for a person aged 18 to 64</a>	<a href="#">Average weekly cost of residential and nursing care for a person aged 65+</a>
	<b>2018/19</b>			
	<b>GBP per unit</b>		<b>GBP per week</b>	
Leicestershire	<a href="#">38.48</a>	<a href="#">16.37</a>	<a href="#">1,150.30</a>	<a href="#">593.15</a>
Total for England	32.05	16.86	1,270.69	649.62
10th percentile for (Pre 2019-20) English single tier and county councils	<a href="#">36.07</a>	<a href="#">19.05</a>	<a href="#">1,549.08</a>	<a href="#">813.03</a>
Mean for (Pre 2019-20) English single tier and county councils	<a href="#">11.73</a>	<a href="#">16.44</a>	<a href="#">1,231.80</a>	<a href="#">667.40</a>
90th percentile for (Pre 2019-20) English single tier and county councils	<a href="#">0.00</a>	<a href="#">14.30</a>	<a href="#">932.32</a>	<a href="#">528.41</a>
Mean for East Midlands (ADASS Region)	20.14	15.67	1,213.26	622.06
Mean for Leicestershire CIPFA nearest neighbours	11.96	17.89	1,325.52	668.05

### Unit costs for Leicestershire, part 1 of 2 - ranks

Area	<a href="#">Average hourly rate for home care - internal</a>	<a href="#">Average hourly rate for home care - external</a>	<a href="#">Average weekly cost of residential and nursing care for a person aged 18 to 64</a>	<a href="#">Average weekly cost of residential and nursing care for a person aged 65+</a>
	<b>2018/19</b>			
	<b>Rank within (Pre 2019-20) English single tier and county councils</b>			
Leicestershire	<a href="#">13</a>	<a href="#">72</a>	<a href="#">95</a>	<a href="#">107</a>

## Unit costs for Leicestershire, part 2 of 2

Area	<a href="#">Average weekly cost of nursing care for a person aged 18 to 64</a>	<a href="#">Average weekly cost of nursing care for a person aged 65+</a>	<a href="#">Average weekly cost of residential care for a person aged 18 to 64</a>	<a href="#">Average weekly cost of residential care for a person aged 65+</a>
	<b>2018/19</b>			
	<b>GBP per week</b>			
Leicestershire	<a href="#">707.59</a>	<a href="#">601.39</a>	<a href="#">1,179.40</a>	<a href="#">591.12</a>
Total for England	975.89	677.92	1,320.03	636.36
10th percentile for (Pre 2019-20) English single tier and county councils	1,280.34	812.82	1,595.37	859.21
Mean for (Pre 2019-20) English single tier and county councils	950.15	661.71	1,287.62	667.44
90th percentile for (Pre 2019-20) English single tier and county councils	690.72	529.26	986.27	515.01
Mean for East Midlands (ADASS Region)	876.74	588.55	1,259.64	630.71
Mean for Leicestershire CIPFA nearest neighbours	975.90	694.23	1,384.82	654.01

## Unit costs for Leicestershire, part 2 of 2 - ranks

Area	<a href="#">Average weekly cost of nursing care for a person aged 18 to 64</a>	<a href="#">Average weekly cost of nursing care for a person aged 65+</a>	<a href="#">Average weekly cost of residential care for a person aged 18 to 64</a>	<a href="#">Average weekly cost of residential care for a person aged 65+</a>
	<b>2018/19</b>			
	<b>Rank within (Pre 2019-20) English single tier and county councils</b>			
Leicestershire	<a href="#">135</a>	<a href="#">102</a>	<a href="#">97</a>	<a href="#">104</a>

**Step 10: Alternative ways of meeting care needs**

**Note: this step does not make use of LG Inform measures.**

If care costs are generally higher than elsewhere for specific local reasons (such as the local labour market) what are you going to do about looking at alternative ways of meeting care needs? This should be set out in the Market Position Statement.

**Step 11: Value for money in work with the NHS**

**Note: this step does not make use of LG Inform measures.**

Is your work with the NHS (including the use of the Better Care Fund) achieving value for money for the local authority? This is based on local judgement, potentially culminating in a report to the Health and Wellbeing Board.

**Step 12: Is your spending other than on care packages effective? Could its efficiency be improved?**

**Note: this step does not make use of LG Inform measures.**

It is important that all activities such as staffing are reviewed regularly to see whether they are effective and to see if they could be more efficient.

### Step 13: Revised expenditure including NHS and other income

This report began with a consideration of gross current expenditure on adult social care as reported by local authorities to NHS Digital. There are several technical issues with this measure which must be borne in mind.

- This measure of gross current expenditure excludes spending funded from the Better Care Fund, other NHS income, and a number of other income sources. The amount of money which is thus excluded from the gross current expenditure measure is often significant. The spending figures for older people are especially likely to be impacted by the exclusion of spending funded by these income sources.
- The financial breakdown used by NHS Digital is not used within local authorities. The returns distinguish between spending on long and short term care and 'other', and it is likely that considerable variation between authorities exists on what is classified within the 'other' category. Gross current expenditure broken down by age group excludes all spending on 'other'.
- There is evidence that there is inconsistency in the way that some local authorities record their data. This means that the information for a minority of local authorities is not consistent with that provided by the majority of local authorities.

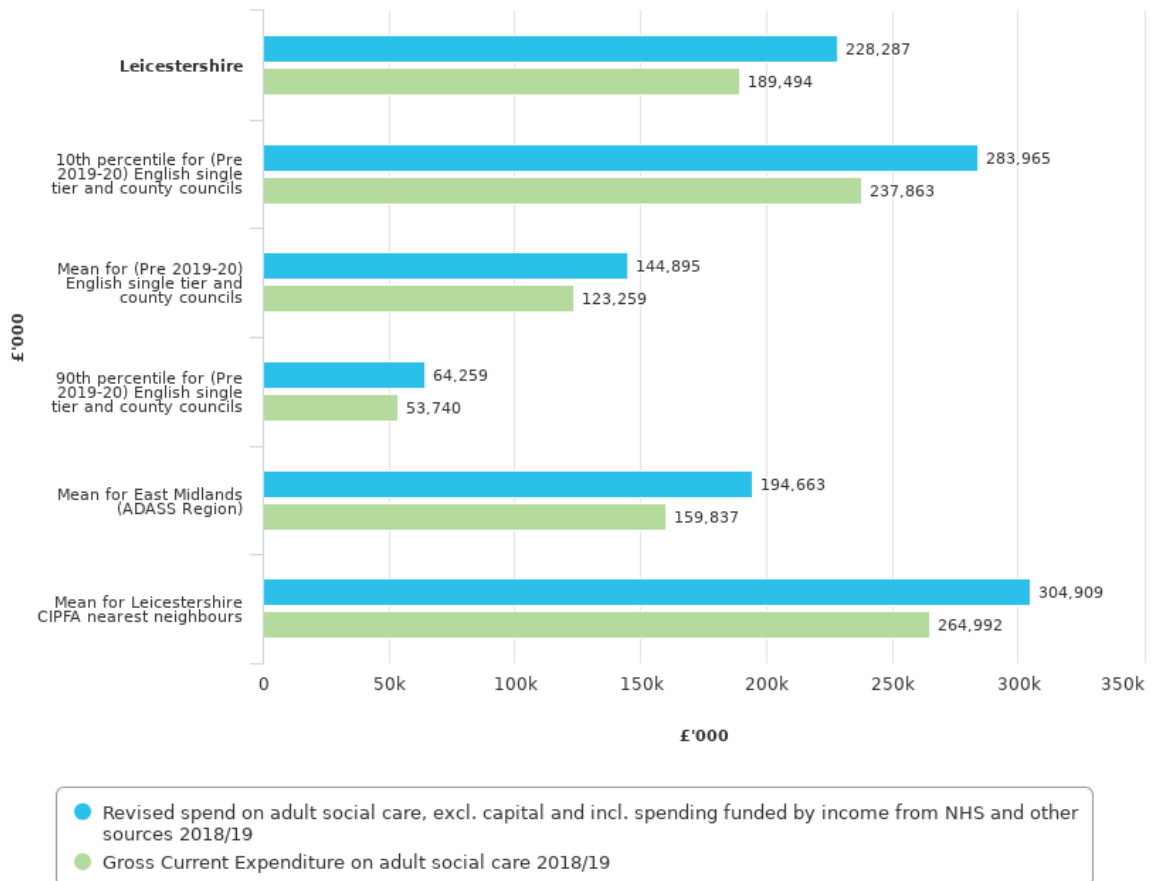
These technical reservations should not stop the application of the approach set out in this paper. However, they reinforce the importance to using this methodology as an approach rather than coming to definitive conclusions.

This Step introduces an alternative measure of spending, 'revised gross current expenditure'. This measure is also derived from data reported to NHS Digital. It is calculated by subtracting the total capital spending figure from the total spending including capital figure, both of which are available in the expenditure and income by finance type and finance description section of the Adult Social Care Activity and Finance Reference Tables published annually by NHS Digital. The advantage of this measure is that it includes all expenditure other than capital expenditure regardless of income source. The introduction of this measure is not intended to replace the existing gross current expenditure

figure, but it is important to compare the two in case the revised measure identifies aspects of a council's use of resources which are not apparent in the original measure.

**Part 13a. Comparison of gross current expenditure and revised gross current expenditure**

**Comparison of gross current expenditure and revised gross current expenditure for Leicestershire**



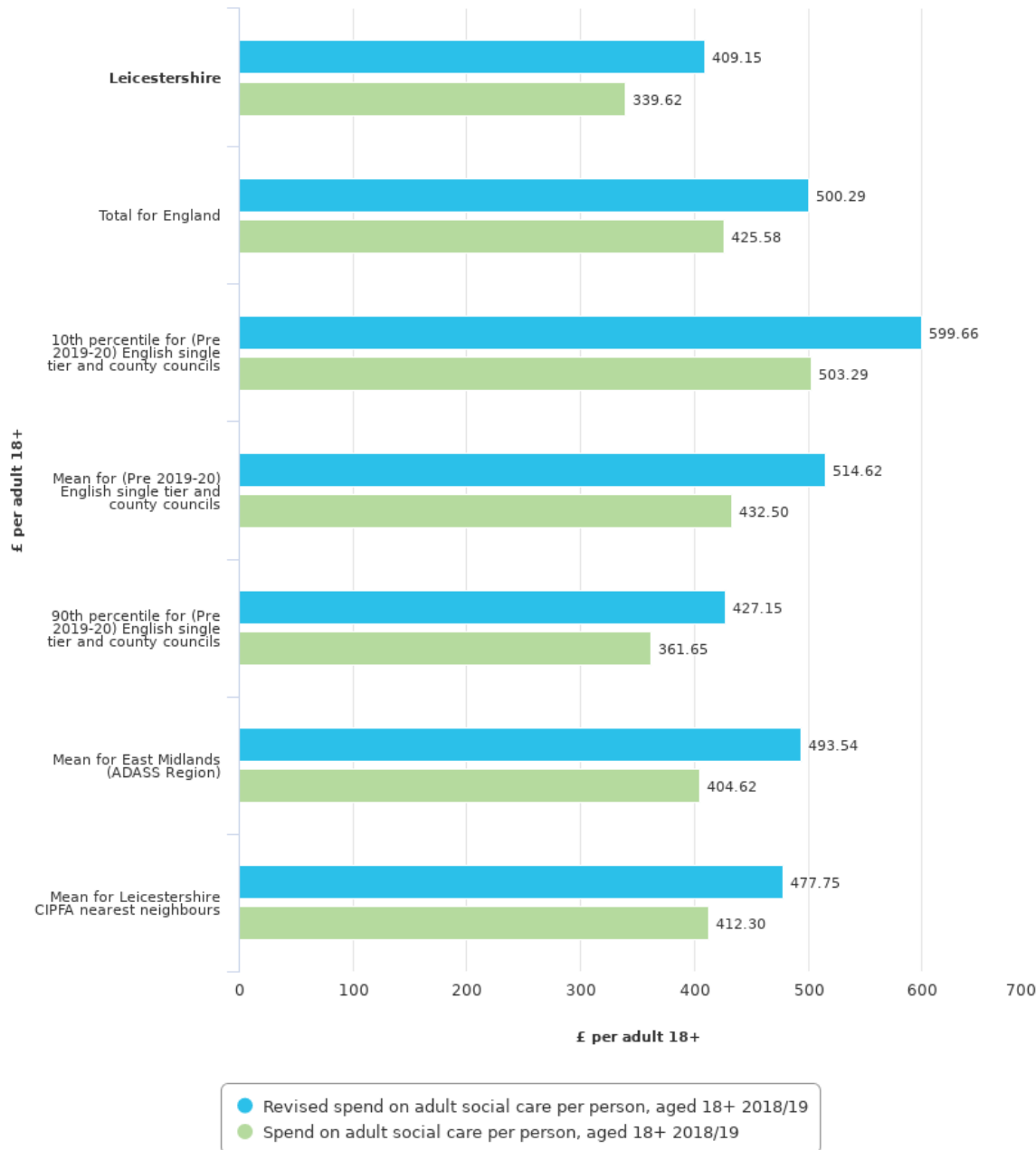
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### Comparison of gross current expenditure and revised gross current expenditure for Leicestershire

Area	<a href="#">Revised spend on adult social care, excl. capital and incl. spending funded by income from NHS and other sources</a>	<a href="#">Gross Current Expenditure on adult social care</a>	<a href="#">Revised gross current expenditure on adult social care, as a % of gross current expenditure (%)</a>
	<b>2018/19</b>		
	<b>GBP (000)</b>		<b>Sum from</b>
Leicestershire	<a href="#">228,287</a>	<a href="#">189,494</a>	<a href="#">120</a>
10th percentile for (Pre 2019-20) English single tier and county councils	283,965	237,863	130
Mean for (Pre 2019-20) English single tier and county councils	144,895	123,259	119
90th percentile for (Pre 2019-20) English single tier and county councils	64,259	53,740	109
Mean for East Midlands (ADASS Region)	194,663	159,837	122
Mean for Leicestershire CIPFA nearest neighbours	304,909	264,992	116

## Part 13b. Comparison of spend per adult

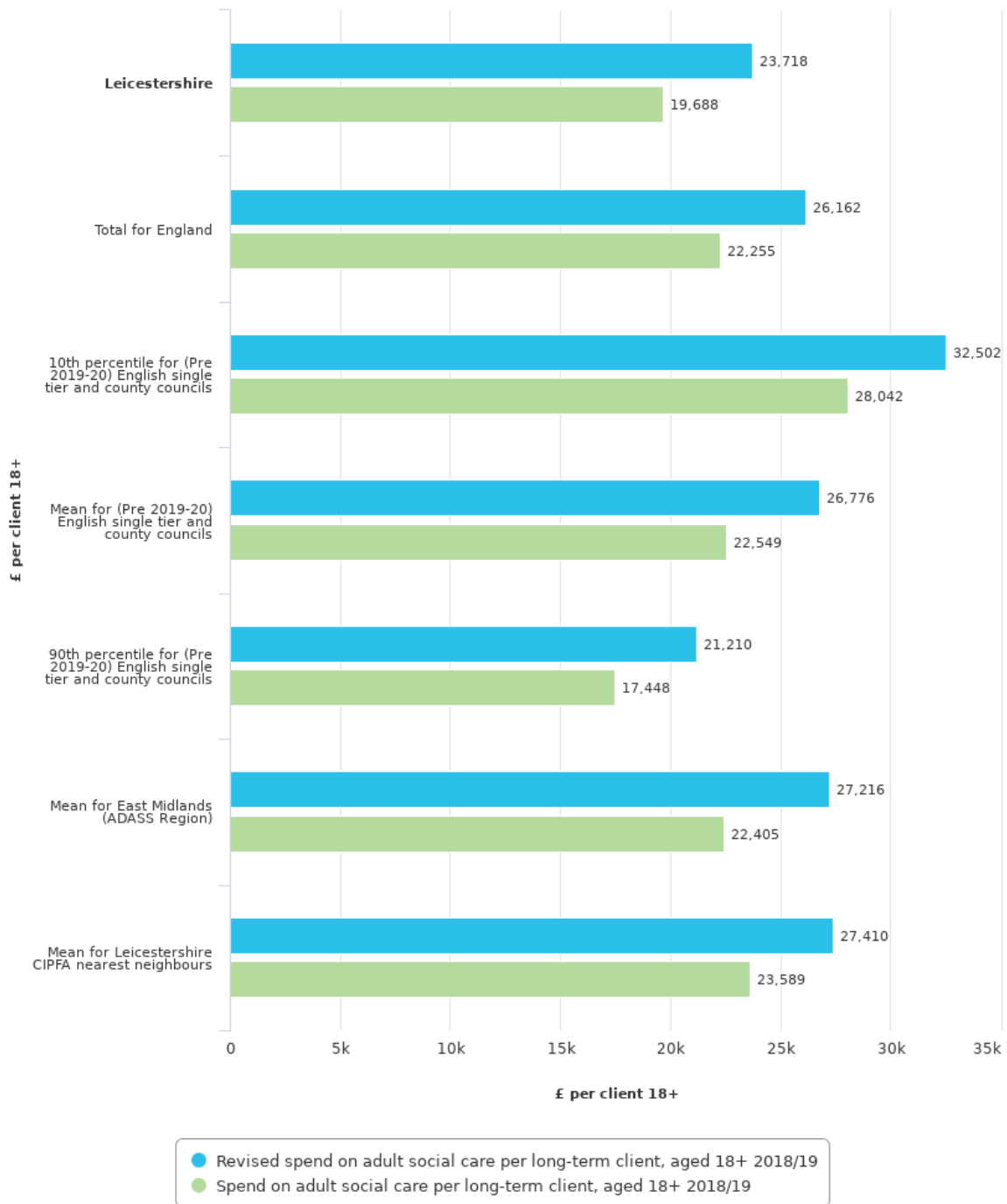
### Comparison of gross current expenditure per adult with revised gross current expenditure per adult for Leicestershire



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**Part 13c. Comparison of spend per long term client**

**Comparison of gross current expenditure per long term client with revised gross current expenditure per long term client for Leicestershire**



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## Comparison of gross current expenditure per adult and per client with revised gross current expenditure per adult and per client for Leicestershire

Area	<a href="#">Revised spend on adult social care per person, aged 18+</a>	<a href="#">Spend on adult social care per person, aged 18+</a>	<a href="#">Revised spend on adult social care per long-term client, aged 18+</a>	<a href="#">Spend on adult social care per long-term client, aged 18+</a>
	<b>2018/19</b>			
	<b>GBP per person</b>			
Leicestershire	<a href="#">409.15</a>	<a href="#">339.62</a>	<a href="#">23,718</a>	<a href="#">19,688</a>
Total for England	500.29	425.58	26,162	22,255
10th percentile for (Pre 2019-20) English single tier and county councils	599.66	503.29	32,502	28,042
Mean for (Pre 2019-20) English single tier and county councils	514.62	432.50	26,776	22,549
90th percentile for (Pre 2019-20) English single tier and county councils	427.15	361.65	21,210	17,448
Mean for East Midlands (ADASS Region)	493.54	404.62	27,216	22,405
Mean for Leicestershire CIPFA nearest neighbours	477.75	412.30	27,410	23,589

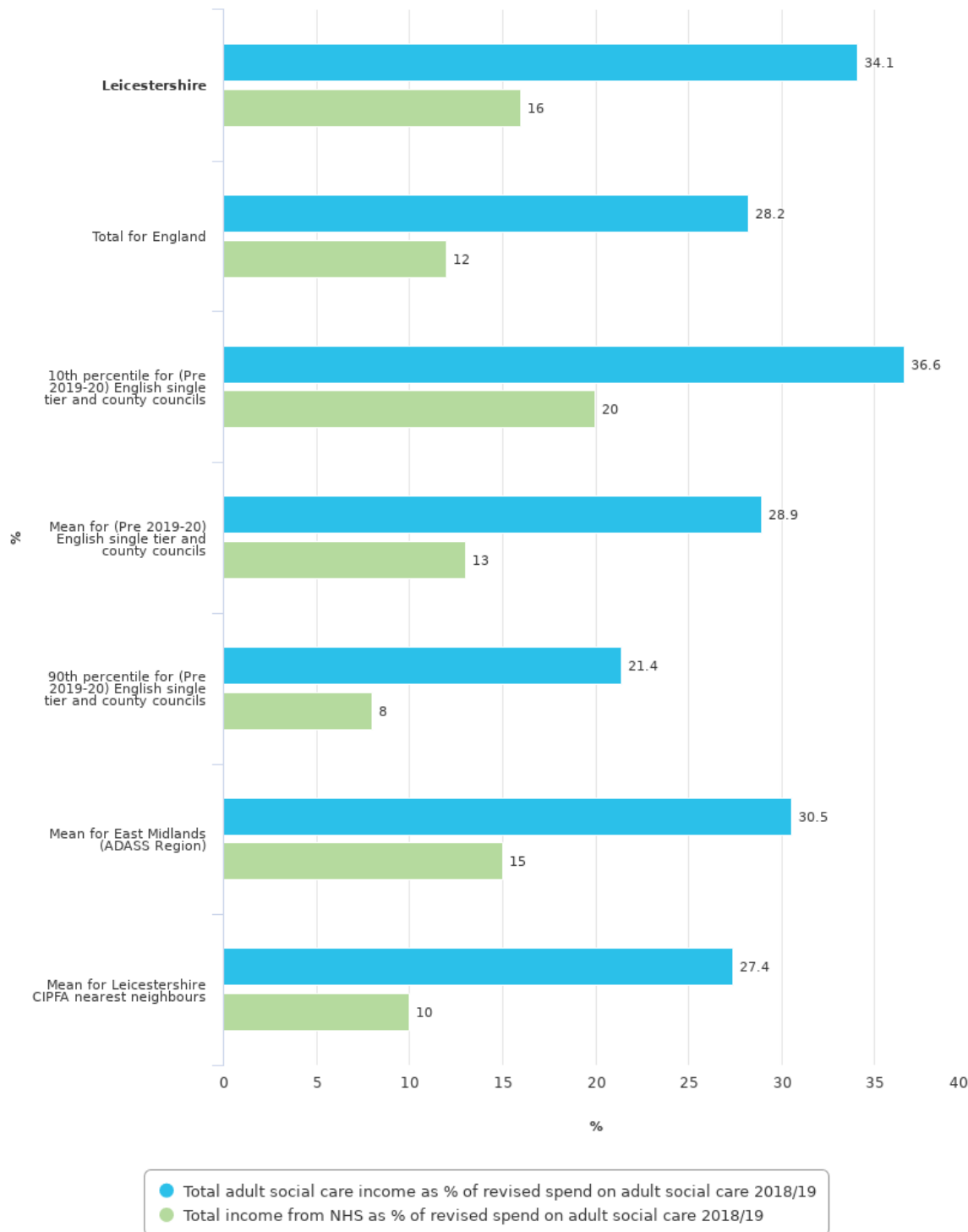
Note: spend on adult social care per long term client aged 18+ is not the same measure as the measure of spend on long and short term care per long term client aged 18+ featured in Step 6. The numerator in Step 6 excludes spending on adult social care that is not categorised by long or short term care, whereas the numerator in this step includes this expenditure. The figures will therefore be different between the two steps.

**Comparison of gross current expenditure per adult and per client with revised gross current expenditure per adult and per client for Leicestershire - ranks**

Area	<a href="#">Revised spend on adult social care per person, aged 18+</a>	<a href="#">Spend on adult social care per person, aged 18+</a>	<a href="#">Revised spend on adult social care per long-term client, aged 18+</a>	<a href="#">Spend on adult social care per long-term client, aged 18+</a>
<b>2018/19</b>				
<b>Rank within (Pre 2019-20) English single tier and county councils</b>				
Leicestershire	<a href="#">146</a>	<a href="#">147</a>	<a href="#">109</a>	<a href="#">113</a>

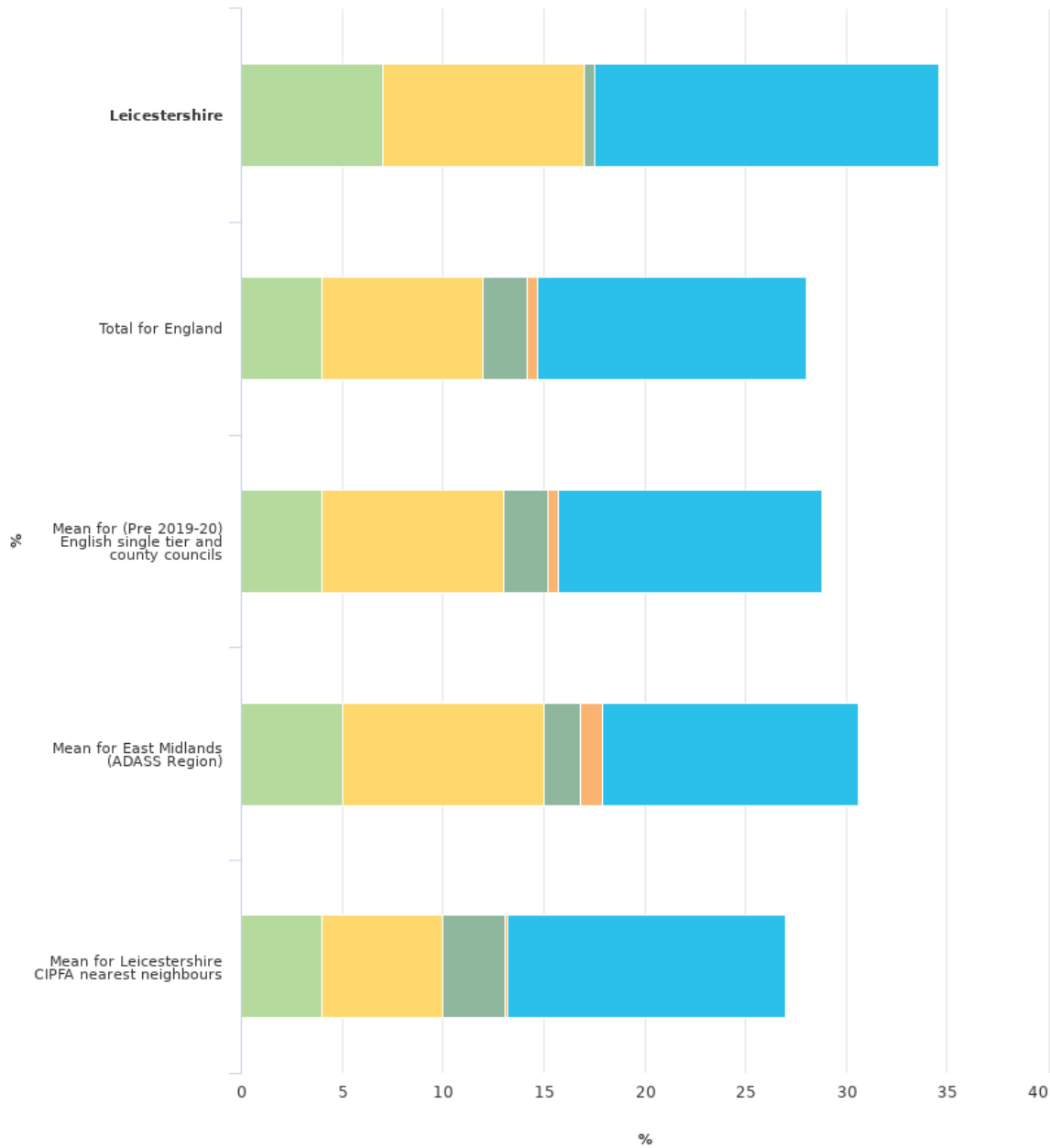
## Part 13d. Income sources as per cent of revised gross current expenditure

### Total adult social care income and total income from the NHS as a per cent of revised gross current expenditure for Leicestershire



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### Breakdown of adult social care income sources as a per cent of revised gross current expenditure for Leicestershire



- Client contributions as % of revised spend on adult social care 2018/19
- Joint arrangements as % of revised spend on adult social care 2018/19
- Other income as % of revised spend on adult social care 2018/19
- Income from Better Care Fund as % of revised spend on adult social care 2018/19
- Income from NHS excl. Better Care Fund as % of revised spend on adult social care 2018/19

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### Breakdown of adult social care income sources as a per cent of revised gross current expenditure for Leicestershire

Area	Total adult social care income as % of revised spend on adult social care	Client contributions as % of revised spend on adult social care	Joint arrangements as % of revised spend on adult social care	Total income from NHS as % of revised spend on adult social care	Other income as % of revised spend on adult social care
	<b>2018/19</b>				
	<b>%</b>				
Leicestershire	<u>34.1</u>	<u>17.1</u>	<u>0.0</u>	<u>16</u>	<u>0.5</u>
Total for England	28.2	13.3	0.5	12	2.2
10th percentile for (Pre 2019-20) English single tier and county councils	36.6	17.3	1.4	20	5.6
Mean for (Pre 2019-20) English single tier and county councils	28.9	13.1	0.5	13	2.2
90th percentile for (Pre 2019-20) English single tier and county councils	21.4	8.9	0.0	8	0.1
Mean for East Midlands (ADASS Region)	30.5	12.7	1.1	15	1.8
Mean for Leicestershire CIPFA nearest neighbours	27.4	13.8	0.1	10	3.1

**Breakdown of adult social care income sources as a per cent of revised gross current expenditure for Leicestershire - ranks**

Area	<u>Total adult social care income as % of revised spend on adult social care</u>	<u>Client contributions as % of revised spend on adult social care</u>	<u>Joint arrangements as % of revised spend on adult social care</u>	<u>Total income from NHS as % of revised spend on adult social care</u>	<u>Other income as % of revised spend on adult social care</u>
	<b>2018/19</b>				
	<b>Rank within (Pre 2019-20) English single tier and county councils</b>				
Leicestershire	32	17	43	44	118

### Breakdown of NHS income as per cent of revised gross current expenditure for Leicestershire

Area	<a href="#">Total adult social care income as % of revised spend on adult social care</a>	<a href="#">Income from Better Care Fund as % of revised spend on adult social care</a>	<a href="#">Income from NHS excl. Better Care Fund as % of revised spend on adult social care</a>
	<b>2018/19</b>		
	%		
Leicestershire	34.1	10	7
Total for England	28.2	8	4
10th percentile for (Pre 2019-20) English single tier and county councils	36.6	14	10
Mean for (Pre 2019-20) English single tier and county councils	28.9	9	4
90th percentile for (Pre 2019-20) English single tier and county councils	21.4	5	0
Mean for East Midlands (ADASS Region)	30.5	10	5
Mean for Leicestershire CIPFA nearest neighbours	27.4	6	4

### Breakdown of NHS income as per cent of revised gross current expenditure for Leicestershire - ranks

Area	<a href="#">Total adult social care income as % of revised spend on adult social care</a>	<a href="#">Income from Better Care Fund as % of revised spend on adult social care</a>	<a href="#">Income from NHS excl. Better Care Fund as % of revised spend on adult social care</a>
	<b>2018/19</b>		
	<b>Rank within (Pre 2019-20) English single tier and county councils</b>		
Leicestershire	32	41	32

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**ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE**  
**9 MARCH 2020**

**SMART LIBRARIES – PERFORMANCE REVIEW**

**REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES**

**Purpose of report**

- 1 The purpose of this report is to provide the Committee with an update on the performance of SMART libraries following implementation in April 2019.

**Policy Framework and Previous Decisions**

- 2 On 18 July 2016, the Cabinet approved the Communities and Wellbeing Strategy 2016-20, “Providing Less: Supporting More” following a period of consultation. This authorised the Director of Adults and Communities to develop a strategy implementation plan, subject to further reports being made to the Cabinet and this Committee. Part of the implementation was the exploration of technology as a means of sustaining library services.
- 3 In November 2016, the Cabinet authorised the Director of Adult and Communities to undertake a pilot of SMART library technology at Syston library.
- 4 On 22 February 2017, the Council approved a Medium Term Financial Strategy (MTFS) saving of £1.3 million for the Communities and Wellbeing Service to be delivered by 2020/21.
- 5 On 12 September 2017, the Committee considered a report, including the results of the Syston pilot and the full business case for SMART libraries, which recommended that the Cabinet authorise the Director of Adults and Communities to implement SMART library technology, where possible, within the following libraries: Ashby de la Zouch, Blaby, Birstall, Broughton Astley, Coalville, Earl Shilton, Glenfield, Hinckley, Loughborough, Lutterworth, Melton Mowbray, Oadby, Shepshed and Wigston Magna. The Cabinet subsequently approved this recommendation on 15 September 2017.
- 6 On 8 February 2019, the Cabinet received an update on the installation of the SMART library implementation technology across the 14 sites, noting that Melton Mowbray and Market Harborough were not able to be adapted.

**Background**

- 7 The installation of SMART library technology enables customers to ‘swipe’ their library card to obtain entry to and exit from a library and provides self-service kiosks for borrowing, returning and renewing items (including the payment of charges)

without staff support. This offered the potential for increasing opening hours, whilst enabling a reduction in staffing costs.

- 8 The full business case identified that the full implementation of SMART library technology (including the replacement of existing self-service kiosks) would deliver an annual saving of c£230,000, predominantly from a reduction in staffed hours. In addition, it would increase customer access to libraries through extending (unstaffed) opening hours by approximately 30 hours per week at each library.
- 9 The SMART library project managed the installation of new self-service kiosks across 16 Council run libraries and the introduction of self-access technology in 14 of these libraries, followed by a reduction in staffing to contribute to the MTFS targets for the Communities and Wellbeing Service. Two libraries were not able to be adapted - Market Harborough is an open plan shared space which houses the Hallaton treasure and as such had significant insurance liabilities; the landlord declined consent to adapt Melton Mowbray library.
- 10 This report sets out an evaluation of the project after the first six months of operation. All statistics cover the time period April–September 2019, unless otherwise stated.

### **Progress**

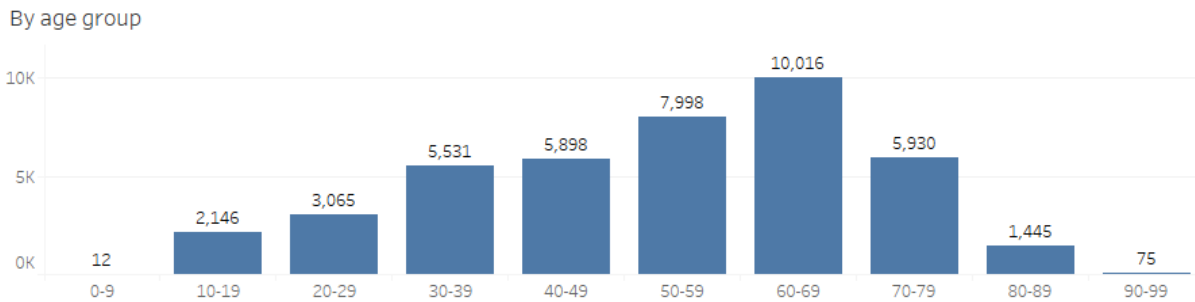
- 11 Implementation was completed on time with the new service commencing on 1 April 2019.
- 12 The 14 libraries adapted are all County Council funded and fall into two categories according to size. The table below sets out the libraries, together with the relative changes to staffing and opening hours:

<b>Category of library</b>	<b>Previous number of open staffed hours</b>	<b>New number of open staffed hours</b>	<b>Total number of hours open (SMART and staffed)</b>
<b>Major:</b> Coalville, Hinckley, Loughborough, Oadby and Wigston	38	28 (-26%)	65 (+78%)
<b>Shopping centre:</b> Ashby de la Zouch, Birstall, Blaby, Broughton Astley, Earl Shilton, Glenfield, Lutterworth, Shepshed and Syston	31	16 (-48%)	65 (+110%)

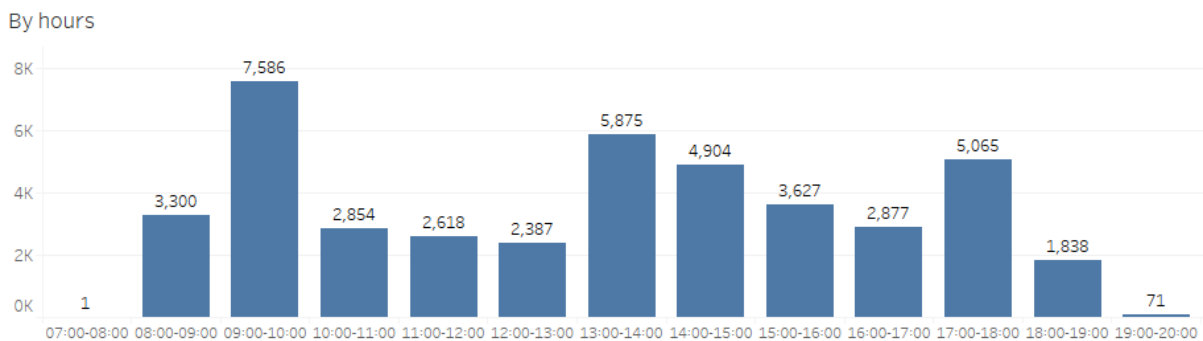
### **Usage and performance**

- 13 To use the library in SMART mode, customers scan their library card at the door and put in their unique PIN to gain entry (known as a login). In the first six months there were 43,010 logins across all 14 libraries. There has been a steady increase across months, with September being the highest to date at 7,720.

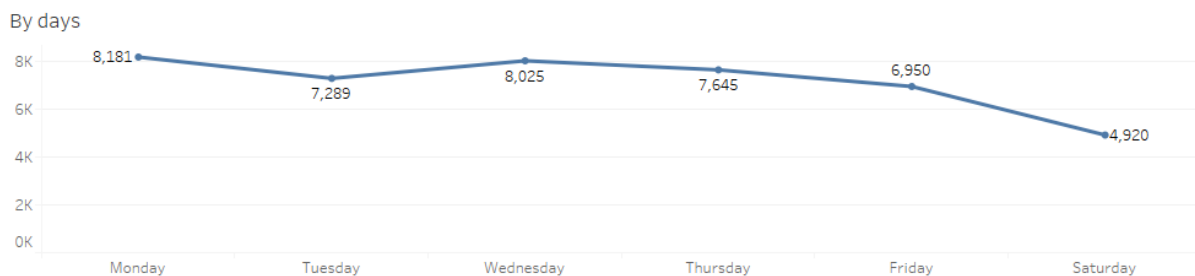
- 14 In the first six months of SMART operation, 8,981 library members registered for SMART access across the County. 6% (579) of these come from non-SMART libraries. 20.7% (8,402) of the 40,626 active library members across the 14 sites are now SMART library members.
- 15 All SMART library members need to undertake an induction before their card is activated. To make this process more user friendly and to reduce the impact on staff, an online version of the induction was introduced. This has proved popular and to date roughly half of all inductions are completed online.
- 16 The age category providing the largest number of logins was the 60-69 age group which is consistent with library use in general:



- 17 The most popular time to access a SMART library was between 9am and 10am:



- 18 The most popular day for accessing a SMART library is a Monday:



- 19 Early evidence has indicated that as the system settles in there has been a perceived increase in people visiting the libraries in staffed hours. This has been more so in the smaller shopping centre libraries. This indicates that people who have not wished to become SMART library members have shifted to the revised hours where staff are available.

- 20 The Communities and Wellbeing Service analysed the impact of the project on traditional library metrics of book loans, visits, computer usage and membership. The following information compares metrics for April-September 2018 with those for 2019. It should be noted that during the 2018 period some libraries will have experienced short-term closures in order for work to take place, so this may have affected their performance, but only to a small degree.

### Loans

- 21 Loans across the 14 SMART libraries declined on average by 8% from 375,660 (April-September 2018) to 345,569 (April-September 2019). In major libraries, (where the reduction in staffed hours was less) a smaller decline was reported: 4% from 214,556 (April-September 2018) to 205,292 (April-September 2019); in the shopping centre sites the average figure was 13% from 161,104 in 2018 to 140,277 in 2019. This compares to a 2% increase in loans at community managed sites (from 132,691 to 135,156), a 5% decrease in mobile library loans (from 21,582 to 20,448) and maintenance of the status quo at Melton and Market Harborough (from 80,080 to 80,262).
- 22 A key annual campaign that impacts on loans of books to children is the Summer Reading Challenge. The impact of the project on these loans was minimal, showing a small decrease of 1,000 loans (from 207,000 July-September 2018 to 206,000 in July-September 2019). This was balanced with a 10% increase (from 1,162 in 2018 to 1,275 in 2019) of children joining a library and a small increase (from 5,435 in 2018 to 5,804 in 2019) of children completing the challenge of 1%.
- 23 Given that the SMART library changes represented a significant change to library operations, and set against declining national library trends, the current early position represents a fairly stable performance.

### Visits

- 24 Visits decreased on average by 6%<sup>1</sup> (from 432,618 April-September 2018 to 406,920 April-September 2019). However, this showed a wide variation between sites, with visits at one shopping centre site decreasing by 28% (Ashby Library had 24,140 visits between April-September 2019 compared to 33,484 visits between April-September 2018). Visits to the busier Loughborough and Wigston libraries increased by 3% (from 82,920 to 85,379) and 6% (from 35,574 to 37,655) respectively.

### Computer usage

- 25 Computer use in SMART libraries saw a small increase over the previous year (2% in major libraries (from 36,903 to 37,636) and 1% (from 15,608 to 15,804) in shopping centres).

### Membership

- 26 In total, 10,028 people joined the library across the 14 sites during the first six months of the project. Of these, 1,537 also became SMART library members (15%).

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<sup>1</sup> 2018 figures exclude Syston library due to faulty beam counter; Glenfield library operated normal staffed hours during April and May 2019 due to a faulty door panel.

## **Health and safety**

- 27 As part of the project, a range of actions were put in place to mitigate health and safety risks for members of the public as they use the library in non- staffed hours. These have included:
- Live CCTV monitoring of all sites with voice over system that enables communication between public and monitoring site;
  - Emergency locked down phone provided with shortcuts to 999 and the County Council's Property Helpdesk;
  - All customers required to undertake an induction before having their card activated;
  - All customers required to sign a Customer Use Agreement to acknowledge their understanding of the system and their responsibilities as users of it;
  - First aid kit at all sites;
  - Floor plans showing emergency exits on view in all sites and on library website – customers shown these at home sites and advised to consult plans if going to an unfamiliar library.
- 28 There have been 24 incident forms completed for incidents taking place during SMART hours. This compares to 41 during staffed time over the same six- month period. The incidents include people falling asleep, technology failure, three incidents of theft and some mostly low level anti-social behaviour.
- 29 Managers have undertaken a review of these incidents and met with health and safety representatives and an issue log is in operation to monitor both the level of incidents and any potential solutions identified as a result of the review.
- 30 The most frequent issue has been one of tailgating where users follow someone into the site without using their card. Few seem to do so with any intention other than to make use of the library and there does not seem to be any serious incidents taking place as a result of this.
- 31 Officers have reviewed other authorities where similar systems are in place to see if there are any additional mitigation around health and safety that can be considered and are confident that the measures put in place across Leicestershire are robust.

## **Feedback**

- 32 Informal canvassing of customer and staff views following the introduction of SMART libraries has taken place. Perceptions of the positive impacts and concerns so far seem to reflect similar messages.
- 33 Positive feedback indicates that the facilities are still well used, with good information provided on how to use self-access, extended opening hours have been beneficial, and libraries have been better for quieter study for certain times of the day when in SMART operation. In addition, new people have joined the library and customers have more ownership of the space, feeling trusted to make use of the space without staff.
- 34 Concerns have reflected the tailgating issue, some technical issues affecting doors, customers being unclear about opening hours and lack of toilet facilities during self-access times.

- 35 Formal complaints have been minimal, with 14 recorded in the first six months of operation.

### **Resource Implications**

- 36 The net budget for the Communities and Wellbeing Service (part of the Adults and Communities Department) for 2020-21 is £5.1m. In line with the Council's Medium-Term Financial Strategy this will reduce to approximately £5.0m per annum by 2023/24. It is recognised that given the scale of these reductions, service delivery will change significantly.
- 37 The SMART libraries project has realised £239,000 in reduced costs.
- 38 The Director of Corporate Resources has been consulted on the contents of this report.

### **Conclusions**

- 39 On balance the first six months of SMART library operation has been positive. Overall performance has remained stable and the robust mitigating measures that have been put in place to ensure public safety have kept incidents at low levels.
- 40 Public reaction to the implementation of self-access has understandably been mixed, but the high number of logins in the first six months would seem to indicate that the people who value the service use it regularly. 21% of active library users have registered for SMART membership in the first six months of operation, and to date this figure has increased to c25%. Further work to communicate the benefits of SMART membership will be built into service planning for 2020-21.
- 41 Public access has increased in the larger libraries by 94% and reduced costs by c£230k. A range of non-financial benefits have also been realised, including reduced incidence of kiosk failure/breakdown requiring action by operational staff, compliance with the requirement for all payment points to offer contactless card payment facilities and improved, performance, reliability and user friendliness of new self-service kiosks.
- 42 Further work is anticipated to develop wider community use of the facilities during SMART time and also to increase opportunities for stakeholder organisations to utilise the facilities as potential workspaces and touchdown points. Officers will continue to closely monitor the safety elements of the project to ensure that customers remain confident in their use of self-access.

### **Background Papers**

- Report to the Cabinet on 18 July 2016: Communities and Wellbeing Strategy 2016-2020 <http://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MId=4604&Ver=4>
- Reports to the Cabinet on 23 November 2016 and 15 September 2017: Progress with the Implementation of the Communities and Wellbeing Strategy 2016-20  
<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MID=4607#AI49882>  
<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MID=4863#AI52290>

- Report to the Cabinet on 8 February 2019: Progress with SMART Library Implementation - <http://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MID=5600#AI58604>

### **Circulation under the Local Issues Alert Procedure**

None.

### **Equality and Human Rights Implications**

- 43 A full Equality and Human Rights Assessment was undertaken as part of the project and is accessible as Appendix D to the report to Cabinet dated 8 February 2019. The action plan attached to the assessment identified 22 actions to be taken to mitigate the impact of self-access. Of those, the following four are still outstanding:
- The provision of visual instructions for using library technology - due for completion 2020;
  - Investigation into the possibility of friends' groups or volunteers having a greater role in the running of the library during smart hours – currently on hold due to Communities and Wellbeing restructure, to be picked up later in the year;
  - The provision of touchscreen technology to provide additional support and information during smart hours – pilot being undertaken during 2020-21;
  - 12 month progress report - due May 2020.

### **Officers to Contact**

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