<u>DECISION TAKEN BY OFFICER UNDER SECTION 13 OF THE LOCAL</u> AUTHORITIES EXECUTIVE ARRANGEMENT REGULATIONS 2012

Officer: David Vitty, Head of Adult Social Care - Services

Service Unit: Adult Social Care - Services

Date of Decision: 28th Oct 2016

<u>Title: Domicilairy Care Contribution Uplifts</u>

<u>Decision(s) Taken:</u>

A decision has been taken not to uplift domiciliary care charges for full charge payers in 2016/17 but to uplift for 2017/18. The 2017/18 will be the maximum allowable under the Adult Social Care Charging Policy.

<u>Threshold Trigger</u>: (please delete as required and give background)

Decisions having a substantive effect on the provision of local services, e.g. fees/charges

Reason for the Decision:

The process for uplift is dependent on the implementation of the Care Director Case Management system. Following implementation in March 2016, a number of technical problems have prevented the system from applying an uplift. Evaluation in October 2016 indicated that the Management Information Team for adult social care could have this functionality ready for April 2017, but earlier implementation would need external expertise and capacity, negating to a large extent any additional income raised.

The impact on service users of an uplift and recent changes to the financial assessment process have also been taken into account as part of this decision.

Background

Officers have discretion under the Charging Policy to uplift annual domiciliary contributions by service users towards their cost of care. This decision relates only to people who pay full-charge for all of their care.

Charges have increased substantially in 2015/16 as part of an MTFP financial contribution project, and it is necessary to achieve a balance between fair charging which does not discourage people from accessing services and maximising income for the Borough. Activity in 2016/17 suggests that some service users are declining packages of care because they are unable or unwilling to pay the increased sums introduced in 2015/16, leading to an overall reduction in income and highlighting the

necessity to set contributions at a level which is acceptable to users of the service and is not so high that it discourages people from accessing service with a subsequent detrimental impact on overall income for adult social care. The decision about whether to uplift in 2016/17 has also been very dependent on the technological practicality and cost following the introduction of a new ICT system.

Issue for consideration

The issue under consideration was whether to apply an uplift for domiciliary care in 2016/17 for full-charge payers.

Declaration of Interest(s), to include:

(Record of any conflict of interest declared by any Officer consulted by the Decision Maker and/or a note of any dispensation granted by the Head of Paid Service relating to the Decision).

None

Report/Information Considered:

The decision was taken by David Vitty and Phil Hornsby based on information provided by the relevant Service Managers/principal Officers relating to capacity within finance and MIT and the costs of implementation combined with the overall impact on service users and adult social care income.

Alternatives Considered:

A 2016/17 uplift was considered, but technical and capacity issues were considered to make this impractical. A decision has been taken to maximise income in 2017/18 (within the framework of the policy) which will also offset lost income in 2016/17.

Budget Implications:

The uplift income from this source in 2016/17 was estimated to be £1,500 per month, which although a modest proportion of the overall income from client contributions is never the less important, and necessitated careful consideration in respect of the decision to defer the uplift.

Signed:

Dated: 28th October 2016