

Central  
Bedfordshire  
Council  
Priory House  
Monks Walk  
Chicksands,  
Shefford SG17 5TQ



**TO EACH MEMBER OF THE  
SOCIAL CARE, HEALTH & HOUSING OVERVIEW & SCRUTINY COMMITTEE**

14 January 2011

Dear Councillor

**SOCIAL CARE, HEALTH & HOUSING OVERVIEW & SCRUTINY COMMITTEE - Monday  
24 January 2011**

Further to the Agenda and papers for the above meeting, previously circulated, please find attached the report for item 15 which was marked "To follow" and a revised version of the report for item 17 on the main agenda:-

**15. Review of the Eligibility Criteria**

To receive an update report from the 4 February 2010 meeting detailing the Council's approach to the framework for setting the eligibility criteria for Adult Social Care.

**17. Statutory Review of Fees and Charges and Revenue Income  
Optimisation Business Cases**

Please note that this report replaces the version issued with the agenda on 13 January 2011.

Should you have any queries regarding the above please contact Committee Services on  
Tel: 0300 300 4032.

Yours sincerely

Martha Clampitt,  
Committee Services Officer  
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**Meeting:** Social Care, Health & Housing Overview & Scrutiny Committee  
**Date:** 24 January 2011  
**Subject:** Update on the Revised Fair Access to Care Services Eligibility Criteria for Adult Social Care  
**Report of:** Cllr. Mrs. Carole Hegley, Portfolio Holder Social Care & Health  
**Summary:** This report aims to highlight the impact of the new policy on new service users.

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Contact Officer: Althea Mitcham, Head of Business Infrastructure  
Public/Exempt: Public  
Wards Affected: All  
Function of: Council

#### **CORPORATE IMPLICATIONS**

**Council Priorities:**

The delivery of Adult Social Care services meets with the Council's vision to 'improve the quality of life of all in Central Bedfordshire' and its priority of 'supporting and caring for an ageing population'.

**Financial:**

Analysis of the data available suggests that there has not been a direct increase in expenditure on services due to the revision of the Fair Access to Care Services Eligibility Criteria for Adult Social Care. The complexity of the cases coming through, however, has resulted in service users being assessed at the higher bands of Critical and Substantial need and therefore qualifying for a greater number of services. The impact of this has been seen and reported in the quarterly budget monitoring reports

**Legal:**

No direct implications.

**Risk Management:**

Increasing access to services by lowering the threshold could potentially have financial implications for the Council.

**Staffing (including Trades Unions):**

No direct implications.

**Equalities/Human Rights:**

The eligibility criteria will promote independence and social inclusion of vulnerable adults, having regard to Article 8 of the Human Rights Act which states that 'everyone has the right to respect for his private and family life, his home and his correspondence'.

**Community Safety:**

No direct implications.

**Sustainability:**

The policy supports the Sustainable Community Strategy in ensuring that everyone has access to high quality health and social care services when they need them and to help Central Bedfordshire's population live healthy an independent lives.

**RECOMMENDATION(S):**

**That the committee notes and considers this report.**

**Introduction.**

1. A report detailing the Council's approach to Fair Access to Care Services (FACS) Eligibility Criteria for Adult Social Care was reported to the Overview and Scrutiny Committee on 4 February 2010, with recommendation that the Fair Access to Care Services to Adult Social Care's threshold be lowered from *substantial* to *moderate*. The priority bands would still remain as Critical and Substantial, but the proposed change would allow for the provision of one-off, short term, time limited, or occasional services on a preventative basis to an individual seeking care support, where the provision of that service will prevent them from deteriorating to a higher risk band. The committee asked for an update report of the impact the change in threshold may have.
2. The Fair Access to Care Services Eligibility Criteria for Adult Social Care framework consists of four bands of eligibility – critical, substantial, moderate and low, which represent the seriousness of the risk to an individual's independence if problems and issues were not addressed.
3. The review of the policy was undertaken for Central Bedfordshire Council to define the threshold levels for services as a new unitary authority and ensure that its focus includes the provision of services based on prevention and early intervention.

**Effect of the Threshold Change**

4. An analysis was undertaken based on a comparison of data collected from 1 April 2010 to 30 September 2010 with data for the same period in the previous year of new customers and is attached at appendix A.

5. The data analysed suggests that overall there has been a reduction in approaches to social services from people seeking support. There is little variation in the numbers going through to assessments, but those who go on to receive services following an assessment have increased, as has the number of services received.
6. This outcome suggests that people are approaching us with more complex needs and following assessment there are a greater number of services being delivered. From April to 30 September 2010, a majority of referrals have been classified as critical or substantial 1,381 (89%) and 88 referrals were classified as moderate representing 6% of the overall total. Similar percentages were evident for both the 18-64 and 65+ age ranges.
7. When compared with the same period for the previous year the results are very similar with 87% of referrals being classified as Critical or substantial and 6% as Moderate.
8. The data indicates that there were more assessments undertaken for the for the 18-64 and 65-74 age groups. Those aged 75+ were slightly down by 6% on the previous year. There has been a significant increase in mental health assessments during the review period, but this could be as the result of improved recording practice.

### **Conclusion and Next Steps**

9. The initial analysis of data suggests that the revision in the Fair Access to Care Services Eligibility Criteria for Adult Social care threshold has not increased approaches to Adult Social Care or demand for services.
10. Monitoring of the criteria will continue and will be reported back to the committee after a further twelve month period.

### **Appendices:**

Appendix A - Update on the Revised Fair Access to Care Services Eligibility Criteria for Adult Social Care

### **Background Papers:**

Report to the Social Care, Health and Housing Overview and Scrutiny Committee - Review of the Adult Social Care Services Eligibility Policy on 4 February 2010.

### **Location of papers:**

Priory House, Chicksands, Bedfordshire

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**Appendix A**

**Update on the Revised Fair Access to Care Services Eligibility Criteria for Adult Social Care**

**Comparison of approaches (referrals) for the same period during 2010 against 2009**

**1/4/2009 - 30/9/2009**

<b>Eligibility Criteria</b>	<b>(18-64)</b>	<b>65+</b>	<b>Total</b>
Critical	125	328	453
Substantial	352	539	891
Moderate	84	21	105
Low	64	1	65
Criteria fully met*	35	216	251
Not recorded	21	41	62
<b>Total</b>			<b>1,827</b>

\* Critical or Substantial (The classification 'criteria fully met' used during 2009-2010 ceased to be used from 1 April 2010)

**1/4/2010 - 30/9/2010**

<b>Eligibility Criteria</b>	<b>(18-64)</b>	<b>65+</b>	<b>Total</b>
Critical	169	363	532
Substantial	243	606	849
Moderate	27	61	88
Low	0	1	1
Not recorded	30	54	84
<b>Total</b>			<b>1,554</b>

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**Meeting:** Social Care, Health and Housing Overview & Scrutiny Committee

**Date:** 24 January 2011

**Subject:** Statutory Review of Fees and Charges and Revenue Income Optimisation Business Cases

**Report of:** Cllr Maurice Jones, Portfolio Holder for Finance, Governance and People

**Summary:** The report asks the Social Care Health and Housing Overview & Scrutiny Committee to consider the report to be submitted to the Executive on the revised Fees and Charges rates to be effective from 1 April 2011 and the business cases resulting from the Revenue Income Optimisation Project.

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**Advising Officer:** Julie Ogley, Director of Social Care Health and Housing

**Contact Officer:** Matt Bowmer, Assistant Director Financial Services

**Public/Exempt:** Public

**Wards Affected:** All

**Function of:** Executive

**CORPORATE IMPLICATIONS:** as set out in the Executive report.

**RECOMMENDATION(S):**

**That the Committee note the report.**

**Reason for recommendation:** *To provide the Social Care, Health and Housing Overview & Scrutiny Committee with an opportunity to inform the decision to be taken by the Executive and to provide any comments as necessary.*

1. As Members will be aware, at its meeting of 11 January 2011, the Executive considered the report of its Portfolio Holder for Finance, Governance & People regarding the statutory review of fees and charges. The report set out proposed revised fees and charges rates to be effective from 1 April 2011. The report also noted that new or enhanced charges as a result of the Revenue Income Optimisation 'Case for Change' report may be recommended following consideration through the Overview and Scrutiny Process.

2. In addition to considering the Executive report the Overview and Scrutiny Committees are asked to consider the relevant business cases from the Revenue Income Optimisation Project (Appendix B) and comment as necessary. The Draft Budget Report to the Executive has assumed £1.5M additional income from enhanced charges for 2011/12.

**Conclusions and Next Steps**

3. The Overview and Scrutiny Committees are asked to provide recommendations by 25<sup>th</sup> January so they can be considered by the Executive alongside the budget report on 8 February 2011. The full Executive report on fees and charges for 2011/12 has not been attached and the Committee is asked to bring to the meeting the Executive Report of 11 January 2011 and comment just on those areas for which the Committee is responsible. A consolidated report will be prepared of Overview and Scrutiny Committee's recommendations and submitted to the Executive meeting on 8 February 2011.

**Appendices:**

Appendix A; Executive Report 11 January 2011– Statutory Review of Fees and Charges (Not attached – please use Appendix from Executive report)

Appendix B:RIO Business Case responses..

**Background Papers:** (open to public inspection)

**Location of papers:** Priory House, Chicksands

## **Telecare Business Case**

### **RIO Project Recommendation**

This business case proposes three areas for development:

#### **Review the charges for Monitoring Services**

- Introduction of a charge to the users of Telecare of the equivalent of at least £3.50 per week.
- Bring the charge for the Careline pendant alarm monitoring into line with other Local Authorities. This is currently £2.50 and other authorities tend to be in the range of £3.50-£4.00.

#### **Consider charges for providing and installing Telecare equipment**

- Some authorities charge for the installation of Telecare equipment

#### **Develop a sustainable business model for Telecare**

- Where Telecare is provided in the absence of a community needs assessment then the principle should be to ensure that overall the costs of provision of equipment, installation and monitoring is covered by charges on a 'cost recovery' basis.

### **Projected additional income**

	<b>2011/12</b>	<b>2012/13</b>	<b>2013/14</b>	<b>Total</b>
	<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>	
<b>Gross projected income (£)</b>	£245,977	£245,977	£245,977	£737,932
<b>Investment costs (£)</b>	0	0	0	0
<b>Net projected income (£)</b>	£245,977	£245,977	£245,977	£737,932

### **Social Care, Health and Housing Response to Recommendations**

#### **Review the charges for Monitoring Services**

- Telecare is currently free. To deliver the income estimated in the business case the charge would need to be £4.29 per week. This is based on a data about the range of charges in other authorities rather than a cost recovery model. Although the business case takes into account the fact that many of those receiving community care would be able to claim the charge as Disability Related Expenditure (resulting on no net increase in income to the council) it does not allow for any reduction in take up of the service as a result of introducing charges. It

is felt that introduction of a charge in the £3.50-£4.00 range would result in fewer people declining the service.

- The Careline pendant alarm monitoring cost is currently £2.50 per week. The business case proposes an increase to £4.00 per week but this would represent a very significant increase. It is also felt that it is reasonable that the cost for Careline should be less than that for Telecare (as the system is much simpler). It is therefore felt reasonable that the increase for Careline should place it around 50p per week less than Telecare indicating a range of £3.00 to £3.50 per week.

If the charges were set at the more modest levels set out above then it would result in a lower income of approximately £192k per annum (Scenario 1 in the business case).

#### **Consider charges for providing and installing Telecare equipment**

- In the exploration of the cost recovery model (see below) this area will be explored. The business case assumes that not all customers will pay for installation so this aspect only contributes less than 1% of the annual income.

#### **Develop a sustainable business model for Telecare**

- It is felt that the best way to deliver Telecare in a way that is financially sustainable is on a transparent cost recovery basis. By this we mean that overall aim is that the Telecare 'business' covers all of its costs through charges, and that these costs and charges are available for public scrutiny. Such a model would not preclude differential pricing although there are significant advantages in having a very simple pricing structure.
- It should be noted that cost to the authority of the purchase of Telecare equipment is considered as a fixed cost in the business case. It is important that in developing the business model that these costs are taken into account as they are not in fact fixed. Also (as the take up of Telecare increases) there will be increasing opportunities to reuse existing equipment when it is no longer required by the customer, thus reducing costs.
- It should also be noted that whilst the council leads in the provision of Telecare there are no significant barriers to other organisations (private or voluntary) entering this market and competing with us on a commercial basis (indeed there may be good reasons for encouraging this).

In summary, the view of the directorate is that there is a significant opportunity here but that the charge rates for Careline and Telecare should be based on a robust cost recovery model rather than one that is simply benchmarked against other local authorities. Until this work is completed it is not possible to give an accurate estimate of the additional income but the £192k per annum figure that is identified in Scenario 1 of the business case is considered to be a more realistic estimate than the £246k which is based on Scenario 2.

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