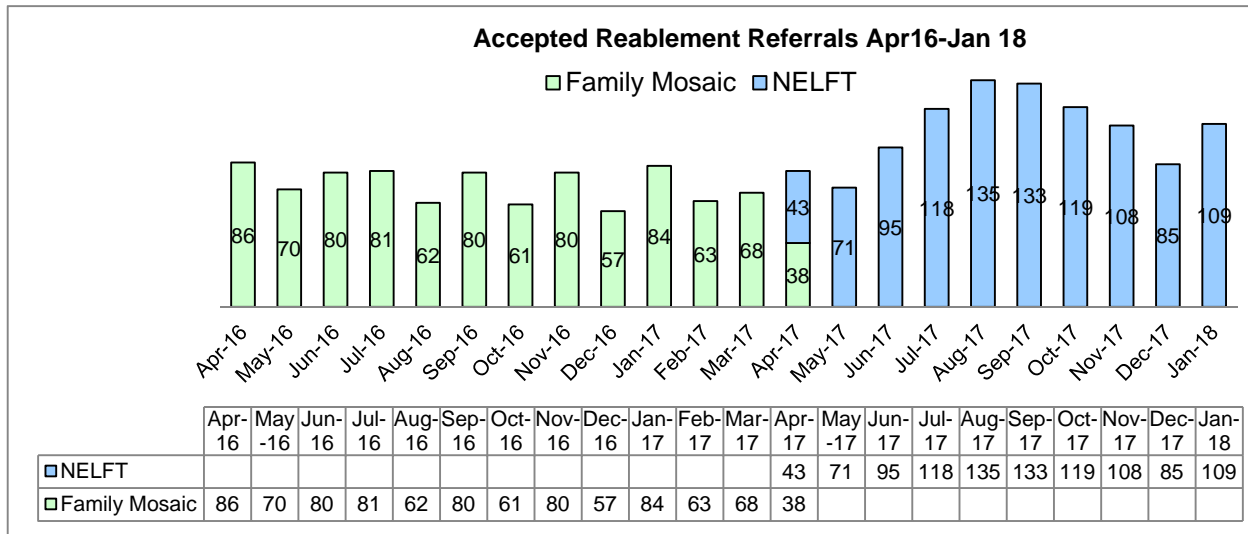


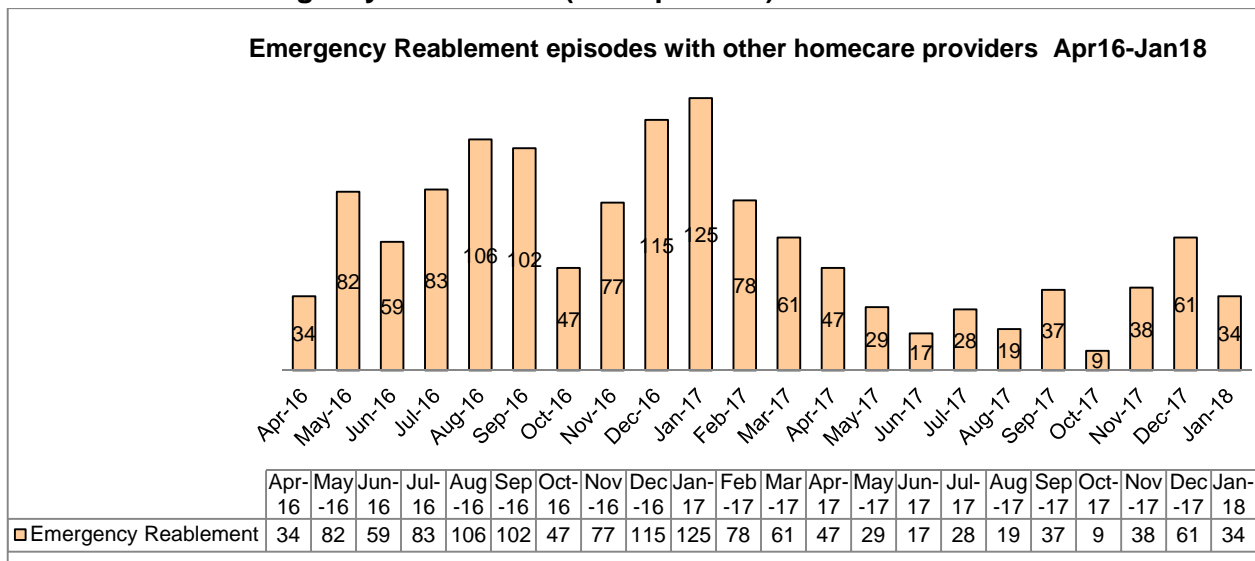
Appendix 1

Table 1. Accepted Reablement Referrals (new episodes)



Comparison of number of reablement episodes with FM or NELFT April-Jan 2016 and 2018 - Average 74 episodes per month 2016/17 compared with average 102 episodes per month over same period in 2017
 *(FM/NELFT handover 18th April 2017)

Table 2. Use of Emergency Reablement (new episodes)



Rationale:

Number of emergency reablement episodes placed with other homecare providers April – Jan 2016/2017 and 2017/18

Average 83 episodes per month 2016/17 compared with average 32 episodes per month over same period in 2017/18

We have assumed that if the funding does not support the contract the minimum cost of emergency reablement required to sustain the system will be £72k per annum. It is likely to be more than that but we have been conservative in our estimates. By investing in the contract the maximum set aside for emergency reablement required will be £36k. A saving against minimum expected levels of spend without the investment of £36k.

Post-reablement outcomes

Assumptions and assertions – home care:

- That the average cost of homecare is £183 per week (taken from the understanding that on an overall average people receive 11 hours per week home care x £16.43 (hourly rate))
- That home care requiring less support will average £90 per week
- That home care requiring more support will cost £270 per week

Table 3. On-going care requirement after reablement

ASC Framework Pack L3 -Data as at Aug 2017	Apr- Aug 16	Apr- Aug 17
Total ended reablement*	526	457
Total number of people discharged from Reablement service who required no further ongoing care	247	344
% ending reablement who require no further care	46.96%	75.27%
Number of people discharged from reablement and returning within 91 days for further ongoing care	15	12
Proportion requiring ongoing service	6.07%	3.49%

* *Apr-Aug - ended continuous reablement episodes (emergency/standard episodes merged where continuous)*

* *Apr-Aug – the reason that the FM figure is higher is because they had cases ending that had started prior to April and wrapped up much of their remaining cases before NELFT started in mid-April.*

Rationale:

From April 2017 – September 17 569 people have gone through reablement

If the two percentage rates are applied to this figure comparative numbers of people who theoretically would have required care can be established:

$569 \times 46.96\% = 267$ people would require no further care. Meaning 302 people would go into the homecare system

$569 \times 75.27\% = 428$ people would require no further care. Meaning 141 people would go into the homecare system

This is a net reduction of 161 people receiving on-going care after reablement over a 6 month period.

If the assumptions are:

- that those being kept out of the system would be those who would have required less than average support
- that the period of benefit lasts for 13 weeks (based on average period of home care being 26 weeks but again these may be assumed to be people who have lower level needs)

The financial benefit over a year equates to:

$161 \times £90 \text{ per week} = £14490 \times 13 \text{ weeks} = £188k$

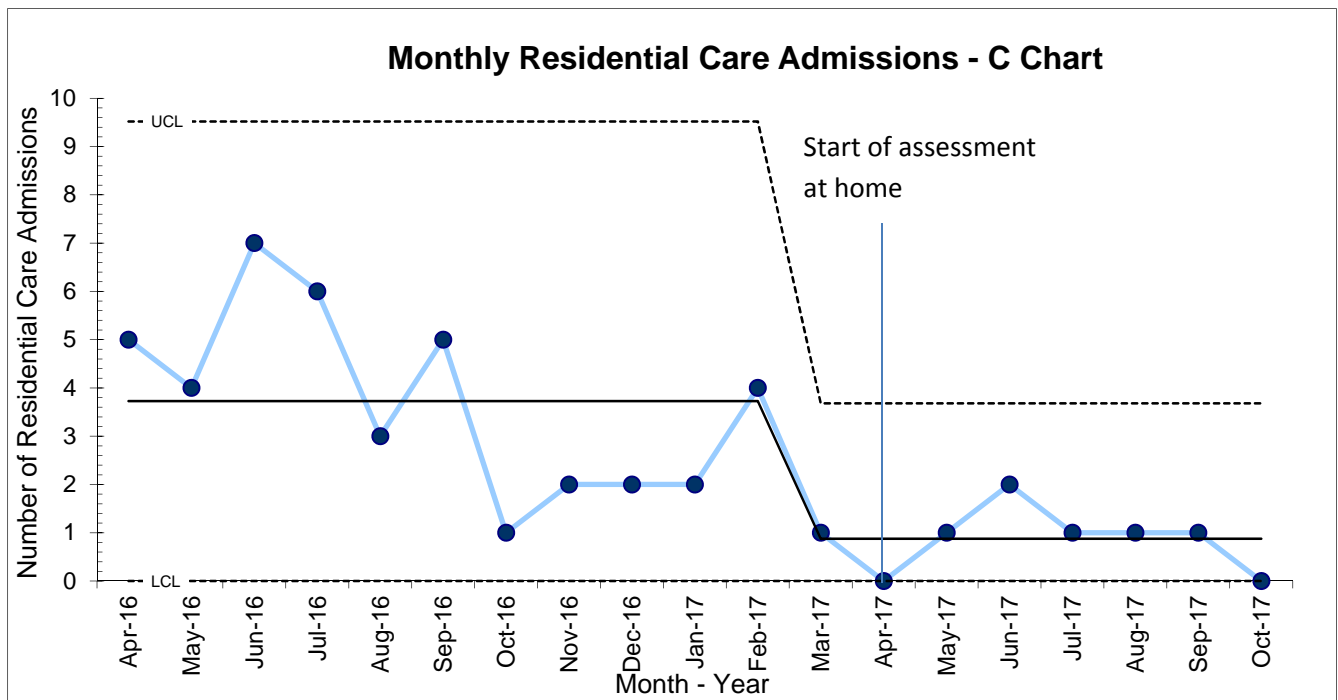
This is based on a 6 month period so for annual savings the figure would be doubled = £376k

Admissions into Long stay residential or nursing

Assumptions and assertions – residential care:

- Average cost of placement £500 per week - £26k
- For those not going to residential care but assumed to be retained in homecare they will require more support – costing £270 per week (see above) or £14k per year

Table 4.

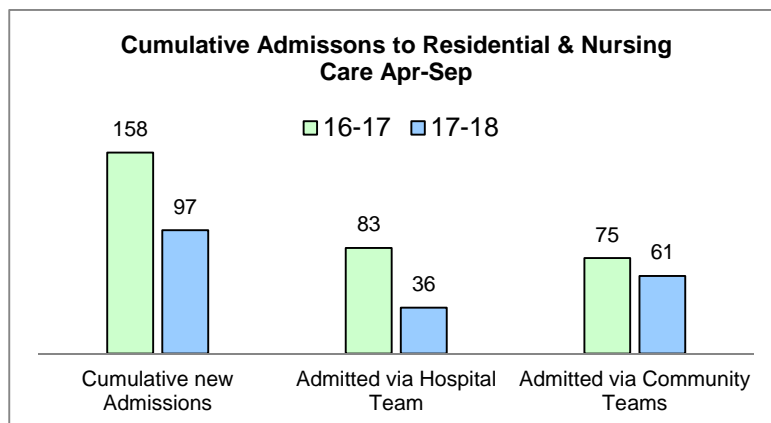


Explanation

The graph shows a shift of eight data points below the centreline which indicates a special cause variation. From this we are able to say with 99.7% confidence that the change in the data is not down to random variation.

The mean number of admissions has reduced from 3.9 to 0.9/month.

Table 5



Rationale:

- There is a reduction of 47 people going to residential care from hospital in the first 6 months of 17/18 compared to the first 6 months of 16/17. A decline of 56%
- There has also been a reduction in residential placements from the community, at a lower rate however. This reduction has been 19%
- To be prudent we have reduced the rate of decline from hospital by the 19%, making the assumption that this decline is as a result of other factors. This leaves a decline of hospital numbers attributable to the change in process of 37%. This equates to 30 people.
- We are making the assumption that the residential average cost is £500 per week
- We also assume that the people we keep out of residential will need home care at the higher rate (£270 per week)
- The net weekly benefit is £230 per week
- We make the generalised assumption that the benefits will accrue for 26 weeks
- 30 people x 26 weeks x £230 = £179,400
- If this were to be replicated for the second half of the year the benefits would increase to £360k.
- This will be monitored but for the time being the benefits claimed will be restricted to the actual numbers achieved in the first half of the year.

Table 6

Service Type	Activity Info	P6 2016-17 Projection	P6 2016-17 Activity	P6 2017-18 Projection	P6 2017-18 Activity
Homecare / ISF	Commissioned Hours	£11,130,428	677,176	£10,591,593	644,650
Nursing LS	Weeks Used	£6,840,574	12,288	£7,323,549	12,893
Residential LS	Weeks Used	£19,688,241	26,363	£19,105,713	24,020
Total		£56,986,801	958,473	£56,851,582	907,805

- Homecare – 2016-17 £11,130,428 to 2017-18 £10,591,593 – reduction £538,835
- Residential – 2016-17 £19,688,241 to 2017-18 £19,105,713 – reduction £582,528 – the reduction is actually more than this because the impact of the 17/18 uplift has added costs of £291,737 (total reduction = £874,265)
- Nursing - 2016-17 £6,840,574 to 2017-18 £7,323,549 – increase £582,528 – the increase is actually less than this because the impact of the 17/18 uplift has added costs of £91,649 (total increase = £490,879)
- These are half year projections and can fluctuate considerably if expensive placements are suddenly required. However the net reduction in comparative projected costs at the same time of the year, between 16/17 and 17/18, is:
 - Home care – reduction £538,835
 - Residential – reduction £874,265
 - Nursing – increase £490,879

- Net decrease: £922,221