Adults and Community Wellbeing Scrutiny Committee

Charging for Social Care

25 May 2022



Financial Assessment Performance

Financial Assessment Type	Annual Volume	Processed Without Delay	Processed with additional info in 28days	Processed with additional info 29days+
Non-Residential	5,800	4,930 (85%)	400 (7%)	470 (8%)
Residential	2,800	1,456 (52%)	820 (29%)	524 (19%)
Total	8,600	6,386 (74%)	1,220 (14%)	994 (12%)

Reasons for additional information ask

- Incomplete bank details
- Difficulties in accessing land / property valuations
- Incomplete information from self funders



What is Changing?

- From October 2023 all individuals in receipt of adult social care services regardless of age will be impacted
- More people will be eligible for state support. The Upper Capital Limit increases to £100,000 (from £23,250). The Lower Capital Limit increases to £20,000 (from £14,250)
- 50:50 Local Authority: Self funder market in Lincolnshire. approx 10,950 service users, potential to double the number of assessments. Non-residential to see the greater volume.
- Self-funders can ask the local authority to commission care at local authority fee levels, this will also be necessary to help calculate when the person reaches the 'care cap'
- Market Sustainability and Fair Cost of Care Fund to prepare markets for reform, including self-funders able
 to access local authority fees and to support local authorities to move towards paying a fair cost of care.
- April 2022 saw social care allowances unfrozen in line with inflation, people will keep more of their income
- Introduction of a £86,000 care cap. Progress towards the cap will be recorded in a 'care account'



Implementation of Care Accounts

- Everyone (approx. 20,000 people) needs a care account to track their progress towards the £86,000 cap
- Local authorities to maintain care accounts for all ordinarily resident with eligible needs for care & support
- Local authority to provide regular care account statements every 6mths, electronic by default
- 12mths prior to reaching cap, local authorities must alert and work with the individual for smooth transition
- Financial assessments determine the service user contribution towards the cap
- Not all costs count towards the cap eg financial contribution from the local authority, costs of meeting noneligible needs, any top up payments the person or third party chooses to make



Increased Demand for Assessments: both to determine needs and to create care accounts

- National assumptions for authorities with high % self funders (of which LCC is with approx. 50:50 ratio)
 - 85-105 social workers
 - 50-60 non-qualified social care staff
 - 13-15 financial assessment officers
 - Waiting lists could rise est. 20-25 weeks for needs assessments, 25-30 weeks for financial assessments
- LCC approach to potential increase in demand;
 - assuming 85% of self funders above upper capital limit, adopt light-touch financial assessment and a proportionate needs assessment for the 15%
 - 1,600 Full needs assessments
 - 1,600 Full financial assessments
 - o 9,300 Proposed light touch assessment approach
- Review 10,950 currently in receipt of adult social care, risk based approach

Financial Assessment Capacity Expansion

- Streamline paper assessment
- Reduce evidence base in some areas
- Roll out at pace on-line financial assessment
- o Introduce light touch assessments
- Further automation of financial assessment

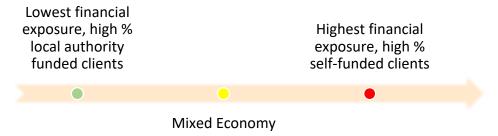
Needs Assessment Capacity Expansion

- Supported self assessment
- Trusted assessment arrangements with other organisations
- Delegated role in the assessment process for partners in other organisations



Impact on Adult Social Care Market

- Providers will be impacted due to
 - o upper capital threshold of £100,000 changes who is a self funder
 - o self funders able to approach local authorities to access their rates
 - local authorities to pay/move towards paying a fair cost of care (FCC)
- Combined financial impact of the above will vary provider to provider



- Market assessment including indicative cost of care well underway in Lincolnshire
- Market Sustainability and Fair Cost of Care Grant to support local authorities to increase rate paid, £2.273m 2022-23, potential to increase 3x in 2023-24

Lincolnshire approach to Market Assessment including Fair Cost of Care;

- Sept21 Residential market
- Apr22 Homecare market
- May22 Community supported living market
- Aug22 Quantification of difference between LCC rates and the indicative cost of care including 3year plan to deliver a Fair Cost of Care for Lincolnshire
- Sept22 market sustainability assessment including indicative cost of care



Finances

Building Back Better	Autumn Statement	Local Government Settlement / Social Care White Paper
£5.4bn over 3 years on adult social care reform	£3.6bn directly to local government for the cap, means test, and fair cost of care	£2.2bn over 3 years for cap and means test: - 22/23: £0m - 23/24: £800m - 24/25: £1.4bn £1.4bn over 3 years for fair cost of care: - 22/23: £162m - 23/24: £600m - 24/25: £600m
	£1.7bn years to improve wider social care system	 At least £300m, integrate housing At least £150m, technology and digitisation At least £500m, workforce training and qualifications Up to £25m, support unpaid carers £30m, innovation of support and care At least £5m, help people understand services available More than £70m, improve delivery of services

£2.273m for Lincolnshire in 2022-23



Strong Cross-Council Programme already underway

Governance Structure underpinning corporate reporting



Projects

- Debt Review Programme
- Residential Move to Gross
- Abacus Upgrade
- Mosaic Development
- On-line assessment Development
- New! Social Care reforms, Demand
- New! Social Care reforms, Fair cost of care
- New! Pathway Automation

Existing Priority Areas Delivering Improvement

- 31Mar22 Majority Financial Assessments within 28days (Reduced from 5mths in 2018)
- 31Mar22 Abacus Upgrade (Abacus SDS decommissioned 2020)
- 31Mar22 Residential rates model in place moving towards a fair cost of care informed by market assessment Sept21
- 31May22 Charging Policy challenges complete (Flat Rate Nov21, Homecare 31Dec21, Non-residential MIG 31May22)
- 30Jun22 Debt Review Programme, all debts reviewed (Debts >£15,000 reviewed by 31Mar22)
- 30Jun22 Online assessment tool for non-residential is being rolled out, residential design in progress (Non-residential tool built and being rolled out already)
- 31July22 Move to gross for residential payments (homecare and community supported living already paid gross)
- 30Sept22 Automation of Deferred Payment Process



Additional Steps to Existing Programme

	eliver non-residential market ssessments	•	Financial impact of reform quantified into MTFP	•	New systems and processes embedding
• E	apacity expansion plans greed and/or operational nabling structures in place comms, training, guidance)	٠	National submission of market sustainability assessment and fair cost of care		April 2023 soft launch enabling self funder accounts to be set up within LCC October 2023 full roll out
• Id	dentification of self-funders	٠	Care accounts piloted	Ì	October 2023 full foll out
e	isk based approach to xisting service users perational		Correspondence to all people in receipt of care confirmed changes ahead		
	are account process onfirmed including systems		Refreshed Adult Care Charging Policy Agreed		
	Apr-Sept22	>	Oct22-Mar23		Apr-Oct23



Key Risks

Risk	Risk Description	Mitigating Actions		
Change	A significant amount of change for staff, service users and their families and providers. There is a risk of misunderstanding, confusion leading to complaints and delay.	 Clear governance structure in place Communication programme roll out from May22 Training programme roll out from Jun22 		
Capacity	Inability to recruit additional workforce to meet new demand	 Not solely reliant on recruiting a limited workforce, Improvement Programme underway Rolling recruitment Risk based approach to prioritise demand 		
Timescale	System development not completed in time. All local authorities approaching same providers	 Upgrade of existing systems in use complete Minimum viable product approach nationally with a detailed technical specification that can be developed in existing case management systems 		
	Inability to contact all self funders	 Residential self funders will be picked up through existing residential move to gross mechanism Non-residential to be confirmed by Sep22 		
Finances	National funding may not be sufficient to support financial impact	 Residential cost of care gap known Non-residential cost of care gap identification by Jun22 Threshold impact and demand increase by Sept22 Significant risk 		
	Debt may increase with more people entering adult social care	Debt Review Groups well establishedProcess changes to be embedded by Dec22		

