I. SERVICES

1. Services for older people

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1.1 Private sector nursing homes for older people

Using PSS EX1 2012/13¹ returns uprated by the PSS pay & prices inflator, the median cost per person for supporting older people in a nursing care home was £507 per week, with an interquartile range of £459 to £564. The mean cost was £511 per week. The standard NHS nursing care contribution is £109.79 and the higher-level NHS nursing care contribution is £151.10.² When we add the standard NHS nursing care contribution to PSS expenditure, the total expected median cost is £617 and the mean cost is £621.

Costs and unit estimation	2013/2014 value	Notes
A. Fees	£729 per week	The direct unit cost of private sector nursing homes is assumed to be the fee. Where a market is fairly competitive, such as that for private sector nursing homes, it is reasonable to assume that the fee will approximate the societal cost of the service. ³ A weighted average fee for England reflecting the distribution of single and shared rooms was taken from the Laing & Buisson market survey. ⁴ Care home fees have been split into their component parts by Laing & Buisson (2013). ⁵ For nursing care for frail elderly people, total fees comprise care costs (45%), accommodation costs (20%), ancillary costs
F. A. maril a small a		(27%) and operator's profit (8%).
External services		No current studies indicate how external services are used by nursing
B. Community nursing		home residents. See previous editions of this volume for sources of information.
C. GP services		information.
D. Other external services	622.00	
E. Personal living	£23.90 per week	The Department for Work and Pensions (DWP) personal allowance for people in residential care or a nursing home is £23.90.6 This has been
expenses		used as a proxy for personal consumption.
Short-term care		No current information is available on whether residents in short-term care are less costly than those who live full-time in a nursing home. See previous editions of this volume for sources of information.
Dependency		No current information is available on the relationship of dependency with cost. See previous editions of this volume for sources of information.
Occupancy	89.8 per cent	The occupancy level in England for-profit and not-for-profit homes was 89.8 per cent in 2012.4
London multiplier	1.12 x A	Fees in London nursing homes were 12 per cent higher than the national average. ⁴
Unit costs available 2013/2	2014	

£729 establishment cost per permanent resident week (A); £753 establishment cost plus personal living expenses per permanent resident week (A and E).

¹Health & Social Care Information Centre (2013) PSS EX1 2012/13, Health & Social Care Information Centre, Leeds.

² https://www.gov.uk/government/news/nhs-funded-nursing-care-rates-increased-for-2013 [accessed 9 October 2014].

³ Kavanagh, S., Schneider, J., Knapp, M., Beecham, J. & Netten, A. (1992) Elderly people with cognitive impairment: costing possible changes in the balance of care, PSSRU Discussion Paper 817/2, Personal Social Services Research Unit, University of Kent, Canterbury.

⁴ Laing & Buisson (2014) Care of older people: UK market report 2013/2014, Laing & Buisson, London.

⁵ Laing & Buisson (2013) Councils rely on a 'hidden tax' on older care home residents, Laing & Buisson, London. http://www.laingbuisson.co.uk/MediaCentre/PressReleases/CareofElderly201213PressRelease.aspx [accessed 19 September 2014].

⁶ Department of Health (2013) Charging for residential care, https://www.gov.uk/government/news/charging-for-residential-care--2/ [accessed 3 October 2013].

1.2 Private sector residential care for older people

Using PSS EX1 2012/13¹ returns uprated by the PSS pay & prices inflator, the median cost per person for supporting older people in a residential care home provided by other organisations (voluntary, private and independent) was £490 per week, with an interquartile range of £443 to £561. The mean cost was £493 per week.

Costs and unit estimation	2013/2014 value	Notes
A. Fees	£553 per week	The direct unit cost of private care homes is assumed to be the fee. Where a market is fairly competitive, such as that for private sector residential homes, it is reasonable to assume that the fee will approximate the societal cost of the service. A weighted average fee for England reflecting the distribution of single and shared rooms was taken from the Laing & Buisson market survey. Care home fees have been split into their component parts by Laing &
		Buisson (2013). ⁴ For residential care for the frail elderly, total fees comprise care costs (33%), accommodation costs (25.5%), ancillary costs (34.5%) and operator's profit (7%).
External service		No current studies indicate how external services are used by residential
B. Community nursing		care home residents. See previous editions of this volume for sources of
C. GP services		information.
D. Other external services		
E. Personal living expenses	£23.90 per week	The Department for Work and Pensions (DWP) personal allowance for people in residential care or a nursing home is £23.90. This has been used as a proxy for personal consumption.
Short-term care		No current information is available on whether residents in short-term care are less costly than those who live full-time in a residential care home. See previous editions of this volume for sources of information.
Dependency		No current information is available on the relationship of dependency with cost. See previous editions of this volume for sources of information.
London multiplier	1.12 x A	Fees in London residential homes were 12 per cent higher than the national average. ³
Occupancy	88.5 per cent	The occupancy level in England for-profit and not-for-profit homes was 88.5 per cent in 2013. ³
Unit costs available 2013/2	2014	•
£553 establishment cost pe	er permanent reside	nt week (A); £577 establishment cost plus personal living expenses per

£553 establishment cost per permanent resident week (A); £577 establishment cost plus personal living expenses per permanent resident week (A and E).

¹ Health & Social Care Information Centre (2013) *PSS EX1 2012/13*, Health & Social Care Information Centre, Leeds.

² Kavanagh, S., Schneider, J., Knapp, M., Beecham, J. & Netten, A. (1992) *Elderly people with cognitive impairment: costing possible changes in the balance of care*, PSSRU Discussion Paper 817/2, Personal Social Services Research Unit, University of Kent, Canterbury.

³ Laing & Buisson (2014) Care of older people: UK market report 2013/2014, Laing & Buisson, London.

⁴ Laing & Buisson (2013) Councils rely on a 'hidden tax' on older care home residents, Laing & Buisson, London. http://www.laingbuisson.co.uk/MediaCentre/PressReleases/CareofElderly201213PressRelease.aspx [accessed 3 October 2014].

⁵ Department of Health (2013) Charging for residential care, https://www.gov.uk/government/news/charging-for-residential-care--2 [accessed 9 October 2014].

1.3 Local authority residential care for older people

This schema uses the Personal Social Services Expenditure return (PSS EX1)¹ for local authority expenditure, which have been uprated using the PSS pay & prices inflator.

Costs and unit estimation	2013/2014 value	Notes
Capital costs (A, B & C)		Based on the new-build and land requirements for local authority residential
A. Buildings and oncosts	£86 per week	care establishments. These allow for 57.3 square metres per person. ² Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
B. Land	£18.40 per week	Land costs researched for PSSRU by the Valuation Office Agency. ³ The cost of land has been annuitised at 3.5 per cent over 60 years.
C. Other capital costs		Capital costs not relating to buildings and oncosts are included in the local authority expenditure costs so no additional cost has been added for items such as equipment and durables.
D. Total local authority expenditure (minus capital)	£995 per week	The median estimate is taken from PSS EX1 2012/13 uprated using the PSS pay & prices Index. Capital charges relating to buildings and oncosts have been deducted. The mean cost is £839 per week (interquartile range £766-£1,304).
E. Agency overheads		Social services management and support services (SSMSS) costs are included in PSS EX1 total expenditure figures so no additional overheads have been added.
External services		No current studies indicate how external services are used by residential care
F. Community nursing		home residents. See previous editions of this volume for sources of
G. GP services		information.
H. Other external services		
I. Personal living expenses	£23.90 per week	The Department for Work and Pensions (DWP) personal allowance for people in residential care or a nursing home is £23.90. ⁴ This has been used as a proxy for personal consumption.
Use of facility by client	52.18 weeks per year	
Occupancy	89 per cent	Based on information reported by Laing & Buisson. ⁵
Short-term care		No current information is available on whether residents in short-term care
		are less costly than those who live full-time in a residential care home. See
		previous editions of this volume for sources of information.
Dependency		No current information is available on the relationship of dependency with
		cost. See previous editions of this volume for sources of information.
London multiplier	1.32 x (D)	Based on PSS EX1 2012/13 data. ¹
Unit costs available 2013/20)14	

£1,100 establishment cost per permanent resident week (includes A to E); £1,124 establishment cost plus personal living expenses per permanent resident week (includes A to D and I).

¹ Health & Social Care Information Centre (2013) PSS EX1 2012/13, Health & Social Care Information Centre, Leeds.

² Building Cost Information Service (2014) *Surveys of tender prices*, Royal Institute of Chartered Surveyors, London.

³ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

⁴ Department of Health (2014) Charging for residential accommodation guide,

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/301250/CRAG_34_April_2014.pdf [accessed 9 October 2014]

⁵ Laing & Buisson (2010) Councils set to shunt social care costs to the NHS and service users as cuts take effect, Laing & Buisson, http://www.laingbuisson.co.uk/LinkClick.aspx?fileticket=7NqbssCOgKA%3D&tabid=558&mid=1888 [accessed 10 October 2014].

1.4 Nursing homes for people with dementia

This schema presents the cost per resident week for a pooled sample of 40 residents living in nursing care homes. The data was taken from two multi-centre cohort studies conducted in the UK. ^{1,2} The average establishment cost per resident week was £781.

2013/2014	Notes
value	
£781 per week	The fee is a weighted average for England reflecting the distribution of single and shared rooms taken from the Laing & Buisson market survey. ³ The fee was used as a proxy as the type of managing organisation for the nursing homes was not specified. Care home fees have been split into their component parts by Laing & Buisson (2014). ³ For nursing care for people with dementia, total fees comprise care costs (46%), accommodation costs (20%), ancillary costs (27%) and operator's profit (8%).
	The weekly cost reflects average level of external services used by
£6.30 per week £8.00 per week £16.10 per week	residents with dementia living in nursing care home in two multicentre cohort studies conducted in the UK. ^{1,2} In the study with the lowest level of community nursing input and study with the highest level of community nursing input, the average weekly cost is £2.00 and £11.50 respectively. Other external services include social care and community health services. The Department of Work and Pensions (DWP) personal allowance for people in residential care or a nursing home is £23.90. ⁴ This has
Week	been used as proxy for personal consumption.
	No current information is available on whether residents in short- term care are less costly than those who live full-time in a residential care home.
1.12 x A	Fees in London nursing homes were 12 per cent higher than the national average. 1
	The occupancy level in Sefton for private and voluntary dementia nursing homes was 89 per cent in 2012. ⁵
	£6.30 per week £8.00 per week £16.10 per week £23.90 per week

£781 establishment cost per permanent resident week (A); £836 establishment cost and external services plus personal living expenses per permanent resident week (includes A to E)

¹ Livingston, G., Katona, C., Roch, B., Guilhaume, C. & Rive, B. (2004) A dependency model for patients with Alzheimer's disease: its validation and relationship to the costs of care-the LASER-AD Study, *Current Medical Research and Opinion*, 20, 7, 1007-16.

² Romeo, R., Knapp, M., Sato, A., Jones, R. & Lacey, L. (2012) Relationship between healthcare and social care costs and patient dependence on others as illness progresses in Alzheimer's disease (AD): Results from the Dependence in Alzheimer's Disease in England (DADE) study, *Alzheimer's & Dementia: The Journal of the Alzheimer's Association*, 8, 4, Supplement, page P237.

³ Laing & Buisson (2014) Care Act could open floodgates to a new 'top up' market in care homes, Laing & Buisson, London.

⁴ Department of Health (2014) Charging for residential accommodation guide,

 $[\]underline{\text{https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/301250/CRAG_34_April_2014.pdf} \ [accessed 9 October 2014]$

⁵ Laing & Buisson (2012) Actual costs of residential care in Sefton, Laing & Buisson, London.

1.5 Private and other independent sector residential homes for people with dementia

This schema presents the cost per resident week for a sample of 206 residents living in private and other independent sector such as voluntary, not-for-profit trust and housing association residential care homes. The information was taken from two multi-centre studies conducted in the UK. ^{1,2} The average establishment cost per resident week was £639. Suggested occupancy levels were taken from Laing & Buisson (2012).³

Costs and unit estimation	2013/2014 value	Notes
A. Fees	£639 per week	The fee is a weighted average for England reflecting the distribution of single and shared rooms taken from the Laing & Buisson market survey. 4
		Care home fees have been split into their component parts by Laing & Buisson (2014). ³ For residential care for people with dementia, total fees comprise care costs (37%), accommodation costs (24%), ancillary costs (31%) and operator's profit (7%).
External services		The weekly cost reflects average level of baseline services for patients
B. Community nursing	£21.70	with dementia living in residential care homes. ³ In the study with the
C. GP services	£43.60	lowest level of community nursing input and study with the highest level
D. Other external services	£20.00	of community nursing input, the average weekly cost is £13 and £32 respectively.
		Other external services include social care and community health services.
E. Personal living expenses	£23.90 per week	The Department of Work and Pensions (DWP) personal allowance for people in residential care or a nursing home is £23.90.5 This has been
expenses		used as proxy for personal consumption
Short-term care		No current information is available on whether residents in short-term
		care are less costly than those who live full-time in a residential care
		home.
London multiplier		No estimate is available for privately and other independent sector
		managed residential homes
Occupancy		The occupancy level in Sefton for private and voluntary dementia
		residential homes was 90 per cent in 2012. ³
Unit costs available 2013,	/2014	
£639 establishment cost p	er permanent reside	nt week (A); £749 establishment cost and external services plus personal

£639 establishment cost per permanent resident week (A); £749 establishment cost and external services plus personal living expenses per permanent resident week (includes A to E)

¹ Amador, S., Goodman, C., Kin,g D., Ng, YT., Elmore, N., Mathie, E., Machen, I. & Knapp M (2013) Exploring resource use and associated costs in end-of-life care for older people with dementia in residential care homes, *International Journal of Geriatric Psychiatry*, 29, 7, 758-66.

² Orrell, M., Hancock, G., Hoe, J., Woods, B., Livingston, G. & Challis, D (2007) A cluster randomised controlled trial to reduce the unmet needs of people with dementia living in residential care, *International Journal of Geriatric Psychiatry*, 22, 1127-1134.

³ Laing & Buisson (2012) Actual costs of residential care in Sefton, Laing & Buisson, London.

⁴ Laing & Buisson (2014) Care Act could open floodgates to a new 'top up' market in care homes, Laing & Buisson, London.

⁵ Department of Health (2014) Charging for residential accommodation guide,

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/301250/CRAG_34_April_2014.pdf [accessed 9 October 2014]

1.6 Local authority day care for older people

This schema uses the Personal Social Services Expenditure return (PSS EX1)¹ for expenditure, which has been uprated using the PSS pay & prices inflator. The median and mean cost was £129 per client week (including capital costs). These data do not report on the number of sessions clients attended each week.

To determine the best unit of activity, this year we have carried out a Freedom of Information request to ask local authorities the duration of a 'unit of activity' and to provide approximate guidance on how many times a week clients attend.

Based on information provided by ten local authorities, we have calculated an average cost per client attendance and also a cost per client hour. We have then used this information to calculate the cost of a client session lasting 3.5 hours which is a typical standard unit of day care for most local authorities responding to our information request. See preface for more information

Costs and unit estimation	2013/2014 value	Notes
Capital costs (A, B & C)		Based on the new-build and land requirements for local authority day
A. Buildings and oncosts	£5.30 per client	care facilities (which do not distinguish client group). ³ Capital costs have
	attendance	been annuitised over 60 years at a discount rate of 3.5 per cent.
B. Land	£1.40 per client	Land costs researched for PSSRU by the Valuation Office Agency. ⁴ These
	attendance	allow for 33.4 square metres per person. The cost of land has been
		annuitised at 3.5 per cent over 60 years.
C. Other capital costs		Capital costs not relating to buildings and oncosts are included in the local
		authority expenditure figures so no additional cost has been added for
		items such as equipment and durables.
D. Total local authority	£49 per client	The median and mean cost per week is taken from PSS EX1 2012/13 and
expenditure (minus	attendance	has been uprated using the PSS pay & prices index. Based on PSSRU
capital)		research, ² older people attend on average 2.5 times per week (4.6 hours
		in duration) resulting in a median and mean cost per day care attendance
		of £49 and £49. Capital charges relating to buildings have been deducted.
E. Agency overheads		Social services management and support services (SSMSS) costs are
		included in PSS EX1 total expenditure figures so no additional overheads
		have been added.
Use of facility by client		Assumes clients attend 2.5 times per week. ²
Occupancy		
London multiplier	1.34 x A	Relative London costs are drawn from the same source as the base data
	1.88 x B	for each cost element.
	1.32 x D	
Unit costs available 2013/2	2014	
£56 per client attendance (includes A to D); £12	per client hour; £42 per client session lasting 3.5 hours.

¹ Health & Social Care Information Centre (2013) *PSS EX1 2012/13*, Health & Social Care Information Centre, Leeds.

² Based on research carried out by PSSRU in 2014.

³ Building Cost Information Service (2014) Surveys of tender prices, Royal Institute of Chartered Surveyors, London.

⁴ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

1.7 Extra care housing for older people

This is based on an evaluation of extra care housing which followed the development of 19 new-build extra care housing schemes located across England.¹

Extra care housing is primarily for older people, and the accommodation is (almost always) self-contained. Care can be delivered flexibly, usually by a team of staff on the premises for 24 hours a day. Domestic care and communal facilities are available. For more information, see the Bäumker & Netten article in the 2011 edition of this report.

All costs have been uprated from 2008 to current prices using the appropriate inflators. The mean cost of living in extra care housing was estimated at £443 per resident per week, with a standard deviation of £187 and a range of £182 to £1,291. The median cost was £377 per resident per week.

Costs and unit estimation	2013/2014 value	Notes
A. Capital costs		Based on detailed valuations for the buildings and the land provided by
		the housing associations operating the extra care schemes. For properties
Building and land costs	£105 per resident	constructed before 2008, capital values were obtained from the BCIS, and
	per week	down-rated using the All-In Tender Price Index. Includes the cost of land,
		works including site development and landscaping, equipment and
		furniture, professional fees (architects, design and surveyors' fees). ¹
B. Housing management		Information taken from the annual income and expenditure accounts for
and support costs		each individual scheme after at least one full operational year. Average
Housing management	£55 per resident	running costs were calculated by dividing the adjusted total running cost
	per week	by the number of units in the scheme. The cost includes management
		staff costs (salary and oncosts including national insurance and pension
		contributions, and office supplies), property maintenance and repairs,
Support costs	£10 per resident	grounds maintenance and landscaping, cleaning of communal areas,
	per week	utilities, and appropriate central establishment costs (excluding capital
		financing).
C. Personal living	£96 per resident	As significant variability existed in the approaches to meal provision in the
expenses	per week	schemes, items related to catering costs were removed from the financial
		accounts, and the cost of food and other consumables was estimated
		using the Family Expenditure Survey (2013), tables 24.2 Costs have been
		uprated using the Retail Price Index.
D. Health and social		Estimates of health and social service costs were made combining
service costs		resource use information reported by 465 residents six months after
		admission, with the appropriate unit costs taken from the respective local
		authorities or, where appropriate, from national sources. ³
Health services	£71 per resident	Health care estimates ranged from £0-£718.
	per week	
Social services	£106 per resident	Social care estimates ranged from £0-£702
	week	
Use of facility by client	52.18 weeks per	
	year	
Unit costs queilable 2012/2		

Unit costs available 2013/2014

£170 accommodation, housing management and support costs; £266 accommodation, housing management, support and living expenses; £443 total cost (A to D).

¹ Darton, R., Bäumker, T., Callaghan, L. & Netten, A. (2011) *The PSSRU evaluation of the extra care housing initiative: Technical Report*, Personal Social Services Research Unit, University of Kent, Canterbury.

² Office for National Statistics (2013) Family spending 2013 edition, Office for National Statistics, London, available at http://data.gov.uk/dataset/family_spending [accessed 10 October 2014].

³ Curtis, L. (2008) Unit Costs of Health and Social Care 2008, Personal Social Services Research Unit, University of Kent, Canterbury.

1.8 Community rehabilitation unit

This schema is based on a joint project between Kent County Council, Ashford Borough Council, Age Concern and Ashford Primary Care Trust. Home Bridge provides recuperative care in seven purpose-built self-contained units for older people who need a period of recuperation following an illness, fall or where people have had increasing problems managing daily living. It provides intensive therapy and support to rebuild mobility and confidence so people can return home. Originally estimated in 2005, costs have been uprated using the appropriate inflators.

Costs and unit estimation	2013/2014 value	Notes
A. Wages/salary and	£75,656 per year	The team comprises a scheme manager (20%), a part-time care manager
oncosts		(80%) and support workers.
		Employer's national insurance is included plus 18 per cent of salary for
		employer's contribution to superannuation.
B. Direct overheads	£28,550 per year	This includes maintenance, running costs, repair/renewal of
Administrative costs	£4,760 per year	fixtures/fittings. Building expenses and equipment costs. Includes project manager (5%), Community Assessment and Rehabilitation Team (CART)
Management costs	£17,916 per year	co-ordinator, social services team leader (8%) and agency fees.
C. Indirect overheads	£11,559 per year	To cover the finance function.
D. Capital:		Based on actual cost of the 7 units, a lounge (shared by sheltered
– building costs	£24,994 per year	housing) and an office and uprated using the Tender Price Index for Public Sector Building (non-housing). Capital costs have been annuitised over 60
– land costs	£11,490 per year	years at a discount rate of 3.5 per cent.
Occupancy	71 per cent	On average, 5 of the 7 places are occupied at any one time.
Caseload	32 per year	The annual caseload for January 2004 to January 2005 was 32 clients.
Average length of stay	33 nights	
Hours and length of	7 days a week (to	The service is available 7 days a week with support workers working 10.5
service	include weekends	hours daily (3,832 hours per year). The scheme manager is available from
	and bank	Monday to Friday 7 am to 3 pm, and in case of emergency there is cover
	holidays)	during evenings, nights and weekends via the call centre.
Patient-related hours		All clients receive an initial assessment when referred to Home Bridge,
		usually in hospital. They are assessed on arrival by a community care
Typical episode	7 hours per week	manager, who monitors them throughout their stay and discharges them at the end of their stay. 50 per cent of clients stay on average 29 nights
Low-cost episode	5 hours per week	and receive 41 hours of contact with a support worker per week. 25 per cent of clients stay 10 days and receive an additional 10 hours with a
High-cost episode	10 hours per	support worker each week. 25 per cent of clients stay on average 64 days
6	week	and receive 137 hours with support workers.
Cost of hospital	£314	Between 3-5 hours of a hospital care manager's time: prepares the
assessment and		discharge from hospital and arranges the referral to Home Bridge. A
admission to Homebridge		further 3 hours is required by the social services duty desk to make the
		admission arrangements at Home Bridge. This is based on the salary of a
		social work assistant.
Cost of discharge from	£509	This is carried out by a community care manager and takes 8.5 hours. It
Homebridge		involves 7.5 hours face-to-face contact time for liaison with patient,
		professionals, families and services, and also 1 hour administration.
Cost of health services	£406	On average, 7 hours of therapy or nursing care was provided by the CART
provided by the CART co- ordinator		team.
Unit costs available 2013/2	0014	

Unit costs available 2013/2014

Full unit costs (all activities): Per person (actual occupancy) £34,985 per year, £671 weekly (includes A to D); per person (full occupancy) £24,989 per year, £479 weekly. Cost per episode: £2,808 (typical episode), £1,913 (low-cost episode); £5,699 (high-cost episode).

¹ Curtis, L. (2005) The costs of recuperative care housing, in L. Curtis (ed.) *Unit Costs of Health and Social Care 2005*, Personal Social Services Research Unit, University of Kent, Canterbury.

1.9 Intermediate care based in residential homes

This information is based on PSSRU research carried out with the Social Work and Social Care Section at the Institute of Psychiatry. It provides the costs of comparative intermediate care schemes based in residential homes. The average weekly cost per client across the four schemes is £590, and the average annual cost per client is £3,374. All costs have been uprated to 2014 values using the appropriate PSS inflators. The *National Evaluation of the Costs and Outcomes of Intermediate Care for Older People*² should also be downloaded for comparative costs.

		Social care only		Social and health care
	Scheme A provides	Scheme B is	Scheme C is a	Scheme D is run by the
	a therapeutic	provided by the	short-stay	local authority in
	programme of	local authority for	residential home	conjunction with the
	recuperative care	people with	for people having	primary care trust and
	with 16	dementia. A fee is	difficulty managing	provides 6 weeks of
	recuperative beds.	paid by the local	at home, or who	support and rehabilitation
	Care staff include	authority for care	have been recently	to older people who have
	care workers, a	staff.	discharged from	the potential to return to
	senior night carer		hospital or are	their own home after a stay
	and rehabilitation		considering entry	in hospital. Staff include a
	workers.		to a residential	care manager, therapists, a
			care home. A fee is	visiting medical officer and
			paid by the local	promoting independence
			authority for care	assistants.
N//	5245 444	64.40.44.7	staff.	5450 222
Wages/salary	£216,441	£148,417	£102,318	£160,223
Oncosts				
Employer's national				
insurance plus 14 per cent of salary for employer's	£46,535	£31,910	£21,998	£34,448
contribution to				
superannuation				
Direct overheads				
Includes salaries of				
supervisory staff, running	£245,654	£52,762	£48,499	£27,603
costs and supplies				
Indirect overheads				
Management fees (inc.	£159,423			
premises' costs)				
Capital/premises	£35,178	£42,210		£9,107
Total costs ³	£703,232	£275,299	£172,815	£231,382
Caseload	196	51	64	67
Average length of stay	34 days	54 days	46 days	32 days
No. of beds	16	10	8	8
Weekly costs per client	£843	£528	£414	£576
Average annual cost per	£3,588	£5,398	£2,700	£3,453
client	25,500	25,550	,,	25,755
Cost of typical client	£4,094	£4,073	£2,693	£2,634
episode	*	·		·

¹ Baumann, M., Evans, S., Perkins, M., Curtis, L., Netten, A., Fernandez, J.L. & Huxley, P. (2007) Organisation and features of hospital, intermediate care and social services in English sites with low rates of delayed discharge, *Health & Social Care in the Community*, 15, 4, 295-305.

² Barton, P., Bryan, S., Glasby, J., Hewitt, G., Jagger, C., Kaambwa, B., Martin, G., Nancarrow, S., Parker, H., Parker, S., Regen, E. & Wilson, A. (2006) *A national evaluation of the costs and outcomes of intermediate care for older people. Executive Summary*, Intermediate Care National Evaluation Team (ICNET), University of Birmingham and University of Leicester. http://www.birmingham.ac.uk/Documents/college-social-sciences/social-policy/HSMC/research/intermediate-care-older-people.pdf [accessed 9 October 2014].

³ Where the fee for providing the scheme was provided, 80 per cent was estimated by the service provider as the amount for care staff salaries. The remainder was allocated to overheads.

1.10 Dementia memory service

Memory assessment services support the early identification and care of people with dementia. They offer a comprehensive assessment of an individual's current memory abilities and attempt to determine whether they have experienced greater memory impairment than would be expected for their age. Memory assessment services are typically provided in community centres by community mental health teams, but also are available in psychiatric and general hospitals. Some commissioners consider locating services (or aspects of such services) in primary care, where they are provided by practitioners with a special interest in dementia. The goal is to help people, from the first sign of memory problems, to maintain their health and their independence. See *Commissioning a memory assessment service for the early identification and care of people with dementia* for more information on this service.

Information for this service has been provided by the South London and Maudsley (SLAM) NHS Foundation Trust. Based in the Heavers Resource Centre, Croydon, the service provides early assessment, treatment and care for people aged 65 and over who have memory problems that may be associated with dementia. The initial assessment is provided in the client's own home wherever possible. The average annual cost per client is £1,201. Two further dementia memory services provided by SLAM (but not providing assessments) had average annual costs per client of £996 (Lambeth and Southwark) and £753 (Lewisham). The costs of another London dementia memory service can be found in http://www.londonhp.nhs.uk/wp-content/uploads/2011/03/Dementia-Services-Guide.pdf.

In 2013, an audit of memory services was carried out by the Royal College of Psychiatrists. For more information see http://www.rcpsych.ac.uk/workinpsychiatry/qualityimprovement/nationalclinicalaudits/memoryservicesaudit.aspx. Using information provided by around half of clinics in England on annual funding and number of patients seen and assessments completed, the average total annual cost was estimated to be £639,725, with an average annual cost per patient attendance of £470. The average minimum cost per patient was £205 and the average maximum cost was £648. Memory clinics not providing complete data were excluded from the analysis.

Costs and unit estimation	2013/2014 value	Notes
A. Wages/salary	£444,328 per year	Based on mean salaries for Agenda for Change (AfC) bands. ³ Weighted to reflect the input of 1 WTE associate specialist, 0.40 WTE consultant, 2 WTE occupational therapists (bands 6 & 7), 2.8 WTE psychologists (bands 5, 7 & 8) and nurses (band 6 & two nurses on band 7).
B. Salary oncosts	£113,752 per year	Employer's national insurance is included plus 14 per cent of salary for employer's contribution to superannuation.
C. Overheads		
Management and administration	£110,205 per year	Provided by the South London and Maudsley NHS Foundation Trust and based on median salaries for Agenda for Change (AfC) administrative and clerical grades. Includes 3 FTE administrative and clerical assistants (bands 3, 4 & 5) and management provided by 0.2 WTE psychologist (band 8).
Non-staff	£178,425 per year	Provided by the South London and Maudsley NHS Foundation Trust. This includes expenditure to the provider for travel/transport and telephone, education and training, office supplies and services (clinical and general), as well as utilities such as water, gas and electricity
D. Capital overheads	£3,595 per year	Based on the new-build and land requirements of 4 NHS offices and a large open- plan area for shared use. 4,5 Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
Working time	50.4 weeks per year	Unit costs are based on 2,016 hours per year: 260 working days (8 hours per day)
	40 hours per week	minus bank holidays.
Caseload	708 clients per year	Provided by the South London and Maudsley NHS Foundation Trust.
Unit costs available 2013/20)14	
Total annual cost £850,305;	total cost per hour £422;	cost per client £1,201.

¹ Department of Health (2011) Commissioning services for people with dementia,

http://webarchive.nationalarchives.gov.uk/+/www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/Browsable/DH_127381 [accessed 9 October 2014].

² National Institute for Health and Clinical Excellence (NICE) (2007) Commissioning a memory assessment service for the early identification and care of people with dementia, http://dementianews.wordpress.com/2011/05/12/nice-commissioning-guide-memory-assessment-services/ [accessed 9 October 2014].

³ Health & Social Care Information Centre (2013) NHS staff earnings estimates June 2014, Health & Social Care Information Centre, Leeds.

⁴ Building Cost Information Service (2014) *Surveys of tender prices*, Royal Institute of Chartered Surveyors, London.

⁵ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

2. Services for people with mental health problems

- 2.1 NHS reference costs for mental health services
- 2.2 Local authority care homes for people with mental health problems
- 2.3 Private sector care homes for people with mental health problems
- 2.4 Local authority social services day care for people with mental health problems
- 2.5 Private sector day care for people with mental health problems
- 2.6 Behavioural activation delivered by the non-specialist
- 2.7 Counselling services in primary medical care
- 2.8 Individual placement and support
- 2.9 Deprivation of liberty safeguards in England: implementation costs
- 2.10 Mindfulness based cognitive therapy group-based intervention
- 2.11 Interventions for mental health promotion and mental illness prevention

2.1 NHS reference costs for mental health services

We have drawn on the *NHS Trust and Primary Care Trusts combined* to report on the NHS reference costs of selected mental health services. All costs have been uprated to 2013/14 prices using the HCHS pay & prices inflators. Only services with more than 10 data submissions have been included, but weighted costs have been provided for service groups which do include services with fewer than 10 submissions. Children's services have only been included in the group averages, and the costs of selected mental health care services for children can be found in schema 6.1.

As the first step towards the introduction of a national tariff for mental health services, the Department of Health mandated the use of the mental health care clusters as the currencies for adult mental health services for working-age adults and older people. The care clusters cover most services for working-age adults and older people, and replace previous reference cost currencies for adult and elderly mental health services. They also replace some currencies previously provided for specialist mental health services or mental health specialist teams. The mental health care cluster for working-age adults and older people focuses on the characteristics and needs of a service user, rather than the individual interventions they receive or their diagnosis. See *NHS reference costs guidance* for 2011-2012¹ for more information on care clusters and the method used to allocate drugs to services.

Each reported unit cost includes:

- (a) direct costs which can be easily identified with a particular activity (e.g. consultants and nurses)
- (b) indirect costs which cannot be directly attributed to an activity but can usually be shared among a number of activities (e.g. laundry and lighting)
- (c) overheads which relate to the overall running of the organisation (e.g. finance and human resources).

	Mean £	Lower quartile £	Upper quartile £
MENTAL HEALTH SERVICES			
Mental health care clusters	£351	NA	NA
Mental health care clusters (initial assessment)	£267	£303	£318
All drug and alcohol services (adults and children)	£122	£57	£148
Alcohol services – admitted (per bed day)	£353	£267	£422
Alcohol services – community (per care contact)	£120	£54	£144
Alcohol services – outpatient (per attendance)	£105	£60	£132
Drug services – admitted (per bed day)	£471	£338	£572
Drug services – community (per care contact)	£105	£38	£134
Drug services – outpatient (per attendance)	£130	£79	£113
Mental health specialist teams (per care contact)	£121	£81	£141
A&E mental health liaison services	£206	£156	£235
Criminal justice liaison services	£197	£108	£295
Improving Access to Psychological Therapies (IAPT), adult and elderly	£105	£86	£118
Prison health adult and elderly	£82	£16	£121
Forensic community, adult and elderly	£236	£118	£279
Secure mental health services (per bed day)	£537	£478	£584
Low-level secure services	£415	£382	£458
Medium-level secure services	£507	£426	£552
Specialist mental health services (per bed day)	£295	£241	£337
Eating disorder (adults) – admitted	£434	£372	£463
Mother and baby units – admitted	£685	£612	£747

¹ Department of Health (2014) *NHS reference costs 2012-2013*, https://www.gov.uk/government/publications/nhs-reference-costs-2012-to-2013 [accessed 2 October 2014].

2.2 Local authority care homes for people with mental health problems

This schema uses the Personal Social Services Expenditure return (PSS EX1)¹ for expenditure which has been uprated using the PSS pay & prices inflator.

Costs and unit estimation	2013/2014 value	Notes
Capital costs	COZ man nasidant	Based on the new-build and land requirements for homes for people with mental health problems. ² Capital costs have been annuitised over 60
A. Buildings and oncosts	£97 per resident week	years at a discount rate of 3.5 per cent.
B. Total local authority expenditure (minus capital)	£941 per resident week	The median revenue weekly cost estimate (£941) for supporting adults in own-provision residential care (includes full-cost paying and preserved-rights residents). Capital costs relating to buildings and land have been deducted. The mean cost per client per week is reported as being £1,299. Councils reporting costs of over £2,000 per client week have not been included in this estimate.
C. Agency overheads		Social services management and support services (SSMSS) costs are included in PSS EX1 expenditure figures so no additional overheads have been added.
Other costs		
D. Personal living expenses	£23.90 per week	The DWP personal allowance for people in residential care or a nursing home is £23.90. This has been used as a proxy for personal consumption.
E. External services		No information is available.
Use of facility by client	365.25 days per year	
Occupancy	100 per cent	No statistics available, therefore 100 per cent occupancy assumed.
London multiplier	0.93 x (A to B)	Relative London costs are drawn from the same source as the base data for each cost element.
Unit costs available 2013/2	2014	
£1,038 per resident week e	stablishment costs (i	ncludes A to B); £1,062 per resident week (includes A to D).

¹ Health & Social Care Information Centre (2013) *PSS EX1 2012/13*, Health & Social Care Information Centre, Leeds.

² Building Cost Information Service (2014) *Surveys of tender prices*, Royal Institute of Chartered Surveyors, London.

³ Department of Health (2012) Charging for residential care, https://www.gov.uk/government/news/charging-for-residential-care--2/ [accessed 9 October 2014].

2.3 Voluntary, private and independent sector care homes for people with mental health problems

This schema uses the Personal Social Services Expenditure return (PSS EX1)¹ for expenditure costs, which have been uprated using the PSS pay & prices inflator.

Costs and unit estimation	2013/2014 value	Notes
Capital costs A. Buildings and oncosts	£97 per resident week	Based on the new-build and land requirements for homes for people with mental health problems. ² Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
B. Total expenditure (minus capital) C. Agency overheads	£613 per resident week	The median cost estimate (£613) for supporting adults in residential care provided by other organisations (includes full-cost paying and preserved-rights residents). The mean cost per client per week is reported as being £625. Capital charges relating to building and oncosts have been deducted. Councils reporting costs of over £2,000 per client week have not been included in this estimate. Social services management and support services (SSMSS) costs are included in PSS EX1 expenditure figures so no additional overheads have been added.
Other costs D. Personal living expenses	£23.90 per week	The DWP allowance is used as a proxy for personal consumption. ³
E. Service use		No information available on service use.
Use of facility by client	365.25 days per year	
Occupancy	100 per cent	No statistics available, therefore 100 per cent occupancy assumed.
London multiplier	1.12 x (A to B)	Relative London costs are drawn from the same source as the base data for each cost element.
Unit costs available 2013/	2014	
£710 per resident week es	tablishment costs (in	cludes A to B); £734 per resident week (includes A to D).

¹ Health & Social Care Information Centre (2013) PSS EX1 2012/13, Health & Social Care Information Centre, Leeds.

² Building Cost Information Service (2014) *Surveys of tender prices*, Royal Institute of Chartered Surveyors, London.

³ Department of Health (2012) Charging for residential care, https://www.gov.uk/government/news/charging-for-residential-care--2/ [accessed 9 October 2014].

2.4 Local authority social services day care for people with mental health problems

This schema uses the Personal Social Services Expenditure return (PSS EX1)¹ for local authority expenditure costs, which have been uprated using the PSS pay & prices inflator. Councils reporting costs of more than £500 per client week have been excluded from these estimates. The median and mean cost was £105 per client week (including capital costs). These data do not report on the number of sessions clients attended each week.

To determine the best unit of activity, this year we have carried out a Freedom of Information request to ask local authorities the duration of a 'unit of activity' and to provide approximate guidance on how many units a week clients attend.

Based on information provided by ten local authorities,² we have calculated an average cost per client attendance and also a cost per client hour. We have then used this information to calculate the cost of a client session lasting 3.5 hours, which is a typical standard unit of day care for most local authorities responding to our information request.

For day care for people with mental health problems, the average number of sessions attended per week was 3, which is also the number of sessions recommended as part of a total recovery programme.³

Costs and unit estimation	2013/2014 value	Notes
Capital costs		
A. Buildings and oncosts	£5.30 per client attendance	Based on the new-build and land requirements for local authority day care facilities (which do not distinguish client group). Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
B. Land	£1.40 per client attendance	Based on research carried out by the Valuation Office Agency. These allow for 33.4 square metres per person. The cost of land has been annuitised at 3.5 per cent over 60 years.
C. Other capital		Capital costs not relating to buildings and oncosts are included in the local authority expenditure figures, so no additional cost has been added for other items such as equipment and durables.
D. Total local authority	£29 per client	The median cost per client week has been taken from PSS EX1 2012/13 ¹
expenditure (minus	attendance	and uprated using the PSS pay & prices index. Assuming people with
capital)		mental health problems attend on average 3 times per week (4.1 hours in duration), the median and mean cost per day care attendance is £29 and £22 respectively. Capital charges relating to buildings have been deducted.
E. Agency overheads		Social services management and support services (SSMSS) costs are included in PSS EX1 expenditure figures so no additional overheads have been added.
Use of facility by client		Assumes clients attend 3 times per week. ²
Occupancy	87 per cent	
London multiplier	1.34 x A	
	1.88 x B	Relative London costs are drawn from the same source as the base data.
	0.92 x D	
Unit costs available 2013/	2014	
£35 per client attendance	(includes A to D); £8.0	50 per client hour; £30 per client session lasting 3.5 hours.

¹ Health & Social Care Information Centre (2013) PSS EX1 2012/13, Health & Social Care Information Centre, Leeds.

² Based on research carried out by PSSRU in 2014.

³ Salford City Council (2011) Mental health, Salford City Council. http://www.salford.gov.uk/mentalhealth.htm [accessed 9 October 2014].

 $^{^{\}rm 4}$ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

⁵ Building Cost Information Service (2014) Surveys of tender prices, Royal Institute of Chartered Surveyors, London.

2.5 Private sector day care for people with mental health problems

This schema uses the Personal Social Services Expenditure return (PSS EX1)¹ for expenditure costs, which have been uprated using the PSS pay & prices inflator. The median cost was £97 per client week and the mean cost was £86 (including capital costs).

To determine the best unit of activity, this year we have carried out a Freedom of Information request to ask local authorities the duration of a 'unit of activity' and to provide approximate guidance on how many times a week clients attend.

Based on information provided by ten local authorities,² we have calculated an average cost per client attendance and also a cost per client hour. We have then used this information to calculate the cost of a client session lasting 3.5 hours, which is a typical standard unit of day care for most local authorities responding to our information request.

For day care for people with mental health problems, the average number of sessions attended per week was 3, which is also the number of sessions recommended as part of a total recovery programme.³

See preface for more information.

Costs and unit estimation	2013/2014 value	Notes
Capital costs		
A. Buildings and oncosts	£5.30 per client attendance	Based on the new-build and land requirements for local authority day care facilities (which do not distinguish client group). Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
B. Land	£1.40 per client attendance	Based on research carried out by the Valuation Office Agency. ⁴ These allow for 33.4 square metres per person. ⁵ The cost of land has been annuitised at 3.5 per cent over 60 years.
C. Other capital		Capital costs not relating to buildings are included in the local authority expenditure figures, so no additional cost has been added for other items such as equipment and durables.
D. Total local authority expenditure (minus capital) E. Agency overheads	£33 per client attendance	The median cost per client week has been taken from PSS EX1 2012/13 ¹ and uprated using the PSS pay & prices index. Assuming people with mental health problems attend on average 3 times per week (4.1 hours in duration), ² the median cost per day care attendance per day is £33 and the mean cost per day is £30. Capital charges relating to buildings have been deducted. Social services management and support services (SSMSS) costs are
		included in PSS EX1 expenditure figures so no additional overheads have been added.
Use of facility by client		Assumes clients attend 3 times per week. ²
Occupancy		
London multiplier	1.34 x A	
	1.88 x B 0.92 x D	Relative London costs are drawn from the same source as the base data.
Unit costs available 2013/2	2014	
£40 per client attendance (includes A to D); £9.8	30 per client hour; £34 per client session lasting 3.5 hours.

¹ Health & Social Care Information Centre (2013) PSS EX1 2012/13, Health & Social Care Information Centre, Leeds

² Based on research carried out by PSSRU in 2014.

³ Salford City Council (2011) Mental health, Salford City Council. http://www.salford.gov.uk/mentalhealth.htm [accessed 9 October 2014].

 $^{^{4}}$ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

⁵ Building Cost Information Service (2014) Surveys of tender prices, Royal Institute of Chartered Surveyors, London.

2.6 Behavioural activation delivered by a non-specialist

Behavioural activation provides a simple, effective treatment for depression. This group-based intervention is delivered over 12 one-hour sessions by two mental health nurses on post-qualification pay bands with no previous formal therapy training. They received 5 days training in behavioural activation and 1 hour clinical supervision fortnightly from the principal investigator. Sessions are usually attended by 10 people. Costs are based on Agenda for Change band 7, the grade normally used for this service. However, if we base the costs on Agenda for Change band 5, the cost per session per person is £10 (£12 with qualifications) and for 12 sessions £125 (£148 with qualifications).

Costs and unit estimation	2013/2014 value	Notes
A. Wages/salary	£76,690 per year	Based on the mean full-time equivalent basic salary for Agenda for Change band 7 of the July 2013-June 2014 NHS staff earnings estimates. ²
B. Salary oncosts	£19,196 per year	Employer's national insurance is included plus 14 per cent of salary for contribution to superannuation.
C. Qualifications	£20,878 per year	Qualification costs have been calculated using the method described in Netten et al. (1998). ³ Current cost information has been provided by the Department of Health and Health Education England (HEE). ⁴ See schema 7.4 for more details. This is for 2 mental health nurses.
D. Training for behavioural activation	£635 per year	Training costs were calculated by facilitators' hourly rate for the duration of the training (35 hours) divided by the number of participants attending (n=10) (£200 per therapist). Supervision costs were based on 1-hour fortnightly contact for 40 weeks (£2,937 per therapist). 12 session behavioural protocol (£226 per therapist). These costs have been annuitised over the working life of the nurse.
E. Overheads		Taken from NHS (England) Summarised accounts. ⁵
Management, administration and estates staff	£18,516 per year	Management and other non-care staff costs were 19.31 per cent of direct care salary costs and included administration and estates staff.
Non-staff	£40 243 per year	Non-staff costs were 41.97 per cent of direct care salary costs. They include costs to the provider for office, travel/transport and telephone, education and training, supplies and services (clinical and general), as well as utilities such as water, gas and electricity.
F. Capital overheads	£7,375 per year	Based on the new-build and land requirements of NHS facilities (2 offices) but adjusted to reflect shared use of both treatment and non-treatment space. ^{6,7} Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
Working time	42 weeks per year 37.5 hours per week	Unit costs are based on 1,575 hours per year: 210 working days minus sickness absence and training/study days as reported for all NHS staff groups. ⁸
Ratio of direct to indirect time	1.0.00	Based on the National Child and Adolescent Mental Health Service Mapping data and returns from over 500 grade G nurses, 45 per cent of time was spent on direct clinical work, 13 per cent on consultation and liaison, 8 per cent on training and education, 4
Face-to-face contacts	1:0.89	per cent on research and evaluation, 23 per cent on admin and management, 7 per cent on other work. Seventeen per cent was spent on tier 1 work and this was
Patient-related work	1:0.33	assumed to be spread across all types of activity for the purpose of the analysis.
Duration of contact		One-hour sessions included direct treatment time of 40-50 minutes and administration.
Unit costs available 2013/2014	(costs including qualific	cations given in brackets)
Cost per session per person £1	0 (£12); Cost per 12 sessi	ions per person £125 (£148)

¹ Ekers, D., Godfrey, C., Gilbody, S., Parrott, S., Richards, D., Hammond, D. & Hayes, A. (2011) Cost utility of behavioural activation delivered by the non-specialist, *British Journal of Psychology*, 199, 510-511, doi:10.1192/bjp.bp.110.090266

² Health & Social Care Information Centre (2013) NHS staff earnings estimates 2014 (not publicly available), Health & Social Care Information Centre, Leeds.

³ Netten, A., Knight, J., Dennett, J., Cooley, R. & Slight, A. (1998) *Development of a ready reckoner for staff costs in the NHS, Vols 1 & 2*, Personal Social Services Research Unit, University of Kent, Canterbury.

⁴ Personal communication with the Department of Health and Health Education England (HEE), 2014.

⁵ Audit Commission (2013) *NHS summarised accounts 2012-2013*, NHS, London.

⁶ Building Cost Information Service (2014) *Surveys of tender prices*, Royal Institute of Chartered Surveyors, London.

 $^{^{\}rm 7}$ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

⁸ Contracted hours are taken from NHS Careers (2014) *Pay and benefits, National Health Service,* London, http://www.nhscareers.nhs.uk/working-in-the-nhs/pay-and-benefits/ [accessed 9 October 2014]. Working days and sickness absence rates as reported in Health & Social Care Information Centre (2014) *Sickness absence rates in the NHS: April 2009 – April 2014*, Health & Social Care Information Centre, Leeds.

2.7 Counselling services in primary medical care

Counselling and psychotherapy are umbrella terms that cover a range of talking therapies. They are delivered by trained practitioners who work with people over a short or long term to help them bring about effective change or enhance their wellbeing.¹

Costs and unit estimation	2013/2014 value	Notes
A. Wages/salary	£38,497 per year	Based on the mean full-time equivalent basic salary for Agenda for
		Change band 7 of the July 2013-June 2014 NHS staff earnings estimates. ²
B. Salary oncosts	£9,640 per year	Employer's national insurance is included plus 14 per cent of salary for
		employer's contribution to superannuation.
C. Overheads		
Management and	£9,295 per year	No information available on management and administrative overheads
administration		for professionals working in primary care. The same level of support has
		been assumed for counsellors as for other NHS staff (19.31 per cent of direct care salary costs).
Office, general business	£18,591 per year	No information available on overheads for a counsellor working in
and premises (including		primary care. All information on office and general business expenses is
advertising and		drawn from the GP earnings and expenses report. ³ The same level of
promotion)		overheads (office & general business, premises and other expenses) has
		been assumed as for a practice nurse (see schema 10.6).
D. Capital overheads	£3,250 per year	Based on new-build and land requirements for a practice nurse non-
		treatment space. Capital costs have been annuitised over 60 years at a
		discount rate of 3.5 per cent. ^{4,5}
E. Travel		No information available on average mileage covered per visit. From July
		2014, NHS reimbursement has been based on a single rate for the first
		3,500 miles travelled (56p) and a reduced rate thereafter, irrespective of
		the type of car or fuel used (20p). ⁶
Ratio of direct to indirect		No current information available on patient-related activity. See previous
time on client contact		editions of this publication for sources of information. Please complete
		our time-use survey: https://www.surveymonkey.com/s/SZMF5YL/
Consultations	55 minutes	
Working time	42.4 weeks per	Unit costs are based on 1,589 hours per year: 212 working days minus
	year	sickness absence and training/study days as reported for all NHS staff
	37.5 hours per	groups. ⁷ Each practice in the study employed counsellors for between 6
	week	and 49 hours per week.
Unit costs available 2013/2		
£50 per hour (includes A to	D).	

¹ British Association for Counselling and Psychotherapy (2011) *BACP definition of counselling*, BACP. www.bacp.co.uk/ [accessed 9 October 2014].

² Health & Social Care Information Centre (2013) NHS staff earnings estimates 2014 (not publicly available), Health & Social Care Information Centre, Leeds.

³ Information Centre (2014) *GP earnings and expenses 2013/2013*, Information Centre, Leeds. http://www.hscic.gov.uk/article/2021/Website-Search?productid=15467&q=GP+earnings+and+expenses&sort=Relevance&size=10&page=1&area=both#top [accessed 9 October 2014].

⁴ Building Cost Information Service (2014) *Surveys of tender prices*, Royal Institute of Chartered Surveyors, London.

 $^{^{\}rm 5}$ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

⁶ NHS Employers (2014) *Amended mileage rates from 1 July 2014*, http://www.nhsemployers.org/case-studies-and-resources/2014/07/amended-mileage-rates-from-1-july-2014 [accessed 1 October 2014].

⁷ Contracted hours are taken from NHS Careers (2014) *Pay and benefits,* National Health Service, London. http://www.nhscareers.nhs.uk/working-in-the-nhs/pay-and-benefits/ [accessed 9 October 2014]. Working days and sickness absence rates as reported in Health & Social Care Information Centre (2014) *Sickness absence rates in the NHS: April 2009 – April 2014,* Health & Social Care Information Centre, Leeds.

2.8 Individual placement and support

Provided by Justine Schneider and Sheila Durie

Description of Individual Placement and Support (IPS)

People with severe mental health problems face particular barriers to employment, both in relation to their impairments¹ and as a result of stigma and prejudice.² To overcome these, an approach known as Individual Placement and Support (IPS) has been developed³ and has strong evidence to support it.^{4,5} There are 25 criteria for 'fidelity' of IPS to the standards of best practice. The management ratio and the caseload sizes used here are within the bounds of 'good to exemplary' scores; most of the other fidelity criteria have little or no direct impact on service costs. Caseload capacity is determined both by size and by turnover. There is evidence from the US that each place on a caseload serves about 1.8 clients over a year, so a caseload of 20 has a throughput of 38 individuals per year on average. Although caseload size is used here to estimate a range of unit costs for IPS, turnover has not been factored in because it is likely to vary according to the skills of the post-holder.

Necessary conditions for IPS to operate

Successful operation of IPS requires work-oriented mental health services, through cross-sector engagement and partnership working. The specialist skills of IPS staff and managers provide direct interventions with service users and employers to place people in work and support them as required. Responsibility for the maintenance of work-oriented mental health is shared more widely across professionals in the field.

Variations in the costs presented

The IPS approach requires employment specialists to be integrated into the mental health team. However, there is a wide range of levels at which the specialists are currently appointed. Therefore, in schema 2.9.1 we offer costs for four grades of staff, two with professional qualifications (e.g. psychology, occupational therapy) and two with no particular qualifications. These different levels of pay, combined with a range of caseload sizes, yield a range of unit costs, as shown in schema 2.9.2. To the salary costs are added the usual overheads, plus a cost for a team leader, who according to IPS guidance should not supervise more than 10 staff and should be available to provide practical support. A small marketing budget is included here, but annual costs for training were not available. We were advised by experienced IPS services that no other costs are commonly incurred. The unit cost per year shown in schema 2.9.2 ranges from £1,893 to £7,323, depending on caseload size and salary level of the worker. This does not take account of turnover in clients, who are unlikely to remain in the service for a full year.

Comparative costs of day care

Unit costs of IPS may be compared to the costs of private sector day care. In schema 2.5 of this volume, the cost of private sector day care was £40 per session outside of London. Schema 2.9.3 shows the unit cost per day for the four grades of staff, combined with the same range of caseload sizes as in schema 2.9.2. The unit cost per day shown in schema 2.9.3 range from £45 to £174 depending on caseload size and salary level of the worker. Whereas day care is often allocated in perpetuity, IPS is geared to finding a person paid work, and therefore the amount used by a given individual is likely to decrease over time. Moreover, there is some evidence that those individuals who attain work gain self-esteem⁶ and reduce their reliance on mental health services, though not necessarily on social security benefits.⁷

¹ McGurk, S. & Mueser, K. (2004) Cognitive functioning, symptoms and work in supported employment; a review and heuristic model, *Schizophrenia Research*, 70, 147-174.

² Thornicroft, G. (2006) *Shunned: discrimination against people with mental illness*, Oxford University Press, Oxford.

³ Department of Health (2006) Vocational services for people with severe mental health problems: commissioning guidance, CSIP for Department of Work and Pensions and Department of Health.

⁴ Bond, G.R., Drake, R.E. & Becker, D.R. (2008) An update on randomized controlled trials of evidence based supported employment, *Psychiatric Rehabilitation Journal*, 31, 280-289.

⁵ Burns, T., Catty, J., Becker, T., Drake, R., Fioritti, A., Knapp, M., Lauber, C., Rossler, W., Tomov, T., van Busschbach, J., White, S. & Wiersma, D. (2007) The effectiveness of supported employment for people with severe mental illness: a randomised controlled trial. *The Lancet*. 370, 1146-1152.

⁶ Sesami Research and Practice Partnership (2007) The SESAMI evaluation of employment support in the UK: background and baseline data, *Journal of Mental Health*. 16. 3. 375-388.

⁷ Schneider, J., Boyce, M., Johnson, R., Secker, J., Grove, B. & Floyd, M. (2009) Impact of supported employment on service costs and income of people, *Journal of Mental Health*, 18, 6, 533-542.

2.8.1 Cost components

	Unqualified	Unqualified	Qualified	Qualified
	Band 3	Band 4	Band 5	Band 6
Salary	£18,433	£21,220	£23,475	£30,998
Salary oncosts	£4,062	£4,837	£5,464	£7,555
Overheads – staff	£4,344	£5,032	£5,588	£7,445
Overheads – other	£9,441	£10,936	£12,145	£16,181
Capital	£2,794	£2,794	£2,794	£2,794
Team leader	£7,166	£7,166	£7,166	£7,166
Marketing budget	£1,089	£1,089	£1,089	£1,089
Total	£47,329	£53,074	£57,721	£73,228

2.8.2 Unit costs per person per year

	Unqualified	Unqualified	Qualified	Qualified
Caseload size	Band 3	Band 4	Band 5	Band 6
10 people	£4,733	£5,307	£5,772	£7,323
15 people	£3,155	£3,538	£3,848	£4,882
20 people	£2,366	£2,654	£2,886	£3,661
25 people	£1,893	£2,123	£2,309	£2,929

2.8.3 Unit costs per person per day

	Unqualified	Unqualified	Qualified	Qualified
Caseload size	Band 3	Band 4	Band 5	Band 6
10 people	£113	£126	£137	£174
15 people	£75	£84	£92	£116
20 people	£56	£63	£69	£87
25 people	£45	£51	£55	£70

2.9 Deprivation of liberty safeguards in England: implementation costs

In 2009 the government provided additional funding of £10 million for local authorities and £2.2 million for the National Health Service (NHS) for the implementation of deprivation of liberty safeguards (DoLS). This amends a breach of the European Convention on Human Rights and provides for the lawful deprivation of liberty of those people who lack the capacity to consent to arrangements made for their care or treatment in either hospitals or care homes, but who need to be deprived of liberty in their own best interests, to protect them from harm.

In 2009, a study was carried out to estimate the costs likely to be incurred with the implementation of the DoLS in England, and data on resource utilisation were collected from professionals conducting the six formal assessments required. These are: age assessment, mental health assessment, mental capacity assessment, best-interest assessment, eligibility assessment and no refusal assessment, the latter of which establishes whether authorisation of deprivation of liberty would conflict with other authorities (for example, power of attorney) for decision-making for that individual.

The 40 interviews included professionals conducting the six DoLS assessments, the secretarial staff in DoLS offices and the independent mental capacity advocates. Each professional provided the average time taken for an individual DoLS assessment or for combined assessments, when more than one of the six DoLS assessments were conducted together. Information on average travelling time and distance was also provided. Total assessment time for each individual (including travelling time) was multiplied by the unit cost for that professional and a travelling allowance.

The average cost for a single DoLS assessment across the five DoLS offices was £1,366. The standard deviation around the estimated cost of a single DoLS assessment was £413, and the 95 per cent confidence interval was £513 to £2,150. All costs have been uprated to 2013/2014 prices using the appropriate inflators.

Costs for a single deprivation of liberty safeguards (DoLS) assessment

All assessments include travel time	DoLS office 1	DoLS office 2	DoLS office 3	DoLS office 4	DoLS office 5	Average of the five offices
Assessments by mental health assessor	£492	£224	£567	£281	£242	£360
Assessments by best-interest assessor	£691	£415	£288	£1,000	£557	£588
Secretarial costs	£322	£181	£126	£574	£302	£300
Independent mental capacity advocates assessments	£111	£85	£60	£58	£72	£77
Court protection costs	£42	£42	£42	£42	£42	£42
Total costs	£1,659	£947	£1,082	£1,955	£1,214	£1,366

¹ Shah, A., Pennington, M., Heginbotham, C. & Donaldson, C. (2011) Deprivation of liberty safeguards in England: implementation costs, *British Journal of Psychiatry*, 199,232-238, doi:10.1192/bjp.bp.110.089474.

2.10 Mindfulness-based cognitive therapy - group-based intervention

Mindfulness-based cognitive therapy (MBCT) is a manualised skills training programme designed to enable patients to learn skills that prevent the recurrence of depression. It is derived from mindfulness-based stress reduction, a programme with proven efficacy in ameliorating distress in people suffering chronic disease.

To provide the unit costs of this service, we have drawn on information provided by Kuyken et al. (2008)¹ which was based on data from three mindfulness-based cognitive therapy therapists who took part in the study. There were 12 individuals in each group.

Costs and unit estimation	Unit cost 2013/2014	Notes	
A. Wages/salary	£38,497 per year	Based on the mean full-time equivalent basic salary for Agenda for Change band 7 of the July 2013-June 2014 NHS staff earnings estimates. ² See section V for further information on salaries.	
B. Salary oncosts	£9,640 per year	Employer's national insurance is included plus 14 per cent of salary for employer's contribution to superannuation.	
C. Qualifications		No information available	
D. Overheads		Taken from NHS (England) Summarised accounts. ³	
Management, administration and estates staff	£9,295 per year	Management and other non-care staff costs were 19.31 per cent of direct care salary costs and included administration and estates staff.	
Non-staff	£20,203 per year	Non-staff costs were 41.97 per cent of direct care salary costs. They include costs to the provider for office, travel/transport and telephone, education and training, supplies and services (clinical and general), as well as utilities such as water, gas and electricity.	
E. Capital overheads	£4,338	Based on the new-build requirements of NHS facilities, but adjusted to reflect shared use of both treatment and non-treatment space. 4,5	
Working time	42.4 weeks per year 37.5 hours per week	Unit costs are based on 1,589 hours per year: 212 working days minus sickness absence and training/study days as reported for all NHS staff groups. ⁶	
Face-to-face time	1:0.67	Based on data from the three MBCT therapists who took part in the study.	
Length of sessions	2 hours	Therapy sessions lasted two hours with 12 people attending each session.	
Unit costs available 2013/2	2014		
£172 per session, £14 per s	ervice user.		

¹ Kuyken, W., Byford, S., Taylor, R.S., Watkins, E., Holden, E., White, K., Barrett, B., Byng, R., Evans, A Mullan, E. & Teasdale, J.D. (2008) Mindfulness-based cognitive therapy to prevent relapse in recurrent depression, *Journal of Consulting and Clinical Psychology*, 76, 966-978.

² Health & Social Care Information Centre (2013) NHS staff earnings estimates 2013 (not publicly available), Health & Social Care Information Centre, Leeds.

³ Audit Commission (2013) *NHS summarised accounts 2012-2013*, NHS, London.

⁴ Building Cost Information Service (2014) Surveys of tender prices, Royal Institute of Chartered Surveyors, London.

⁵ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

⁶ Contracted hours are taken from NHS Careers (2014) *Pay and benefits,* National Health Service, London. http://www.nhscareers.nhs.uk/working-in-the-nhs/pay-and-benefits/ [accessed 9 October 2014]. Working days and sickness absence rates as reported in Health & Social Care Information Centre (2014) *Sickness absence rates in the NHS: April 2009 – April 2014,* Health & Social Care Information Centre, Leeds.

2.11 Interventions for mental health promotion and mental illness prevention

Information has been drawn from Knapp et al. (2011)¹ and explores the economic case for mental health promotion and prevention, based on a detailed analysis of costs and benefits for 15 different interventions. All costs have been uprated using the appropriate inflators.

The full report can be downloaded at:

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_126085/.

Parenting interventions for the prevention of persistent conduct disorders

Context: Conduct disorders are the most common childhood psychiatric disorders, with a UK prevalence of 4.9 per cent for children aged 5-10 years. The condition leads to adulthood anti-social personality disorder in about 50 per cent of cases, and is associated with a wide range of adverse long-term outcomes, particularly delinquency and criminality. The costs to society are high, with average potential savings from early intervention previously estimated at £150,000 (2011 prices) per case

Intervention: Parenting programmes can be targeted at parents of children with, or at risk of, developing conduct disorder, and are designed to improve parenting styles and parent-child relationships. Reviews have found parent training to have positive effects on children's behaviour, and that benefits remain one year later. Longer-term studies show sustained effects but lack control groups; cost-effectiveness data are limited, but in one trial, health and social services costs were found to reduce over time.

Cost: The median cost of an 8-12 week group-based parenting programme is estimated at £988 per family, while that of individual interventions is £2,156. Assuming 80 per cent of people receive group-based interventions and 20 per cent individual interventions, in line with NICE guidance, the average cost of the intervention can be estimated at £1,221 per family.

School-based social and emotional learning programmes to prevent conduct problems in childhood.

Context: Conduct problems in childhood cover a range of oppositional or anti-social forms of behaviour, such as disobedience, lying, fighting and stealing, and are associated with a range of poor outcomes, including increased risk of criminal activity, fewer school qualifications, parenthood at a young age, unemployment, divorce or separation, substance abuse and psychiatric disorders, many of which lead to increased costs across several agencies.

Intervention: School-based Social and Emotional Learning (SEL) programmes help children and young people to recognise and manage emotions, and to set and achieve positive goals. International evidence shows that SEL participants demonstrate significantly improved social and emotional skills, attitudes, behaviour and academic performance.

Cost: The costs of a representative intervention, including teacher training, programme co-ordinator and materials, were estimated at £137 per child per year at current prices.

School-based interventions to reduce bullying

Context: Being bullied at school has adverse effects on both psychological well-being and educational attainment. There is evidence from longitudinal data that this has a negative long-term impact on employability and earnings; on average, lifetime earnings of a victim of bullying are reduced by around £50,000. According to an Ofsted survey, ² 39 per cent of children reported being bullied in the previous 12 months.

Intervention: Anti-bullying programmes show mixed results. One high-quality evaluation of a school-based anti-bullying intervention found a 21-22 per cent reduction in the proportion of children victimised.

Cost: Information is limited on the cost of anti-bullying programmes, but one study estimates this at £16 per pupil per year at current prices.

¹ Knapp, M., McDaid, D. & Parsonage, M. (2011) *Mental health promotion and mental illness prevention: the economic case*, Department of Health, London

² Ofsted (2008) *Children on bullying*, Ofsted, http://www.ofsted.gov.uk/resources/children-bullying [accessed 9 October 2014].

Early detection for psychosis

Context: It is estimated that each year in England more than 15,000 people exhibit early symptoms before the onset of full psychosis. Progression of the disease is associated with higher costs to public services (including health, social care and criminal justice), lost employment, and greatly diminished quality of life for the individual and their family.

Intervention: Early detection services aim to identify the early symptoms of psychosis, reduce the risk of transition to full psychosis, and shorten the duration of untreated psychosis for those who develop it. Such services include cognitive behavioural therapy, psychotropic medication, and contact with psychiatrists. This contrasts with treatment as usual which typically consists of GP and counsellor contacts.

Cost: One year of an early detection intervention has been estimated to cost £3,058 per patient, compared with £771 for standard care (2009 prices).

Early intervention for psychosis

Context: Psychosis related to schizophrenia is associated with higher costs to public services (including health, social care and criminal justice), lost employment, and greatly diminished quality of life for the individual with the illness and their family.

Intervention: Early intervention teams aim to reduce relapse and readmission rates for patients who have suffered a first episode of psychosis, and to improve their chances of returning to employment, education or training, and more generally their future quality of life. This intervention involves a multidisciplinary team that could include a range of professionals (psychiatrists, psychologists, occupational therapists, community support workers, social workers and vocational workers).

Cost: The annual direct cost per patient of this type of service, plus other community psychiatric services and inpatient care, has been estimated at £11,815 at current prices. The first year of the early intervention team's input is estimated to cost £2,467 per patient.

Screening and brief intervention in primary care for alcohol misuse

Context: It is estimated that 6.6 million adults in England currently consume alcohol at hazardous levels, and 2.3 million at harmful levels.

Intervention: An inexpensive intervention in primary care combines universal screening by GPs of all patients, followed by a 5-minute advice session for those who screen positive.

Cost: The total cost of the intervention averaged over all those screened was £18.00 at current prices.

Workplace screening for depression and anxiety disorders

Context: Labour Force Survey data suggest that 11.4 million working days were lost in Britain in 2008/09 due to work-related stress, depression or anxiety. This equates to 27.3 days lost per affected worker.

Intervention: Workplace-based enhanced depression care consists of employees completing a screening questionnaire, followed by care management for those found to be suffering from, or at risk of developing, depression and/or anxiety disorders. Those at risk of depression or anxiety disorders are offered a course of cognitive behaviour therapy (CBT) delivered in six sessions over 12 weeks.

Cost: It is estimated that £32 covers the cost of facilitating the completion of the screening questionnaire, follow-up assessment to confirm depression, and care management costs. For those identified as being at risk, the authors estimated that the cost of six sessions of face-to-face CBT is £249.

Promoting well-being in the workplace

Context: Deteriorating well-being in the workplace is potentially costly for businesses as it may increase absenteeism and presenteeism (lost productivity while at work), and in the longer term potentially leads to premature withdrawal from the labour market.

Intervention: There are a wide range of approaches: flexible working arrangements; career progression opportunities; ergonomics and environment; stress audits; and improved recognition of risk factors for poor mental health by line managers. A multi-component health promotion intervention consists of personalised health and well-being information and advice; a health risk appraisal questionnaire; access to a tailored health improvement web portal; wellness literature, and seminars and workshops focused on identified wellness issues.

Cost: The cost of a multi-component intervention is estimated at £83 per employee per year.

Debt and mental health

Context: Only about half of all people with debt problems seek advice, and without intervention almost two-thirds of people with unmanageable debt problems will still face such problems 12 months later. Research has demonstrated a link between debt and mental health. On average, the lost employment costs of each case of poor mental health are £12,361 per year, while the annual costs of health and social service use are £1,631.

Intervention: Current evidence suggests that there is potential for debt advice interventions to alleviate financial debt, and hence reduce mental health problems resulting from debt. For the general population, contact with face-to-face advice services is associated with a 5 per cent likelihood of debt becoming manageable, while telephone services achieve 47 per cent.

Cost: The costs of this type of intervention vary significantly, depending on whether it is through face-to-face, telephone or internet-based services. The Department for Business, Innovation and Skills suggests expenditure of £259 per client for face-face-debt advice; telephone and internet-based services are cheaper.

Population-level suicide awareness training and intervention

Context: The economic impacts of suicide are profound, although comparatively few studies have sought to quantify these costs. This is in part because a proportion of individuals who survive suicide attempts are likely to make further attempts, in some cases fatal.

Intervention: There is evidence that suicide prevention education for GPs can have an impact as a population-level intervention to prevent suicide. With better identification of those at risk, individuals can receive cognitive behavioural therapy (CBT), followed by ongoing pharmaceutical and psychological support to help manage underlying depressive disorders.

Cost: The authors estimated that a course of CBT in the first year is around £433 per person. Further ongoing pharmaceutical and psychological therapy is estimated to cost £1,278 a year. The cost of suicide prevention training for GPs, based on the Applied Suicide Intervention Skills Training (ASIST) course, is £216.

Bridge safety measures for suicide prevention

Context: Jumping from height accounts for around 3 per cent of completed suicides.

Intervention and cost: Following the installation of a safety barrier in 1998, at a cost of £324,382 at current prices, the number of suicides reduced from an average of 8.2 per year in the five years before the barrier, to 4 per year in the five years after it was installed.

Collaborative care for depression in individuals with Type II diabetes

Context: Depression is commonly associated with chronic physical health problems. US data indicate that 13 per cent of all new cases of Type II diabetes will also have clinical depression. These patterns are important as evidence shows that comorbid depression exacerbates the complications and adverse consequences of diabetes, in part because patients may more poorly manage their diabetes. This has substantial economic consequences.

Intervention: 'Collaborative care', including GP advice and care, the use of antidepressants and cognitive behavioural therapy (CBT) for some patients, can be delivered in a primary care setting to individuals with co-morbid diabetes.

Cost: It is estimated that the total cost of six months of collaborative care is £737, compared with £374 for usual care.

Tackling medically unexplained symptoms

Context: Somatoform conditions present physical symptoms for which there is no identifiable physical cause. These medically unexplained symptoms are thought to be triggered or exacerbated by emotional factors, such as psychosocial stress, depression or anxiety. The financial costs to public services and society are considerable.

Intervention: Cognitive behavioural therapy (CBT) has been found to be an effective intervention for tackling somatoform conditions and their underlying psychological causes.

Cost: A course of CBT may last for 10 sessions at £93 per session. Costs associated with the need to raise the awareness of GPs to the potential role of CBT treatment for somatoform conditions, either through e-learning or face-to-face training.

Befriending of older adults

Context: Befriending initiatives, often delivered by volunteers, provide an 'upstream' intervention that is potentially of value both to the person being befriended and the befriender.

Intervention: The intervention is not usually structured and nor does it have formally-defined goals. Instead, an informal, natural relationship develops between the participants, who will usually have been matched for interests and preferences. This relationship facilitates improved mental health, reduced loneliness and greater social inclusion.

Cost: The contact is generally for an hour per week or fortnight. The cost to public services of 12 hours of befriending contact is estimated at £88, based on the lower end of the cost range for befriending interventions.

3. Services for people who misuse drugs or alcohol

- 3.1 Residential rehabilitation for people who misuse drugs or alcohol
- 3.2 Inpatient detoxification for people who misuse drugs or alcohol
- 3.3 Specialist prescribing
- 3.4 Alcohol health worker, Accident & Emergency Department

Services for people who misuse drugs or alcohol

Statistics produced by the National Drug Treatment Monitoring System (NDTMS), presented in the National Treatment Agency's (NTA) Annual Report 2008/09, revealed the prevalence of people who misuse drugs or alcohol.

The information presented in schemas 3.1 to 3.3 was provided by the National Treatment Agency² and present the unit costs of three treatment interventions: (a) residential rehabilitation, (b) inpatient detoxification and (c) specialist prescribing. These interventions are described fully in *Business Definition for Adult Drug Treatment Providers* (National Treatment Agency, 2010).³

National average costs for the interventions were calculated. These excluded instances where the provider data fell in the top and bottom 5 per cent of unit costs for service users in treatment **OR** days in treatment, and the top and bottom 10 per cent of unit costs for service users in treatment **AND** days in treatment.

¹ National Treatment Agency for Substance Misuse (2009) *Annual report, 2008/09*. http://www.nta.nhs.uk/uploads/nta_annual_report_08-09_2.pdf [accessed 9 October 2014].

² Personal communication with the National Treatment Agency, 2010.

³ National Treatment Agency for Substance Misuse (2010) NDTMS dataset G, definition, business definition for adult drug treatment providers, http://www.nta.nhs.uk/core-data-set.aspx/ [accessed 9 October 2014].

3.1 Residential rehabilitation for people who misuse drugs or alcohol

Residential rehabilitation consists of a range of treatment delivery models or programmes to address drug and alcohol misuse, including abstinence orientated drug interventions within the context of residential accommodation. Other examples include inpatient treatment for the pharmacological management of substance misuse, and therapeutic residential services designed to address adolescent substance misuse. Of the 210,815 individuals receiving structured drug treatment in 2008/09, 4,711 were in residential rehabilitation. The real figure is likely to be higher as only about two-thirds of residential providers sent data to the National Drug Treatment Monitoring System in 2008/09.

Information has been drawn from a sample of 34 residential rehabilitation programmes to produce a unit cost per resident week of £633 (unchanged from last year) at 2013/2014 prices. The Gross Domestic Product (GDP) index has been used to uprate from 2007/08 prices, as suggested by the NTA. It was not possible to provide details of costs for this service due to the method of data collection.

¹ National Treatment Agency for Substance Misuse (2009) *Annual report, 2008/09*, http://www.nta.nhs.uk/uploads/nta_annual_report_08-09_2.pdf [accessed 9 October 2014].

3.2 Inpatient detoxification for people who misuse drugs or alcohol

An Inpatient Unit (IPU) provides care to service users with substance-related problems (medical, psychological or social) that are so severe that they require medical, psychiatric and psychological care. The key feature of an IPU is the provision of these services with 24-hour cover, seven days per week, from a multidisciplinary clinical team who have had specialist training in managing addictive behaviours.

Treatment in an inpatient setting may involve one or more of the following interventions: (a) assessment, (b) stabilisation and (c) assisted withdrawal (detoxification). A combination of all three may be provided, or one followed by another.

The three main settings for inpatient treatment are: (a) general hospital psychiatric units, (b) specialist drug misuse inpatient units in hospitals and (c) residential rehabilitation units (usually as a precursor to the rehabilitation programme). See *Business Definition for Adult Drug Treatment Providers*¹ for more detailed information on this intervention.

Based on information provided by the National Treatment Agency in 2010, the average cost for inpatient detoxification (NHS and voluntary organisations) is £152 per patient day, which is equivalent to £1,061 per patient week (unchanged from last year).

Costs and unit estimation	2013/2014 value	Notes
A. Direct pay	£88 per patient	Salaries plus oncosts for care staff.
	day	
B. Direct overheads	£16 per patient day	Includes drugs, pharmacy and dispensing costs. Also includes other treatment materials, toxicology and drug testing, medical supplies, rent and rates, staff travel, training, service user travel costs, volunteer expenses, contingency management, office costs specifically attributed to the provision of the service, non-pay administration (for example, telephones and information technology).
C. Indirect costs and overheads	£48 per patient day	Includes capital charges, expenditure on refurbishment, property and buildings, housekeeping, catering, porterage, transport, waste disposal, security, finance, human resources, personnel, communications and corporate charges.
Unit costs available 2013/2	2014	
£152 per patient day or £1,	061 per patient weel	Κ

¹ National Treatment Agency for Substance Misuse (2010) *NDTMS dataset G, definition, business definition for adult drug treatment providers*, http://www.nta.nhs.uk/core-data-set.aspx [accessed 9 October 2014].

3.3 Specialist prescribing

Specialist prescribing is community prescribing for drug misuse in a specialist drug service setting, normally staffed by a multidisciplinary substance misuse team. Specialist prescribing interventions normally include comprehensive assessments of drug treatment need and the provision of a full range of prescribing treatments in the context of care-planned drug treatment. The specialist team should also provide, or provide access to, a range of other care-planned health-care interventions including psychosocial interventions, a wide range of harm reduction interventions, Blood Borne Virus (BBV) prevention and vaccination, and abstinence-oriented interventions.

The teams include specialist doctors who are usually consultant addiction psychiatrists 'with a Certificate of Completion of Training (CCT) in psychiatry, with endorsement in substance misuse working exclusively to provide a full range of services to substance misusers'. See *Business Definition for Adult Drug Treatment Providers*¹ for more detailed information on this intervention.

Based on information provided by the National Treatment Agency,² the average cost for specialist prescribing is £53 per patient week. All costs have been uprated from 2007/08 using the Gross Domestic Product (GDP) index, as suggested by the NTA.

Using reference costs 2011/2012,³ the mean cost per client contact in a NHS and PCT combined drugs and alcohol mental health team was £119 per face-to-face contact and £51 per non face-to-face contact. These costs have been uprated using the Hospital and Community Health Services (HCHS) inflator.

Costs and unit estimation	2013/2014 value	Notes
A. Direct pay	£24 per patient week	Salaries plus oncosts for care staff.
B. Direct overheads	£18 per patient week	Includes drugs, pharmacy and dispensing costs. Also includes other treatment materials, toxicology and drug testing, medical supplies, rent and rates, staff travel, training, service user travel costs, volunteer expenses, contingency management, office costs specifically attributed to the provision of the service, non-pay administration (for example, telephones and information technology).
C. Indirect costs and overheads	£10 per patient week	Includes capital charges, capital on refurbishment, property and buildings, housekeeping, catering, porterage, transport, waste disposal, security, finance, human resources, personnel, communications and corporate charges.
Unit costs available 2013/2	2014	
£52 per patient week	_	

¹ National Treatment Agency for Substance Misuse (2010) NDTMS dataset G, definition, business definition for adult drug treatment providers, http://www.nta.nhs.uk/core-data-set.aspx [accessed 9 October 2014].

² Personal communication with the National Treatment Agency, 2010.

³ Department of Health (2014) *NHS reference costs 2012-2013*, https://www.gov.uk/government/publications/nhs-reference-costs-2012-to-2013 [accessed 9 October 2014].

3.4 Alcohol health worker, Accident & Emergency

Alcohol health workers (AHWs) are experienced mental health nurses who have undertaken specific training in counselling people who misuse alcohol. AHWs interact with people in a non-confrontational and patient-centred way, and during an assessment may offer feedback about safe levels of drinking and suggest a range of strategies aimed at reducing levels of consumption. Information for this schema is based on a study carried out by the Centre for the Economics of Mental and Physical Health at the Institute of Psychiatry, London. London.

Costs and unit estimation	2013/2014 value	Notes
A. Wages/salary	£31,943 per year	Based on the mean full-time equivalent basic salary for Agenda for Change band 7
		of the July 2013-June 2014 NHS staff earnings estimates. ² An additional 14.7 per
		cent can be added to reflect payments for activity such as over-time, shift work
		and geographic allowances. See preface and section V for further information on
D. C. I.	67.040	salaries.
B. Salary oncosts	£7,818 per year	Employer's national insurance contribution is included plus 14 per cent of salary for employer's contribution to superannuation.
C. Qualifications	£10,514 per year	Qualification costs have been calculated using the method described in Netten et
		al. (1998). ³ Current cost information has been provided by the Department of Health and Health Education England (HEE). ⁴ See the preface for more
		information on qualifications and also schema 7.4 for details. It has been assumed
		that this health worker requires the same qualifications as a staff nurse/ward
		manager.
D. Overheads		Taken from NHS (England) Summarised accounts. ⁵
Management, administration	£7,678 per year	Management and other non-care staff costs were 19.31 per cent of direct care
and estates staff		salary costs and included administration and estates staff.
Non-staff	£16,687 per year	Non-staff costs were 41.97 per cent of direct care salary costs. They include costs
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	to the provider for office, travel/transport and telephone, education and training,
		supplies and services (clinical and general), as well as utilities such as water, gas
		and electricity.
E. Capital overheads	£3,687 per year	Based on the new-build and land requirements of NHS facilities, but adjusted to
		reflect shared office space for administration, and recreational and changing
		facilities. ^{6,7} Treatment space has not been included.
Working time	41.6 weeks per year	Unit costs are based on 1,575 hours per year: 225 working days minus sickness
	37.5 hours per week	absence and training/study days as reported for all NHS staff groups. ⁸
Ratio of direct to indirect		Based on a survey of AHWs in a London A&E department, 82 per cent of time is
time on:		spent on face-to-face contact and 18 per cent on onward referral.
clinic contacts	1:0.22	Please complete our time-use survey:
		https://www.surveymonkey.com/s/SZMF5YL/.
Length of contact	55 minutes	Per clinic contact. Based on survey of AHWs in London A&E department. 1
Unit costs available 2013/201	4 (costs including quali	
£48 (£56) per clinic consultation	on	

¹ Barrett, B., Byford, S., Crawford, M.J., Patton, R., Drummond, C., Henry, J.A. & Touquet, R. (2006) Cost-effectiveness of screening and referral to an alcohol health worker in alcohol misusing patients attending an accident and emergency department: a decision-making approach, *Drug and Alcohol Dependence*, 81, 1, 47-54.

² Health & Social Care Information Centre (2014) NHS staff earnings estimates 2014, Health & Social Care Information Centre, Leeds.

Netten, A., Knight, J., Dennett, J., Cooley, R. & Slight, A. (1998) Development of a ready reckoner for staff costs in the NHS, Vols 1 & 2, Personal Social Services Research Unit, University of Kent, Canterbury.

⁴ Personal communication with the Department of Health and Health Education England (HEE), 2014.

⁵ Audit Commission (2012) NHS summarised accounts 2012-2013, NHS, London.

 $^{^{\}rm 6}$ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

⁷ Building Cost Information Service (2014) *Surveys of tender prices*, Royal Institute of Chartered Surveyors, London.

⁸ Contracted hours are taken from NHS Careers (2014) *Pay and benefits*, National Health Service, London. http://www.nhscareers.nhs.uk/working-in-the-nhs/pay-and-benefits/ [accessed 9 October 2014]. Training days as recommended by professional bodies. Working days and sickness absence rates as reported in Health & Social Care Information Centre (2014) *Sickness absence rates in the NHS: April 2009 – April 2014*, Health & Social Care Information Centre, Leeds.

4. Services for people with learning disabilities

- 4.1 Group homes for people with learning disabilities
- 4.2 Fully staffed living settings
- 4.3 Semi-independent living settings
- 4.4 Local authority day care for people with learning disabilities

4.1 Group homes for people with learning disabilities

The costs of group homes are based on the results of a study funded by the Wellcome Trust and conducted by Felce and colleagues in 2005. The sample comprises residents living in fully-staffed and semi-independent living settings (53 service users). These costs have been uprated using the appropriate inflators. See *Deinstitutionalisation and Community Living: outcomes and costs* (Mansell et al., 2007, chapter 3), which provides further details on service provision for people with intellectual disabilities.^{2,3}

Costs and unit estimation	2013/2014 value	Notes
A. Capital costs	£69 per week	Capital costs for buildings and land were calculated using market valuations of property. Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent. ¹
Revenue costs		
B. Staffing (direct and non-direct staffing)	£708 per week	Calculated using facility-specific expenditure accounts. ¹
C. On-site administration	£21 per week	
D. Agency overheads	£123 per week	
Other costs E. Personal living expenses for items such as food, utilities, personal care and leisure	£266 per week	This cost has been based on the allowances received by a sample of residents living in fully-staffed and semi-independent living settings. It includes a Lower Disability Allowance (care component), Employment and Support Allowance 25 plus, Job Seekers Allowance (income based) and Housing Benefit as well as the Personal Allowances for a single person (25 plus) and Housing Benefit (premium single). ^{4,5}
External services		
F. Hospital	£11 per week	Client-specific service use was recorded using the Client Service
G. Community H. Day services	£19 per week £202 per week	Receipt Inventory (CSRI), with 35 residents in group homes interviewed. Costs for day services were estimated using accounts information, where available. Unit costs for all other services were taken from this volume.
Use of facility by client	52.18 weeks per year	
Multiplier for level of disability	Higher levels of ability: 0.82 x (B to H)	The sample of service users used to derive the table were of mild to moderate learning disability and therefore with higher levels of ability (ABS>145). 1,7
	Lower levels of ability: 1.60 x (B to H)	For lower levels of ability a multiplier of 1.60 could be applied. 1,6
Unit costs available 2013/2	2014	
£921 establishment cost pe	er resident week (include	s A to D), £1,418 care package costs (includes A to H).

¹ Felce, D., Perry, J., Romeo, R., Robertson, J., Meek, A., Emerson, E. & Knapp, M. (2008) Outcomes and costs of community living semi-independent living and fully staffed group homes, *American Journal on Mental Retardation*, 113, 2, 87-101.

² Mansell, J., Knapp, M., Beadle-Brown, J. & Beecham, J. (2007) *Deinstitutionalisation and community living: outcomes and costs: report of a European study. Volume 2: Main Report*, Tizard Centre, University of Kent, Canterbury.

³ Mansell, J., Knapp, M., Beadle-Brown, J. & Beecham, J. (2007) *Deinstitutionalisation and community living: outcomes and costs: report of a European study, country report: United Kingdom,* Tizard Centre, University of Kent, Canterbury.

⁴ Department for Work and Pensions (2013) Benefits uprating http://www.parliament.uk/briefing-papers/SN06512.pdf [accessed 9 October 2014].

⁵ Note that last year's prices were based on 2013/2014 allowances and therefore this cost has not changed this year.

⁶ Beecham, J. & Knapp, M. (1992) Costing psychiatric interventions, in G. Thornicroft, C. Brewin & J. Wing (eds) *Measuring Mental Health Needs*, Oxford University Press. Oxford.

⁷ Nihira, K., Leland, H. & Lambert, N. (1993) Adaptive behavior scale — Residential and Community, 2nd Edition, Pro-Ed, Austin, Texas.

4.2 Fully-staffed living settings

The costs of fully-staffed living settings are based on the results of a study funded by the Wellcome Trust and conducted by Felce and colleagues in 2005. All costs have been uprated using the appropriate inflators. See *Deinstitutionalisation and Community Living: outcomes and costs* (Mansell et al. 2007, chapter 3), which provides further details on service provision for people with learning disabilities. 2,3

Costs and unit	2013/2014 value	Notes
estimation		
A. Capital costs	£79 per week	Capital costs for buildings and land were calculated using market valuations of property. Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
Revenue costs		
B. Staffing (direct and non-direct staffing)	£948 per week	
C. On-site administration	£29 per week	Calculated using facility-specific expenditure accounts. 1
D. Agency overheads	£149 per week	
Other costs		
E. Personal living	£266 per week	This cost has been based on the allowances received by a sample of
expenses for items such		residents living in fully-staffed and semi-independent living settings. It
as food, utilities, personal		includes a Lower Disability Allowance (care component), Employment
care and leisure		and Support Allowance 25 plus, Job Seekers Allowance (income based)
		and Housing Benefit as well as the Personal Allowances for a single person (25 plus) and Housing Benefit (premium single). ^{4,5}
External services		
F. Hospital	£8 per week	Client-specific service use was recorded using the Client Service
G. Community	£17 per week	Receipt Inventory (CSRI), ⁶ with 35 residents in fully-staffed living settings interviewed. Costs for day services were estimated using
H. Day services	£229 per week	accounts information, where available. Unit costs for all other services
2 4 7 5 6 7 7 6 6 7	per cer.	were taken from this volume.
Use of facility by client	52.18 weeks per year	
Multiplier for level of	Higher levels of	Clients were grouped according to scores on the Adaptive Behaviour
disability	ability: 0.82 x (B to H)	Scale (ABS). Scores between zero and 145 were grouped as less able;
	Lower levels of	scores higher than 145 were grouped as more able (145 was selected
	ability: 1.60 x (B to H)	to allow relatively even distribution between groups). All participants
		in the study had mild to moderate learning disability. 1
Unit costs available 2013/		
£1,205 establishment cost	s per resident week (incl	udes A to D); £1,725 care package costs (includes A to H).

¹ Felce, D., Perry, J., Romeo, R., Robertson, J., Meek, A., Emerson, E. & Knapp, M. (2008) Outcomes and costs of community living semi-independent living and fully staffed group homes, *American Journal on Mental Retardation*, 113, 2, 87-101.

² Mansell, J., Knapp, M., Beadle-Brown, J. & Beecham, J. (2007) *Deinstitutionalisation and community living: outcomes and costs: report of a European study. Volume 2: Main Report*, Tizard Centre, University of Kent, Canterbury.

³ Mansell, J., Knapp, M., Beadle-Brown, J. & Beecham, J. (2007) *Deinstitutionalisation and community living: outcomes and costs: report of a European study, country report: United Kingdom*, Tizard Centre, University of Kent, Canterbury.

⁴ Department for Work and Pensions (2013) *Benefits uprating*, http://www.parliament.uk/briefing-papers/SN06512.pdf [accessed 9 October 2014].

⁵ Note that last year's prices were based on 2013/2014 allowances and therefore this cost has not changed this year.

⁶ Beecham, J. & Knapp, M. (1992) Costing psychiatric interventions, in G. Thornicroft, C. Brewin & J. Wing (eds) *Measuring Mental Health Needs*, Oxford University Press. Oxford.

⁷ Nihira, K., Leland, H. & Lambert, N. (1993) Adaptive behavior scale — Residential and Community, 2nd Edition, Pro-Ed, Austin, Texas.

4.3 Semi-independent living settings

The costs of semi-independent living settings are based on the results of a study funded by the Wellcome Trust and conducted by Felce and colleagues in 2005. The sample comprised 35 service users who were resident in semi-independent living settings. These settings were partially staffed, having no paid support for at least 28 hours per week when service users were awake at home. These settings did not have any regular night-time support or sleep-over presence. All costs have been uprated using the appropriate inflators. See *Deinstitutionalisation and Community Living: outcomes and costs* (Mansell et al., 2007, chapter 3), which provides further details on service provision for people with learning disabilities. ^{2,3}

Costs and unit	2013/2014 value	Notes
estimation		
A. Capital costs	£53 per week	Capital costs for buildings and land were calculated using market valuations of property. They have been annuitised over 60 years at a discount rate of 3.5 per cent.
Revenue costs B. Staffing (direct and non-direct staffing) C. On-site administration	£259 per week	Calculated using facility-specific expenditure accounts. 1
D. Agency overheads	£62 per week	
Other costs E. Personal living expenses for items such as food, utilities, personal care and leisure	£266 per week	This cost has been based on the allowances received by a sample of residents living in fully-staffed and semi-independent living settings. It includes a Lower Disability Allowance (care component), Employment and Support Allowance 25 plus, Job Seekers Allowance (income based) and Housing Benefit as well as the Personal Allowances for a single person (25 plus) and Housing Benefit (premium single). 4,5
External services		
F. Hospital	£11 per week	Client-specific service use was recorded using the Client Service
G. Community	£15 per week	Receipt Inventory (CSRI), ⁶ with 35 residents in semi-independent living settings interviewed. Costs for day services were estimated using
H. Day services	£126 per week	accounts information, where available. Unit costs for all other services were taken from this volume.
Use of facility by client	52.18 weeks per year	
Multiplier for level of disability	Higher levels of ability: 0.82 x (B to H) Lower levels of ability: 1.60 x (B to H)	Clients were grouped according to scores on the Adaptive Behaviour Scale (ABS). Scores between zero and 145 were grouped as less able; scores higher than 145 were grouped as more able (145 was selected to allow relatively even distribution between groups). All participants in the study had mild to moderate intellectual disability.
Unit costs available 2013/	2014	,
£384 establishment costs p	oer resident week (includ	es A to D); £802 care package costs (includes A to H).

¹ Felce, D., Perry, J., Romeo, R., Robertson, J., Meek, A., Emerson, E. & Knapp, M. (2008) Outcomes and costs of community living semi-independent living and fully staffed group homes, *American Journal on Mental Retardation*, 113, 2, 87-101.

² Mansell, J., Knapp, M., Beadle-Brown, J. & Beecham, J. (2007) *Deinstitutionalisation and community living: outcomes and costs: report of a European study. Volume 2: Main Report*, Tizard Centre, University of Kent, Canterbury.

³ Mansell, J., Knapp, M., Beadle-Brown, J. & Beecham, J. (2007) *Deinstitutionalisation and community living: outcomes and costs: report of a European study, country report: United Kingdom*, Tizard Centre, University of Kent, Canterbury.

⁴ Department for Work and Pensions (2013) Benefits uprating, http://www.parliament.uk/briefing-papers/SN06512.pdf [accessed 9 October 2014].

⁵ Note that last year's prices were based on 2013/2014 allowances and therefore this cost has not changed this year.

⁶ Beecham, J. & Knapp, M. (1992) Costing psychiatric interventions, in G. Thornicroft, C. Brewin & J. Wing (eds) *Measuring Mental Health Needs*, Oxford University Press, Oxford.

⁷ Nihira, K., Leland, H. & Lambert, N. (1993) Adaptive behavior scale — Residential and Community, 2nd Edition, Pro-Ed, Austin, Texas.

4.4 Local authority day care for people with learning disabilities

This schema uses the Personal Social Services Expenditure return (PSS EX1)¹ for expenditure costs, which have been uprated using the PSS pay & prices inflator. The median cost was £284 per client week and the mean cost was £293 per client week (including capital costs). These data do not report on the number of sessions clients attended each week.

To determine the best unit of activity, this year we have carried out a Freedom of Information request to ask local authorities the duration of a 'unit of activity' and to provide approximate guidance on how many times a week clients attend.

Based on information provided by ten local authorities, we have calculated an average cost per client attendance and also a cost per client hour. We have then used this information to calculate the cost of a client session lasting 3.5 hours which is a typical standard unit of day care for most local authorities responding to our information request.

See preface for more information.

Costs and unit estimation	2013/2014 value	Notes
Capital costs (A, B & C)		
A. Buildings and oncosts	£5.30 per client	Based on the new-build and land requirements for local authority day
	attendance	care facilities (which do not distinguish client group). Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
B. Land	£1.40 per client	Based on research carried out by the Valuation Office Agency. ³ These
	attendance	allow for 33.4 square metres per person. ⁴ The cost of land has been annuitised at 3.5 per cent over 60 years.
C. Other capital		Capital costs not relating to buildings and oncosts are included in the
		revenue costs so no additional cost has been added for other capital such as equipment and durables.
D. Total local authority	£69 per client	The median cost per client week has been taken from PSS EX1 2012/13 ¹
expenditure (minus	attendance	and uprated using the PSS pay & prices index. Assuming people with
capital)		learning disabilities attend on average 4.8 times per week (4 hours in
		duration), ² the median cost per day care attendance is £69 and the mean
		cost per attendance is £67. Capital charges relating to buildings have been
		deducted. Councils reporting costs of over £2,000 per client week have not been included in this estimate.
E. Agency overheads		Social services management and support services (SSMSS) costs are
		included in PSS EX1 expenditure figures so no additional overheads have
		been added.
Use of facility by client		Assumes clients attend 4.8 times per week. ²
Occupancy		No current information is available.
London multiplier	1.34 x (A to B)	Relative London costs are drawn from the same source as the base data
	1.32 x (D to E)	for each cost element.
Unit costs available 2013/	2014	
£76 per client attendance	(includes A to D); £16	per client hour; £55 per client session lasting 3.5 hours.

¹ Health & Social Care Information Centre (2013) *PSS EX1 2012/13*, Health & Social Care Information Centre, Leeds.

² Based on research carried out by PSSRU in 2014.

 $^{^{\}rm 3}$ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

⁴ Building Cost Information Service (2014) Surveys of tender prices, Royal Institute of Chartered Surveyors, London.

4.5 Advocacy for parents with learning disabilities

Advocacy can help service users both to understand their rights and choices and also to support them in resolving issues of great significance to their lives. We have drawn on an article by Bauer & Colleagues (2014)¹ for the costs of providing an advocate for parents with learning disabilities and at risk of having their children taken into care. Based on information provided by two of the four projects and taking mid-points of salary ranges provided, combined with routine data and assumptions made for staff employed by local authorities, the mean cost of an advocacy intervention consuming 95 hours of client related work (including one-to-one sessions, external meetings, but excluding travel and training costs), was £4,245. Information on the wider costs and benefits of advocacy and early intervention signposted or referred to by the advocate can be found in the referenced paper (Bauer & Colleagues, 2014).¹

The costs below are based on the average of two advocacy projects. The first is in rural and urban parts of the country where most service users are in areas of deprivation; and the second in urban regions with large areas of poverty and child protection issues.

Costs and unit estimation	2013/2014 value	Notes (for further clarification see Commentary)
A.Wages/salary	£31,072 per year	Project A: Two part-time advocates (salary range £20,000-£25,000);
A. wages/salary	£31,072 per year	
		Project B: Eighty per cent of a service manager (salary range £29,604-£31,766). Plus one
D.C.1	640.000	part-time (3.5 hours per week) advocate (salary range £26,401-£28,031).
B. Salary oncosts	£10,902 per year	Employer's national insurance is included plus 20 per cent of salary for employer's
		contribution to superannuation.
C. Overheads		Project A : supervision from a service manager for 2 hours per month (24 hours per year)
Management/supervision	£5,979 per year	Project B : service manager is provided with 4 hours formal supervision and 20 hours
		informal supervision per month (288 hours per year). Advocate has 3 hours formal and 3
		hours informal supervision by manager per month (72 hours per year).
Direct overheads	£2,938 per year	Premises costs (office, stationery, utilities etc.) are estimated at 7 per cent of salary costs. ²
Indirect overheads	£6,716 per year	Indirect overheads assumed to be 16 per cent of direct care salary costs. ² They include
		general management and support services such as finance and human resource
		departments.
D. Qualifications	No costs available	Project A: advocates required 20 hours of national advocacy training.
		Project B: NVQ level 4 management and national advocacy qualification required.
E. Training	No costs available	Project A: further training consisted of 8 hours by Family Rights Group plus additional
		training to individual requirements.
		Project B : 5 days per year provided by a range of safeguarding, advocacy, legal and
		community organisations.
F. Capital overheads	£2,451 per year	It is assumed that one office is used and costs are based on the new-build and land
		requirements of a local office and shared facilities for waiting, interviews and clerical
		support. Capital costs have been annuitised over 60 years at a discount rate of 3.5 per
		cent.
G. Travel	No costs	Project A : average travel time per intervention = 70 minutes, range (40-120 minutes)
	available	Project B: average travel time = 15 minutes.
Working time	41 weeks per year	Includes 29 days annual leave and 8 statutory leave days. Ten days for study/training and
C	37 hours per	8.2 days sickness leave have been assumed based on the median average sickness absence
	week	level in England for all authorities. Unit costs assumes 1,516 hours of client-related work
		per year.
Ratio of direct to indirect	1:0.13	1,344 hours of client-related work are assumed per year. 1
time on client-related		,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
work		
Caseload		Project A: Caseload of 8-10 parents. Project B 10 families.
Time per case	95 hours of client	On average, an advocacy intervention consisted of 95 hours of client-related work (one-to-
e per case	related work.	one sessions, external meetings travelling and preparation time) provided over a 10 month
	. c.acca work	period. Face-to-face time ranged from 3 to 68 hours. Time per case ranged from 3 to 68
		hours delivered over periods of 3 months to 6 years.
Unit costs available 2013	/2014	Thous delivered over periods of 5 months to 0 years.
Unit costs available 2013	/2014	

Unit costs available 2013/2014

Average cost per working hour £26, average cost per client related hour £45. (Estimates exclude travel costs). Average total cost £60,059; Total cost for project A: £41,298; Total cost for project B: £78,819.

Average cost per advocacy intervention (based on 95 hours); £4,263 (Project A £2,919 and Project B £5,571).

¹ Bauer, A., Wistow, G., Dixon, J. & Knapp, M. (2014) Investing in advocacy for parents with learning disabilities: what is the economic argument? *British Journal of Learning Disabilities*, doi: 10.111.bld.12089.

² Based on information taken from Selwyn, J., Sempik, J., Thurston, P. & Wijedasa, D. (2009) *Adoption and the inter-agency fee*, University of Bristol, Bristol; and Glendinning, C.et al (2010). Home care re-ablement services: Investigating the longer-term impacts, Final Report, University of York, PSSRU Kent, Department of Health, London.

5. Services for adults with physical disability

- 5.1 Local authority care homes for adults with a physical disability
- 5.2 Voluntary, private and independent sector care homes for adults with a physical disability
- 5.3 Day care for adults with a physical disability
- 5.4 Home care for adults with a physical disability

5.1 Local authority care homes for adults with a physical disability

This schema uses the Personal Social Services Expenditure return (PSS EX1),¹ which has been uprated using the PSS pay & prices inflator.

Costs and unit estimation	2013/2014 value	Notes
Capital costs		
A. Buildings and oncosts	£131 per resident	Based on the new-build and land requirements for local authority
	week	residential care establishments. These allow for 57.3 square metres per
		person. ² Capital costs have been annuitised over 60 years at a discount
		rate of 3.5 per cent.
B. Land costs	£16 per resident	Based on Department for Communities and Local Government statistics. ³
	week	The cost of land has been annuitised at 3.5 per cent over 60 years.
C. Total local authority	£809 per resident	The median revenue weekly cost estimate (£809) for supporting adults in
expenditure (minus	week	own-provision residential care (includes full-cost paying and preserved-
capital)		rights residents). Capital costs relating to buildings and land have been
		deducted. The mean cost per client per week is reported as being
		£1,087.
D. Assault and a		
D. Agency overheads		Social services management and support services (SSMSS) costs are
		included in PSS EX1 expenditure figures so no additional overheads have been added.
Other costs		been added.
	£23.90 per week	The DMD personal allowance for people in recidential care or a pursing
E. Personal living	£23.90 per week	The DWP personal allowance for people in residential care or a nursing home is £23.90. ⁴ This has been used as a proxy for personal
expenses		consumption.
F. External services		No information is available.
Use of facility by client	365.25 days per	No information is available.
Ose of facility by chefft	year	
Occupancy	100 per cent	No statistics available, therefore 100 per cent occupancy assumed.
Occupancy	100 per cent	No statistics available, therefore 100 per cent occupancy assumed.
London multiplier	2014	INO STATISTICS AVAILABLE.
Unit costs available 2013/2		Studes A to Cl. COOO per resident week (includes A to E)
±956 per resident week est	ablishment costs (inc	cludes A to C); £980 per resident week (includes A to E).

¹ Health & Social Care Information Centre (2013) PSS EX1 2012/13, Health & Social Care Information Centre, Leeds.

² Building Cost Information Service (2014) *Surveys of tender prices*, Royal Institute of Chartered Surveyors, London.

³ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

⁴ Department of Health (2012) Charging for residential care, https://www.gov.uk/government/news/charging-for-residential-care--2/ [accessed 3 October 2014].

5.2 Voluntary, private and independent sector care homes for adults with a physical disability

This schema uses the Personal Social Services Expenditure return (PSS EX1)¹ for expenditure which has been uprated using the PSS pay & prices inflator.

Costs and unit estimation	2013/2014 value	Notes
Capital costs		
A. Buildings and oncosts	£131 per resident week	Based on the new-build and land requirements for local authority residential care establishments. These allow for 57.3 square metres per person. Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
B. Land costs	£16 per resident week	Based on Department for Communities and Local Government statistics. ³ The cost of land has been annuitised at 3.5 per cent over 60 years.
C. Total expenditure (minus capital)	£704 per resident week	The median revenue weekly cost estimate (£704) for supporting adults in residential care provided by others (includes full-cost paying and preserved-rights residents). Capital costs relating to buildings and land have been deducted. The mean cost per client per week is reported as being £718.
D. Agency overheads		Social services management and support services (SSMSS) costs are included in PSS EX1 expenditure figures so no additional overheads have been added.
Other costs		
E. Personal living expenses	£23.90 per week	The DWP personal allowance for people in residential care or a nursing home is £23.90. This has been used as a proxy for personal consumption.
F. External services		No information is available.
Use of facility by client	365.25 days per year	
Occupancy	100 per cent	No statistics available, therefore 100 per cent occupancy assumed.
London multiplier		No statistics available.
Unit costs available 2013/	2014	
£852 per resident week es	tablishment costs (ir	cludes A to C); £876 per resident week (includes A to E).

¹ Health & Social Care Information Centre (2013) PSS EX1 2012/13, Health & Social Care Information Centre, Leeds.

² Building Cost Information Service (2014) *Surveys of tender prices*, Royal Institute of Chartered Surveyors, London.

³ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

⁴ Department of Health (2012) Charging for residential care, https://www.gov.uk/government/news/charging-for-residential-care--2/ [accessed 3 October 2014].

5.3 Day care for adults with a physical disability

This schema uses the Personal Social Services Expenditure return (PSS EX1)¹ for revenue costs, which have been uprated using the PSS pay & prices inflator. The median cost was £198 per client week and the mean cost was £203 per client week (including capital costs). These data do not report on how many sessions clients attended each week.

To determine the best unit of activity, this year we have carried out a Freedom of Information request to ask local authorities the duration of a 'unit of activity' and to provide approximate guidance on how many times a week clients attend.

Based on information provided by ten local authorities,² we have calculated an average cost per client attendance and also a cost per client hour. We have then used this information to calculate the cost of a client session lasting 3.5 hours, which is a typical standard unit of day care for most local authorities responding to our information request.

Costs and unit	2013/2014 value	Notes
estimation		
Capital costs (A, B & C)		
A. Buildings and oncosts	£5.30 per client attendance	Based on the new-build and land requirements for local authority day care facilities (which do not distinguish client group). Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
B. Land	£1.30 per client attendance	Based on research carried out by the Valuation Office Agency. ³ These allow for 33.4 square metres per person. ⁴ The cost of land has been annuitised at 3.5 per cent over 60 years.
C. Other capital		
Revenue costs		
D. Salary and other revenue costs E. Agency overheads	£73 per client attendance	The median cost per client week has been taken from PSS EX1 2012/13 ¹ and uprated using the PSS pay & prices index. Assuming people with learning disabilities attend on average 2.7 times per week (4.8 hours in duration), the median cost per day care attendance is £73 and the mean cost per attendance is £75. Capital charges relating to buildings have been deducted. Councils reporting costs of over £2,000 per client week have not been included in this estimate. Social services management and support services (SSMSS) costs are
		included in PSS EX1 expenditure figures so no additional overheads have been added.
Use of facility by client		Assumes clients attend 2.7 times per week. ²
Occupancy		No current information is available.
London multiplier	1.34 x A 1.88 x B 1.07 x D	Relative London costs are drawn from the same source as the base data for each cost element. 1,3,4
Unit costs available 2013/	2014	
£80 per client attendance	(includes A to D); £16	5.60 per client hour; £58 client per session lasting 3.5 hours.

¹ Health & Social Care Information Centre (2013) PSS EX1 2012/13, Health & Social Care Information Centre, Leeds.

² Based on research carried out by PSSRU in 2014.

³ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

⁴ Building Cost Information Service (2014) Surveys of tender prices, Royal Institute of Chartered Surveyors, London.

5.4 Home care

The mean (median) gross weekly expenditure on home care per adult aged under 65 with a physical disability is £199 (£191). Assuming home care is provided 7 days a week, the median weekly expenditure is £29 and the mean is £28.

See schema 11.6 for more information on home care

6. Services for children and their families

- 6.1 NHS reference costs for children's health services
- 6.2 Care home for children—local authority
- 6.3 Care home for children—voluntary and private sector
- 6.4 Local authority foster care for children
- 6.5 Social services support for children in need
- 6.6 Key worker services for disabled children and their families
- 6.7 End-of-life care at home for children
- 6.8 Multi-systemic therapy (MST)
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- 6.10 Adoption
- 6.11 Multidimensional treatment foster care
- 6.12 Decision-making panels
- 6.13 Costs of reunification
- 6.14 Short-break provision for disabled children and their families
- 6.15 Local safeguarding children's boards
- 6.16 Incredible Years parenting programme
- 6.17 Parenting programmes for the prevention of persistent conduct disorder
- 6.18 Parent training interventions for parents of disabled children with sleep problems
- 6.19 Independent reviewing officer (IRO)
- 6.20 Early Years Teacher Classroom Management programme

6.1 NHS reference costs for children's health services

We have drawn on the *NHS Trust and Primary Care Trusts combined* dataset to report the costs of selected children's health services. All costs have been uprated to 2013/2014 levels using the HCHS pay & prices inflator.

Each reported unit cost includes:

- (a) direct costs which can be easily identified with a particular activity (e.g. consultants and nurses)
- (b) indirect costs which cannot be directly attributed to an activity but can usually be shared among a number of activities (e.g. laundry and lighting)
- (c) overheads which relate to the overall running of the organisation (e.g. finance and human resources).

For information on the method used to allocate drugs to services, see NHS reference costs guidance for 2012-2013.¹

	National Average	Lower	Upper
		quartile	quartile
COMMUNITY SERVICES, average cost per care			
contact/group session			
Therapy services			
Physiotherapy group	£145 (£81)	£61 (£61)	£119 (£91)
Occupational therapy group	£178 (£113)	£94 (£69)	£217 (£132)
Speech therapy services group	£87 (£89)	£62 (£68)	£92 (£103)
All community paediatrician services (excluding Treatment			
Function Code (TFC) and vaccination programmes), average			
cost per care contact			
Weighted average of face-to-face contacts	£310	£185	£382
Weighted average of non-face-to-face contact	£176	£99	£175
Community health services – nursing, average cost per care contact/group session			
School-based children's health core (other) services – group multi professional	£63 (£83)	£46 (£74)	£76 (£74)
School-based children's health core (other) services – group single professional	£46 (£74)	£37 (£43)	£50 (£54)
School-based children's health core (other) services – one to	£50 (£53)	£35 (£37)	£60 (£58)
one	130 (133)	133 (137)	100 (130)
OUTPATIENT ATTENDANCES, average cost per attendance			
Paediatrics	£189	n/a	n/a
Paediatric consultant-led outpatient attendances	£195		
Paediatric non-consultant-led outpatient attendances	£122		
SPECIALIST PALLIATIVE CARE, average cost per bed day			
Inpatient specialist palliative care	£149	£54	£322
CHILD AND ADOLESCENT MENTAL HEALTH SERVICES			
Day care facilities — regular attendances	£296	£277	£300
Admitted patients	£614	£534	£695
Community contacts	£227	£172	£280
Outpatient attendances	£271	£214	£325

¹ Department of Health (2014) *NHS reference costs 2012-2013*, https://www.gov.uk/government/publications/nhs-reference-costs-2012-to-2013 [accessed 2 October 2014].

6.2 Care home for children — local authority

This schema presents the costs per resident week for a local authority care home for children. Establishment costs are £2,995 per resident week. All costs have been uprated using the PSS pay & prices index. For more information on the market in children's care homes see *DfES Children's Services: Children's Homes and Fostering*, and for information on secure children's homes see Mooney et al. (2012).

Costs and unit estimation	2013/2014 value	Notes
Capital costs (A & B)		
A. Buildings	£143 per resident	Based on the new-build and land requirements for local authority children's
	week	homes. These allow for 59.95 m ² per person. ³ Capital costs are discounted at
		3.5 per cent over 60 years. This remains unchanged from last year.
B. Land	£20 per resident	Land costs researched for PSSRU by the Valuation Office Agency ⁴ and
	week	annuitised at 3.5 per cent over 60 years.
C. Total local authority	£2,831 per	Mean costs for children looked after in own-provision children's homes are
expenditure (minus capital)	resident week	based on the underlying data of the Section 251 ⁵ of the Department for
		Education's Financial Data collection for outturn 2012/13.
		The cost for a child for a week in an own-provision residential care home was
		£2,831. This was calculated by dividing net current expenditure for local
		authority (LA) provision children's care homes (£300,426,698) by the number
		of LA provision care days for children in residential care (709,604). ^{5,6} We
		have excluded capital charges for buildings and uprated costs using the PSS
		pay & prices inflator. Local authorities reporting costs of less than £400 per
		week (£57 per day) or more than £14,000 per week (£2,000 per day) have
		been excluded.
D. Agency overheads		Most of the direct social work costs and the commissioning costs for
		children's services have been excluded from these estimates. Also excluded
		are occupational therapy services and child protection social work costs.
E. Other costs		No current information available on the costs of external services received.
		See previous editions of this publication for sources of information.
Use of facility by client	52.18 weeks	
Occupancy		No current information available. See previous editions of this volume for
		sources of information.
London multiplier	1.20 x A	Relative London costs are drawn from the same source as the base data for
	1.88 x B	each cost element. ^{3,4,5}
	1.11 x C	
Unit costs available 2013/20)14	
£2,995 establishment costs p	oer resident week (inc	ludes A to C).

¹ Department for Education (2006) *DfES children's services: children's homes and fostering*, PricewaterhouseCoopers, London.

² Mooney, A., Statham, J., Knight, A. & Holmes, L. (2012) *Understanding the market for secure children's homes,* Summary Report, *A rapid response study for the Department for Education*, Childhood Wellbeing Research Centre, Loughborough.

³ Building Cost Information Service (2014) *Surveys of tender prices*, Royal Institute of Chartered Surveyors, London.

⁴ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

⁵ Department for Education (2014) *Underlying data of the section 251 data archive: outturn data-detailed level 2008-09 onwards, outturn summary 2012-13*, Department for Education, London. https://www.gov.uk/government/publications/outturn-2012-to-2013-data-section-251 [accessed 20 October 2014].

⁶ Department for Education (2011) *Children looked after in England including adoption and care leavers, year ending 31 March 2012, SSDA903*. Data provided by DfE. http://www.education.gov.uk/rsgateway/DB/SFR/s001084/index.shtml [accessed 1 October 2013].

6.3 Voluntary and private sector care homes for children

This schema presents the costs per resident week for a non-statutory care home for children. Establishment costs are £2,947 per resident week. See *DfES Children's Services: Children's Homes and Fostering*, for information on the market in children's care homes.¹

Costs and unit estimation	2013/2014 value	Notes
Capital costs (A &B)		
A. Buildings	£143 per resident week	Based on the new-build and land requirements for local authority children's homes. These allow for 59.95 m ² per person. ² Capital costs are discounted at 3.5 per cent over 60 years. This remains unchanged from last year.
B. Land	£20 per resident week	Land costs researched for PSSRU by the Valuation Office Agency ³ and annuitised at 3.5 per cent over 60 years.
C. Total expenditure (minus capital)	£2,784 per resident week	Mean costs for children looked after in externally provided children's homes (e.g. non local authority (LA) own provision) are based on the underlying data of the Section 251 ⁴ of the Department for Education's <i>Financial Data collection for outturn 2012/13</i> .
		The cost for a child for a week in a non-statutory residential care home for children was £2,784. This was calculated by dividing net current expenditure for other provision children's care homes (£656,837,857) by the number of care days in non-LA provision for children in residential care (1,581,898). We have excluded capital charges for buildings and uprated costs using the PSS pay & prices inflator. The number of local authorities reporting costs of less than £400 per week (£57 per day) or more than £14,000 per week (£2,000 per day) have been excluded.
D. Agency overheads		Most of the direct social work costs and the commissioning costs for children's services have been excluded from these estimates. Also excluded are occupational therapy services and child protection social work costs.
E. Other costs External services		No current information available on the costs of external services received. See previous editions of this publication for sources of information.
Use of facility by client	52.18 weeks	
Occupancy		No current information available. See previous editions of this volume for sources of information.
London multiplier	1.20 x A 1.88 x B 1.07 x C	Relative London costs are drawn from the same source as the base data for each cost element. ^{2,3,4}
Unit costs available 2013/	2014	
£2,947 establishment costs	per resident week (in	cludes A to C).

¹ Department for Education (2006) *DfES children's services: children's homes and fostering*, PricewaterhouseCoopers, London. https://www.education.gov.uk/publications/RSG/publicationDetail/Page1/RW74 [accessed 9 October 2013].

² Building Cost Information Service (2014) *Surveys of tender prices*, Royal Institute of Chartered Surveyors, London.

³ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

⁴ Department for Education (2014) *Underlying data of the section 251 data archive: outturn data-detailed level 2008-09 onwards, outturn summary 2012-13*, Department for Education, London. https://www.gov.uk/government/publications/outturn-2012-to-2013-data-section-251 [accessed 20 October 2014].

⁵ Department for Education (2013) *Children looked after in England including adoption and care leavers, year ending 31 March 2011, SSDA903.* Data provided by DfE, https://www.gov.uk/government/statistics/children-looked-after-in-england-including-adoption [accessed 18 November 2014].

6.4 Local authority foster care for children

This schema provides the cost of local authority foster care for children. For information on multidimensional treatment foster care, see schema 6.10 of this volume. See Holmes & Soper (2010)¹ and Department for Education (2006)² for more information on the costs of foster care.

Costs and unit estimation	2013/2014 value	Notes
A. Boarding out allowances, administration and the costs of social worker and other support staff who support foster carers	£468 per child per week	Using Section 251 ³ data and dividing total net expenditure for own-provision foster care (including children placed with family and friends) (includes own provision and other public provision) of £840,645,533 by the total number of days of care (12,647,252), ⁴ the cost per day for 2012/13 was £66 (£465 per week) and £468 when uprated to 2013/14 prices using the PSS pay & prices inflator. Using Section 251 and dividing total net expenditure for all foster care (includes own-provision, private, other public and voluntary foster care) of £1,536,280,000 ³ by the total number of activity days (18,340,684), ⁴ the cost
		per day for all provision foster care for 2012/13 was £84 (£586 per week) and £591 when uprated using the Personal Social Services (PSS) pay & prices inflator.
B. Social services (including cost of social worker and support)	£233 per child per week	Although Section 251 data includes the costs of social workers and staff who support foster carers, it excludes social work costs related directly to the fostered children. The majority of children looked after are in foster placements and the mean cost of social services support from fieldwork teams and centres (costed staff/centre time) has been estimated from the Children in Need (CiN) census 2005 ⁵ and has been uprated to current levels using the PSS pay & prices inflators. At 2013/2014 prices, this was £233 per child per week.
C. Other services, including education		No current information available on the costs of other external services received. See previous editions of this publication for sources of information.
Service use by client	52.18 weeks per year	
London multiplier	1.72 x A	Relative London costs are drawn from the same source as the base data. ²
Unit costs available 2013/2	2014	
£700 per child per week		

 $^{^{1}}$ Holmes, L. & Soper, J. (2010) *Update to the cost of foster care*, Loughborough University, Loughborough.

² Department for Education (2006) *DfES children's services: children's homes and fostering*, PricewaterhouseCoopers, London. https://www.education.gov.uk/publications/RSG/publicationDetail/Page1/RW74 [accessed 9 October 2013].

³ Department for Education (2014) *Underlying data of the section 251 data archive: outturn data-detailed level 2008-09 onwards, outturn summary 2012-13*, Department for Education, London. https://www.gov.uk/government/publications/outturn-2012-to-2013-data-section-251 [accessed 20 October 2014].

⁴ Department for Education (2013) Children looked after in England including adoption and care leavers, year ending 31 March 2011, SSDA903. Data provided by DfE, https://www.gov.uk/government/statistics/children-looked-after-in-england-including-adoption [accessed 18 November 2014].

Department for Education and Skills (2005) Children in need in England: results of a survey of activity and expenditure as reported by local authority social services' children and families teams for a survey week in February 2005, Department for Education and Skills, London.

6.5 Social services support for children in need

Until 2005, the Children in Need census was a biennial survey which collected information on the numbers and characteristics of children in need: that is, children receiving social services support. The unit costs of these services were also published for a survey week in February 2005 which included 234,700 children. Since 2008/09, the annual Children in Need census has contained slightly different information. In 2008/09, although financial information was collected, rather than being for a sample week as in previous censuses the collection covered six months. Further differences between these two surveys are discussed in Mahon (2008).

In this schema, therefore, we present information collected in 2005 which is based on services received by each child seen during a survey week in February. These costs have been uprated to 2013/2014 costs using the PSS pay & prices inflators. At 2013/2014 prices, the average weekly cost for looked-after children was £791 while, for children supported in their families or independently, the cost was £163, with an average cost per Child in Need of £337.

For care package costs which provide examples of the support received by children in need, see schemas 6.5.1-6.5.4.

Three types of expenditure are captured in the schemas below:

- 1) The costs of field and centre staff time carrying out social services activities with, or on behalf of, identified children in need and their families.
- 2) The costs of providing care and accommodation for children looked after (and similar regular, ongoing expenditure that can be treated in the same way).
- 3) One-off or ad hoc payments and purchases for children in need or their families.

6.5.1 Social services' costs per child per week by region

Location	Children supported in families or independently		Children looked after		Total	
	Total no. of children	Average cost per child	Total no. of children	Average cost per child	Total no. of children	Average cost per child
All shire counties	60,265	£145	22,875	£744	83,140	£308
All unitary authorities	35,235	£145	12,115	£855	47,350	£326
All metropolitan districts	40,760	£157	18,685	£709	59,445	£331
All London authorities	32,490	£227	12,230	£954	44,720	£425
England	168,750	£163	65,900	£791	234,650	£337

¹ For further information on this survey see http://www.education.gov.uk/rsgateway/DB/SFR/s001084/sfr20-2012md.pdf [accessed 9 October 2013].

² Mahon, J. (2008) *Towards the new children in need census*, York Consulting, https://www.education.gov.uk/publications/standard/publicationDetail/Page1/DCSF-RW039 [accessed 9 October 2013].

6.5.2 Social services costs per child per week by need category

Need category ¹		Children supported in families or independently		ooked after
	Total no. of children	Mean cost per child	Total no. of children	Mean cost per child
Abuse/neglect	50,900	£163	36,000	£756
Disability	21,100	£186	8700	£756
Parental illness or disability	8,400	£163	3,200	£709
Family in acute stress	20,000	£140	4,100	£989
Family dysfunction	23,400	£151	6,400	£896
Socially unacceptable behaviour	12,200	£186	1,800	£1,396
Low income	3,900	£174	270	£768
Absent parenting	5,500	£233	4,400	£698
Cases other than children in need	8,000	£151	460	£675
Cases not stated	15,400	£151	660	£547

6.5.3 Average cost (£ per week) per child receiving support: by service categories

	Children supported in families or independently	Children looked after	Total
	Mean cost per child	Mean cost per child	Mean cost per child
Costs for staff/centre time	£134	£233	£163
Ongoing costs	£23	£552	£169
One-off costs	£6	£12	£5
Total costs	£163	£791	£337

6.5.4 Average cost (£ per week) for identified groups of children

	Children supported in families or independently		Children looked after		Total	
	Mean hours per child	Mean cost per child	Mean hours per child	Mean cost per child	Mean hours per child	Mean cost per child
Asylum-seeking children	1.5	£256	2.4	£698	1.8	£413
Disabled children	2.5	£186	3.0	£826	2.7	£407
Autistic children	2.6	£192	2.8	£960	2.7	£488
All children	2.3	£163	3.5	£791	2.7	£337

¹ As specified in Department for Education and Skills (2005) Children in need in England: results of a survey of activity and expenditure as reported by local authority social services' children and families teams for a survey week in February 2005, Department for Education and Skills, London.

6.6 Key worker services for disabled children and their families

Key workers provide a single point of contact for disabled children and their families, supporting them and facilitating access to other services. Both key workers and the families supported see the key worker role as providing information and advice, identifying and addressing needs, accessing and co-ordinating services for the family, providing emotional support, and acting as an advocate. Research has shown that key worker services generate good outcomes for families, and provision is encouraged through central government policy.

In 2004/05, research was carried out in seven sites providing key worker services to explore the effectiveness of different models and also to calculate costs. ^{1,2} In total, 205 families returned questionnaires of which there were 189 valid responses. Predominantly, key workers included in the study came from four professional backgrounds: health visiting, nursing, teaching and social work. However, parents, paediatricians, dietitians, speech therapists, occupational therapists, physiotherapists and early years workers also acted as key workers. The children supported by these seven key worker services had a range of diagnoses, of which autistic spectrum disorders, cerebral palsy and developmental delay were the most common. Most children had more than one condition.

The schema below shows that the average cost per working hour for the seven services was £34, ranging from £24 to £43. This has been calculated by dividing the total cost by the total number of hours for which staff members undertook keyworking activities. The unit cost is, therefore, weighted for the staff-mix on each service. Over a three-month period, the mean and median costs of contact, taking into account telephone calls and the costs of visits, were £153 and £88 respectively. All costs have been uprated to reflect 2013/2014 prices.

Assuming this level of contact to be constant over 12 months, annual average contact costs would be £605. Using information provided by 11 key workers reporting time use, the contact to other activity ratio is 1:1.6 (for each hour spent in contact with the family, two and a half hours are spent on activities such as travel, liaison, meetings etc.). At 2013/2014 prices, the total cost of all participating schemes was £2,278,031 and this total caseload was 1,237, giving an average annual cost per family across the schemes of £1,842.

Use and costs of key worker services in three months prior to survey						
Service	Cost per working hour	Mean number of visits (range)	Mean number of telephone calls (range)	Mean cost of visits and telephone calls	Median cost of visits and telephone calls	
Α	£26	2.9 (0-8)	6.7 (1-16)	£145	£127	
В	£43	2.7 (0-24)	5.0 (0-60)	£187	£91	
С	£36	3.6 (0-10)	5.4 (1-80)	£191	£143	
D	£38	1.9 (0-12)	2.5 (0-12)	£109	£61	
E	£38	2.8 (0-20)	4.6 (0-50)	£186	£115	
F	£32	4.4 (0-12)	2.5 (0-12)	£112	£76	
G	£24	1.4 (0-6)	2.1 (0-6)	£39	£24	
Total/average	£34	2.8 (0-24)	4.4 (0-60)	£153	£88	

¹ Greco, V., Sloper, P., Webb, R. & Beecham, J. (2005) An exploration of different models of multi-agency partnerships in key worker services for disabled children: effectiveness and costs, Social Policy Research Unit, University of York.

² Beecham, J., Sloper, P., Greco, V. & Webb, R. (2007) The costs of key worker support for disabled children and their families, *Child: Care, Health and Development*, 33, 5, 611-618.

6.7 End-of-life care at home for children

Information for this schema has been provided by Rhiannon Edwards and Jane Noyes at Bangor University and was taken from the *My Choices* project report¹ which provided a summary of the proposed *additional costs* associated with providing palliative care at home (assuming care is provided for one week, 24 hours per day).

Costs and unit estimation	2013/2014 value	Notes
A. Wages/salary	£289,117 per year	Based on the mean basic salaries for 5.5 community nurses (band 6), 1 specialist palliative care nurse (band 7), 0.2 medical equipment technician (band 6), 0.5 clinical psychologist (band 7) and 15 band 7 nurses, each working 100 hours per year.
B. Salary oncosts	£70,876 per year	Employer's national insurance plus 14 per cent of salary for employer's contribution to superannuation.
C. Overheads		
Staff costs	£20,542 per year	Includes IT and administrative support, 0.5 WTE band 7 and 0.5 WTE band 5 respectively.
D. Travel costs	£27,857 per year	No travel costs available but the assumption is that they are equivalent to those reported in schema 7.5.
Working time	24 hours per day,	Unit costs based on 168 hours per week and 52.18 weeks per year.
	52.18 weeks	
Unit costs available 2013/2	2014	
Cost per week £7,827; cost	per hour £46.60 (if w	vorking 24/7).

Noyes, J., Hain, R., Tudor Edwards, R., Spencer, L., Bennett, V., Hobson, L., & Thompson, A. (2010) My choices project report, Bangor University, CRC Cymru, Cardiff University School of Medicine, N Warwickshire PCT, Royal College of Paediatrics and Child Health, Public Health Wales NHS Trust, Bath and NE Somerset PCT, http://www.bangor.ac.uk/healthcaresciences/research/My%20Choices%20Project%20Report%20-%2022-09-2011.pdf [accessed 9 October 2013].

6.8 Multi-systemic therapy (MST)

Multi-systemic therapy (MST) is an intensive family- and community-based treatment programme that focuses on addressing all environmental systems that impact on chronic and violent juvenile offenders: their homes and families, schools and teachers, neighbourhoods and friends (http://mstservices.com/).

This schema is based on costs estimated for a randomised controlled trial of interventions for adolescents aged 11-17 years at risk of continuing criminal activity. 1

Costs and unit estimation	Unit cost 2013/2014	Notes
A. Salary plus oncosts	£46,656 per year	Based on the salary of a chartered counselling psychologist. Employer's national insurance is included plus 14 per cent of salary for employer's contribution to superannuation.
B. Overheads		Taken from NHS (England) Summarised accounts. ²
Management, administration and estates staff.	£9,009 per year	Management and other non-care staff costs were 19.31 per cent of direct care salary costs and included administration and estates staff.
Non-staff	£19,581 per year	Non-staff costs were 41.97 per cent of direct care salary costs. They include costs to the provider for office, travel/transport and telephone, education and training, supplies and services (clinical and general), as well as utilities such as water, gas and electricity.
C. Capital overheads	£3,687 per year	Based on the new-build and land requirements of NHS facilities and adjusted to reflect shared used of both treatment and non-treatment space. Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
Working time	42.4 weeks per year 37.5 hours per week	Unit costs are based on 1,588 hours per year: 212 working days minus sickness absence and training/study days as reported for NHS staff groups. ³
Face-to-face time	1:1.40	The direct: indirect ratio was based on a survey of the three MST therapists who took part in the trial.
Length of sessions	60 minutes	Therapy sessions lasted 60 minutes.
Unit costs available 2013/2		
£50 per hour; £119 per the	rapy session.	

¹ Cary, M., Butler, S., Baruch, G., Hickey, N. & Byford, S. (2013) Economic evaluation of multisystemic therapy for young people at risk for continuing criminal activity in the UK, *PLos One* 8(4):e61070, doi:10.1371/journal.pone.0061070. http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0061070 [accessed 11 November 2014].

² Audit Commission (2013) *NHS summarised accounts 2012-2013*, NHS, London.

³ Contracted hours are taken from NHS Careers (2014) *Pay and benefits, National Health Service,* London, http://www.nhscareers.nhs.uk/working-in-the-nhs/pay-and-benefits/ [accessed 9 October 2014]. Working days and sickness absence rates as reported in Health & Social Care Information Centre (2014) *Sickness absence rates in the NHS: April 2009 – April 2014*, Health & Social Care Information Centre, Leeds.

6.9 Cognitive behaviour therapy (CBT)

This schema is based on costs estimated for a randomised controlled trial of interventions for adolescents with depression. The setting was two Child and Mental Health Services (CAMHS) teams in secondary care where CBT was delivered. Barrett and Petkova summarise CBT costs over 21 studies in a short article in the 2013 edition of this publication.

Costs and unit estimation	2013/2014 value	Notes
A. Wages/salary	£42,866 per year	Based on the mean full-time equivalent basic salary for Agenda for
		Change band 7 of the July 2013-June 2014 NHS staff earnings estimates. ²
		An average has been taken of these salaries.
B. Oncosts	£5,597 per year	Employer's national insurance is included plus 14 per cent of salary for
		employer's contribution to superannuation.
C. Qualifications		No information available.
D. Overheads		Taken from NHS (England) Summarised accounts. ³
Management,	£9,358 per year	Management and other non-care staff costs were 19.31 per cent of
administrative and estates staff		direct care salary costs and included administration and estates staff.
Non-staff	£20,340 per year	Non-staff costs were 41.97 per cent of direct care salary costs. They
		include costs to the provider for office, travel/transport and telephone,
		education and training, supplies and services (clinical and general), as
		well as utilities such as water, gas and electricity.
E. Ongoing training		Information not available for all care staff.
F. Capital overheads	£3,935 per year	Based on the new-build and land requirements of an NHS office and
		shared facilities, capital costs have been annuitised over 60 years at a
		discount rate of 3.5 per cent. ^{4,5} Based on the assumption that there is one office per team.
Working time	43.4 weeks per	Unit costs are based on 1,627 hours per year: 217 working days minus
	year,	sickness absence and training/study days as reported for all NHS staff
	37.5 hours per week	groups. ⁶
Ratio of direct to indirect	1:1	Fifty per cent of time is spent on face-to-face contact and 50 per cent on
time on face-to-face		other activities.
contact		
Length of contact	55 minutes	Average duration of CBT session.
Unit costs available 2013/2	2014	
£93 cost per CBT session.		

¹ Goodyer, I., Harrington, R., Breen, S., Dubicka, B., Leech, A., Rothwell, J., White, L., Ford, C., Kelvin, R., Wilkinson, P., Barrett, B., Byford, S. & Roberts, C. (2007) A randomised controlled trial of SSRIs with and without cognitive behavioural therapy in adolescents with major depression, *British Medical Journal*, doi:10.1136/bmj.39224.494340.55.

² Health & Social Care Information Centre (2013) NHS staff earnings estimates 2014 (not publicly available), Health & Social Care Information Centre, Leeds.

 $^{^{\}rm 3}$ Audit Commission (2013) NHS summarised accounts 2012-2013, NHS, London.

⁴ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

⁵ Building Cost Information Service (2014) *Surveys of tender prices*, Royal Institute of Chartered Surveyors, London.

⁶ Contracted hours are taken from NHS Careers (2014) *Pay and benefits, National Health Service,* London. http://www.nhscareers.nhs.uk/working-in-the-nhs/pay-and-benefits/ [accessed 9 October 2014]. Working days and sickness absence rates as reported in Health & Social Care Information Centre (2014) *Sickness absence rates in the NHS: April 2009 – April 2014*, Health & Social Care Information Centre, Leeds.

6.10 Adoption

In 2013, an overview of the adoption research initiative was published. ¹ This draws on studies commissioned by the Department for Education (DfE) as part of the Adoption Research Initiative (ARI) to explore issues relating to the implementation of the Adoption and Children Act 2002 in England and Wales. This schema draws mainly on information contained in this overview, providing the costs of various stages of the adoption process, from the fees to post-adoption support for families. It also includes information from a routine source: Section 251 of the Department of Education's financial data collection. All costs have been uprated using appropriate inflators.

Local authority expenditure - Section 251

In the Section 251 financial accounts, adoption services include 'adoption allowances paid and other staff and overhead costs associated with adoption including the costs of social workers seeking new and supporting existing adoptive parents'. Based on the outturn accounts for 2013/14³ and activity data taken from the Department of Education's statistical release for children looked after in England, the average cost per day for own-provision adoption services was £229. This was calculated by dividing total expenditure (£241,026,000) for own-provision and other provision adoption services by the total number of days of care for both own provision (PR1) and other local authority provision (PR2) (1,057,879). At 2013/2014 prices, the cost per day for private and voluntary services is £233, which was calculated by dividing private and voluntary expenditure (£22,711,000) by the total number of private and voluntary care days (98,292). The average cost per day across all adoption services (including the private and voluntary sector) at 2013/2014 prices is £230. This was calculated by dividing total expenditure (£263,737,000) by total number of days of care (1,057,879) and uprating by the PSS pay & prices index.

Inter-agency fees

Local authorities (LAs) and voluntary adoption agencies (VAAs) arrange adoptions in England. LAs place children for adoption with their own approved prospective adopters (an 'internal placement') or with approved prospective adopters provided by another local authority or by a VAA (an 'external placement'). VAAs also place a very small number of children relinquished into their care for adoption. Where an external placement is made, an inter-agency fee is charged. This fee enables an agency that has recruited and approved the prospective adopters to recoup their costs. Current fees (2013) are shown in schema 6.10.1 below (http://www.baaf.org.uk/webfm_send/3161/).

6.10.1 Inter-agency fees

Local authorities	Costs for 2013/2014
Fees for one child	£27,000
Fees for two children	150 per cent of the above fee
Fees for three or more children	200 per cent of the above fee
Voluntary adoption agencies	
Fees for one child	£27,000 comprising £18,000 on placement, and £9,000 when the adoption order is made or 12 months from start of placement, whichever is sooner
Ongoing support	£750 per month

As part of the Adoption Research Initiative, the DfE funded a study to establish whether the inter-agency fee was a good reflection of the expenditure incurred by LAs and VAAs in placing a child or sibling group (Selwyn et al., 2009, 2011). Financial accounts for 2007-08 from ten LAs and 17 VAAs were analysed, and the average cost per adoptive placement was estimated as £37,200 for a VAA and £35,000 for LAs, when expenditure on inter-agency fees had been excluded. The inter-agency fee in 2009 was £24,080 for a VAA, or around three-quarters of the estimated cost per placement in a typical VAA: a shortfall of around £10,000 per placement. 'Accounts submitted to the Charity Commission 2007-08 suggest VAAs contribute about £3.5 million to adoption services from income received from donations, legacies and investments' (Selwyn, 2011, p.427).

¹ Thomas, C. (2013) Adoption for looked after children: messages from research, British Association for Adoption & Fostering (BAAF).

www.education.gov.uk/childrenandyoungpeople/strategy/financeandfunding/section251/a00191786/outturn-guidance/ [accessed 9 October 2013].

³ Department for Education (2014) *Underlying data of the section 251 data archive: outturn data-detailed level 2008-09 onwards, outturn summary 2012-13*, Department for Education, London. https://www.gov.uk/government/publications/outturn-2012-to-2013-data-section-251 [accessed 20 October 2014].

⁴ Department for Education (2014) *Children looked after in England including adoption and care leavers, year ending 31 March 2013, SSDA903*. Data provided by DfE, see https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/253578/ssda903guidancenotes201213v12.pdf [accessed 9 October 2014].

⁵ Selwyn, J., Sempik, J., Thurston, P. & Wijedasa, D. (2009) *Adoption and the inter-agency fee*, Centre for Child and Family Research, http://www.bristol.ac.uk/sps/research/projects/current/rk6582a/rk6582afinalreport.pdf [accessed 9 October 2013]. See also Selwyn, J. & Sempik, J. (2011) Recruiting adoptive families: the costs of family finding and the failure of the inter-agency fee, *British Journal of Social Work*, 41, 415-431.

Family-finding

Linking and matching in adoption is the process of identifying an adoptive family which might best be able to meet the needs of a specific child who is waiting for an adoptive placement. More specifically, linking refers to the process of investigating the suitability of one or more prospective adoptive families who might meet the needs of a certain child or sibling group, based on their prospective adopter reports. Matching refers to the process whereby a local authority decides which prospective adoptive family is the most suitable to adopt a particular child. This family will be identified as a 'match' for the child or sibling group at the Adoption Panel, but the large variation in the way adoption panels are implemented means these costs are difficult to estimate.

Information has been drawn from a survey of adoption agencies (Dance et al., 2008), and 6.10.2 shows how much social worker time was spent on the relevant activities required to produce the assessment form for a prospective adoptive family. The number of hours spent on each activity was broadly in line with other research (Selwyn et al., 2006). Many other activities are undertaken as part of the adoption process, including completing the various legal procedures, writing reports for adoption panel meetings, and preparing and introducing children and adoptive families. Each of these activities will involve considerable amounts of social work time and input from other professions, thereby adding to the costs shown here. The average cost to the adoption agency of these four sub-processes amounts to £6,344. Costs for participating teams were estimated during the study and have been uprated from 2007/08 prices using the PSS pay & prices inflator.

6.10.2 Cost estimation of adoption activities

		Costs 2013/2014
Child assessment	55 social work hours (over four months)	£2,671
Adopter's assessment	64 social work hours (over six months)	£2,350
Preparing child's profile	6 social work hours	£157
Family-finding process – talking to children,		£1,282
families and professionals as part of the	16 social work hours	
linking process		
Total	141 social work hours	£6,460

Helping birth families

A study undertaken by Neil & colleagues (2010)⁴ and commissioned by the DfE aimed to estimate the cost of providing support services to birth relatives over 12 months. Seventy-three birth relatives were interviewed, and 57 (78%) were re-interviewed approximately 15 months later. Case workers completed diaries to record time spent on each of the various services provided to birth relatives, and other agencies provided information about the number and type of services provided for each person in the interview sample over one year. For each type of support, a unit cost was taken from the 2007 volume of the *Unit Costs of Health and Social Care*. The unit costs were combined with each person's use of support services to calculate the total costs of support. Costs have been uprated using the PSS pay & prices inflator.

Birth relatives were reported to have used 8.35 support services (range 0 to 70) over the 12-month study period at an average cost of £563 (range £0 to £5,023). Services included a telephone line for out-of-hours support, drop-in sessions, duty sessions, following referrals by telephone, providing venues for meetings, and liaison with other service providers. All other services were excluded from the cost estimates. The research was completed before the current consultation on the review of contact arrangements http://www.education.gov.uk/childrenandyoungpeople/families/adoption/a00212027/.

Supporting direct contact after adoption

A study undertaken by Neil & colleagues (2010)⁵ explored services provided to support post-adoption contact in 'complex' cases, i.e. direct contact where agencies had an ongoing role in the contact. They reported that the average adoptive family was estimated to have used contact support services 12 times over a 12-month period at a mean total cost of £1,200 (range £0-£4,461). The average birth relative used contact support services 8.9 times over a 12-month period, at a mean total cost of £833 (range £0-£2,184).

¹ Dance, C., Ouwejan, D., Beecham, J. & Farmer, E. (2008) Adoption agency linking and matching practice in adoption in England and Wales, Survey Findings, Department for Education, Research Brief DCSF-RBX-16-08.

https://www.education.gov.uk/publications/standard/publicationDetail/Page1/DCSF-RBX-16-08/ [accessed 9 October 2013]. ² Selwyn, J., Sturgess, W., Quinton, D. & Baxter, C. (2006) *Costs and outcomes of non-infant adoptions,* BAAF, London.

³ Dance, C., Ouwejan, D., Beecham, J. & Farmer, E. (2010) *Linking and matching: a survey of adoption agency practice in England and Wales*, BAAF, London

⁴ Neil, E., Cossar, J., Lorgelly, P. & Young, J. (2010) Helping birth families: a study of service provision, costs and outcomes. http://www.adoptionresearchinitiative.org.uk/study5.html [accessed 9 October 2013]. See also consultation on the review of contact arrangements for children in care and adopted children and on the placement of sibling groups for adoption, http://www.education.gov.uk/childrenandyoungpeople/families/adoption/a00212027/ [accessed 9 October 2013].

⁵Neil, E., Cossar, J., Jones, C., Lorgelly, P. & Young, J. (2010) Helping birth relatives and supporting contact after adoption, Adoption Research Initiative, http://www.adoptionresearchinitiative.org.uk/summaries/ARi_summary_8.pdf [accessed 23 October 2013].

Post-adoption support for adoptive parents

A legal framework for the provision of adoption support is set out in the Adoption and Children Act 2002 and the Adoption Support Services Regulations 2005 (Department of Health, 2005; Bonin et al. 2013). Families have a right to an assessment of their support needs and may be entitled to (means-tested) financial support, access to support groups, support for contact with birth relatives, and therapeutic services that support the relationship between children and their adoptive parents, including training to meet the child's needs, respite care and assistance in cases of disruption.

Bonin et al. (2013)¹ provide the costs of services over a six-month period through data collected from 19 adoptive parents six months after a child (average age 23 months) had been placed with them. Schema 6.10.3 shows that the total mean public sector cost for support services was £3,953 (uprated from 2007/08 prices), rising to £7,078 if financial support is included.

6.10.3 Services received by adoptive parents

Service or support	Mean costs (sd)	Range (lower)	Range (upper)
Adoption support & social care	£2,382	£843	£6,415
Health care	£517	£0	£1,995
Education support	£11	£0	£117
Specialist services	£114	£0	£1,315
Total cost of services	£3,024	£1,043	£6,672
Financial support	£4,224	£0	£22,645
Total cost (services and financial support)	£7,248	£1,405	£23,688

Financial support includes Adoption Allowances (n=6 families), settling-in grants (n=7), reimbursed expenses over the introductory period (n=8), and benefits and tax credits. In a more recent study, 61 adoptive parents caring for 94 children were interviewed: 88 per cent were reimbursed for expenses during introductions, 70 per cent had received a settling-in grant, and 26 per cent received an Adoption Allowance (Selwyn et al., 2009).¹

Another study funded through the Adoption Research Initiative reported costs of £3,302 (uprated from 2006/07 prices using the PSS pay & prices inflator) for adopters of children with severe behavioural difficulties, estimated over an average of 12 months of the placement (Sharac et al., 2011). Social work was at the heart of adoption support, accounting for nearly half (44%) of costs. Use of education support (20% of total costs), health care (13%) and other services such as day care and home help (23%) were also recorded.

¹ Selwyn, J., Sempik, J., Thurston, P. & Wijedasa, D. (2009) Adoption and the inter-agency fee, University of Bristol, Bristol.

² Sharac, J., McCrone, P., Rushton, A. & Monck, E. (2011) Enhancing adoptive parenting: a cost-effectiveness analysis, Child and Adolescent Mental Health, 16, 2, 110-115. See also http://www.adoptionresearchinitiative.org.uk/study6.html [accessed 9 October 2013].

6.11 Multidimensional treatment foster care (MTFC)

Multidimensional treatment foster care (MTFC) is a programme of intervention designed for young people who display emotional and behavioural difficulties. It is based on social learning and attachment theories, and provides intensive support in a family setting. A multidisciplinary team of professionals works with foster carers to change behaviour through the promotion of positive role models. Placements are intensive and tailored to the child's specific needs, with 24-hour support to carers. The specialised team of professionals is responsible for the planning and delivery of the programme, and each practitioner has a clearly-defined role. The core team consists of a programme supervisor, individual therapist, birth family therapist, skills worker, administrator, foster carer recruiter and education worker; additional staff may be appointed in some local authorities (see schema 6.4 for information on local authority foster care for children).

Research to calculate the costs of multidimensional treatment foster care^{1,2} built on a previous study that calculated unit costs for eight social care processes.³ The process costs shown below align with those in the schemas for children in care (8.6.1-8.6.4); in particular the high-cost children. Costs per hour have been calculated using Curtis (2007)⁴ and include overheads and capital costs. For each process, the salary and overhead costs have been multiplied by the time spent by the practitioners involved. The costs tabulated below for providing and maintaining the placement account for over 90 per cent of the costs of a care episode, but exclude the set-up costs. Costs have been uprated from 2006/2007 to 2013/2014 prices using the PSS pay & prices inflators.

6.11.1 Costs of eight social care processes for MTFC

Process number	MTFC cost per child (2013/2014 prices)		
Process one: decision to place and finding first MTFC placement	£9,805		
Process two: care planning	£252		
Process three: maintaining the placement (per month)	£7,415		
Process four: leaving care/accommodation	£488		
Process five: finding subsequent MTFC placement	£9,113		
Process six: review	£693		
Process seven: legal process	£4,906		
Process eight: transition to leaving care services	£2,174		

6.11.2 Process costs for other types of provision for young people

Process number	LA foster care in LA area (2013/2014 prices)	Agency/foster care in LA area (2013/2014 prices)	Agency residential in LA area (2013/2014 prices)	
Process one	£1,226	£1,741	£1,546	
Process two	£252	£252	£252	
Process three	£3,843	£5,558	£10,655	
Process four	£488	£488	£488	
Process five	£550	£1,097	£1,118	
Process six	£833	£833	£833	
Process seven	£4,906	£4,906	£4,906	
Process eight	£2,174	£2,174	£2,174	

¹ Holmes, L., Westlake, D. & Ward, H. (2008) Calculating and comparing the costs of multidimensional treatment foster care, Report to the Department for Children, Schools and Families, Loughborough Centre for Child and Family Research, Loughborough University.

² Holmes, L., Ward, H. & McDermid, S. (2012) Calculating and comparing the costs of multidimensional treatment foster care in English local authorities, *Children and Youth Services Review*, 34, 2141-2146.

³ Ward, H., Holmes, L. & Soper, J. (2008) *Costs and Consequences of Placing Children in Care*, Jessica Kingsley, London.

⁴ Curtis, L. (2007) Unit Costs of Health and Social Care 2007, Personal Social Services Research Unit, University of Kent, Canterbury.

6.12 Decision-making panels

A number of studies carried out by the Centre for Child and Family Research at Loughborough University have explored the costs of decision-making panels for the Common Assessment Framework (CAF), short-break services for disabled children and their families, and joint commissioning for children with additional needs. The joint commissioning panels were held to discuss both looked-after children and children in need cases. Information was gathered from practitioners, managers and administrative staff on the time taken to complete activities prior to, during and after panel meetings. The costs of the Common Assessment Framework and short-breaks panels are based on data provided by two local authorities. The joint commissioning panel is based on information gathered in one local authority. The activity times for each personnel type involved in the three panels are shown in the schema below.

6.12.1 Activity times for CAF, short breaks for disabled children and their families and joint commissioning for children with additional needs panels by personnel type

	Activity times					
Panel	Panel member	Social worker	Principal manager	Administrator	Lead professional	
CAF panel	1 hour 10 minutes	N/A	N/A		5 hours	
Short-breaks panel	3 hours 20 minutes	1 hour 45 minutes	N/A	4 hours 40 minutes	N/A	
Joint commissioning panel	1 hour 45 minutes	2 hours	1 hour 45 minutes	3 hours 20 minutes	N/A	

Unit costs are calculated by multiplying the number of hours carried out for each process by each type of personnel, by the relevant unit costs per hour. Unit costs per hour are based on average salaries for each staff type using national salary scales including salary oncosts (national insurance and superannuation). Direct, indirect and capital overheads are applied as outlined in the *Unit Costs of Health and Social Care* (2011).

Personnel type	Unit cost per hour
Panel member (senior manager)	£48
Family support worker	£30
Social worker	£41
Team manager	£48
Administration	£29

The cost of the CAF panel is based on 12 panel members, discussing eight cases per meeting. The cost of the short breaks panel is based on five panel members discussing four cases per meeting. The cost of the joint commissioning panel is based on four panel members discussing eight cases per meeting.

6.12.2 Cost per case for CAF, short breaks and joint commissioning panels

	Costs per case considered £					
Panel	Panel Social Principal Administrator Lead professional					Total cost per case
CAF panel	£83.53				£139.62	£223.15
Short-breaks panel	£114.18	£63.32		£134.84		£312.36
Joint commissioning panel	£42.01	£71.15	£84.02	£95.94		£293.12

¹ Holmes, L., McDermid, S., Padley, M. & Soper, J. (2012) Exploration of the costs and impact of the Common Assessment Framework, Department for Education London

² Holmes, L., McDermid, S. & Sempik, J. (2010) *The costs of short break provision*, Department for Children, Schools and Families, London.

6.13 Costs of reunification

The Centre for Child and Family Research (CCFR) was commissioned by the National Society for the Prevention of Cruelty to Children (NSPCC) to estimate the costs to the public purse of providing services ¹ to support successful reunification to all children and families following a care episode (Holmes, 2014). ² This schema provides the weighted average cost per case, based on estimates that 53 per cent of the children returning home (5,342) will require a high level of support, 16 per cent (1,613) will have medium levels of need, and 31 per cent (3,125) will have low levels of need. The cost for a high, medium and low need case are also included. Two types of costs have been provided here: the cost of providing additional support services for children and families following reunification, and the cost of Children in Need support to children and families when the child returns home. At 2013/14 prices, the weighted average cost was £5,627 per case.

The assumptions about the proportion of families with high, medium, and low needs are adapted from the Farmer et al. (2011) ³ study which concluded that 28 per cent of returns were good quality, 14 per cent borderline, 49 per cent poor quality and 9 per cent were not clear. It is assumed that the poor quality returns represent high need, the borderline medium need, and the good quality returns low need. The 9 per cent where the quality of returns is unclear has been apportioned equally across the three categories. Hence, it has been assumed that 53 per cent of reunification cases have high support needs, 16 per cent have medium support needs and 31 per cent have low support needs.

The costs include the provision of parenting support, adult mental health, drug and alcohol and CAMHS services for those with medium and high needs. The proportion of families in each category receiving specific interventions, and the intensity of the interventions, are based on the research evidence (Wade et al., 2011⁴; Farmer et al., 2011³; Meltzer et al., 2003⁵). The cost estimations are based on national data. There will be variations between authorities in terms of the needs and costs of the families they are supporting.

The report acknowledges its limitations: for example, the exclusion of the costs incurred by other agencies to support vulnerable children and their families on reunification. It is also acknowledged that some of the assumptions and categorisations will mask some of the complexities of individual cases and the costs associated with supporting these families.

Services	2013/2014	Notes
	Cost per case	
High needs		
Adult mental health (60%; fortnightly);	£9,330	Based on Farmer et al. (2011) ³ and Meltzer et al. (2003) ⁵ .
Drug and alcohol services (50%, fortnightly);		Based on Farmer et al. (2011) ³ and Meltzer et al. (2003) ⁵
Parenting support (80%; weekly);		Based on Farmer et al. (2011) ³ and costs for a family support worker (see schema 11.8).
CAMHS (45%, fortnightly).		Based on Farmer et al. (2011) ³ and Meltzer et al. (2003). ⁵
Medium needs		
Parenting support	£1,613	80 per cent of parents receive parenting support, fortnightly, for one year (Farmer et al., 2011). ³
CAMHS		Forty five per cent of children receive CAMHS services, monthly, for one year (Meltzer et al., 2003). ⁵
Low needs		It has been assumed that any services to meet the needs of the families would have been provided prior to the child returning home and as part of routine service provision.
Support		
High needs	£3,803	Comprises 6 months at a high level (8 hours 15 minutes social worker time plus 50 minutes team manager per month); 3 months at medium level (5 hours and 45 minutes social worker time plus 50 minutes team manager per month) and 3 months at a low level (2 hours and 35 minutes social worker time plus 50 minutes team manager per month). ⁶
Medium needs	£2,384	Comprises ongoing support for the family as an open Child in Need case for 9 months; 6 months at medium level followed by 3 months at a low level.
Low needs	£1,188	Comprises ongoing support as an open Child in Need case for 6 months at a low level.
Unit costs available 2013/2014	1	·
£5,656 average weighted cost per case.		

¹ Research indicates that much of this support is **not** currently provided. In cases where it is provided by local authorities, it will not represent additional spend. There are significant variations between authorities in terms of types and levels of social care support and services, so the degree of overestimation of the additional cost of these services will vary accordingly.

² Holmes, L. (2014) Supporting children and families returning home from care, Centre for Child and Family Research, Loughborough University.

³ Farmer, E., Sturgess, W., O'Neill, T. & Wijedasa, D. (2011) Achieving successful returns from care: what makes reunification work? British Association for Adoption and Fostering, London.

⁴ Wade, J., Biehal, N., Farrelly, N. and Sinclair, I. (2011) Caring for Abused and Neglected Children: Making the Right Decisions for Reunification or Longterm Care, Jessica Kingsley Publishers, London.

⁵ Meltzer, H., Gatward, R., Corbin, T., Goodman, R. & Ford, T. (2003) *The mental health of young people looked after by local authorities in England,* The Stationery Office. London.

⁶ Holmes, L. & McDermid, S. (2012) *Understanding costs and outcomes in child welfare services*, Jessica Kingsley Publishers, London.

6.14 Short-break provision for disabled children and their families

The Centre for Child and Family Research were commissioned by the Department for Children, Schools and Families (now the Department for Education) to calculate the costs incurred by children's services departments to provide short-break services. The average cost of different types of short-break services was estimated, along with the costs of the routes by which families access provision and the ongoing activity undertaken to support the child and family once in receipt of short-break services. The study employs a bottom-up costing methodology, using social care activity time data as the basis for building up unit costs. See Holmes & McDermid in Curtis (2010) for detailed information on the methods employed.

The services

Short breaks can be delivered in the form of overnight stays, day, evening and weekend activities, and can take place in the child's own home, the home of an approved carer, or a residential or community setting.⁴ A range of services and their costs were identified in this study.

Service type	Unit	Average cost 2013/14 value Mean cost Median cost		Range 2013/14 value	
Residential	Per child per night (24-hour period)	£274	£300	£73-£422	
Family-based overnight	Per child per night (24-hour period)	£178	£153	£146-£235	
Day care	Per child per session (8 hours)	£136	£127	£103-£214	
Home support	Per family per hour	£22	£22	£18-£27	
Home sitting	Per family per hour	£19	£19	£11-£28	
General groups	Per session	£346	£396	£101-£640	
Afterschool clubs	Per session	£291	£283	£249-£344	
Weekend clubs	Per session	£324	£325	£309-£337	
Activity holidays	Per child per break	£1,336	£863	£118 ^a -£3,853 ^b	

^a Short break of two days

The social care processes

The study also calculated the costs of social care activity associated with providing short-break services to disabled children and their families. This included the routes by which families were able to access short-break provision, and any ongoing activity undertaken to support the child and family once in receipt of short-break services.

Process	Out of London cost	London cost
	2013/2014 value	2013/14 value
Referral and assessment processes		
Local Core Offer eligibility models ⁵	Not available	£12 ^a
Common Assessment Framework	£190 ^a	Not available
Initial assessment	£341 ^a	£312 ^a
Core assessment	£513 ^a	£722 ^a
Resource panels for short-break services ⁶	£97°	£53°
Ongoing support		
Ongoing support	£78 ^b	£101 ^b
Reviews	£197 ^a	£265 ^a

^a per process per child

^b Short break of seven days

^b per month per child

¹ Holmes, L., McDermid, S. & Sempik, J. (2009) *The costs of short break provision: report to the Department for Children, Schools and Families*, Centre for Child and Family Research, Loughborough University.

² Beecham, J. (2000) *Unit Costs – Not exactly child's play: a guide to estimating unit costs for children's social care*, Department of Health, Dartington Social Research Unit and the Personal Social Services Research Unit, University of Kent; Ward, H., Holmes, L. & Soper, J. (2008) *Costs and consequences of placing children in care*, Jessica Kingsley, London.

³ Holmes, L. & McDermid, S. (2010) The costs of short break provision, in L. Curtis (ed.) *Unit Costs of Health and Social Care 2011*, Personal Social Services Research Unit. University of Kent. Canterbury.

⁴ Department for Children, Schools and Families (2008) Aiming high for disabled children: short breaks implementation guidance, Department for Children, Schools and Families, London.

⁵ 'Local core offer eligibility model' refers to an access route whereby a local authority offers the provision of a standardised package of short-break services to a specific population of disabled children and young people who meet an identified set of eligibility criteria.

⁶Two of the three participating authorities used panels to decide how resources might be most usefully deployed to support families. The out of London authority held panels once a fortnight and the London authority held their panel monthly.

6.15 Local safeguarding children's boards

Research carried out by the Centre for Child and Family Research examined the cost of local safeguarding children's boards (LSCBs) as part of a wider study commissioned by the Department for Children, Schools and Families to explore the effectiveness of the boards in meeting their objectives.¹

To understand the costs of the LSCB meetings, information was gathered from practitioners, managers and administrative staff on the time taken to complete activities before, during and after LSCB meetings. Board members were asked to complete a time use event record to indicate the time they spent on different LSCB activities in the month preceding the LSCB meeting. Activities included: travel to and from meetings, preparation for meetings and provision of feedback to their agency. Data were collected in relation to the main LSCB meetings and subgroup meetings. The activity times are outlined in the schema below.

6.15.1 Average time spent by board members before and after LSCB meetings

Activity	Average time spent per meeting ^a
Travel	0.89 hours
Preparation for meetings	3.07 hours
Feedback to own agency	1.33 hours
Total	5.29 hours

^a Figures do not include the time spent in the meeting.

Unit costs are calculated by multiplying the number of hours carried out for each activity by each type of personnel by the relevant unit costs per hour. Unit costs per hour are based on average salaries for each staff type using national salary scales and applying oncosts and overheads as presented in this volume.

Six local authority areas contributed to the study. The structure and activities of the LSCBs in these six areas varied considerably. The costs in each area and the overall average cost are shown below, uprated to 2013/14 using the appropriate inflators.

6.15.2 The costs of local safeguarding children's boards

LSCB	Infrastructure	Estimated costs of board member attendance at LSCB meetings Estimated cost per meeting Estimated cost per year		Cost of subgroups	
	(staffing, including Chair) per year				
Area one	£134,041	£11,504	£69,025	£66,877	
Area two	£104,475	£7,191	£43,146	£21,925	
Area three	£302,073	£17,427	£209,120	£146,845	
Area four	£96,965*	£16,051	£64,204	£79,838	
Area five	£113,676	£9,552	£57,312	Data not available	
Area six	£196,817	£16,681	£66,726	Data not available	
Average cost	£158,008	£13,068	£84,923	£78,871	

^{*}Figure does not include the time spent in the meeting.

¹ France, A., Munro, E. & Waring, A. (2010) *The evaluation of arrangements for effective operation of the new local safeguarding children boards in England,* Final Report, Department for Education, London.

6.16 Incredible Years parenting programme

The Incredible Years series includes three interlocking training programmes for parents, children and teachers. The parenting programmes are targeted at children up to 12 years of age, and the child and teacher programmes are for children aged 3-8 years. The schema below shows costs for the Webster-Stratton Incredible Years basic parenting programme, which were collected in 2003/04 and have been uprated using the hospital and community health services inflators (HCHS). The costs have been calculated using weekly diaries completed by leaders of four groups, and the cost information supplied by the Incredible Years Welsh Office. The figures include costs of weekly attendance at supervision for group leaders. This was required because these leaders were participating in a randomised controlled trial, and were relatively inexperienced and were not certified leaders. Generally, supervision for inexperienced leaders would be recommended on a termly basis, with encouragement to work for leader certification. Further details of the study are available from Edwards et al. (2007). The costs have been calculated using programmes for parents and the child and teacher programmes are for children and

Set-up costs are not itemised in the schema below. These include producing the programme kits and also the training of two leaders, and their travel and supervision time. The total cost for these activities was £4,815 and the total time taken was 53 hours.

Costs and unit estimation	2013/2014 value	Notes
A. Capital costs premises	£3,738	Capital costs were 25 per cent of total costs.
B. Salaries and oncosts	£7,551	Direct salary and oncosts for running the group included the recruitment costs (£1,079), supervision costs (£4,576) and group running costs (£1,897). The activities included: - 2 group leaders to recruit parents, including travel time - 2 leaders to run the group - salary in group session preparation time for 2 leaders - supervision time for 2 leaders including travel - trainer costs to deliver supervision
C. Overheads Venue costs and	£2,302 £1,397	Telephone costs (£51), mileage costs (£819), clerical support costs (£101) and transport and crèche costs (£1,331). Venue costs and refreshments.
refreshments		
Working time Length of programme	379.25 hours	375.25 hours spent by 2 leaders to run the programme.
11.:tt:1-b1- 2012/		

Unit costs available 2013/2014

Based on 8 parents per group: total costs per child (including set-up costs) £1,869 (£2,471); Based on 12 parents per group: total cost per child (including set-up costs) £1,246 (£1,647).

¹ Webster-Stratton, C. & Hancock, L. (1998) Training for parents of young children with conduct problems: content, methods and therapeutic processes, in C.E Schaefer & J.M. Briesmeister (eds) *Handbook of parent training*, Vol. 9, September, John Wiley, New York.

² Edwards, R.T., Céilleachair, A., Bywater, T., Hughes, D.A. & Hutchings, J. (2007) Parenting programme for parents of children at risk of developing conduct disorder: cost and effectiveness analysis, *British Medical Journal*, 334, 682-688.

6.17 Parenting programmes for the prevention of persistent conduct disorder

The most successful parenting programmes targeted at parents of children with or at risk of developing conduct disorder are designed to improve parenting styles and parent-child relationships, in turn having positive effects on child behaviour. This schema draws information from a study by Bonin & colleagues (2011)¹ which identified the average costs for group-based interventions and one-to-one delivery-based interventions. In turn these estimates drew on data collected between 2007 and 2009 by researchers at the National Academy for Parenting Research. Data on parenting programmes can be found at http://www.education.gov.uk/commissioning-toolkit. While there are many different parenting programmes, administered in a variety of formats, often they are group-based lasting between 1.5 and 2.0 hours per week over 8-12 weeks.

Schemas 6.15.1 and 6.15.2 show the cost of delivering five parenting programmes for which there is evidence of effectiveness. According to NICE (2007), about 80 per cent of parenting programmes can be delivered in a group format, and this figure is used to weight the median costs. The expected intervention cost based on 80 per cent group and 20 per cent individual provision used for the model is therefore £1,213 per participant. All costs have been uprated to 2013/2014 using the appropriate inflators.

6.17.1 Group delivery (Incredible Years, Triple P and Strengthening Families, Strengthening communities)

	Median	Mean	Low	High
Total practitioner cost (includes time in session, preparation and supervision time)	£6,417	£6,254	£1,203	£10,975
Venue hire	£964	£913	£551	£1,171
Food and refreshment	£503	£477	£287	£611
Childcare	£578	£513	£198	£701
Translation services	£646	£575	£222	£785
Materials	£150	£143	£113	£157
Total cost per session for training, supervision and materials	£9,258	£8,873	£2,574	£14,400
Total per person assuming 10 per group	£926	£887	£257	£1,440
Total costs of practitioners' training time and fees	£2,010	£2,317	£1,416	£3,834
Training/100 (assuming 10 participants per group +10 sessions delivered	£20	£23	£14	£38
per training received)				
Per person estimate include a component for training	£946	£910	£272	£1,478
Hours of supervision needed x hourly cost of minimum recommended level of supervisor	£469	£469	£256	£680
Per person supervision estimate assuming: 10 per group; cost does not depend on number of practitioners; nor the number of programmes run at once	£47	£47	£26	£68
Per person estimate including a component for training and supervisor cost	£993	£957	£297	£1,546

¹ Bonin, E., Stevens, M., Beecham, J., Byford, S. & Parsonage, M. (2011) Costs and longer-term savings of parenting programmes for the prevention of persistent conduct disorder: a modelling study, *BMC Public Health 2011*, 11:803. doi:10.1186 1471-2458-11-803.

² National Institute for Health and Clinical Excellence (2007) Parent-training/education programmes in the management of children with conduct disorders, National Institute for Health and Clinical Excellence, London.

6.17.2 One-to-one delivery (Incredible Years, Triple P, Strengthening Families, Strengthening communities and Helping the Noncompliant Child)

	Median	Mean	Low	High
Total staff cost (includes session, preparation and supervision time) for one lead practitioner	£1,898	£2,702	£755	£5,488
Total food/10	£50	£38	£0	£61
Childcare/10	£57	£41	£0	£70
Translation/10	£65	£46	£0	£79
Materials/10	£14	£12	£1	£16
Total session costs (including preparation, supervision, materials etc.)	£2,084	£2,839	£756	£5,714
Training costs (lead practitioner)	£685	£671	£489	£857
Training fees	£640	£865	£142	£2,121
Total costs of lead practitioner's training time and fees	£1,325	£1,536	£632	£2,978
Per person training component/50 (assuming 50 deliveries per	£26	£31	£13	£60
training)				
Total including training component	£2,110	£2,870	£769	£5,774
Hours of supervision needed x hourly cost of minimum recommended level of supervisor	384 hrs	452 hrs	256 hrs	680 hrs
Per person supervision estimate assuming: 10 one-to-one programmes delivered per supervisor term; cost does not depend on the number of practitioners	£38	£45	£26	£68
Per person estimates include a component for training and supervisor cost	£2,150	£2,915	£795	£5,842

6.18 Parent training interventions for parents of disabled children with sleep or behavioural problems

This schema draws on work carried out by Beresford and colleagues (2012)¹ and provides the costs of five different parent training interventions for parents of disabled children with sleep or behavioural problems. Costs have been updated using current salaries and overhead information. The cost for each programme is an average cost.

Description of programme	Staff (Agenda for Change band/local authority band if provided) FTE unless otherwise noted	Staff sessions and hours (including preparation, delivery, debrief)	Total cost (including programme and staff)
The Ascend Programme is a group-delivered parent-training programme for parents of children with Autistic Spectrum Conditions (ASC). Up to 20 participants per programme.	Clinical psychologist (7), learning disability nurse (7), S&L therapist (5), consultant clinical psychologist (8D), consultant psychiatrist (8DD), learning disability nurse (6), CAMHS therapist (6), social worker assistant, learning disability nurse (7), clinical psychologist (6)	Delivered in 10 weekly sessions of 2-2.5 hours plus final follow up session. In total 46.5 hours were delivered by staff in 4 programmes.	Staff cost £7,782 Programme cost £171 Total £7,953
The Cygnet programme is a group-delivered parent-training programme for parents of children with Autistic Spectrum Conditions, age 7 to 18.	Cygnet co-ordinator, Bradford and District Autistic Support Group (BADASG) co-ordinator, child psychologist (8B), consultant clinical psychologist (8D), clinical psychologist (7), social worker, teacher, administrator (level 3), senior CAMHS practitioner (7), 3 STARS workers and a student nurse.	Delivered in CAMHS and voluntary sector community facilities in 6-weekly 2.5 hour sessions. There is a reunion session at three months. In total staff delivered 51.5 hours in 6 programmes.	Staff cost £3,930 Programme cost £171 Total £4,101
The Confident Parenting Programme is a 6-week, group- delivered parent-training programme for parents of disabled children (aged 7 to 18 years). A maximum of 12 participants is recommended.	Consultant clinical psychologist (8C), 2 clinical psychologists (7 and 5), head teacher, assistant psychologist (6) and teacher. There are typically 3 members of staff at each session.	The programme has 6-weekly sessions of 2 hours (+1 optional follow-up). In total staff delivered 69 sessions (15 hours) in 4 programmes. An additional 40 hours was required to set up the group.	Staff cost £4,069 Programme cost £226 Total cost £4,295
Riding the Rapids is a group- delivered parent-training programme for parents of children with Autistic Spectrum Conditions and other disabilities (aged 4-10).	Clinical psychologist (8b), teaching assistant (TA4), S&L therapist, clinical psychologist, senior nurse, deputy head, community nurse (7), parent facilitator, 2 clinical psychologists, assistant psychologist and a community nurse.	The programme is delivered in 10-weekly sessions of 2 hours. In total 33.5 hours were delivered in 7 programmes.	Staff cost £3,184 Programme cost £255 Total cost £3,439
The Promoting Better Sleep Programme is a group-delivered intervention for parents of children with Autistic Spectrum Disorder and/or learning and/or sensory disabilities.	C & A learning disabilities team co-ordinator (7), community learning disability nurse (6), consultant clinical psychologist (8D), autistic spectrum link nurse (4). (Typically 2 members of staff at each session)	A manual-based programme in 4-weekly sessions of 3 hours over 5-6 weeks. In total 32 sessions (16.5 hours) were delivered in 4 programmes.	Staff cost £1,889 Programme cost £111 Total cost £2,000

¹ Beresford, B., Stuttard, L., Clarke, S., Maddison, J. & Beecham, J. (2012) Managing behaviour and sleep problems in disabled children: an investigation into the effectiveness and costs of parent-training interventions, Research Report DFE-RR204a, Department for Education, London.

6.19 Independent reviewing officer (IRO)

An independent reviewing officer (IRO) ensures that the care plan for a looked-after child clearly sets out the help, care and support that they need, and takes full account of their wishes and feelings. Local authorities are required by law to appoint an IRO for each looked-after child. Since 2011, IROs are responsible for chairing statutory reviews and also for monitoring children's care plans on an ongoing basis (Ofsted, 2013). The analysis of resources needed for the IRO service was conducted as part of the cost analysis carried out by the Centre for Child and Family Research (CCFR), Loughborough University (Jelicic et al., 2014). Caseloads and time inputs have been based on suggested best practice and statutory guidance.

	2013/2014 value	Notes
A. Salary	£38,592 per year	In line with IRO Guidance (Department for Children Schools & Families, 2010) ² IROs are paid at
		the same level as a team manager. The average salary for a team manager was £35,410 for
		2007/08. ³ As no new salary estimates are available, this has been inflated to reflect the pay
		increments for social workers reported in the Local Government Earnings Surveys 2009 to 2014. ⁴
B. Salary oncosts	£12,011 per year	Employer's national insurance is included plus 20 per cent of salary for employer's contribution
		to superannuation. ⁵
C. Qualifications	£25,430 per year	IROs are required to be registered social workers. Qualification costs have been calculated using
		the method described in Netten et al. (1998). Current cost information is drawn from research
		by Curtis et al. (2011). ⁷
D. Ongoing training		IROs should have training to develop their observational skills for work with children under the
		age of four, communicate with disabled children and develop links with and awareness of
		support and services for disabled children. IROs have regular monthly or six-weekly supervision,
		and regular access to their managers for ad hoc consultation. ²
E. Direct overheads	£14,675 per year	Direct overheads were 29 per cent of direct care salary costs. They include costs to the provider
		for administration and management, as well as for office, training and utilities such as water, gas
		and electricity.
Indirect overheads	£8,096 per year	Indirect overheads were 16 per cent of direct care salary costs. They include general
		management and support services such as finance and human resource departments.8
F. Capital overheads	£1,897 per year	Based on the new-build and land requirements for a local authority office and shared facilities
1. Capital Overneads	11,057 per year	for waiting, interviews and clerical support. 9,10 Capital costs have been annuitised over 60 years
		at a discount rate of 3.5 per cent.
G. Travel		No information available on average mileage covered per review. For information see <i>Green</i>
oave.		Book: National Agreement on Pay and Conditions of Service. ¹¹
Working time	41 weeks per year	Includes 29 days annual leave and 8 statutory leave days. Ten days for study/training and 8.2
5 6 5	37 hours per week	days sickness leave have been assumed based on the median average sickness absence level in
		England for all authorities. 9,12 Unit costs are based on 1,516 hours per year.
Review	8.5 hours	Based on recommendations for a properly resourced IRO service, a standard case should take a
		total of between 7.5 and 9.5 hours. This includes preparation time (up to 1 hr) consultation with
		the child/young person, social worker, parents and foster carer/ keyworker/family or friends'
		carer, the review meeting (between 1.5 to 2 hrs) plus travel time, and up to two hrs for writing
		up the report. This work takes the midpoint (8.5 hours).
Ongoing monitoring	1 hour	Up to 1 hour is allocated between review meetings for standard cases. Up to 2 additional hours
G., 808	2 11041	should be allocated if there are issues that need to be resolved, delays, poor practice or if the
		child is unhappy in their placement.
Case load	60	It is estimated that a caseload of 50-70 looked-after children for a full time equivalent IRO would
		represent good practice in the delivery of a quality service. ² The midpoint has been taken.
		Results of a national survey show that overall the (mean) average caseload for a full-time
		equivalent IRO was 78 looked-after children.
London multiplier	1.10 x A 1.49 x F	Allows for higher costs associated with London compared to the national average cost. 4,9,10
Unit costs available 2013/201		
	· • · · · · · · · · · · · · · · · · · ·	(including ongoing monitoring).

¹ Jelicic, H., La Valle, I. & Hart, D. with Holmes, L. (2014) The role of Independent Reviewing Officers (IROs) in England, National Children's Bureau, London.

² Department for Children Schools & Families (2010) IRO Handbook, Statutory guidance for independent reviewing officers and local authorities on their functions in relation to case management and review for looked after children, Department for Children, Schools and families.
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/273995/iro_statutory_guidance_iros_and_las_march_2010_tagged.pdf (accessed 8 July 2014).

³ Local Government Association Analysis and Research (2008) Local government earnings survey 2007, Local Government Analysis and Research, London.

⁴ Local Government Association (2014) Local government pay and workforce research, http://www.local.gov.uk/research-pay-and-workforce/ [accessed 16 October 2014].

⁵ Thurley, D. (2011) *Local government pension scheme, 2010 onwards,* House of Commons, London.

⁶ Netten, A., Knight, J., Dennett, J., Cooley, R. & Slight, A. (1998) *Development of a ready reckoner for staff costs in the NHS, Vols 1 & 2,* Personal Social Services Research Unit, University of Kent, Canterbury.

⁷ Curtis, L. Moriarty, J. & Netten, A. (2012) The costs of qualifying a social worker, *British Journal of Social Work*, 42, 4, 706-724.

Based on information taken from Selwyn, J. et al. (2009) Adoption and the inter-agency fee, University of Bristol, Bristol; and Glendinning, C. et al. (2010) Home care re-ablement services: investigating the longer-term impacts, Final Report, University of York, PSSRU Kent, Department of Health, London.

⁹ Building Cost Information Service (2014) *Surveys of tender prices*, Royal Institute of Chartered Surveyors, London.

¹⁰ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

Local Government Employers (2012) Green Book: national agreement on pay and conditions of service, Local Government Association, London. http://www.local.gov.uk/web/guest/workforce/-/journal_content/56/10180/3510601/ARTICLE/ [accessed 9 October 2013].

¹²Local Government Association (2012) Local government workforce survey 2011/12, http://www.local.gov.uk/local-government-intelligence/journal_content/56/10180/3328402/ARTICLE/ [accessed 9 October 2013].

6.20 Early Years Teacher Classroom Management Programme

The Teacher Classroom Management programme is a prevention programme to strengthen teacher classroom management strategies, and promote children's prosocial behaviour and school readiness (reading skills). The programme is intended for group leaders who plan to work with groups of teachers to promote these skills. It is divided into 6 full-day workshops, with enough time between each workshop, for teachers to practice the new skills they are learning. The Teacher Classroom Management Programme is useful for teachers, teacher aides, school psychologists and school counsellors http://incredibleyears.com/programs/teacher/classroom-mgt-curriculum/. See also Ford et al. (2012) for details on the cost-effectiveness of the programme.

The following schema provides the costs for two group leaders to deliver a six-day workshop to 10 teachers. Excluded from this schema are the costs of ongoing consultation by telephone or in person for new group leaders. The consultation fee is £120 per hour. Although not obligatory, group leaders are encouraged to apply for certification/accreditation (£270). Where costs on the Incredible Years website have been provided in dollars, they have been converted at a rate of \$1=£0.60 (2 June 2014).

Costs and unit estimation	2013/14 value	Notes
Start-up costs		
Group leader training	£1,440 per year	Based on the cost of £240 per person per day for a three-day training course. Training delivered by an Incredible Years certified trainer or mentor. (Costs exclude airfare from the USA and accommodation, which will vary and might be shared with other programmes).
Materials	£1,492 per year	This includes Incredible Years materials such as manuals, assorted books, tool box, wheel of fortune, puppets etc. Also video cameras should be included if sessions are to be filmed
Group leaders		
Course planning	£6,600 per year	Based on the cost of £550 per day (includes salaries and overheads) for two group leaders for six days.
Course delivery	£6,600 per year	Based on the cost of £550 per day (includes salaries and overheads) for two group leaders for six days.
Teachers attending programme		
Supply cover	£9,600 per year	Supply cover provided for the 10 teachers attending the course at £160 per day for 6 days.
Incredible Years professional		
Supervision	£1,560 per year	Supervision provided by an Incredible Years professional for the 6 sessions. Based on a cost of £260 per session
Venue		Cost for venue is not known.
Course materials	£350 per year	Books and handouts at £35 per teacher for 10 teachers
Miscellaneous costs	£50 per annum £360 per annum	Incentives and materials Lunch and refreshments are based on a cost of £60 per session.
Certification/accreditation	£267 per annum	This promotes fidelity to the programme
Unit Costs for 2013/14	'	, , ,
Start-up costs £2,932 (exclu	ding airfare and acco	ommodation for Incredible Years trainer).
Cost per programme for 10		
Cost per teacher excluding s	start-up costs £2,539	l.

¹ Ford, T., Edwards, V. Sharkey, S., Ukoumunne, O., Byford, S. Norwich, B. & Logan, S. (2012) Supporting teachers and children in schools: the effectiveness and cost-effectiveness of the incredible years teacher classroom management programme in primary school children: a cluster randomised controlled trial, with parallel economic and process evaluations, *BMC Public Health 2012*, 12:719, doi:10.1186/1471-2458-12-719.

7. Hospital and related services

- 7.1 NHS reference costs for hospital services
- 7.2 NHS wheelchairs
- 7.3 Equipment and adaptations
- 7.4 Hospital based rehabilitation care scheme
- 7.5 Expert patients programme
- 7.6 Public health interventions
- 7.7 Rehabilitation services
- 7.8 End-of-life care
- 7.9 Hospice rapid response service

7.1 NHS reference costs for hospital services

We have drawn on the *NHS Trust and Primary Care Trusts combined* dataset to report the costs of selected adult health services. All costs have been uprated to 2013/14 levels using the HCHS pay & prices inflator.

Each reported unit cost includes:

- (a) direct costs which can be easily identified with a particular activity (e.g. consultants and nurses)
- (b) indirect costs which cannot be directly attributed to an activity but can usually be shared among a number of activities (e.g. laundry and lighting)
- (c) overheads which relate to the overall running of the organisation (e.g. finance and human resources).

For information on the method used to allocate drugs to services, see reference cost guidance for 2012-2013.¹

	National	Lower quartile	Upper quartile
	average		
Elective/non elective Health Care Resource Group (HRG) data,			
average cost per episode			
Elective inpatient stays	£3,403	£2,568	£4,013
Non-elective inpatient stays (long stays)	£2,716	£2,029	£3,197
Non-elective inpatient stays (short stays)	£611	£408	£726
Day cases HRG data (finished consultant episodes)			
Weighted average of all stays	£701	£503	£835
Day care facilities (average cost per patient day)			
Stroke patients	£208	£153	£268
Elderly patients	£157	£76	£208
Other patients	£157	£94	£214
Outpatient procedures			
Weighted average of all outpatient attendances	£109	NA	NA
PALLIATIVE CARE			
Day case and regular day/night – specialist inpatient palliative care, same day (adults and children)	£122	£63	£121
Inpatient – specialist palliative care (adults and children), average cost per bed day	£326	£190	£441
Inpatient – hospital specialist palliative care support (adults and children), average cost per bed day	£117	£62	£131
Outpatient – medical specialist palliative care attendance (adults and children)	£153	£95	£169
Outpatient – non-medical specialist palliative care attendance (adults and children)	£124	£63	£163
AMBULANCE SERVICES (Weighted average of attendances)			
Calls	£7	£6	£8
Hear and treat and refer	£48	£39	£54
See and treat and refer	£176	£157	£198
See and treat and convey	£233	£209	£258

NB See Transforming NHS ambulance services for further information on paramedic services unit costs.²

¹ Department of Health (2014) *NHS reference costs 2012-2013*, https://www.gov.uk/government/publications/nhs-reference-costs-2012-to-2013 [accessed 2 October 2014].

² National Audit Office (2011) *Transforming NHS ambulance services*, http://www.nao.org.uk/wp-content/uploads/2011/06/n10121086.pdf [accessed 22 October 2013].

7.2 NHS wheelchairs

Information about wheelchair costs is based on the results of a study of six sites supplying wheelchairs to adults and older people. The study information was supplemented with national data not available from the sites. Three main types are identified: those propelled by an attendant or self-propelled; a lighter type of chair especially designed for active users; and powered wheelchairs. (Active users are difficult to define, but generally refer to individuals who are permanently restricted to a wheelchair but are otherwise well and have high mobility needs). The cost of modifications is included in the estimated capital value, but this is a very approximate mid-range figure so specific information should be used wherever possible. All costs have been uprated using the retail price index.

Although no further studies have been carried out on wheelchairs, current price information suggests that powered wheelchairs range from £700-£3,000 and self- or attendant-propelled wheelchairs range from £100-£650.

Type of chair	Total value	Annual cost	Notes
	2013/2014	2013/2014	
Capital costs			Capital value has been annuitised over five years at a
Self- or attendant-propelled	£278	£62	discount rate of 3.5 per cent to allow for the expected life
Active user	£694	£154	of a new chair. In practice, 50 per cent of wheelchairs supplied have been reconditioned, not having been worn
Powered	£1,387	£307	out by the time their first users ceased to need them.
Revenue costs			Revenue costs exclude therapists' time but include the
Maintenance			staff costs of maintenance. The costs include all costs for
- non-powered		£29	pressure relief. The cost of reconditioning has not been included in the cost of maintenance.
- powered		£116	
Agency overheads			No estimate of management overhead costs is available.
			They are likely to be minimal.
Unit costs available 2013/2014	1	•	

£91 per self or attendant propelled chair per year; £183 per active user per chair per year; £424 per powered chair per year.

¹ Personal communication with Richard Murray, National Health Service Management Executive, 1995.

7.3 Equipment and adaptations

Community equipment refers to any items of equipment prescribed by occupational therapists, physiotherapists and other health staff, designed to help vulnerable or older people and those with disabilities or long-term health conditions to manage everyday tasks independently at home. Last year, in the absence of current information on the costs of providing adaptations and equipment, we presented a price list for a selection of equipment listed in the *Transforming Community Equipment Services* (TCES) national catalogue of equipment for independent daily living: http://www.national-catalogue.org/smartassist/nationalcatalogue and *Equipment for older and disabled people: an analysis of the market* (Consumer Focus, 2010) (see 7.3 of last year's publication). This year, as discussed in the preface, we have drawn from a study commissioned by PSSRU and undertaken by Astral/Foundations

(http://www.foundations.uk.com/about-home-improvement-agencies/), a part of which was to identify the process and resources used to supply equipment and adaptations. Information was received from 17 organisations (85% response rate) to support the research: ten local authorities, six Home Improvement Agencies (HIAs) and the British Association of Occupational Therapists. The research differentiated between the time taken to supply and install minor adaptations (generally those under £1,000) and also provided time inputs of the staff involved in administering the process and assessing clients.

In schemas 7.3.1-7.3.2, we have provided information on: equipment and installation costs for major and minor adaptations and in schemas 7.3.3-7.3.4 staff preparation and assessment time are provided. Further work will be carried out for next year's volume to monetise the staff preparation and assessment time for both major and minor adaptations. Excluded from the research brief were items of equipment and systems commonly regarded as telecare or telehealth, as these types of equipment have been the focus of previous work (see Henderson & colleagues article in the 2013 edition of this report).

The period over which adaptations to housing should be annuitised is open to debate. Ideally they should be annuitised over the useful life of the aid or adaptation. In many cases this is linked to the length of time the person using the appliance is expected to remain at home. Where it is expected that the house would be occupied by someone else who would also make use of the equipment, a longer period would be appropriate. Clearly, this is difficult to do in practice. Following government guidelines on the discount rate, the items in the schema below have been annuitised over 10 years at 3.5 per cent.¹

7.3.1 Major adaptations, including installation costs

	Sample size	Lowest cost	Highest cost	Mean (median) cost	Mean (median) annual equipment cost (3.5% discount)
Level access shower	21	£2,500	£12,000	£4,651 (£3,986)	£559 (£479)
Stair lift (straight)	21	£1,050	£2,829	£1,874 (£1,925)	£225 (£231)
Stair lift (more complex)	7	£2,300	£6,613	£4,564 (£4,600)	£549 (£553)
Convert room for downstairs WC /washroom	7	£2,800	£22,000	£9,856 (£9,872)	£1,185 (£1,187)
Build Downstairs extension for WC/washroom	5	£12,000	£30,000	£22,563 (£25,000)	£2,712 (£3,005)
Build downstairs extension for bedroom	5	£12,000	£45,000	£26,715 (£25,745)	£3,211 (£3,095)
Build downstairs extension for bedroom and en suite facilities	6	£23,000	£45,000	£33,639 (£32,067)	£4,043 (£3,854)
Total	52				

¹ See http://webarchive.nationalarchives.gov.uk/+/www.dh.gov.uk/en/Aboutus/Procurementandproposals/Publicprivatepartnership/Privatefinanceinitiative/Changestotreasurygreenbook/DH_4016196).

7.3.2 Minor adaptations, including installation costs

	Sample size	Lowest cost	Highest cost	Mean (median) cost	Mean (median) annual equipment cost (3.5% discount)
Fit handrail – external	8	£16	£101	£42 (28)	£5 (£3.40)
Fit handrail – internal	10	£9.40	£65	£28 (20)	£3.40 (£2.40)
Fit handrail to bath	8	£8.40	£28.36	£18 (20)	£2.20 (£2.40)
Fit over bath shower	6	£320	£1800	£107 (£1200)	£12.90 (£144)
Create step to front/back door	8	£20	£1500	£476 (£90)	£57(£10.90)
Create ramp to front/ back door	5	£120	£700	£313 (120)	£37.60 (£14)
Lay new path, per metre cost	3	£100	£120	113 (£120)	£13.60 (£14.40)
Widen doorway for wheelchair access	6	£300	£660	£530 (£660)	£63.70 (£79.30)
Install lighting to outside steps/path	5	£25	£600	£253 (£140)	£30.40 (£16.80)
Move bed to downstairs room	3	£30	£45	£40 (£45)	£4.80 (£5.40)
Raise electrical sockets/lower light switches	6	£40	£150	£79 (£75)	£9.50 (£9.00)

7.3.3 Mean average time inputs for staff involved in the process of providing minor adaptations

	Average time in minutes					
	Initial OT HI		HIA	Total time		
	enquiry		administrator			
Fit handrail – external	9.8	84	30	123.8(2.06 hours)		
Fit handrail – internal	9.8	72	30	111.8 (1.7 hours)		
Fit handrail to bath	9.8	42	24	75.8 (1.1 hours)		
Fit (handrail) over bath shower	9.8	84	42	135.8 (2.1 hours)		
Create step to front/back door	9.8	132	30	171.8 (2.7 hours)		
Create ramp to front/back door	9.8	360	30	399.8 (6.5 hours)		
Lay new path, per metre cost	9.8	192	48	249.8 (4 hours		
Widen doorway for wheelchair access	9.8	456	42	507.8 (8.3 hours)		
Install lighting to outside steps/path	9.8	318	12	339.8 (5.5 hours)		
Move bed to downstairs room	9.8	78	42	129.8 (2 hours)		
Raise electrical sockets/lower light switches	9.8	156	36	201.8 (3.2 hours)		

7.3.4 Mean average time inputs for staff involved in providing major adaptations

			Average minutes					
	Initial enquiry	ОТ	LA grants officer	HIA technical officer	HIA caseworker	HIA administrator	Total time	
Level access shower	9.8	210	462	420	287	168	1,557 (26 hours)	
Stairlift (straight)	9.8	72	186	120	474	120	982 (16.4 hours)	
Stairlift (more complex)	9.8	156	756	306	96	120	1,444 (24.1 hours)	
Convert room for downstairs WC/Washroom	9.8	498	792	672	276	312	2,560 (42.7 hours)	
Build downstairs extension for WC washroom	9.8	816	1,188	1,578	144	174	3,910 (65.2 hours)	
Build downstairs extension for bedroom and ensuite facilities	9.8	1,068	1,356	1,272	372	234	4,312 (71.9 hours)	

7.4 Hospital-based rehabilitation care scheme

This PCT-run rehabilitation unit, based in a hospital in Kent, is supervised by a nurse consultant. The information was collected in 2005/06 just after a quick redesign, but costs reflect current prices, inflated by the HCHS pay & prices index. The unit is managed by a modern matron, but has a strong multi-professional team. The unit is divided into three sections. The first is the 'assessment area', where patients go for between 24-72 hours on admission to have their health care needs closely observed and identified. They then go to the 'progression area', which is for patients who need moderate to high nursing support and where a rehabilitation programme is provided. Finally, patients move to the 'independent area' before returning home. In total there are 38 beds in the unit.

Costs and unit estimation	2013/2014 value	Notes
A. Wages/salary	£915,709 per year	Based on salaries for a team of a modern matron (band 8), 3 nurse team
		managers (band 7), 7 (WTE 5.34) nurse specialists (band 6), 8 (WTE 6.31)
		nurses (band 5), 21 (WTE 17.09) higher-level clinical support workers
		(band 4), 4 (WTE 3.2) clinical support workers (band 3) and a support
		physiotherapist (band 3). ¹
B. Salary oncosts	£218,863 per year	Employer's national insurance is included plus 14 per cent of salary for
		employer's contribution to superannuation.
C. Qualifications		
D. Overheads		Taken from NHS (England) Summarised accounts. ²
Management,	£219,086 per year	Management and other non-care staff costs were 19.31 per cent of direct
administration and		care salary costs and included administration and estates staff.
estates staff		
Non-staff	£476,180 per year	Non-staff costs were 41.97 per cent of direct care salary costs. They
		include costs to the provider for office, travel/transport and telephone,
		education and training, supplies and services (clinical and general), as well
		as utilities such as water, gas and electricity.
E. Capital overheads	£92,036 per year	Includes capital overheads relating to the building and equipment which
		have been annuitised using the appropriate discount rate.
Hours and duration of	7 days a week (to	If necessary, the service provides an intensive package of care over 24
service	include weekends	hours.
	and bank	
	holidays) 8.00 am	
	– 9.00 pm, 365	
	days per year.	
Average duration of stay	14 days	Patients can stay up to six weeks, but average duration is 14 days.
Caseload per worker	30 per month	The total annual caseload was 358.
		qualifications given in brackets)
Cost per bed per week £973	3; Average annual co	st per patient £5,368; Cost of a typical client episode £1,940.

¹ Health & Social Care Information Centre (2014) NHS staff earnings estimates 2014 (not publicly available), Health & Social Care Information Centre, Leeds.

² Audit Commission (2013) *NHS summarised accounts 2012-2013*, NHS, London.

7.5 Expert patients programme

Self-care support in England is provided through a broad initiative called the Expert Patients Programme (EPP). The programme focuses on five core self-management skills: problem-solving, decision-making, resource utilisation, developing effective partnerships with health-care providers, and taking action. It offers a toolkit of fundamental techniques that patients can use to improve their quality of life. It also enables patients who live with a long-term condition to develop their communication skills, manage their emotions, manage daily activities, interact with the health-care system, find health resources, plan for the future, understand exercising and healthy eating, and manage fatigue, sleep, pain, anger and depression (Department of Health, 2001). Courses led by trainers who themselves have a chronic condition were held for an optimum number of 16 people over sessions lasting six weeks. The groups were led by two lay trainers or volunteers.

The information for this schema is based on research carried out by the University of York.^{3,4} The cost per participant is £300. These costs are based on 2005 data and have been uprated using the appropriate inflators.

Costs and unit estimation	2013/2014 value	Notes
A. Staff salaries (including	£4,418,230	Includes EPP trainers and co-ordinators.
oncosts) and expenses		
B. Overheads:		
Publicity material	£488,379	Includes awareness raising, staff magazine, manuals, course books, website, intranet.
Office expenditure	£254,350	Includes IT and other office expenditure.
Assessment	£9,553	Assessment to ensure quality of trainers and programme.
C. Other overheads:	£414,358	Includes EPP staff days, venues (volunteers and staff).
Rental	£427,624	Rental of premises for EPP sessions.
D. Travel	£27,857	Volunteer travel expenses.
Number of participants	20,000	Participants were a range of people living with long-term conditions.
Length of programme	6 weeks	EPP courses take place over six weeks (2½ hours a week) and are led by
		people who have experience of living with a long-term condition.
Unit costs available 2013/2	2014	
Cost per participant £300.		

¹ Department of Health (2001) The expert patient: a new approach to chronic disease management in the 21st Century, The Stationery Office, London.

² Expert Patients Programme Community Interest Company, *EPP price guide 2008/2009*, London.

³ Richardson, G., Gravelle, H., Weatherly, H. & Richie, G. (2005) Cost-effectiveness of interventions to support self-care: a systematic review, *International Journal of Technology Assessment in Health Care*, 21, 4, 423-432.

⁴ Richardson, G., Kennedy, A., Reeves, D., Bower, P., Lee, V., Middleton, E., Gardner, C., Gately, C. & Rogers, A. (2008) Cost-effectiveness of the expert patients programme (EPP) for patients with chronic conditions, *Journal of Epidemiology and Community Health*, 62, 361-367.

7.6 Public health interventions

These costs are drawn from two reports: *Prioritising investments in public health* (Matrix Evidence and Bazian, 2008),¹ commissioned by the Department of Health, and *A review of the cost-effectiveness of individual level behaviour change interventions* commissioned by the Health and Well-Being Alliance group (North West Public Health Observatory, 2011).² Here we present the costs of interventions for which the economic evidence originated in the UK. Further information can be found on Public Health Interventions in the Cost Effectiveness Database (PHICED) http://www.yhpho.org.uk/PHICED/. All costs have been taken directly from the reports and uprated to 2013/2014 prices using the appropriate inflators. Further information on the specific research studies can be found in the reports named above.

Intervention: Reducing long-term absence in the workplace

The NICE public health guidance on Management of Long-term Sickness and Incapacity for Work provides cost information for three types of intervention: physical activity and education (10 sessions of physiotherapy or physical activity and 10 sessions of cognitive behaviour therapy); workplace intervention (usual care, workplace assessment and work modifications and communication between occupational physician and GP to reach a consensus on return to work); and physical activity and education along with a workplace visit (sessions as before plus half a day of line manager's time).

Intervention	Workplace intervention	Physiotherapy/ physical activity	Cognitive behaviour therapy	Workplace visit	Total
Physical activity and education		£177	£673		£850
Workplace intervention	£572				£572
Physical activity education and workplace visit		£177	£673	£50	£901

Alcohol intervention

Intervention: Brief interventions have proven to be effective and have become increasingly valuable for the management of individuals with increasing and high-risk drinking, filling the gap between primary prevention efforts and more intensive treatment for persons with serious alcohol use disorders. The cost of delivering ten minutes' brief advice for alcohol ranges from £7 for a practice nurse to £36 for a GP (see schemas 10.6 and 10.8c of this publication).

Reducing the incidence of sexually transmitted infections (STIs) and teenage pregnancy

Intervention: Individual risk counselling, defined here as one-to-one interventions, delivered by a counsellor to at-risk groups with the aim of reducing incidence of STIs or risky behaviour. Individual risk counselling can be delivered through clinics (genitourinary medicine, abortion, or drug and alcohol misuse clinics), community health services, GPs and other community and non-health-care settings. The review suggested that counselling interventions cost between £84 and £185 per person.

Reducing smoking and the harms from smoking

Intervention: The review suggested that there is strong evidence that **mass media campaigns** for both young and adult populations cost between £0.29 and £2.01 per person. Estimates of cost are higher when the unit receiving the intervention is defined as those potentially exposed to the campaign (£26-£49).

Intervention: Drug therapies for smoking cessation. This can include nicotine replacement therapy (NRT) (such as nicotine patches and gum), nicotine receptor partial antagonists (such as varenicline), opioid antagonists (such as naltrexone), clonidine, lobeline, or antidepressants (such as bupropion). There is evidence that drug therapy (bupropion, nicotine replacement therapy and varenicline) has a moderate effect on smoking cessation, particularly in people motivated to quit. There is economic evidence from the UK on the cost of NRT (£46-£160 per person), bupriopion (£88-£94 per person), and combinations of NRT and bupriopion (£176-£182 per person).

Intervention: A ten-minute opportunistic brief advice session for smoking is £36 for a GP and £7 for a practice nurse (see schemas 10.6 and 10.8c of this publication).

¹ Matrix Evidence & Bazian (2008) *Prioritising investments in public health*, Department of Health, London.

² North West Public Health Observatory (2011) *A review of the cost-effectiveness of individual level behaviour change interventions,* Health and Wellbeing Alliance, Manchester. https://www.ewin.nhs.uk/news/item/2011/changes-in-the-nhs [accessed 9 October 2013].

Well man services

Information has been drawn from the Liverpool Public Health Observatory Series¹ and provides the costs of 18 well man pilots in Scotland funded between June 2004 and March 2006, aimed to:

- · Promote healthier lifestyles and attitudes among men;
- Provide men with an opportunity to undertake a health assessment and to obtain advice and support on health and lifestyle issues;
- Effectively engage all men and, in particular, those who were hardest to reach as a consequence of social exclusion or discrimination. They were also intended to identify what worked in promoting and sustaining health awareness and improvement in men.

Staff variation was the main factor in different session costs, and attendance rate was the main factor in cost per health assessment, particularly at drop-in services in community venues, where attendance was unpredictable. The costs did not include those incurred by patients.

Cost comparison of delivery modes - well man service pilots

Location	Cost per session		Cost per assessment	
	Number Range		Number	Range
Health clinics	9	£204-£904	9	£46-£307
Workplaces	2	£225-£238	3	£29-£111
Community venues (inc. pharmacies)	6	£109-£463	4	£68-£1,208

Health action area - community programme

Within the Wirral health action area, specialist lifestyle advisory staff are co-located with health trainers and community health development staff. These teams work with individuals and groups and provide (or commission) a community programme of lifestyle activities including mental wellbeing. They work closely with employability programmes such as the Condition Management Programme and Wirral Working 4 Health. The teams are based in a variety of community venues including a children's centre, and they also work closely with a wide network of other partner agencies, particularly where there is a common interest, e.g. in accessing particular groups such as men aged over 50 or homeless people. This is a model of wellness which takes a network approach within a particular neighbourhood potentially involving all aspects of the wellbeing of an individual or family through joint working rather than a discrete wellness service.

An evaluation of the community programme showed the average cost per client is £36.

¹ Winters, L., Armitage, M., Stansfield, J. Scott-Samuel & Farrar, A. (2010) Wellness services – evidence based review and examples of good practice, Final Report, Liverpool Public Health Observatory.

7.7 Rehabilitation services

7.7.1 Tertiary 'specialised' rehabilitation services (Level 1)

These are high-cost/low-volume services, which provide for patients with highly complex rehabilitation needs that are beyond the scope of their local and district specialist services. These are normally provided in co-ordinated service networks planned over a regional population of 1-3 million through collaborative (specialised) commissioning arrangements.¹

The data below provide the annual cost per bed, the average daily cost per bed and the average daily cost per occupied bed and have been drawn from research carried out in eight sites by Turner-Stokes & colleagues (2012). The information has been calculated from budget statements and accounting costs. These averages include costs from a range of different service models, which are separated in later versions of the Specialised Services National Definition Sets. The wide range of bed-day costs also reflects diversity in staffing/resource provision to meet differing case-load complexity which is factored into commissioning currencies using a costing model based on the Rehabilitation Complexity Scale. The UK Rehabilitation Outcomes Collaborative is in the process of revising its figures on staffing levels and costs based on the updated figures reported by services for 2013/14 will be available in the next edition.

Costs and unit estimation	2013/2014 value	Notes
A. Wages/salary and	£128,395 per	Staff include: 2.5 WTE consultants accredited in rehabilitation medicine
oncosts	year	and/or neuropsychiatry, 2.5 WTE training grades doctors and 1.5 WTE
		trust grade doctor, 30 nurses, 6 physiotherapists and 6 occupational
		therapists, 3 speech and language therapists, 2.5 clinical psychologists, 2
		social workers/discharge co-ordinators and 0.75 WTE dietitians, 3
		technical/clerical assistants, 1 service manager. This team covers 20 beds
		so the total cost has been divided by 20 to give the average cost per bed.
B. Direct overheads		
Non-pay patient costs	£11,684 per year	Includes the cost of diagnostic & clinical services, drugs/pharmacy, medical and therapy supplies, travel/transport, interpreters, equipment
		hire, clinical specialist support and the cost of minor procedures.
Ward costs	£17,205 per year	Includes the cost of cleaning, portering, catering, laundry, provisions
		utilities, maintenance, replacement of bedding & rates.
Provision of equipment	£1,412 per year	Includes the cost of wheelchairs, mobility and exercise equipment,
and facilities		electronic assistive technology, hydrotherapy and other therapy.
Rehabilitation unit	£2,825 per year	Includes the cost of office consumables, computer hardware, computer
office/administrative		software, IT support, telephones, filing, data and records.
costs		
Office (staff) costs	£1,926 per year	Includes administrators and office management.
C. Indirect costs	£22,854 per year	Includes general capital depreciation (departmental and central
		resources). Also includes central costs relating to HR, Trust management,
		payroll, Finance and Estates.
D. Overheads	£20,030 per year	Includes units contribution to Public Dividend Capital, interest charges
		and other costs not included above that are specific to unique factors
		associated with the rehabilitation service.
Number of beds per unit	26	Median number of beds per unit. Numbers ranged from 15-54.
Occupancy	90 per cent	Average occupancy across the 8 units. Occupancy ranged from 70-99 per
		cent.
Unit costs available 2013/2		
Total annual cost nor had f	206 221, average da	ily cost per had FEGE (range FAEO FGAO); average daily cost per occupied

Total annual cost per bed £206,331; average daily cost per bed £565 (range £459-£649); average daily cost per occupied bed £628.

¹ Turner-Stokes, L. (2010) *Specialist neuro-rehabilitation services: providing for patients with complex rehabilitation needs*, British Society of Rehabilitation Medicine, http://www.bsrm.co.uk/ClinicalGuidance/Levels_of_specialisation_in_rehabilitation_services5.pdf [accessed 9 October 2013].

² Turner-Stokes, L., Bill, A. & Dredge, R. (2012) A cost analysis of specialist inpatient neurorehabilitation services in the UK, *Clinical Rehabilitation*, 26, 3, 256-263, http://cre.sagepub.com/content/26/3/256 [accessed 25 July 2013].

³ Turner-Stokes, L., Sutch, S. & Dredge, R. (2012) Healthcare tariffs for specialist inpatient neurorehabilitation services: rationale and development of a UK casemix and costing methodology, *Clinical Rehabilitation*, 26, 3, 264-79, http://cre.sagepub.com/content/26/3/264/ [accessed 9 October 2013].

7.7.2 Local (district) specialist rehabilitation services (Level 2)

These are typically planned over a district-level population of 250-500,000 and are led or supported by a consultant trained and accredited in rehabilitation medicine, working both in hospital and the community setting. The specialist multidisciplinary rehabilitation team provides advice and support for local general rehabilitation teams. The data below provide the annual cost per bed and have been drawn from research carried out in seven sites by Turner-Stokes & colleagues (2011). The information has been calculated from budget statements and accounting costs. These averages include costs from a range of different service models. The wide range of bed-day costs reflects diversity in staffing/resource provision to meet differing case-load complexity which is factored into commissioning currencies using a costing model based on the Rehabilitation Complexity Scale. The UK Rehabilitation Outcomes Collaborative is in the process of revising its figures on staffing levels and costs based on the updated figures reported by services for 2013/14 will be available in the next edition.

Costs and unit estimation	2013/2014	Notes		
	value			
A. Wages/salary and oncosts	£100,568 per year	Staff include: 1.5 WTE consultants accredited in rehabilitation medicine and/or neuropsychiatry, 2 WTE training grades doctors and 1.5 WTE trust grade doctor, 28 nurses, 4 physiotherapists and 4 occupational therapists 2 WTE speech and language therapists, 2 WTE clinical psychologists, 1.5 social workers/discharge co-ordinators and 0.5 WTE dietitians, 2 technical/clerical assistant, 0.5 service manager. This team covers 20 beds so the total cost has been divided by 20 to give the average cost per bed.		
B. Direct overheads				
Non-pay patient costs	£10,811 per year	Includes the cost of diagnostic & clinical services, drugs/pharmacy, medical and therapy supplies, travel/transport, interpreters, equipment hire, clinical specialist support and the cost of minor procedures.		
Ward costs	£14,844 per year	Includes the cost of cleaning, portering, catering, laundry, provisions utilities, maintenance, replacement of bedding & rates.		
Provision of equipment and facilities	£1,106 per year	Includes the cost of wheelchairs, mobility and exercise equipment, electronic assistive technology, hydrotherapy and other therapy.		
Rehabilitation unit office/administrative costs	£2,414 per year	Includes the cost of office consumables, computer hardware, computer software, IT support, telephones, filing, data and records.		
Office (staff) costs	£1,529 per year	Includes administrators and office management.		
C. Indirect costs	£12,873 per year	Includes general capital depreciation (departmental and central resources). Also includes central costs relating to HR, Trust management, payroll, Finance and Estates.		
D. Overheads	£12,973 per year	Includes units contribution to Public Dividend Capital, interest charges and other costs not included above that are specific to unique costs factors associated with the rehabilitation service.		
Number of beds per unit	20	Median number of beds per unit. Numbers ranged from 12-30.		
Occupancy	96 per cent	Average occupancy across the 7 units. Occupancy ranged from 84-100 per cent.		
Unit costs available 2013/20	14			

Total annual cost per bed £157,117; average daily cost per bed £430 (range £321-£529); average daily cost per occupied bed £448.

¹ Turner-Stokes, L. (2010) *Specialist neuro-rehabilitation services: providing for patients with complex rehabilitation needs*, British Society of Rehabilitation Medicine. http://www.bsrm.co.uk/ClinicalGuidance/Levels of specialisation in rehabilitation services5.pdf [accessed 9 October 2013].

² Turner-Stokes, L., Bill, A. & Dredge, R. (2011) A cost analysis of specialist inpatient neurorehabilitation services in the UK, *Clinical Rehabilitation*, October 5 http://cre.sagepub.com/content/26/3/256/ [accessed 9 October 2013].

³ Turner-Stokes, L., Sutch, S. & Dredge, R. (2012) Healthcare tariffs for specialist inpatient neurorehabilitation services: rationale and development of a UK casemix and costing methodology, *Clinical Rehabilitation*, 26, 3, 264-79, doi:10.1177/0269215511417467. http://cre.sagepub.com/content/26/3/264/ [accessed 9 October 2013].

7.8 End-of-life care

Recent research carried out by the Nuffield Trust¹ on behalf of the National End of Life Care Intelligence Network has examined the health and social care service use patterns across seven local authorities for a cohort of 73,243 people who died

Schema 7.8.1 provides the total cost of care services received in the last twelve months of life and also the average cost per decedent and per user of each type of service. Estimated social care costs include only the most common types of services provided by local authorities. Hospital care accounted for 66 per cent of total care costs with social care costs accounting for 34 per cent of total costs.

Emergency hospital admissions were responsible for 71 per cent of all hospital costs in the final year of life and 46 per cent of total costs. Emergency admissions rose sharply in the final year such that by the final month of death, costs had risen by a factor of 13 compared to 12 months earlier. They accounted for 85 per cent of hospital costs in the final month (£1,983 per decedent). Elective inpatient costs more than tripled in the same time (from £76 per decedent to £260 per decedent).

7.8.1 Estimated average cost of care services in the last twelve months of life

	Total cost	Total cost per decedent	% total	No. of users	Total cost per user
Hospital care	£511	£6,975	66%	65,624	£7,784
Inpatient emergency	£363	£4,956	47%	54,577	£6,652
Inpatient non-emergency	£97	£1,322	12%	58,165	£1,664
Outpatient	£42	£569	5%	50,155	£831
A&R	£9	£128	1%	48,000	£195
Social care	£261	£3,566	34%	20,330	£12,847
Residential and nursing care	£209	£2,859	28%	10,896	£19,724
Home care	£40	£553	5%	10,970	£3,691
Other	£11	£154	1%	4,084	£2,760
Total	£772	£10,541	100%	NA	NA

One of the key findings of the research was that there were significant differences in the use of social care between groups of individuals with certain long-term conditions: people with dementia, falls and stroke were more likely to use social care services, while people with cancer were least likely to use social care (even when adjusted for age). Schema 7.8.2 provides a breakdown of these groups, including prevalence rates and costs. A person may have more than one condition so the groups are not mutually exclusive, and the sum of individual rows exceeds the total. Hospital costs were higher for those with more than one long-term condition (as might be expected), and social care costs decreased with an increasing number of long-term conditions.

¹ Georghiou, T., Davies, S., Davies, A. & Bardsley, M. (2012) Understanding patterns of health and social care at the end of life, Nuffield Trust, London.

7.8.2 Cost of hospital and social care services by diagnostic group per decedent in the final year of life

Diagnostic group	Average costs, final year, £ per person					
	Number	Hospital care	Social care	Hospital and social care		
All people	73,243	£6,942	£3,483	£10,424		
No diagnoses	22,118	£3,418	£4,280	£7,697		
Any diagnosis	51,125	£8,465	£3,138	£11,603		
Hypertension	21,241	£9,474	£2,879	£12,353		
Cancer	19,934	£9,924	£1,345	£11,268		
Injury	17,540	£10,223	£4,183	£14,406		
Atrial fibrillation	13,567	£9,572	£3,410	£12,981		
Ischaemic heart disease	13,213	£9,710	£2,905	£12,615		
Respiratory infection	11,136	£10,625	£2,313	£12,938		
Falls	10,560	£9,393	£5,295	£14,688		
Congestive heart failure	10,474	£9,756	£3,299	£13,055		
Chronic obstructive	9,392	£9,531	£2,600	£12,131		
pulmonary disease	9,392	19,551	12,000	112,151		
Anaemia	9,210	£11,191	£3,135	£14,326		
Diabetes	8,697	£9,741	£3,238	£12,979		
Cerebrovascular disease	8,290	£9,592	£4,309	£13,901		
Peripheral vascular disease	6,780	£11,052	£2,872	£13,924		
Dementia	6,735	£8,000	£9,231	£17,231		
Renal failure	6,570	£11,154	£3,314	£14,468		
Angina	6,549	£10,430	£2,937	£13,367		
Mental disorders, not dementia	4,814	£10,461	£3,731	£14,192		
latrogenic	4,190	£15,076	£2,616	£17,692		
Asthma	3,480	£10,125	£2,564	£12,689		
Alcoholism	2,437	£9,234	£1,198	£10,431		
Non-rheumatic valve disorder	2,059	£11,368	£2,261	£13,630		

7.9 Hospice Rapid Response Service

This schema is based on a Rapid Response Service (RRS) introduced by Pilgrims Hospices in East Kent in 2010. RRSs provide intense care over relatively short periods when crises arise, and work alongside regular domiciliary services that offer longer-term support, to help avoid admission to hospice or hospital. This team services three areas and has access to a service co-ordinator, medical advice and equipment that can be carried by car. The team responds rapidly 24/7 to crises in patients' own homes (including care homes); undertakes a robust assessment which takes account of patient and carer/family preferences, patient needs, and patient prognosis; provides hands on care; and works in co-ordination with other community services. See Setting up a new hospice at home service² for further information. See also National Survey of Patient Activity Data for more information on specialist palliative care services. ³

Costs and unit	2013/2014	Notes
Estimation	value	
A. Wages/salary	£275,725 per year	Based on mean Agenda for Change (AfC) salaries for 18 band 3 health care assistants (HCAs) ⁴ who spend 85 per cent of their time on duties related to the RRS.
3. Salary oncosts	£60,402 per year	Employer's national insurance is included plus 14 per cent of salary for employer's contribution to superannuation.
C. Qualifications		HCAs required NVQ 2/3 or equivalent and community end-of-life care experience.
D. Training		The HCAs were provided with an initial orientation training programme covering introduction to the hospice and clinical work on wards and in the community. They also attended a 5-day hospice palliative care course costing approximately £750. Staff have continued to access in-house development training, statutory and mandatory annual training.
E. Overheads		Taken from NHS (England) Summarised accounts. Hospice overheads are broadly similar to those applied to NHS staff.
Service co- ordinator and day to day co-ordinator	£69,453 per year	Supervision (40% of WTE) provided by Agenda for Change band 8 plus a day to day coordinator (80% of WTE) provided by Agenda for Change band 3.
Management, administration and estates staff	£16,990 per year	Includes estates and indirect care staff which are assumed to be approximately 5 per cent of direct care salary costs.
Non-staff	£141,066 per year	Non-staff costs were 41.97 per cent of direct care salary costs. They include costs to the provider for office, travel/transport and telephone, education and training, supplies and services (clinical and general), as well as utilities such as water, gas and electricity.
F. Capital overheads	£3,687 per year	Based on the new-build and land requirements of NHS facilities. ^{6,7} It is assumed that each HCA uses one-sixth of an office. Six HCAs are on duty at any one time. Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
H. Travel	£121,512 per year	£12 per visit. Based on the average number of visits per patient in 2012 (16.6).
Caseload	610 per year	
Hours and length		The service is available 24/7.
of service		
Ratio of indirect		No estimates available for percentage of service time spent with patients.
ime to direct time		Travel time is high given the area covered by the service (approx.20% of total time).
Number of rapid	16.6 per	Based on the average number of visits per patient in 2012 (610). Episodes
response visits	patient	vary according to need. The average number of referrals was 670 (multiple referrals for some people).
Unit costs available 201	3/2014	
		ervice £79; average cost per patient (referral) £1,129 (£1,028).

¹ Butler, C., Holdsworth, L. Coulton, S. & Gage, H. (2012) Evaluation of a hospice rapid response community service: a controlled evaluation, *BMC Palliative Care* 2012, 11:11, doi:10.1186/1472-684X-11-11.

² Butler, C. & Holdsworth, L. (2013) Setting up a new evidence-based hospice-at-home service in England, *International Journal of Palliative Nursing*, 19(7):355-359.

³ The National Survey of Patient Activity Data for Specialist Palliative Care Services (2014) National Survey of Patient Activity Data for Specialist Palliative Care Services, MDS Full Report for the year 2012-2013, Public Health England.

⁴Health & Social Care Information Centre (2014) NHS staff earnings estimates 2014 (not publicly available), Health & Social Care Information Centre, Leeds.

⁵ Audit Commission (2013) NHS summarised accounts 2012-2013, NHS, London.

⁶ Building Cost Information Service (2014) Surveys of tender prices, Royal Institute of Chartered Surveyors, London.

⁷ Land costs researched for PSSRU by the Valuation Office Agency in 2013.

8. Care packages

- 8.1 Community care packages for older people
- 8.2 Social care support for older people, people with intellectual disabilities, people with mental health problems and people with physical disabilities
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8.1 Community care packages for older people

8.1.1 Community care package for older person: very low cost

The care package described in this schema is an example of support where the costs to the public purse for health and social support were in the lowest decile in a 2005 home care sample of 365 cases. In this sample, which had 35 per cent of 'intensive' cases with 10 or more home care hours per week compared with 26 per cent in England as a whole, 10 per cent of cases incurred gross public community care costs of less than £50 per week. Care package costs exclude the costs of hospital and any use of care homes for respite care. Social work/care management costs were included only where visits from a social worker during the previous three months were reported by the individual. GP visits data were not collected so estimates based on national data have been added. Costs for all professionals exclude qualifications.

Prior to services being allocated, the service user's needs were assessed and these costs are excluded from these care packages. Information on the Common Assessment Framework (CAF) used for children and families can be found in schema 8.8. All costs have been uprated with the appropriate inflators.

Typical case

Mrs A was an 83-year old widow who lived alone in sheltered accommodation but received help from two people, with most help coming from another family member.

Functional ability

Mrs A had problems with three activities of daily living: using the stairs, getting around outside, and bathing. Her problems stemmed from a previous stroke.

Services	Average weekly cost (2013/2014)	Level of service	Description
Social care Home care	£37	1 hour	Taken from PSS EX1 2012/13, ² the average cost for one hour of local authority home care is £37 (see schema 11.6).
Meals on wheels	£46		Taken from PSS EX1 2012/13, ² the average cost per meal on wheels was £6.60 for the local authority and £5.00 for the independent sector.
Health care GP	£11	11.7 minutes	Surgery visits estimated at once every four weeks based on the <i>General Practitioner Workload Survey</i> , July 2007. ³
Accommodation	£170		Based on the weekly cost of extra care housing. See schema 1.7.
Living expenses	£164		Taken from the Family Expenditure Survey (2013). 4 Based on one retired adult household, mainly dependent on state pensions.
Total weekly cost of health and social care package	£95 £429		Excludes accommodation and living expenses. All costs.

¹ Darton, R., Forder, J., Bebbington, A., Netten, A., Towers, A-M. & Williams, J. (2006) *Analysis to support the development of the Relative Needs Formula for older people*, PSSRU Discussion Paper 2265/3, Personal Social Services Research Unit, University of Kent, Canterbury.

² Health & Social Care Information Centre (2013) *PSS EX1 2012/13*, Health & Social Care Information Centre, Leeds.

³ Information Centre (2007) 2006/07 UK general practice workload survey, Primary Care Statistics, Information Centre, Leeds.

⁴ Office for National Statistics (2013) *Family spending 2013 edition*, Office for National Statistics, London, available at http://data.gov.uk/dataset/family_spending [accessed 10 October 2014].

8.1.2 Community care package for older person: low cost

The care package described in this schema is an example of support where the costs to the public purse for health and social care were in the bottom quartile in a 2005 home care sample of 365 cases. In this sample, which had 35 per cent of 'intensive' cases with 10 or more home care hours per week compared with 26 per cent in England as a whole, 25 per cent of cases incurred gross public community care costs of less than £95 per week. Care package costs exclude the costs of hospital and any use of care homes for respite care. Social work/care management costs were included only where visits from a social worker during the previous three months were reported by the individual. GP visits data were not collected so estimates based on national data have been added. Costs for all professionals exclude qualifications.

Prior to services being allocated, the service user's needs were assessed and these costs are excluded from these care packages. Information on the Common Assessment Framework (CAF) used for children and families can be found in schema 8.8. All costs have been uprated using the appropriate inflators.

Typical case

Mrs B was a 79-year old widow who lived alone but received help from two people, most help being provided by a family member.

Functional ability

Mrs B had problems with three activities of daily living: using the stairs, getting around outside and bathing. Her problems stemmed from arthritic conditions and cardiovascular disease.

Services	Average weekly cost (2013/2014)	Level of service	Description
Social care			
Home care	£148	4 hours per week	Based on 4 hours of local authority-organised home care (see schema 11.6).
Private home care	£45	3 hours per week	Based on 3 hours of independently provided home care (see schema 11.6).
Health care			
Community nurse	£4.80	20 minutes	Community nurse visits once a month (see schema 10.1).
GP	£21	23.4 minutes	Home visits estimated at once every four weeks based on the <i>General Practitioner Workload Survey</i> , July 2007. ²
Accommodation	£90		The national average weekly gross rent for a two- bedroom house in the social housing sector. ³
Living expenses	£164		Taken from the Family Expenditure Survey (2013). ⁴ Based on one retired person household, mainly dependent on state pensions.
Total weekly cost of	£219		Excludes accommodation and living expenses.
health and social care package	£473		All costs.

¹ Darton, R., Forder, J., Bebbington, A., Netten, A., Towers, A-M. & Williams, J. (2006) *Analysis to support the development of the Relative Needs Formula for older people*, PSSRU Discussion Paper 2265/3, Personal Social Services Research Unit, University of Kent, Canterbury.

² Information Centre (2007) 2006/07 UK general practice workload survey, Primary Care Statistics, Information Centre, Leeds.

³ Department for Communities and Local Government (2014) English housing survey headline report 2012-2013, table 3, https://www.gov.uk/government/statistics/english-housing-survey-2012-to-2013-headline-report [accessed 10 November 2014].

Office for National Statistics (2013) Family spending 2013 edition, Office for National Statistics, London, available at http://data.gov.uk/dataset/family_spending [accessed 10 October 2014].

health and social care

package

£698

8.1.3 Community care package for older person: median cost

The care package described in this schema illustrates the median public sector costs per week for health and social care support in a 2005 home care sample of 365 cases. In this sample there were 35 per cent of 'intensive' cases with 10 or more home care hours per week compared with 26 per cent in England as a whole. Care package costs exclude the costs of hospital and any use of care homes for respite care. Social work/care management costs were included only where visits from a social worker during the previous three months were reported by the individual. GP visits data were not collected so estimates based on national data have been added. Costs for all professionals exclude qualifications.

Prior to services being allocated, the service user's needs were assessed and these costs are excluded from these care packages. Information on the Common Assessment Framework (CAF) used for children and families can be found in schema 8.8. All costs have been uprated using the appropriate inflators.

Typical case Mrs C was an 80-year old widow living with two other relatives. **Functional ability** Mrs C had problems with four activities of daily living: using the stairs, getting around outside, dressing and bathing. Level of service **Services** Average weekly Description cost (2013/2014) **Social care** £370 10 hours per Based on the cost of local authority-organised home Home care week care (see schema 11.6). **Health care** GP 11.7 minutes Surgery visits estimated at once every four weeks £11 based on the General Practitioner Workload Survey, July 2007.2 Accommodation £164 Based on the mean weekly rent paid by private renters.3 Living expenses £164 Living expenses taken from the Family Expenditure Survey (2013). Based on one-person retired household mainly dependent on state pensions. Total weekly cost of £370 Excludes accommodation and living expenses.

All costs.

¹ Darton, R., Forder, J., Bebbington, A., Netten, A., Towers, A-M. & Williams, J. (2006) *Analysis to support the development of the Relative Needs Formula for older people*, PSSRU Discussion Paper 2265/3, Personal Social Services Research Unit, University of Kent, Canterbury.

² Information Centre (2007) 2006/07 UK general practice workload survey, Primary Care Statistics, Information Centre, Leeds.

³ Department for Communities and Local Government (2014) English housing survey headline report 2012-2013, table 3, https://www.gov.uk/government/statistics/english-housing-survey-2012-to-2013-headline-report [accessed 10 November 2014].

Office for National Statistics (2013) Family spending 2013 edition, Office for National Statistics, London, available at http://data.gov.uk/dataset/family_spending [accessed 10 October 2014].

8.1.4 Community care package for older person: high cost

The care package described in this schema is an example of where the costs to the public purse for health and social care support were in the top quartile in a 2005 home care sample of 365 cases. In this sample, which had 35 per cent of 'intensive' cases with 10 or more home care hours per week compared with 26 per cent in England as a whole, 25 per cent of cases incurred gross public community care costs of over £283 per week. Care package costs exclude the costs of hospital and any use of care homes for respite care. Social work/care management costs were included only where visits from a social worker during the previous three months were reported by the individual. GP visits data were not collected so estimates based on national data have been added. Costs for all professionals exclude qualifications.

Prior to services being allocated, the service user's needs were assessed and these costs are excluded from these care packages. Information on the Common Assessment Framework (CAF) used for children and families can be found in schema 8.8. All costs have been uprated using the appropriate inflators.

Typical case

Mr D was a 79 year old widower who owned his own home and lived with two other friends. One of these friends provided him with help.

Functional ability

Mr D had problems with seven activities of daily living: using the stairs, getting around outside and inside the house, using the toilet, transferring between chair and bed, dressing and bathing. His problems stemmed from arthritic conditions and a previous stroke.

Services	Average weekly cost (2013/2014)	Level of service	Description
Social care			
Home care	£370	10 hours per week	Based on local authority-organised home care (see schema 11.6).
Day care	£56		Attended a day centre about once a week (see schema 1.4).
Private home care	£358	24 hours per week	Based on PSS EX1 2012/13 data on independently provided home care (see schema 11.6).
Health care			
Community nurse	£19	20 minutes	Once a week visit from a community nurse (see schema 10.1).
ОТ	£62		Two visits were made by the OT (see schema 9.2).
GP	£11	11.7 minutes	Visits (surgery) estimated at once every four weeks based on the <i>General Practitioner Workload Survey</i> , July 2007. ²
Accommodation	£67		Based on the average weekly mortgage payment paid by owner occupiers. ³
Living expenses	£213		Living expenses taken from the <i>Family Expenditure</i> Survey (2013). ⁴ Based on two adult retired households not mainly dependent on state pensions.
Total weekly cost of health and social care	£877		Excludes accommodation and living expenses and privately purchased home care.
package	£1,157		All costs

¹ Darton, R., Forder, J., Bebbington, A., Netten, A., Towers, A-M. & Williams, J. (2006) *Analysis to support the development of the Relative Needs Formula for older people*, PSSRU Discussion Paper 2265/3, Personal Social Services Research Unit, University of Kent, Canterbury.

² Information Centre (2007) 2006/07 UK general practice workload survey, Primary Care Statistics, Information Centre, Leeds.

³ English housing survey headline report 2012-2013: tables http://www.gov.uk/government/statistics/english-housing-survey-2012-to-2013-headline-report [accessed 13 November 2014]

Office for National Statistics (2013) Family spending 2013 edition, Office for National Statistics, London, available at http://data.gov.uk/dataset/family_spending [accessed 10 October 2014].

8.1.5 Community care package for older person: very high cost

The care package costs described in this schema is an example of support where the costs to the public purse for health and social care support were in the top decile in a 2005 home care sample of 365 cases. In this sample, which had 35 per cent of 'intensive' cases with ten or more home care hours per week compared with 26 per cent in England as a whole, ten per cent of cases incurred gross public community care costs of over £390 per week. Care package costs exclude the costs of hospital and any use of care homes for respite care. Social work/care management costs were included only where visits from a social worker during the previous three months were reported by the individual. GP visits data were not collected so estimates based on national data have been added. Costs for all professionals exclude qualifications.

Prior to services being allocated, the service user's needs were assessed and these costs are excluded from these care packages. Information on the Common Assessment Framework (CAF) used for children and families can be found in schema 8.8. All costs have been uprated using the appropriate inflators.

Typical case

Mrs E was an 82 year old woman who was married and lived with her husband and another relative in her own home. Her husband provided most support.

Functional ability

Mrs E suffered from dementia and needed help with nine activities of daily living: stairs, getting around outside and inside the house, using the toilet, transferring between chair and bed, dressing, bathing, washing and feeding.

Services	Average weekly	Level of service	Description
	cost (2013/2014)	Service	
Social care			
Home care	£1,111	30 hours per week	Based on the cost of local authority-organised home care (see schema 11.6).
Health care			
Community nurse	£19	20 mins	One visit a week from a community nurse (see schema 10.1).
GP	£11	11.7 mins	Visits (surgery) estimated at once every four weeks based on the <i>General Practitioner Workload Survey</i> , July 2007. ²
Accommodation	£46		Based on the annuitised value of all houses shared between three people. Taken from the Halifax Price Index, August 2014. ³
Living expenses	£213		Living expenses taken from the <i>Family Expenditure</i> Survey (2013). Based on one-person retired household, not mainly dependent on state pension.
Total weekly cost of	£1,141		Excludes accommodation and living expenses.
health and social care package	£1,401		All costs.

¹ Darton, R., Forder, J., Bebbington, A., Netten, A., Towers, A-M. & Williams, J. (2006) *Analysis to support the development of the Relative Needs Formula for older people*, PSSRU Discussion Paper 2265/3, Personal Social Services Research Unit, University of Kent, Canterbury.

² Information Centre (2007) 2006/07 UK general practice workload survey, Primary Care Statistics, Information Centre, Leeds.

³ Lloyds Banking Group (2013) *Halifax house price index*, http://www.lloydsbankinggroup.com/media/pdfs/halifax/2013/060913_HPI.pdf [accessed 14 October 2013].

⁴ Office for National Statistics (2013) Family spending 2013 edition, Office for National Statistics, London, available at http://data.gov.uk/dataset/family_spending [accessed 10 October 2014].

8.2 Social care support for older people, people with learning disabilities, people with mental health problems and people with physical disabilities

The care packages described in the following schemas (8.2.1-8.2.4) are drawn from the National Evaluation of the Individual Budgets Pilot Projects (IBSEN). This study collected information on the social care service use of 1001 people across four client groups: older people, people with learning disabilities, people with mental health problems, and people with physical disabilities. For the study, the service users' needs were categorised as critical, substantial or moderate, and information was collected on a pre-specified set of services: the type of accommodation in which they usually lived, the number of hours of home care and day care received each week, and the social security benefits they received. The services were costed using information contained in this volume where possible (see details below); otherwise they have been taken from the Personal Social Services Expenditure return (PSS EX1, 2011/2012)² and uprated using the PSS pay & prices inflator. As no information was available on whether the services had been provided by the local authority or private organisations, we have used the weighted average price.

Home care: The cost per hour for a home care worker is £24 (face-to-face) (see schema 11.6). As the PSS EX1 return does not distinguish between client groups for home care, the cost of home care for adults and older people has been used for all client groups. This cost is likely to be an under-estimate for certain client groups.

Day care: To arrive at a cost per day care attendance, assumptions have to be made about the number of times service users attend per week. New research (see preface for information) suggests that older people attend on average 2.49 times per week, people with mental health problems attend on average 2.88 times per week, people with physical disabilities attend on average 2.65 times per week, and that people with learning disabilities attend four times per week. Based on these assumptions, the mean cost per client attendance for older people is £56 per week, and for people with mental health problems (local authority and independent provision) is £38. For people with learning disabilities the mean cost is £76 per session and for people with physical disabilities the mean cost of a day care session is £79.

Benefit receipt: All benefit receipt was costed using information taken from the Department for Work and Pensions (DWP)³ and summed to provide a total for each service user. Benefits included long-term incapacity benefit (£101.35 per week), severe disability benefit (£58.20 per week), disability (mobility) benefit (£55.25 per week), disability care allowance (£53 per week), attendance allowance (lower/higher rate, £53/£79.15 per week), carer's allowance (£59.75 per week) and housing benefit (£71.70 per week).

Accommodation: Information was available on whether the service user lived in a registered care home, sheltered accommodation, supported living, flats, private accommodation or rented accommodation; whether the service user lived alone or in shared accommodation; and the number of bedrooms in the accommodation. No information is available on whether the service user lived in accommodation provided by the local authority or private organisations. We have taken the lower-cost assumption that the accommodation was provided by a private sector organisation. For each client group, the appropriate cost was taken from this volume or other national sources such as Rentright (http://www.rent-right.co.uk/), a website which provides the average rental costs for England for each month, or the Halifax Price Index which provides average prices for privately-owned accommodation in England. Sometimes judgements were made about the type of accommodation according to the level of need of the service user. For example, for people with physical disabilities, where a care home was specified, it was assumed that this was a high dependency care home (see schema 5.1 of last year's volume). Similarly, when a 'flat' was specified and the level of need was 'critical' or 'substantial, the cost of special needs flats were applied (see schema 5.3 of the 2012 volume). When the accommodation type was 'supported living', when the level of need was 'critical', it was assumed that this also was a care home; otherwise the cost of 'extra care housing' was used. Costs for residential care and supported living for all client groups were taken from the relevant sections of this volume.

¹ Glendinning, C., Challis, D., Fernandez, J., Jacobs, S., Jones, K., Knapp, M., Manthorpe, J., Moran, N., Netten, A., Stevens, M. & Wilberforce, M. (2008) Evaluation of the individual budgets pilot programme: Final Report, Social Policy Research Unit, University of York, York.

² Health & Social Care Information Centre (2013) *PSS EX1 2012/13*, Health & Social Care Information Centre, Leeds.

³ See: http://www.payingforcare.org/types-of-state-and-local-authority-support [accessed 10 October 2014].

8.2.1 Social care support for older people

In the IBSEN study, 281 people were aged over 65 (28% of the whole sample): 39 had critical needs, 171 had substantial needs and 71 moderate needs. The average total cost for the whole sample was £282 per week, with 10 per cent incurring costs of less than £125 and 10 per cent more than £562.

Service/need group	Average weekly costs (2013/2014)	Number of users	Description
Home care	, , ,		
Critical	£297	18 users	Forty-two per cent of the sample of older people reported
Substantial	£154	74 users	the use of home care. The average weekly cost for critical needs users was £297 compared to £157 for those with
Moderate	£157	26 users	moderate needs. The average weekly cost for all 118
Average/total	£176	118 users	service users was £176 (9 hours per week).
Day care			
Critical	£132	4 users	Twelve per cent of the older participants reported the use
Substantial	£85	24 users	of day care. The average weekly cost for all 35 users was £71.
Moderate	£69	7 users	
Average/total	£71	35 users	
Benefits			
Critical	£123	15 users	Thirty-seven per cent reported receiving benefits. In total,
Substantial	£85	66 users	the cost of benefits received by critical service users was £123 compared to £95 for moderate service users. The
Moderate	£95	24 users	total average weekly cost for all 105 users was £93.1
Average/total	£93	105 users	
Accommodation			
Critical	£167	39 users	The cost of accommodation for those with moderate needs
Substantial	£138	171 users	was 6 per cent higher than those with critical needs. The average weekly cost for accommodation was £165.
Moderate	£177	71 users	,
Average/total	£165	281 users	
Total costs			
Critical	£384	39 users	The average weekly cost for all service users was £282.
Substantial	£265	171 users	Support costs for critical service users were 33 per cent higher than costs for moderate service users.
Moderate	£287	71 users	0 1 1120 2222 221 222.246 221.1132 222.31
Average/total	£282	281 users	

¹ Benefits in this volume last year were for 2013/14 and therefore remain unchanged.

8.2.2 Social care support for people with learning disabilities

In the IBSEN study, 260 people had learning disabilities (26% of the whole sample): 76 had critical needs, 159 had substantial needs and 25 moderate needs. The average cost for this sample was £318 per week, with 10 per cent incurring costs of less than £182 and 10 per cent more than £473.

Service/need group	Average weekly costs (2013/2014)	Number of users	Description
Home care			
Critical	£394	28 users	Forty-six per cent of the sample of people with learning
Substantial	£387	47 users	disabilities reported the use of home care. Of those, the average weekly cost for critical users was £394 compared
Moderate	£274	2 users	to £274 for those with moderate needs. The average
Average/total	£387	77 users	weekly cost for all 77 service users was £387.
Day care			
Critical	£330	18 users	Twenty-eight per cent of the whole sample of people
Substantial	£48	51 users	with learning disabilities reported the use of day care. The average weekly cost was £53 across the 72 users.
Moderate	£35	3 users	,
Average/total	£53	72 users	
Benefits			
Critical	£140	68 users	Seventy-seven per cent reported receiving benefits. In
Substantial	£138	119 users	total, the value of benefits received by critical service users was £140 compared to £146 for moderate service
Moderate	£146	12 users	users. The total average weekly cost for all 199 users was
Average/total	£139	199 users	1139.
Accommodation			
Critical	£183	76 users	The cost of accommodation for those with critical needs
Substantial	£158	159 users	was £183 compared to the cost of those with moderate needs of £66. The average weekly cost for the whole
Moderate	£66	25 users	sample of people with learning disabilities was £157.
Average/total	£157	260 users	
Total costs			
Critical	£393	76 users	The average weekly cost for all service users was £318.
Substantial	£307	159 users	Support costs for critical users were 28 per cent higher than costs for moderate service users.
Moderate	£169	25 users	
Average/total	£318	260 users	

¹ Benefits in this volume last year were for 2013/14 and therefore remain unchanged.

8.2.3 Social care support for people with mental health problems

In the IBSEN study, 143 people had mental health problems (14% of the whole sample): 22 had critical needs, 96 had substantial needs and 25 moderate needs. The average cost for these 143 people was £457 per week, with 10 per cent incurring costs of less than £194 and 10 per cent incurring costs of more than £503 per week.

Service/need group	Average weekly costs (2013/2014)	Number of users	Description
Home care			
Critical	£103	4 users	Seven per cent of people with mental health problems
Substantial	£253	5 users	were receiving home care. The average weekly cost for critical users was £103 compared to £78 for moderate
Moderate	£78	1 user	users. The average weekly cost for all 10 service users
Average/total	£176	10 users	was £176.
Day care			
Critical	£68	5 users	Fourteen per cent of people with mental health problems
Substantial	£71	13 users	were receiving day care. The average weekly cost was £70 across all users of day care.
Moderate	£65	2 users	,
Average/total	£70	20 users	
Benefits			
Critical	£144	17 users	Seventy-seven per cent service users were receiving
Substantial	£156	73 users	benefits. In total, the value of benefits received by critical service users was £144 compared to £111 for moderate
Moderate	£111	20 users	service users. The total average weekly cost for all 110
Average/total	£145	110 users	users was £145. ¹
Accommodation			
Critical	£197	22 users	The cost of accommodation for those with critical needs
Substantial	£210	96 users	was £197 compared to the cost of those with moderate needs of £170. The average weekly cost across all users
Moderate	£170	25 users	was £198.
Average/total	£198	143 users	
Total costs			
Critical	£327	22 users	The average weekly cost for all service users was £457.
Substantial	£535	96 users	Support costs for critical users were 22 per cent higher than costs for moderate service users.
Moderate	£267	25 users	
Average/total	£457	143 users	

¹ Benefits in this volume last year were for 2013/14 and therefore remain unchanged.

8.2.4 Social care support for people with physical disabilities

In the IBSEN study, 317 people had physical disabilities (32% of the whole sample): 52 had critical needs, 245 had substantial needs and 20 moderate needs. The average cost for this group was £687 per week, with 10 per cent of service users incurring costs of less than £261 and 10 per cent more than £1,089.

Service/need group	Average weekly costs (2013/2014)	Number of users	Description
Home care	, , ,		
Critical	£379	31 users	Fifty-six per cent of the total sample of people with
Substantial	£280	136 users	physical disabilities received home care. The average weekly cost for users with critical needs was £379
Moderate	£125	9 users	compared to £125 for those with moderate needs. The
Average/total	£289	176 users	average weekly cost for all users of home care (176 people) was £289.
Day care			
Critical	£158	8 users	Twelve per cent of the people with physical disabilities
Substantial	£166	27 users	were receiving day care. The value of day care received by moderate users was 56 per cent higher than critical
Moderate	£246	2 users	users. The average weekly cost was £169 for all 37 users
Average/total	£169	37 users	of day care.
Benefits			
Critical	£129	72 users	Ninety-four per cent of service users were receiving
Substantial	£175	230 users	benefits. In total, the cost of benefits received by critical service users was £129 per week compared to £175 for
Moderate	£165	17 users	moderate service users. The total average weekly cost for
Average/total	£175	297 users	all 297 service users was £175. ¹
Accommodation			
Critical	£757	52 users	The average weekly cost of accommodation for those
Substantial	£238	245 users	with critical needs was £757 compared to £238 for those with moderate needs. The average weekly cost was £323.
Moderate	£238	20 users	, , , , , , , , , , , , , , , , , , , ,
Average/total	£323	317 users	
Total costs			
Critical	£1,223	52 users	The average weekly care package cost for all service users
Substantial	£586	245 users	was £687 per week. Support costs for critical users were 260 per cent higher than costs for moderate service
Moderate	£470	20 users	users.
Average/total	£687	317 users	

¹ Benefits in this volume last year were for 2013/14 and therefore remain unchanged.

8.3 Health care support received by people with mental health problems, older people (over 75) and other service users

Information for this schema has been drawn from the *Evaluation of the Personal Health Budget Pilot Programme*¹ and provides information on the health service use of participants in the year before the study started. The information provided in the schema below shows the total mean annual cost of health care received by all service users, which includes people with chronic obstructive pulmonary disease, diabetes, long-term neurological conditions, mental health, stroke and patients eligible for NHS Continuing Healthcare. It also provides this information separately for people with mental health problems and people over 75 with one of the above health conditions.

The information was collected in 2009 and has been uprated using the appropriate inflators.

Health services received	Total mean annual	Number of	Range of costs
	cost (2013/2014)	patients	
All service users			
Nursing and therapy	£217	1278	£0-£14,053
Primary care	£855	2028	£0-£10,595
Inpatient care	£4,072	1771	£0-£107,169
Outpatient and A&E	£967	1772	£0-£11,995
People with mental health problems			
Nursing and therapy	£156	180	£0-£3,851
Primary care	£548	344	£0-£2,400
Inpatient care	£4,330	358	£0-£107,169
Outpatient and A&E	£826	358	£0-£6,614
People over 75			
Nursing and therapy	£185	226	£0-£4,005
Primary care	£1,094	345	£0-£13,473
Inpatient care	£5,956	275	£0-£76,904
Outpatient and A&E	£1,038	275	£0-£6,910

¹ Forder, J., Jones, K., Glendinning, C., Caiels, J., Welch, E., Baxter, K., Davidson, J., Windle, K., Irvine, A., King, D. & Dolan, P. (2012) Evaluation of the personal health budget pilot programme, Department of Health, London.

8.4 Adults with learning disabilities - care packages

These care packages (8.4.1 and 8.4.2) draw on research carried out by Laing & Buisson¹ and commissioned by the Department of Health. They provide illustrative cost models in learning disabilities social care provision, first for residential care homes and then for supported living schemes.

8.4.1 Residential care homes

The schema below provides examples of high-specification care homes in the South East of England, one with 4 bedrooms and one with 8 bedrooms. Twenty four-hour support is provided in both houses; they are well equipped and include en suites with bath or shower rooms and good communal spaces. The average fee paid for a place in the 4-bedroom house is £1,600 per week and is £1,450 for a place in the 8-bedroom house.

Costs and unit	2013/2014			
estimation	4-bed	Notes	8-bed	Notes
	house	Notes	house	Notes
Staff costs				
Salaries	£211,035	Based on approximately 7.5 WTE staff providing 257 hours of support per week plus 1 waking night staff member and an additional sleep-in support staff member. There is also a full-time manager earning £28,345 per year.	£305,639	Based on approximately 12.4 WTE staff providing 427 hours of support per week plus 1 waking night staff member (2 additional WTEs to cover the full week). There is also a full-time manager earning £35,431 per year plus one additional deputy manager.
Training	£6,317		£6,843	
Staff overheads	£7,264		£21,478	
Capital costs				
Building	£22,211	The purchase price of the building was £553,914. This has been annuitised over 60 years at 3.5 per cent	£31,097	The purchase price of the building was £775,479. This has been annuitised over 60 years at 3.5 per cent
Equipment	£8,885	Major adaptations cost £221,565. This amount has been annuitised over 60 years at 3.5 per cent	£17770	Major adaptations cost £443,131. This amount has been annuitised over 60 years at 3.5 per cent
Living expenses				
Personal living expenses	£25,644	Living expenses per person per week cover £46 food, £46 travel, £23 service user activities and £6 for holidays.	£46,402	Living expenses per person per week cover £47 food, £47 travel, £23 service user activities and £6 for holidays.
Utilities	£7,327		£14,653	
Direct overheads				
Maintenance/ service	£28,574	Includes the costs of boiler and other equipment maintenance, cleaning materials, maintenance staff costs and damages and breakages.	£47,379	Includes the costs of boiler and other equipment maintenance, cleaning materials, maintenance staff costs and damages and breakages.
Indirect overheads				
Head office costs	£18,424	Head office costs are charged at £88 per person per week, on the basis of full occupancy.	£36,849	Head office costs are charged at £89 per person per week, on the basis of full occupancy.
Total cost per year	£335,682		£528,111	
Total cost per person per year	£83,920		£66,014	
Total cost per person per week	£1,608		£1,265	

¹ Laing & Buisson (2011) Illustrative cost models in learning disabilities social care provision, Department of Health, London.

8.4.2 Supported living homes

The weekly unit costs per service user for both homes in this schema are similar. Both homes support service users with, on average, the same level of needs for support hours, although there are some offsetting differences: in particular, staff costs are higher at the two-bedded home but the manager costs are lower, reflecting input of only five hours a week for both services (i.e. 2.5 hours per service user).¹

Costs and unit estimation (2013/2014)	This example is of a two-be home in the North West of budgeted costs (average of	England, using	This example is of a three-bedded suppo living home in the North West of England budgeted costs (average of 85.7 hours of support)		
Income	Per person fee/cost per week (including	2 residents Total per year	Per person fee/cost per week (including	3 residents Total per year	
INCOME	oncosts)		oncosts)		
Fees	£924	£96,116	£924	£144,175	
COSTS	1324	130,110	1324	1144,173	
Direct staff costs					
Senior support					
staff	£216	£22,562	£272	£42,553	
Support staff	£370	£38,594	£301	£47,006	
Sub-total	£586	£61,157	£573	£89,558	
Waking nights					
Sleep-in	£112	£11,169	£71	£11,169	
Manager	£40	£4,051	£92	£14,427	
Sub-total	£152	£15,220	£163	£25,596	
Recruitment	£5	£511	£5	£740	
Training	£12	£1,326	£12	£2,040	
Other staff	£16	£1,700	£19	£2,989	
overheads	110	11,700	119	12,363	
Total staff	£772	£79,914	£773	£120,924	
support costs	E//Z	E/3,314	1//3	1120,324	
Management					
costs-area,	£126	£13,173	£127	£19,945	
division, central					

¹ Laing & Buisson (2011) *Illustrative cost models in learning disabilities social care provision*, Department of Health, London.

8.5 Support for children and adults with autism

There is growing evidence on the economic burden of autism spectrum disorders (ASD). Autism has life-time consequences with a range of impacts on the health, economic well-being, social integration and quality of life of individuals with the disorder, their families, and potentially the rest of society. Many of those impacts can be expressed as economic costs.

Interventions and services currently used to treat or support children and adults with ASD include those provided by medical practitioners, nurses, dietitians, psychologists, speech and language therapists, teachers and various providers of complementary and alternative medicine, such as music therapy, aromatherapy, homeopathic remedies, naturopathic remedies, manipulative body therapies and spiritual healing. These treatments, services and supports impose costs to the state, the voluntary sector or to the families of people with ASD who have to pay for them from their own pockets.

Here we present cost information taken from two research studies. The first focuses on pre-school children and provides the service and wider societal costs in the UK. It looked at the services received by 152 pre-school children with autism, reported family out-of-pocket expenses and productivity losses, and explored the relationship between family characteristics and costs.

Service use data were collected using a modified version of the Child and Adolescent Service Use Schedule (CA-SUS) asking about the use of specialist accommodation such as foster and respite care, education or day care facilities attended, all medication prescribed for the individual child, all hospital contacts, and all community health, education and social care services, including non-statutory provision. School-based services were not recorded separately to avoid double-counting costs already included in the overall cost of the education facility, and because parents may not always be aware of their use. In addition, parents were asked to report details of time off work due to their child's illness, and expenditure on any specialist equipment or other extraordinary costs, such as home adaptations, conference or training attendance, and overseas travel that were a direct result of their child's autism. Information from this study is found in 8.5.1.

The second study provides the annual costs for children and adults with low-functioning and high-functioning ASD (i.e. with and without an intellectual disability). The research^{2,3} estimated the full costs of autism spectrum disorders (ASDs) in the United Kingdom drawing on previous research, national surveys, expert advice and supplemented with service use data on 146 children and 91 adults. In the sample of children with autism, ages ranged from 3 to 17, with a mean of 10.28 years (standard deviation 3.17) and a median age of 10. The purpose of the study was to examine the service, family and other economic consequences of autism in the UK for children and adults with ASD. See schemas 8.5.2 to 8.5.4 for costs from this study.

¹ Barrett, B., Byford, S., Sharac, J., Hudry, K., Leadbitter, K., Temple, K., Aldred, C., Slonims, V., Green, J. & the PACT Consortium (2012) Service and wider societal costs of very young children with autism, *Journal of Autism and Developmental Disorders*, 42, 5, 797-804.

² Knapp, M., Romeo, R. & Beecham, J. (2007) *The economic consequences of autism in the UK*, Report to the Foundation for People with Learning Disabilities. London.

³ Knapp, M., Romeo, R. & Beecham, J. (2009) Economic cost of autism in the UK, *Autism*, 13, 3, May, 317-336.

8.5.1 Children with autism (pre-school)

Information for this schema has been taken from Barrett et al. (2012). All costs were originally estimated at 2006/2007 prices and have therefore been uprated to 2013/2014 using the appropriate inflators.

This schema reports the service and wider societal costs for the six months prior to interview for pre-school children with autism. The mean total service costs were £2,878, equivalent to £480 per month and over £5,756 per year. Almost half the costs (44%) were for education and childcare, 41 per cent were for community health and social services, and 12 per cent for hospital services. Total costs varied substantially between the children in the study (range £351 to £7,422 over six months). Box 1 below presents case studies of low- and high-cost cases.

On average, families spent an additional £293 as a result of their child's illness over the six months prior to interview (range £0 to £4,319). Fifty-one per cent of families reported taking some time off work due to their child's illness over the six months, associated with productivity losses of £305 per family. Total costs including all services, family costs and productivity losses were estimated at over £3,475 over six months, equivalent to over £579 per month.

Total costs per child for the six months prior to interview (£, n=152)

	Mean	SD	Total service	Total cost
			cost	%
			%	
Accommodation	£18	£223	0.62	0.51
Hospital-based health services	£350	£513	12.16	10.07
Community health and social services	£1,181	£990	41.04	33.99
Medication	£19	£95	0.66	0.55
Voluntary sector services	£33	£91	1.16	0.96
Education and child care	£1,277	£913	44.36	36.73
Total service costs	£2,878	£1,382	100.00	82.81
Out-of-pocket expenses	£293	£620		8.42
Productivity losses	£305	£666		8.77
Total costs (2013/2014)	£3,475	£1,851		100.00

Box 1 Case studies of high and low cost cases

High cost — £7,422 over six months

Child H attends a mainstream nursery part-time and a specialist playgroup one day a week. He spent three nights in hospital following a grommet operation, and had two outpatient appointments with the ear, nose and throat specialist before and after the operation. Child H had monthly visits to his GP, regular contact with the practice nurse and his health visitor, and weekly contacts with a speech and language therapist at the local health centre. In addition, he had contact with a community paediatrician and a portage worker.

Low cost — £351 over six months

Child I does not attend any formal education or childcare, spending all his time at home with his mother. He had one visit to a paediatrician at the local hospital, but did not have any other hospital contacts or use any services in the community.

¹ Barrett, B., Byford, S., Sharac, J., Hudry, K., Leadbitter, K., Temple, K., Aldred, C., Slonims, V., Green, J. & the PACT consortium (2012) Service and wider societal costs of very young children with autism, *Journal of Autism and Developmental Disorders*, 42, 5, 797-804.

8.5.2 Children with low-functioning autism (ages 0-17)

The research carried out by Knapp et al. (2007, 2009)^{1,2} estimated the full costs of autism spectrum disorders (ASDs) in the United Kingdom. Costs estimated for children used a combination of routinely collected and research data and a pooled dataset of 146 children.

The schema below summarises the average cost per child with low-functioning ASD, whether living with their families or living in a residential or foster care placement. Costs are organised under a number of different service and support headings. Family expenses were also included and, where appropriate, costs were imputed for the lost employment of parents. The schema distinguishes children in three different age groups. For the two older age groups, the largest contributors to these totals are the care placements themselves, and special education. The authors noted that, given the availability of data, residential special school costs may have been under- estimated.

Average annual cost per child with low-functioning ASD

	Living in residential or foster care placement		Living in private households with family			
	Ages 0-3	Ages 4-11	Ages 12-17	Ages 0-3	Ages 4-11	Ages 12-17
Residential/foster care placement	£17,705	£25,495	£36,236	-	-	-
Hospital services	-	£978	£1,801	-	£978	£1,801
Other health and social services	£664	£7,840	£454	£664	£7,840	£454
Respite care	-	-	-	-	£3,207	£4,181
Special education	-	£10,375	£31,334	-	£10,375	£31,334
Education support	-	£1,344	£1,132	-	£1,344	£1,132
Treatments	-	£20	£17	-	£20	£17
Help from voluntary organisations	-	-	-	-	£957	£109
Benefits	-	-	-	£4,264	£4,540	£4,540
Lost employment (parents)	-	-	-	-	£2,367	£2,367
Total annual cost (excluding benefits)	£18,369	£46,053	£70,973	£664	£27,089	£41,395
Total annual cost (including benefits)	£18,369	£46,053	£70,973	£4,928	£31,629	£45,935

Note: Expenditure on social security/welfare benefits could partly double-count the costs of lost employment for parents, which is why two totals are provided above.

¹ Knapp, M., Romeo, R. & Beecham, J. (2007) *The economic consequences of autism in the UK*, Report to the Foundation for People with Learning Disabilities. London.

² Knapp, M., Romeo, R. & Beecham, J. (2009) Economic cost of autism in the UK, Autism, 13, 3, May, 317-336.

8.5.3 Children with high-functioning autism (ages 0-17)

The research carried out by Knapp et al. (2007, 2009)^{1,2} estimated the full costs of autism spectrum disorders (ASDs) in the United Kingdom.

As in schema 8.3.2, the schema below distinguishes costs under a number of different service and support headings. The study assumed that all children with high-functioning ASD live with their parents.

Average annual cost per child with high functioning ASD

	Living in private household with family			
	Ages 0-3	Ages 4-11	Ages 12-17	
Hospital services	-	£882	£882	
Other health and social services	£1,378	£1,378	£1,378	
Respite care	-	£7,388	£7,388	
Special education	-	£13,256	£13,256	
Education support	-	£619	£619	
Treatments	-	£168	£168	
Help from voluntary organisations	-	-	-	
Benefits	£532	£532	£532	
Lost employment (parents)	-	£245	£245	
Total annual cost (excluding benefits)	£1,378	£23,936	£23,936	
Total annual cost (including benefits)	£1,910	£24,468	£24,468	

Notes

The costs for children aged 4-11 and aged 12-17 are the same.

Expenditure on social security/welfare benefits could partly double-count the costs of lost employment for parents, which is why two totals are provided above.

¹ Knapp, M., Romeo, R. & Beecham, J. (2007) *The economic consequences of autism in the UK*, Report to the Foundation for People with Learning Disabilities, London.

² Knapp, M., Romeo, R. & Beecham, J. (2009) Economic cost of autism in the UK, *Autism*, 13, 3, May, 317-336.

8.5.4 Adults with autism

The research carried out by Knapp et al. (2007, 2009)^{1,2} estimated the full costs of autism spectrum disorders (ASDs) in the United Kingdom. The estimated annual costs for adults with high-and low-functioning ASD are presented below and were calculated from routinely-collected and research data and a pooled dataset of 185 individuals. Imputed costs for lost employment are included for both the individuals with ASD and for parents, where these are appropriate. Costs are arranged by place of residence.

A sizeable part (59%) of costs for an adult with high-functioning ASD living in a private household (with or without family) is the imputed cost of lost employment (and hence also lost productivity to the economy. Part of that (not separately identified here) would be lost tax revenue to the Exchequer. Costs for high-functioning adults in supported living settings or care homes are much higher (£96,843 and £99,921 per year respectively) and the proportion attributable to lost employment is lower. The largest cost element in each case is for accommodation, and includes the costs of staff employed in those settings or supporting the residents.

Average annual cost per adult with ASD

	Adults with high-functioning ASD		Adults with low-functioning ASD				
	Private	Supporting	Residential	Private	Supporting	Residential	Hospital
	household	people	care	household	people	care	
Accommodation	£1,689	£66,985	£70,063	-	£66,985	£70,063	-
Hospital	£882	£882	£882	£99	£170	£39	£85,664
services							
Other health	£552	£552	£552	£802	£531	£657	-
and social							
services							
Respite care	-	-	-	£1,743	-	-	-
Day services	£2,526	£2,526	£2,526	£4,258	£4,112	£941	-
Adult education	£3,275	£3,275	£3,275	£1,629	£966	£3,763	-
Employment	-	-	-	£572	£1,240	-	-
support							
Treatments	£168	£168	£168	£70	£70	£70	-
Family expenses	£2,146	-	-	£2,471	-	-	-
Lost	£4,181	-	-	£4,181	-	-	-
employment							
(parents)							
Sub-total	£15,419	£74,388	£77,466	£15,825	£74,075	£75,534	£85,664
Lost	£22,454	£22,454	£22,454	£25,403	£25,403	£25,403	£25,403
employment							
(person with							
ASD)							
Total (excluding	£37,873	£96,843	£99,921	£41,228	£99,478	£100,937	£111,067
benefits)							
Benefits	-	-	-	£7,607	£4,903	£4,903	£1,050
Total (including	£37,873	£96,843	£99,921	£48,836	£104,381	£105,839	£112,117
benefits)							

¹ Knapp, M., Romeo, R. & Beecham, J. (2007) *The economic consequences of autism in the UK*, Report to the Foundation for People with Learning Disabilities, London.

² Knapp, M., Romeo, R. & Beecham, J. (2009) Economic cost of autism in the UK, Autism, 13, 3, May, 317-336.

8.6 Services for children in care

The following schemas present illustrative costs of children in care reflecting a range of circumstances. Information from practitioners and managers, gathered in the course of developing unit costs for social work processes, indicated that some needs — or combinations of them — are likely to have an impact on the cost of placements: disabilities; emotional or behavioural difficulties; and offending behaviour. Unaccompanied asylum-seeking children comprise a further group whose circumstances, rather than their attributes, engender a different pattern of costs. In any population of looked-after children, there will be some children who have none of these additional support needs. Authorities with a higher proportion of children without additional needs will incur lower average costs per looked-after child. However, in reality their overall expenditure on children's services may be greater, for such authorities may place a higher proportion of their whole population of children in need away from home than do those with better-developed family support services.

The study by Ward and colleagues identified different combinations of additional support needs. There were five 'simple' groups of children who display none or one of the attributes expected to affect costs, and six complex groups of children who display two or more additional support needs. In the sample of 478 children, 129 (27%) showed no evidence of additional support needs; 215 (45%) displayed one; 124 (26%) children displayed combinations of two; and a very small group of children (2%) displayed combinations of three or more.

The care package costs for children described in schemas 8.6.1-8.6.4 illustrate an example of the support received by children in some of these groups, taken from the study sample. Costs relate to time periods stated in each schema.

¹ Ward, H., Holmes, L. & Soper, J. (2008) Costs and consequences of placing children in care, Jessica Kingsley, London.

8.6.1 Children in care: low-cost — with no evidence of additional support needs

Child A is a boy aged 14 with no evidence of additional support needs. The schema shows the total cost incurred by social services and other agencies from February 2005 to October 2006, uprated using the PSS pay & prices inflator. Child A became looked after at the age of six, as the result of neglect. A care order was obtained in 2002. Since then he has been placed with the same local authority foster carers, a placement that had lasted eight years by the start of the study. In June 2006, his case was transferred to the leaving care team. Reviews were held at six-monthly intervals and his care plan was updated every six months. He attended six-monthly dental appointments and an annual looked-after child medical. During the time period shown above, this young person attended weekly, hour-long physiotherapy sessions as a result of a neck injury. He completed his statutory schooling in summer 2008 and obtained seven GCSEs. He then progressed to further education to start an A level course.

Child A had a relatively inexpensive placement with local authority foster carers. He incurred some educational costs, in that he attended school, and some health care costs, but there was no exceptional expenditure. Please note that these figures have been rounded. Where appropriate, the original information has been adjusted to take account of Agenda for Change salaries.

Process	Cost to LA	Total	Cost to others	Total
Care planning	£247 x 3	£742	£175 x 3	£526
Maintaining the placement	£824 x 87 weeks	£61,718	£56 x 3	£168
	minus £10,003 ¹			
Review	£638 x 3 + £20 ²	£1,935		
Legal	£8 ³ x 87 weeks	£686	£12.6 ⁴ x 87 weeks	£1,096
Transition to leaving care	£1,903	£1,903		
Cost of services				
Mainstream schooling			£28 ⁵ per day	£7,986
FE college			£27 ⁵ per day	£832
Looked-after child medical			£38 ⁶	£38
Physiotherapy (home visit)			£81 x 87 weeks ⁷	£7,037
Dentist			No current costs	
Total cost over 9 months		£66,984		£17,680

¹ Cost includes payment made for the placement and all activity to support the placement. There is a reduction in cost as a result of reduced activity once the placement has lasted for more than one year.

 $^{^{\}rm 2}$ An additional cost is incurred for the first 16+ review.

³ The cost of obtaining a care order has been divided over the total number of weeks between admission and the child's eighteenth birthday.

⁴ Selwyn, J., Sturgess, W., Quinton, D. & Baxter, C. (2003) *Costs and outcomes of non-infant adoptions*, report to the Department of Health, Hadley Centre for Adoption and Foster Care Studies, University of Bristol.

⁵ Based on the cost of a secondary school place. Calculated by dividing total secondary school expenditure by the total number of pupils on the roll, and by the total number of days of pupil contact (190). Department for Education (2011) Section 251 data archive: Outturn data-detailed level 2008-09 onwards, outturn summary 2011-12, Department for Education, London and table 1A 'All Schools: pupils with statements of special educational needs'

⁶ Based on the unit cost of a surgery consultation with a general practitioner (see table 10.8b).

Department of Health (2014) NHS reference costs 2012-2013, https://www.gov.uk/government/publications/reference-costs-guidance-for-2011-12/[accessed 9 October 2013].

8.6.2 Children in care: median cost — child with emotional or behavioural difficulties

Between February 2005 and April 2006, Child B was placed with local authority foster carers (within the area of the authority). She then moved to another placement with local authority foster carers within the area of the authority. A care order was obtained for this young person when she first became looked after. During the time-frame, three review meetings were held and her care plan was also updated on three occasions. Child B attended mainstream school from December 2005 until June 2006 where she received support from a personal teaching assistant for four hours a week. This young person attended six-monthly dental appointments and also her annual looked-after child medical. Child B also received speech therapy until July 2006. Following a self-harm incident she was taken to the accident and emergency department and was referred to a clinical psychologist and began weekly sessions in April 2005.

Costs to social services are relatively low, largely because she was placed with local authority foster carers within the authority area throughout the study period, and not considered difficult to place. There were relatively high costs to other agencies, designed to meet both her health and educational needs. Please note that these figures have been rounded. Where appropriate, the original information has been adjusted to take account of Agenda for Change salaries.

Process	Cost to LA		Cost to others		
	Unit costs	Total	Unit costs	Total	
Care planning	£247 x 3	£742	£175 x 3	£526	
Maintaining the placement	£721 x 59 weeks minus £36,392 £6,147 ¹		£56 x 3	£168	
Finding subsequent placement	£320	£320			
Review	£638 x 3	£1,915			
Legal	£9.60 ² x 59 weeks	£566	£12.60 ³ x 59	£741	
Cost of services Mainstream schooling Looked-after child medical Speech therapy Clinical psychologist Hospital accident and emergency visit (admitted)			£28 ⁴ per day £38 ⁵ £89 x 60 weeks £137 x 52 weeks £233	£8,559 £38 £5,338 £7,130 £233	
Personal teaching assistant Dentist			£22 (4 hours per week for 25 weeks) ⁶ No current costs	£2,200	
Total cost over 14 months		£39,935		£24,933	

¹ Cost includes payment made for the placement and all activity to support the placement. There is a reduction in cost as a result of reduced activity once the placement has lasted for more than one year.

² The cost of obtaining a care order has been divided over the total number of weeks between admission and the child's eighteenth birthday.

³ Selwyn, J., Sturgess, W., Quinton, D. & Baxter, C. (2003) Costs and outcomes of non-infant adoptions, report to the Department of Health, Hadley Centre for Adoption and Foster Care Studies, University of Bristol.

⁴ Based on the cost of a secondary school place. Calculated by dividing total secondary school expenditure by the total number of pupils on the roll, and by the total number of days of pupil contact (190). Department for Education (2012) Section 251 data archive: Outturn data-detailed level 2008-09 onwards, outturn summary 2011-12, Department for Education, London and table 1A 'All Schools: pupils with statements of special educational needs'.

 $^{^{5}}$ Based on the unit cost of a surgery consultation with a general practitioner (see table 10.8b).

⁶ Based on the average salary of a teaching assistant, http://www.tes.co.uk/article.aspx?storyCode=6168765/ [accessed 22 October 2013].

8.6.3 Children in care: high cost — children with emotional or behavioural difficulties and offending behaviour

Child C was aged 15 at the start of the study. He first became looked after at the age of 11, when his parents needed respite. Prior to the start of the study he was placed in secure accommodation on five separate occasions. He had also been placed in various residential homes, schools and foster placements, many of which had broken down. As a consequence, he had been classified as 'difficult to place'. During the study period (74 weeks), Child C experienced ten different placements. He also refused all statutory medical and dental appointments; furthermore, he refused any mental health support. Child C did not complete his statutory schooling as a result of numerous exclusions and non-attendance. Prior to the start of the study he had a history of offending: this continued throughout the study, with him committing ten further offences. He ceased being looked after in summer 2007 when he refused to return to any placement provided by the local authority.

The costs to social services were relatively high, both because of a number of out-of-authority, residential placements provided by independent sector agencies and due to nine changes of placement. There were substantial costs to other agencies (Youth Offending Team and the Police) as a result of his offending behaviour. No additional health care costs were incurred for this young man because of his refusal to engage in the services offered to him. Please note that these figures have been rounded. Where appropriate, the original information has been adjusted to take account of Agenda for Change salaries.

Process	Cost to LA	Total	Cost to others	Total
Care planning	£247 x 2	£495	£175 x 2	£351
Maintaining the placement	£366,440 ¹	£366,440	£56 x 74 weeks ²	£4,144
Ceased being looked after	£428	£428		
Find subsequent placements	£10,540 ³	£10,540		
Review	£1,915	£1,915	£205 x 2	£410
Cost of services ⁴				
YOT involvement/criminal costs			£1,110 ⁵ x 74 weeks	£82,140
Total cost over 18.5 months		£379,819		£87,045

¹ This cost includes the payment made for the placement and all activity to support the placements. There is an increase in cost in the first three months of a placement due to increased social worker activity.

² Child C ceased being looked after in July 2011, therefore the time period being costed is 74 weeks.

³ Child C experienced nine changes of placement during the timeframe of the study.

⁴There are no additional education costs because these are included in the costs of the placements in process three.

⁵ Liddle, M. (1998) Wasted lives: counting the cost of juvenile offending, National Association for the Care and Resettlement of Offenders (NACRO), London.

8.6.4 Children in care: very high cost — children with disabilities, emotional or behavioural difficulties plus offending behaviour

Child D experienced nine different placements from February 2006 to October 2007. Initially he was placed in an independent sector agency residential unit with education facilities. In March 2006, he was placed with independent sector foster carers, again out of area. He then experienced three further placements, all out of area authority and all provided by independent sector organisations: another residential unit, then another foster placement, then a third residential placement. In September 2006 he was placed overnight in a secure unit within the authority. He then had three independent sector placements: foster carers, a residential unit, and a specialised one-bedded residential unit in December 2006. This placement was also out of the area of the authority. Review meetings were held six-monthly and his care plan was also updated every six months. This young person attended the education provision in two different residential units until summer 2006, when he was permanently excluded. He then started sessions with a home tutor in October 2006. Over the 20 months he attended six-monthly dental appointments and his looked-after child medical. He also attended weekly sessions with a clinical psychologist from October 2006 onwards. In September 2006 he was accused of a criminal offence; the police were involved, but he was not convicted.

These costs are markedly higher than for the majority of other children in the sample. Child D had become difficult to place; and increasing amounts of social work time had to be spent on finding the rare placements that were prepared to accept him. The costs of changing placements were calculated at over £1,000 per move. Please note that these figures have been rounded. Where appropriate, the original information has been adjusted to take account of Agenda for Change salaries.

Process	Cost to LA	Total	Cost to others	Total
Care planning	£150 x 3	£450	£175 x 3	£526
Maintaining the placement	£700,571 plus £1,797 ¹	£702,368		
Finding subsequent placements	£20,759	£20,759	£95 x 8	£783
Review	£1,015 x 3	£3,044	£399 x 3	£1,197
Legal	£5.3 ² x 87 weeks	£461	£6 ³ x 87 weeks	£539
Transition to leaving care	£1,903	£1,903		
Cost of services Home tuition Permanent exclusion Looked-after child medical Clinical psychologist Police costs for criminal offence (police statement and interview) Dentist			No current costs No current costs £38 ⁵ £137 per hour for 52 weeks £325 ⁶ No current costs	£38 £7,130 £325
Total cost over 20 months		£728,985		£10,539

¹ The cost includes the payment made for the placements and all activity to support the placements. There is an increase in cost in the first three months of a placement due to increased social worker activity.

² The cost of obtaining a care order has been divided over the total number of weeks between admission and the child's eighteenth birthday.

³ Selwyn, J., Sturgess, W., Quinton, D. & Baxter, C. (2003) Costs and outcomes of non-infant adoptions, report to the Department of Health, Hadley Centre for Adoption and Foster Care Studies, University of Bristol.

⁴ See Prince's Trust (2007) The cost of exclusion, Prince's Trust, London. http://www.princes-trust.org.uk/PDF/Princes%20Trust%20Research%20Cost%20Of%20Exclusion%20apr07.pdf [accessed 9 October 2013].

⁵ Based on the unit cost of a surgery consultation with a general practitioner (see table 10.8b).

⁶ Bedfordshire Police (2012) 2012/13 Fees and charges handbook, http://www.bedfordshire.police.uk/PDF/bedfordshire_fees_and_charges.pdf [accessed 9 October 2013].

8.7 Services for children in need

The care package costs for children described in the schemas (8.7.1-8.7.4) illustrate examples of the support received by children in need reflecting a range of circumstances. These costs have been drawn from a study undertaken by the Centre for Child and Family Research (CCFR) at Loughborough University in which the costs of key social care processes for children in need have been calculated in four local authorities, including initial and core assessments, children in need reviews, along with ongoing social care activity to support families. The study used a bottom-up costing methodology, which uses social care activity time data as the basis for building up unit costs. The unit costs per hour are based on average salaries for each staff type using national salary scales and applying oncosts and overheads as presented in this volume. The costs provided were for 2008/09 and have been uprated using the appropriate inflators. For social services support received by children in need, see schemas 6.5.1-6.5.4.

8.7.1 Child A - no additional needs

Child A - No additional needs: out of London costs

Child A, a boy aged 11 at the start of the study, was referred to social care in August 2007. Support was offered to his family, who had been assessed as being in need due to 'family dysfunction'. Child A lived with his mother and had no siblings.

Concerns had been raised about the relationship between Child A and his mother, in particular the ability of his mother to deal with his tantrums and use appropriate levels of discipline.

In addition to the ongoing case management provided by the allocated social worker, a family support worker from the social care team had been allocated to the case to undertake some work around discipline and behaviour. A weekly visit was made by the family support worker. This work ceased in December 2008, three months into the data collection period. One Child in Need Review was carried out during the study time period.

Total costs for Child A during the six-month data collection perioda

Social care activity costs (out of Lor	don costs)		
Process Frequency Unit cost		Unit cost	Sub-total
CiN 3 – ongoing support	6 months	£112	£674
CiN 6 – planning and review		£234	£234
Cost of social care case managemen	£907		
Additional services costs (out of Lon	don costs)		
Family support	£35	£353	
Cost of services			£353
Total cost incurred by children's so	£1,261		

^a There was no evidence of additional support services being provided by other agencies during the study timeframe.

¹ Holmes, L. & McDermid, S. (2012) *Understanding costs and outcomes in child welfare services*, Jessica Kingsley, London.

² Beecham, J. (2000) *Unit costs – not exactly child's play: a guide to estimating unit costs for children's social care*, Department of Health, Dartington Social Research Unit and the Personal Social Services Research Unit, University of Kent; Ward, H., Holmes, L. & Soper, J. (2008) *Costs and consequences of placing children in care*, Jessica Kingsley, London.

8.7.2 Child B - no additional needs, aged six and under

Child B - No additional needs, aged six and under: London costs

Child B was referred to social care in June 2008, aged 14 months, due to concerns about her mother's mental health. Although both parents lived at home, Child B's mother was struggling to fulfil her caring duties because of her anxiety and depression. These difficulties were also putting a strain on the parents' relationship. Consequently, Child B was assessed as being in need under Section 17 of the Children Act 1989. The primary need code was recorded as 'family in acute distress' and no additional needs were identified.

During the study time period, the family was in receipt of a number of additional support services. Weekly one-to-one home visits were provided by a mental health social worker from multi-agency early intervention service. A mental health support worker was funded by the Primary Care Trust to address and support Child B's mother. Additional one-to-one support was offered to Child B's mother for an hour each week by the local authority family support team. The family also attended weekly group sessions at the local children's centre. There were two Child in Need reviews during the data-collection period.

Total costs for child B during the six-month data collection perioda

Social care activity costs (London costs)			
Process	Frequency	Unit cost	Sub-total
CiN 3 – ongoing support	6 months	£242	£1,455
CiN 6 – planning and review	2	£268	£565
Cost of social care case management activity	<u> </u> 		£2,020
Additional services costs (London costs)			
Social care services			
Family support	Once a week for 21 weeks ¹	£45	£937
Cost of service care provision	£937		
Services from other agencies			
Children's centre stay and play group provided by Local authority, not social care	Once a week for 21 weeks ²	£15	£336
One-to-one support from mental health social worker provided by the PCT	Once a week for 21 weeks ³	£122	£2,552
Cost of service provision from other provide	£2,888		
Total cost incurred by children's social care f	£2,957		
Total cost incurred for Child B during the 6-n	£5,846		

 $a\ There\ was\ no\ evidence\ of\ additional\ support\ services\ being\ provided\ by\ social\ care\ during\ the\ study\ time frame.$

¹Unit cost based on a one-hour visit and 40 minutes travel time.

² Tidmarsh, J. & Schneider, J. (2005) Typical costs of sure start local programmes, in L. Curtis (ed.) *Unit Costs of Health and Social Care 2005*, Personal Social Services Research Unit, University of Kent, Canterbury.

³ Curtis, L. (2011) *Unit Costs of Health and Social Care 2011*, Personal Social Services Research Unit, University of Kent, Canterbury. (Costs have been uprated to 2013 values.)

8.7.3 Child C - emotional or behavioural difficulties

Child C – Boy with emotional or behavioural difficulties: out of London costs.

Child C was aged 14 at the time of the data collection and had been receiving support as a Child in Need since September 2008, as his family was 'in acute distress'.

Child C's mother had been subject to domestic abuse by her partner and, although he no longer lived in the family home, their relationship had continued to be chaotic. The family had been receiving family therapy, provided by a voluntary agency, twice a month, to help another sibling with obsessive compulsive disorder.

The family's circumstances were reviewed at a Child in Need Review in November 2008. At this review meeting Child C's teacher noted that he had also exhibited symptoms of low self-esteem. His school attendance had been low and his teacher was concerned that this might be a result of his anxieties around socialising with his peers.

The review meeting concluded that the family's situation had not improved and, because of the additional concerns raised by the teacher and social worker, a Core Assessment was recommended. This was carried out in December 2008. Subsequently, Child C was referred to CAMHS for weekly sessions and his mother was offered women's aid support.

Total costs for Child C during the six-month data collection period^a

Social care activity costs (out of London		linit cost	Cub total
Process	Frequency	Unit cost	Sub-total
CiN 3 – ongoing support	6 months	£210	£1,257
CiN 6 – planning and review		£234	£234
CiN 5 – core assessment		£616	£616
Cost of social care case management act	ivity		£2,107
Additional services from other agencies (out of London costs)		
Family therapy provided by voluntary	Twice a month for 6	£106	£1,114
agency	months ¹		
Women's aid provided by voluntary	Weekly for 3 months ²	£66	£698
agency			
CAMHS provided by Primary Care Trust	Weekly for 3 months ³	£69	£831
Cost of service provision from other prov	£2,643		
Total cost incurred by children's social ca	£2,107		
Total cost incurred for Child B during the 6-month period			£4,750

a There was no evidence of additional support services being provided by social care during the study timeframe.

¹ Barlow, J., Davis, H., McIntosh, E., Jarrett, P., Mockford, C. & Stewart-Brown, S. (2006) Role of home visiting in improving parenting and health in families at risk of abuse and neglect: results of a multicentre randomised controlled trial and economic evaluation, *Archives of Disease in Childhood*, 92, 3, 229-233.

² McIntosh, E. & Barlow, J. (2006) The costs of an intensive home visiting intervention for vulnerable families, in A. Netten & L. Curtis (eds) *Unit Costs of Health and Social Care 2006*, PSSRU, University of Kent, Canterbury.

³ Curtis, L. (2013) Unit Costs of Health and Social Care 2013, Personal Social Services Research Unit, University of Kent, Canterbury.

8.7.4 Child D - became looked after during the data collection

Child D was first referred to social care in August 2007 and had been receiving support as part of a Child Protection Plan. Her parents were identified as regular drug users and this was felt to be impacting on their ability to care appropriately for her needs. In particular, her mother's chaotic lifestyle and regular drug use meant that she frequently failed to get Child D ready for school. The home environment was felt to be unsuitable for young children. Child D was five and a half at the start of the data collection. Child D lived with her mother, and had regular contact with her father who also misused drugs. Both parents were reluctant to engage with additional services, although Child D's father would occasionally attend a stayand-play group at the local Sure Start children's centre with his daughter.

In early December 2008 the social worker was contacted by a child care worker at the children's centre who reported that Child D presented with bruises, allegedly caused by her mother's new partner. Along with concerns regarding the lack of improvements since the implementation of a Child Protection Plan, further investigation was instigated and the decision was taken for Child D to be placed in local authority foster care. A review was held 28 days after the child was placed and the Care Plan updated following that review. Child D remained on a Child Protection Plan whilst being looked after.

Total costs for Child D during the six-month data collection perioda

Social care activity costs (London costs)			
Process	Frequency	Unit cost	Sub-total
Child in Need processes			
CiN 3 – ongoing support	Two and a half	£242	£606
	months		
Looked-after children processes ¹			
LAC1 – Decide child needs to be looked after		£1,120	£1,120
LAC3 – Maintaining the placement ²	Three and a half		
	months		
LAC2 – Care planning		£220	£220
LAC6 – Review			£688
Cost of social care case management activity			£2,635
Additional services from other agencies (London co	osts)		
Sure Start stay and play group provided by Local	Twice during the data	£15	£30
authority (not social care) ³	collection period		
Cost of service provision from other providers	£30		
Total cost incurred by children's social care for Child D during the 6-month period			£2,635
Total cost incurred for Child B during the 6-month	period		£2,665

^a There was no evidence of additional support services being provided by social care during the study timeframe.

¹ Ward, H., Holmes, L. & Soper, J. (2008) Costs and consequences of placing children in care, Jessica Kingsley, London.

² The costs of maintaining the placement also include the weekly fees and allowance of the child's placement.

³ Tidmarsh, J. & Schneider, J. (2005) Typical costs of sure start local programmes in L. Curtis (ed.) *Unit Costs of Health and Social Care 2005*, Personal Social Services Research Unit, University of Kent, Canterbury.

8.8 Common Assessment Framework (CAF)

The Common Assessment Framework (CAF) is a standardised approach for assessing children and their families, to facilitate the early identification of additional needs and to promote a co-ordinated service response. CAF is underpinned by an integrated approach to support and has been designed for use by all professionals working with children and families with additional needs who do not meet the threshold for more intensive interventions such as those associated with children's social care or safeguarding. Information for schemas 8.8.1-8.8.3 have been provided by researchers from the Centre for Child and Family Research, Loughborough.

The study used a bottom-up costing methodology, which uses social care activity time data as the basis for building up unit costs. The unit costs per hour are based on average salaries for each staff type using national salary scales and applying oncosts and overheads as presented in this publication.

8.8.1 Family A: support from a lead professional (LP)

Family A live in London and consists of Jennifer, who has two sons, Ryan and Jack, aged 8 and 4 respectively. Jennifer and the boys' father had recently separated. Jennifer contacted CAMHS after discovering that Ryan had been self-harming. CAHMS informed Jennifer that they had a six-month waiting list for assessments but referred their case onto 'Family Help', a voluntary organisation that supports vulnerable children and families. The service manager completed a CAF, although a pre-CAF checklist was not completed. A family support worker from Family Help was allocated to support their case and was identified as the lead professional for the child and family. Following the completion of the CAF assessment, the support worker visited the child and family on a fortnightly basis. Team Around the Child (TAC) meetings were not held, and the support worker continued to support the child and family until a CAHMS assessment was offered. The child and family were not in receipt of other additional services at this time. Jennifer reported that the support they had received from Family Help had been extremely useful and that Ryan's self-harming behaviour had reduced. Jennifer reported that she thought that the CAF had helped her family.

Total costs for family A during a six-month period³

Social care activity costs (London costs)			
Process	Frequency	Unit cost	Sub-total
Process 2: CAF assessment completed by		£342	£342
service manager			
Process 4: ongoing support from the	Fortnightly visits for 6	£52	£628
family support worker	months ⁴		
Total cost of CAF support for Family A duri	£970		

¹ Holmes, L., McDermid, S., Padley, M. & Soper, J. (2012) Exploration of the costs and impact of the Common Assessment Framework (Research Report DFE-RR210). Department for Education, London.

² Beecham, J. (2000) *Unit costs – not exactly child's play: a guide to estimating unit costs for children's social care*, Department of Health, Dartington Social Research Unit and the Personal Social Services Research Unit, University of Kent; Ward, H., Holmes, L. & Soper, J. (2008) *Costs and consequences of placing children in care*, Jessica Kingsley, London.

³ Costs have been rounded to the nearest pound.

⁴ Holmes, L. & McDermid, S. (2012) *Understanding costs and outcomes in child welfare services: a comprehensive costing approach to managing your resources*, Jessica Kingsley, London. (This suggests that the average time for a home visit is 1 hour 40 minutes, including travel time.)

8.8.2 Family B: support from a range of services

Mother, Michelle, lives with her daughter Sophie, aged 13. Michelle suffers with anxiety and depression and finds it very difficult to leave the house. Concerns were raised by Sophie's school about her behaviour and a reduction in attendance; subsequently they referred the child and family to a voluntary organisation, 'Family Help', after completing a pre-CAF checklist. A worker from Family Help completed a CAF assessment and decided that Michelle and her daughter would benefit from additional support, both to improve Sophie's behaviour and to support Michelle with her mental health difficulties and parenting. A family support worker was identified as the lead professional (LP). One Team Around the Child (TAC) meeting was held, which Michelle attended, along with the support worker and the school education welfare officer.

Michelle received one-to-one parenting support, once a week for 8 weeks, and then attended a parenting course over 8 weeks. Sophie received one-to-one support in school from a learning mentor. The LP continued to co-ordinate the support and provided a 12-week focused piece of family support, visiting Michelle and Sophie on a weekly basis.

Michelle said that the LP had been extremely supportive and thought that the other services provided as a result of the CAF had helped her and Sophie: she would have liked more of the intensive parenting support offered by the LP, and reported that Sophie's behaviour in school had improved.

Total costs for family B during the six-month period¹

Social care activity costs (out of London costs)				
Process	Frequency	Unit cost	Sub-total	
Process 1: pre-CAF checklist completed by education welfare officer	Once	£18	£18	
Process 2: completion of the CAF assessment by family support worker	Once	£175	£175	
Process 3: TAC meeting attended by family support worker	Once	£203	£203	
Process 3: TAC meeting attended by education welfare officer	Once	£27	£27	
Process 4: ongoing support of lead professional by family support worker	Over five and a half months	£165	£912	
Cost of case management activity			£1,334	
Additional services (out of London costs)				
Parenting course	Once a week for 8 weeks ²	£49	£338	
One-to-one parenting support	Once a week for 8 weeks	£52	£419	
Focused family support	Once a week for 12 weeks	£50	£604	
Total cost of additional support	£1,361			
Total cost of CAF support incurred for Family B during the 6-m	£2,695			

¹ Costs have been rounded to the nearest pound.

² Tidmarsh, J. & Schneider, J. (2005) Typical costs of sure start local programmes, in L. Curtis (ed.) *Unit Costs of Health and Social Care 2005*, Personal Social Services Research Unit, University of Kent, Canterbury.

8.8.3 Family C: CAF as a step up to social care

Kyle, aged 13, lives with his mother, Louise, and four year old brother, Robert. A CAF was initiated in January 2011 by the school due to concerns about Kyle's deteriorating behaviour at home and school. Kyle has long-standing mental health difficulties, anxieties about new situations and had difficulties making friends. Louise also had mental health difficulties and there were concerns about her capacity to maintain the children's food and drink intake. There were also some concerns about Louise's offending behaviour.

The CAF was undertaken by the school learning mentor, and a Team Around the Child (TAC) meeting was convened. The TAC was attended by the learning mentor, an educational psychologist, and a family support worker from Children's Services. Prior to the initial TAC meeting, Kyle had been permanently excluded from school after his behaviour became untenable and was placed at another school at the end of March 2011. A referral was also made to the children's social care emergency duty team by a hospital doctor following concerns about Louise's mental health. The social care team were aware that a CAF was in process and therefore no further action was taken.

A number of services were initiated to support the child and family; ADHD support was provided to both Kyle and Louise. They saw the ADHD nurse on a monthly basis. A family support worker was also identified to address some of Kyle's behavioural difficulties. The family support worker visited the family once a week for 8 weeks. Despite some improvements, the family suffered a number of setbacks and was referred to children's social care in July 2011. The CAF case was closed, and a child protection plan was initiated.

Total costs for family C during the six-month period¹

Process	Frequency	Unit cost	Sub-total
Process 1: Pre-CAF checklist completed by learning	Once	£14	£14
mentor			
Process 2: Completion of the CAF assessment by learning	Once	£164	£164
mentor			
Process 3: TAC meeting attended by learning mentor	Once	£280	£280
Educational psychologist		£41	
Family support worker		£26	
Process 4: Ongoing support of lead professional by	Five months	£157	£785
learning mentor			
Process 5: Case closure			£90
Cost of case management activity for CAF			£1,333
Social care activity costs (out of London): social care			
CiN process 1: initial contact and referral with no further		£221	£221
action			
CiN process 1: initial contact and referral		£200	£200
CiN process 7: Section 47 enquiry		£547	£547
Total cost of care management activity for social care		£968	
Additional services (out of London costs)			
ADHD nurse	Once a month for	£46	£277
	6 months		
Family support worker ²	Once a week for 8	£50	£400
	weeks		
Total cost of additional services			£677
Total cost of CAF support incurred for Family C during the	6-month period		£2,301
Total cost of support for Family C during the 6-month peri	od		£2,978

¹ Costs have been rounded to the nearest pound.

² Curtis, L. (2014) *Unit Costs of Health and Social Care*, Personal Social Services Research Unit, University of Kent, Canterbury.

8.9 Services for children returning home from care

A child is recorded as returning home from an episode of care if he or she ceases to be looked after by returning to live with parents or another person who has parental responsibility. This includes a child who returns to live with their adoptive parents but does not include a child who becomes the subject of an adoption order for the first time, nor a child who becomes the subject of a residence or special guardianship order.¹

In light of the research findings about the lack of support leading to breakdown of reunification in some circumstances, the Department for Education has worked with Loughborough University to draw up a number of scenarios reflecting the costs of returning children home based on a range of ages, circumstances and placement types.

Information for schemas 8.9.1 to 8.9.4 have been drawn from a study commissioned by the Childhood Wellbeing Research Centre and undertaken by the Centre for Child and Family Research (CCFR) at Loughborough University. They make use of existing unit costs that have been estimated in previous research studies carried out by the CCFR. The aim of this work was to provide a series of estimated unit cost trajectories for children returning home from care. The care illustrates examples of the support received by children 12 months after returning home from care.

The unit cost estimations used are based on estimates for the 2013/14 financial year. Where costs have been taken from research completed in previous years, the unit costs have been inflated to 2013/14. The unit costs of support foster care have been estimated for the Fostering Network, and have been included in these case studies with their permission. ⁵

¹ Department for Education (2013) Data pack: improving permanence for looked after children, http://www.education.gov.uk/a00227754/looked-after-children-data-pack/ [accessed 1 October 2013].

² Ward, H., Holmes, L. & Soper, J. (2008) *Costs and consequences of placing children in care*, Jessica Kingsley, London.

³ Holmes, L., McDermid, S., Padley, M. & Soper, J. (2012) Exploration of the costs and outcomes of the Common Assessment Framework, Department of Health, London.

⁴ Holmes, L. & McDermid, S. (2012) *Understanding costs and outcomes in child welfare services*, Jessica Kingsley, London.

⁵ The Fostering Network and Holmes, L. (2013) *Unit Costs of Support Care*, The Fostering Network, London.

8.9.1 Child A - low level of Child in Need support on return home from care

Child A became looked after under Section 20 arrangements at the age of five. Child A was placed with grandparents out of the area of the local authority under kinship placement arrangements. The placement lasted for three months and, on return home, formal support was not provided; however, the grandmother provided ongoing informal support to the family. In October 2012 Child A became looked after again and returned to the care of the grandmother.

Social care processes (case management)			
Process	Frequency	Unit cost	Sub-total
LAC 1 – became LAC (looked-after child)	Twice	£1,275	£2,550
LAC 2 – care plan	Once a fortnight	£241	£482
LAC 3 – ongoing	Six months in	£2,923	£17,540
	total		
LAC 4 – return home	Once	£415	£415
LAC 6 – review	Twice	£618	£1,237
Total social care case management costs	·		£22,224

8.9.2 Child B - high level of Child in Need support on return home from care

Child B first became looked after as a baby and was placed with local authority foster carers when an interim care order was obtained. In February 2011, Child B returned home and a high level of (Child in Need) support was provided to the family throughout. For the duration of the 12 months, the parent was provided with drug and alcohol treatment services.

Social care processes (case management)					
Process	Frequency	Unit cost	Sub-total		
CiN 3 – ongoing support	12 months	£199	£2,393		
CiN 6 – planning and review	3 times	£230	£690		
Cost of social care case management activi-	ty		£3,083		
Additional services costs (out of London)					
Drug and alcohol treatment services	Once a fortnight	£121	£3,142		
Total social care case management costs			£6,225		

8.9.3 Child C – high level of Child in Need support and support foster care provided on return home from care

Child C was placed in a specialist therapeutic foster care community placement outside the area of the placing authority between September 2011 and October 2012. Prior to this placement, Child C had experienced two other placements and was accommodated under Section 20 arrangements. Child C had emotional and behavioural problems, and was aged 11 at the start of the specialist placement. On return home, Child C was referred to receive support foster care. A support foster care family was identified, and respite care was provided by the carers for one overnight stay per week. The case also remained open as a CiN/support foster care case, and this support continued until March 2013.

Social care processes (case management)			
Process	Frequency	Unit cost	Sub-total
LAC 2 – carer plan	Twice	£240	£479
LAC 3 – ongoing	10 months	£11,938	£119,380
LAC 4 – return home	Once	£415	£415
LAC 6 – review	Twice	£618	£1,237
Support foster care – ongoing	2 months	£693	£1,386
Support foster care – referral	Once	£395	£395
Total social care case management unit cost	£123,291		

¹ Department for Education (2012) *Children in care*, http://www.education.gov.uk/childrenandyoungpeople/safeguardingchildren/a0068940/children-in-care/ [accessed 10 September 2013].

8.9.4 Child D – ongoing support provided by an independent fostering provider on return home from care

Child D was placed with Intensive Foster Placement (IFP) foster carers in June 2010, aged 16, after a care order was obtained. Child D had emotional and behavioural difficulties and remained in the placement until August 2011. On return home, Child D continued to be supported by the IFP, and there was a good working relationship between the foster carers and birth family. The support continued until the end of March 2012. CiN support was provided during the first three months of 2012.

Social care processes (case management)					
Process	Frequency	Unit cost	Sub-total		
CiN 3 – ongoing support	3 months	£1,080	£3,239		
CiN 4 – close case	£99				
Total social care case management unit costs			£3,337		

8.10 Support care for children

Support care is short-term preventative foster care aimed at families in crisis, with a view to avoiding a child being taken into care full-time and long-term. Support carers look after the child on a part-time basis, while at the same time a package of other support services is offered to the family, giving them space, guidance and help to work through their problems.

The information reproduced below has been drawn from the *Unit Costs of Support Care* (2013). The report demonstrates that support care, including the accompanying support services for families, has a far lower unit cost than the foster care it replaces.

As well as helping struggling families stay together, support care also helps family and friends' carers such as grandparents, who report that they struggle when children are first placed with them. It can also help to prevent adoption breakdown, and be a breathing space for some families whose disabled children do not reach the criteria for short breaks but desperately need help.

Using a range of pre-existing process unit costs (for example, referrals, reviews and ongoing support), the costs of support care, using individual case studies as illustrative examples, are presented in schemas 8.10.1 and 8.10.2. Comparative costs if the local authority had been required to place them as looked-after children are also shown. Costs have been uprated to current prices using the PSS pay & prices inflator. The key for the social care processes is as follows:

The first case study (8.10.1) shows that, for Family A, the costs would have been much higher if the local authority had been required to place them as looked-after children. The cost to look after the three children in local authority foster care for one year is £129,326, which is nearly nine times higher than the estimated social care costs of providing support care for the same duration (£14,441).

The second case study (8.10.2) shows that the total estimated cost to look after Child B in local authority foster care for one year is £46,015 – four times higher than the estimated social care costs of providing support care for the same duration (£10,858).

¹ The Fostering Network and Holmes, L. (2013) *Unit costs of support care*, the Fostering Network, London.

² Taken from: Ward, H., Holmes, L. & Soper, J. (2009) *Costs and consequences of placing children in care*, Jessica Kingsley, London; Holmes, L. & McDermid, S. (2012) *Understanding costs and outcomes in child welfare services: a comprehensive costing approach to managing your resources*, Loughborough University; Holmes, L., McDermid, S., Padley, M. & Soper, J. (2012) *Exploration of the costs and impact of the Common Assessment Framework*, Department for Education, London.

8.10.1 Family A - support care for a sibling group

Family A were referred to support care following social work concerns about their living arrangements and the deterioration in family relationships. The family consisted of 11 children living with their mother and step-father in a small three-bedroom house. In addition to support care, the family were engaged with a housing support service, budgeting advice, parenting classes and ongoing social work support.

Support care was initially offered to three members of the family: Jack aged 15, Samantha aged 8 and Jordan aged 7. Different support carers were identified for each of the children and they were offered one overnight stay with support carers once a fortnight.

Family A: support care and annual social care costs

Process	Process unit cost	Social work cost	Fostering cost
1 Referral	£394	£247	£147
2 Ongoing support	(£228 x 12) and (£109 x 12)	£2,736	£1,308
2 Ongoing support	[(£148/7) x 26] x 3 +		£6,396
	[(£426/7) x 26] x 3		
3 Review	£82 x 8 and £68 x 8	£659	£547
4 Case closure	£279	£245	£34
Total		£3,882	£8,436

Annual costs of other support or services provided alongside support care

Support or service	Frequency/duration	Unit cost	Sub-total
Parenting programme	One course – group	£503	£503
Housing support	Once a fortnight	£31	£810
Budgeting advice	Once a fortnight	£31	£810
Total cost of other supp	ort or services		£2,123

Family A: social care costs for looked-after children

These costs include the activity to find the first placement for the three siblings, to review the case (using statutory timeframes of 28 days, three-monthly and six-monthly intervals), update care plans and also support the children in their placements. The costs of these processes are detailed below:

Process	Cost
1: Decide children need to be looked after and find first placement	£970
2: Care plans: Updated three times following reviews for each of the children (£238 x 9)	£2,153
3: Maintain the placements: Support and placement costs (£793 per child per week)	£124,351
6: Review: Held on three occasions during the year (3 x £617)	£1,852

8.10.2 Child B - Support care for a single child

Child B (aged six) was referred for support care as a result of housing and financial concerns. He was living with his father and step-mother, along with five other children, in a two-bedroom property throughout the week, and a further three children stayed at weekends. Space and overcrowding were key concerns, as were the financial pressures.

Child B was offered support care for one overnight stay per week at the weekend. Child B's father also agreed to attend support sessions for parenting and budgeting. Child B continued with weekly visits to his support carers for six months, until his family secured larger accommodation. He then continued to receive support care, on a fortnightly basis for three further months before being reduced to monthly stays. Child B and his family no longer required support care or other support services after 12 months.

Child B: support care and annual social care unit costs

Process	Process unit cost	Social work cost	Fostering cost
1.	£394	£247	£147
2.	(£227 x 12) and (£108 x 12)	£2,726	£1,303
2.	[(£148/7) x 42] and [(£424/7) x 42]		£3,443
3.	(£82 x 8) and £68	£659	£552
4.	£279	£245	£34
Total		£3,878	£5,480

Annual costs of other support or services, provided alongside support care

Support or service	Frequency/duration	Unit cost	Sub-total
Parenting programme	Once course – group	£502	£502
Housing support	Six sessions	£31	£187
Budgeting advice	Once a fortnight	£31	£810
Total cost of other support or services			£1,500

Child B's: social care costs for looked-after children

The costs for child B would also have been much higher if the local authority had been required to place him as a looked-after child. The costs below include the activity to find the first placement for child B, to review the case (using statutory timeframes of 28 days, three-monthly and six-monthly intervals), update his care plan and also support child B in his placement. The costs of these processes are detailed below:

Process	Cost
1. Decide child needs to be looked-after and find first placement	£970
2. Care plans: Updated three times following reviews	£1,743
3. Maintain the placements: Support and placement costs (£793 per week)	£41,450
6. Review: Held on three occasions during the year (3 x £614)	£1,851
Total	£46,015

8.11 Young adults with acquired brain injury in the UK

Acquired brain injury (ABI) is 'a non-degenerative injury to the brain occurring since birth', including both open and closed head injuries. ABI includes a range of diagnoses or causes, including strokes or tumours. Head injury through trauma is a common cause among young adults. ABI is not thought to affect life expectancy after the initial acute phase, so the prevalence of long-term brain damage is high at 100-150 per 100,000 population, implying a total of 60,000-90,000 people in the UK (http://www.rhn.org.uk/).

A study was undertaken by the Personal Social Services Research Unit to identify the health and social care services used by young adults aged 18-25 years with acquired brain injury (ABI) and the associated costs. The study identified the annual incidence of ABI in this age group, and then tracked the young adults' likely progress through four support-related stages: trauma, stabilisation, rehabilitation and return to the community. By identifying the numbers using different treatment locations and services at each stage, a picture of service use and costs could be built up over a notional 12-month period following injury. All costs have been uprated to 2013/2014 prices using the HCHS pay & prices Inflator.

Four broad groups of young people with ABI were identified by their location at the community care stage.

Group 1 comprises the largest proportion of those sustaining brain injuries and includes those who attend A&E with ABI or spend short periods in a hospital ward and then return home. A small proportion, perhaps just one in five, will have follow-up appointments arranged at an outpatient clinic or with their GP. This group will generally have had a mild head injury and no longer-term disability, although 20 per cent of this group may continue to have residual symptoms six months after injury.

Group 1: Average cost per person = £304 per year.

People in Group 2 are also likely to have returned to their own homes within a year, but are more seriously disabled and rely on personal care support provided by spouses, parents or other informal carers. This group may include those who are discharged home from longer-term residential rehabilitation (34% of patients discharged), from acute brain injury units (25%) and from neurosurgery units (23%). It is likely that at least 40 per cent of them will require at least part-time support or supervision from informal carers.

Group 2: Average costs per person = £21,692 per year.

The third group of young adults with ABI are those whose pathway towards the end of a year will see them living in supported accommodation with formal (paid) personal carers. Some will have been discharged straight from hospital and some will have stayed in a rehabilitation facility prior to their move to supported living. One in four of these young adults will need overnight supervision, and three in four will need at least part-time supervision during the day. The number of young adults may be quite high, but some will move on to more independent living. Others will need this type of support for many years to come. For cost estimates, it has been assumed this group will live in community-based housing with low staffing levels during the day and 'sleeping-in' staff at night. In addition to personal care, they are also likely to use outpatient clinics and community-based therapists. Personal care costs (estimated at an average of 8 hours overnight 'sleeping-in' and 6 hours during the day) would amount to £543 per week. Use of community-based therapy and health care services would add another £631 by the end of the notional 12-month period. Costs have been uprated from 2009/10 to 2013/14 price levels using the HCHS pay and prices inflator.

Group 3: Average cost per person = £41,590 per year.

The fourth group includes young adults who are likely to be among the most severely disabled. Although some will be supported at home, it is estimated that 310 will be resident in nursing homes for young adults, specialist ABI residential units, in longer-stay hospital wards or in mental health units. They are likely to have been the most severely injured. Some of the principal independent providers contacted for this research reported current prices for residential placements of up to £3,160 per week, often jointly funded by health and social services. Nursing homes and 'young disability units' are likely to be less costly. However, nursing home care may not be appropriate for people with severe ABI-related disability as there tend to be few qualified staff and low input from local community-based teams or specialist doctors. Costs have been uprated from 2009/10 to 2013/14 price levels using the HCHS pay and prices inflator.

Group 4: Average cost per person = £42,853 per year.

¹ Beecham, J., Perkins, M., Snell, T. & Knapp, M. (2009) Treatment paths and costs for young adults with acquired brain injury in the United Kingdom, *Brain Injury*, 23, 1, 30-38.

8.12 Palliative care for children and young people

The government's manifesto commitment to improve palliative care services in 2006¹ resulted in an independent review of children's palliative care services commissioned by the Secretary of State for Health.² This independent review was based on findings from a wide consultation with stakeholders, including children and young people and their families, commissioners and providers of services, along with commissioned research from Department of Health and the York Health Economics Consortium.

Information for this schema has been drawn from the work carried out by the York Health Economics Consortium³ which provides examples of illness trajectories and the resulting costs for children in need of palliative care. All costs have been uprated using the appropriate inflators to provide current prices. See Lowson et al. (2007) for more information on the cost benefits of using community care instead of hospital services.

8.12.1 Short illness trajectory: cancer

This generic pathway was developed for a child with cancer from data provided by Sargent Cancer Care for Children and Cancer and Leukaemia in Childhood (CLIC Sargent). It was triangulated with information collected during focus groups which included two parents, both of whose children had died: one from a form of leukaemia, the second from bone cancer.

A child with cancer	Cost per year
Health costs	
During one year:	
Three inpatient stays	£7,400
One ward attendance per month	£698
One day care episode per fortnight	£4,082
One home visit per week, including intensive bereavement support	£8,769
Sub-total	£20,948
It was assumed that the child died at home with intensive community support and that	
there was no uptake of respite care. It was also assumed that there were no costs	
accruing to education and social services	
Financial burden on the family	
One family member gives up paid employment	£15,470
Significant financial cost to family	£7,714
Sub-total	£23,184
Total costs (including financial burden on the family)	£44,132

¹ Cochrane, H., Liyanage, S. & Nantambi, R. (2007) *Palliative care statistics for children and young adults,* Department of Health, London. http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsStatistics/DH_074701

² Craft, A. & Killen, S. (2007) *Palliative care services for children and young people in England*, Department of Health, London. http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH 074459

³ Lowson, K., Lowson, P. & Duffy, S. (2007) *Independent review of palliative care services for children and young people: economic study*, Final Report, York Health Economics Consortium, Department of Health Independent Review Team, London.

8.12.2 Longer life illness trajectories: cardiac care

This pathway has been developed for a typical child being treated by a community-based team. The information was provided by parents at a focus group.

A child aged 15 months with a cardiac condition	Cost per year
Health costs	
During one year	
Inpatient stay of 5 days in local hospital for respiratory infection	£2,467
Inpatient stay of 4 weeks in paediatric cardiac unit including 1 week in PICU	£50,090
Inpatient stay of 6 days in local hospital for viral infection	£2,467
Inpatient stay of 6 weeks in paediatric cardiac unit including 2 weeks in PICU	£78,004
One outpatient visit per month to local team	£2,093
One home visit per week by community team	£8,769
One telephone contact per week	£363
Sub-total	£144,252
Social care costs	
The child attends a pre-school special needs nursery	£3,745
Uses wheelchair and has home equipment	£6,678
Sub-total	£10,423
Respite care costs	
Assumptions re. respite care (based on focus groups and published evidence)	
15 days per year at hospice	£16,049
6 hours per week at home	£8,849
Sub-total	£24,898
Financial burden on the family	
Family in receipt of carer allowance	${ t f0}^1$
One family member gives up paid employment	£15,470
Significant financial cost to family	£7,714
Sub-total	£23,184
Total costs (including financial burden on the family)	£202,757

¹ Expenditure on social security/welfare benefits could partly double-count the costs of lost employment for parents so have been estimated at £0.

8.12.3 Longer life illness trajectories: cystic fibrosis

This pathway has been developed for a typical child being treated by a community-based team. The information was provided by parents at a focus group.

A child aged 5 years with cystic fibrosis	Cost per year
Health costs	
During one year:	
Two inpatient stays in local hospital for receipt of intravenous antibiotics	£8,294
One outpatient visit per month to local team comprising consultant paediatrician	£8,373
and consultant respiratory paediatrician	£1,777
Four visits per year to speech and language therapist	£409
One home visit per fortnight by community team	£4,384
One telephone contact per week	£363
Sub-total Sub-total	23,601
Social care costs	
The child attends mainstream school with support	£6,643
Uses wheelchair and has home equipment	£6,678
Sub-total Sub-total	£13,321
Respite care (based on focus groups and published evidence)	
15 days per year at hospice	£16,049
6 hours per week at home	£8,583
Sub-total Sub-total	£24,632
Financial burden on family	
One family member gives up paid employment	£15,470
Significant financial cost to family	£7,714
Sub-total Sub-total	£23,184
Total costs	£84,738

8.12.4 Longer life illness trajectories: child with multiple disabilities

This pathway has been developed for a typical child being treated by a community-based team. The information was provided by parents at a focus group.

An older child with complex and multiple needs. The child has renal problems and seizures,	Cost per year
with visual impairment and intellectual difficulties. The child and family are in contact with	
five specialities: paediatric endocrinology, paediatric gastroenterology, neurosurgery,	
ophthalmology, child psychiatry.	
Health costs	
In one year:	
One inpatient stay in tertiary centre for neurosurgery	£16,145
One inpatient stay for dental extraction	£1,165
One outpatient visit per week for blood tests	£9,071
One outpatient visit per month for specialist reviews	£2,093
Two CT scans	£300
Two MRI scans	£782
Three EEGs	£345
Four visits per year to clinical psychologist	£1,777
Four visits per year to speech and language therapist	£409
One face-to-face visit per month by community team	£2,024
One home visit per fortnight by community team	£4,047
One telephone contact per fortnight with community team	£181
Sub-total	£38,340
Social care costs	
The child attends a school for children with special educational needs	£3,568
Uses wheelchair and has home equipment	£6,678
Sub-total	£10,246
Respite care (based on focus groups and published evidence)	
15 days per year at hospice	£16,049
6 hours per week at home	£8,849
Sub-total	£24,898
Financial burden on the family	
Family in receipt of carer allowance	${ t E0}^1$
One family member gives up paid employment	£15,470
Significant financial cost to family	£7,714
Sub-total	£23,184
Total costs (including financial burden on the family)	£96,668

¹ Expenditure on social security/welfare benefits could partly double-count the costs of lost employment for parents so have been estimated at £0.

8.13 Residential parenting assessments

The following schemas illustrate examples of the support given to families who are supported during a residential parenting assessment (RPA) from independent providers. These costs have been drawn from a study carried out by the Institute of Education, London and the Centre for Child and Family Research (CCFR) at Loughborough University, in which the use and costs of RPAs in local authorities was explored. Three local authorities took part in an in-depth case analysis of 10 or 11 cases in which an RPA had been used. The unit costs of social care processes and support are based on previous research carried out by CCFR, and the weekly cost of the RPA is the rate charged to the local authority by the independent RPA provider.

Three examples are presented in this schema. Each illustrates different RPA support package and outcomes for the families, along with the variation of the costs incurred. The case profile covers a 12-month period in the family's case history. These are followed by a breakdown of costs in social care processes and services provided.

Family A

The mother of this family received methadone replacement treatment and had previously had a child removed from her care. A pre-birth assessment was completed in 2010 for the current child and a child protection plan initiated. In 2012 a court directed a residential parenting assessment (RPA). The RPA lasted 20 weeks. As part of the assessment the mother was provided with parenting advice and support. In the final six weeks of the RPA both parents received relationship guidance counselling from the provider. A psychiatric assessment of the mother was completed by an additional agency. It was concluded that the mother was unable to provide consistently good care and meet the baby's needs. At the end of the RPA the baby was placed with foster carers, and a Placement Order was granted in summer 2012 when the baby was two years old.

¹ Munro, E., Hollingworth, K., Meetoo, V., Quy, K., McDermid, S., Trivedi, H. & Holmes, L. (2014) Residential parenting assessments: uses, costs and contributions to effective and timely decision-making in public law cases, Department for Education, London.

² Ward, H., Holmes, L., and Soper, J (2008) *The costs and consequences of placing children in care.* Jessica Kingsley Publishers, London; Holmes, L. & McDermid, S. (2012) *Understanding costs and outcomes of child welfare services: a comprehensive guide to managing your resources,* Jessica Kingsley, London. The costs have been inflated using the appropriate inflators.

Family A's social care process costs per annum

Social process costs	Frequency/ length	Unit cost	Sub-total
CiN – 3 high level – (CPP) ongoing support (per month)	5 months	£432	£2,158
CiN – 5 core assessment	Once	£616	£616
CiN – 8 legal activity	Once	£2,358	£2,358
Cost of CiN social care case management ac	tivity		£5,132.00
LAC – 1 child becomes looked after	Once	£1,008	£1,008
LAC – 5 find subsequent placement	Once	£319	£319
LAC – 3 ongoing support, in RPA (per day)	143 days	£40 (per day)	£5,768
LAC – 3 ongoing support, first 3 months of placement (per day)	90 days	£8 (per day)	£699
LAC – 3 ongoing support, LA foster care (per day)	99 days	£53 (per day	£5,243
LAC – 3 fee & allowance foster care in LA (per week)	14 weeks	£164 (per week)	£2,295
LAC – 6 review	Once	£641	£641
LAC – 2 care planning	Once	£249	£249
LAC – 7 legal	Once	£4,339	£4,339
Cost of LAC social care case management a	ctivity		£20,561
Total cost of all social care case manageme	ent activity		£25,692
Service provision costs			
RPA, including parenting support and relationship counselling for parent.	12 weeks and 8 weeks	£3,351 (per week for the RPA) £3,351 (per week for the relationship counselling)	£67,020
Drug & rehab programme ^b	20 weeks	£53	£1,060
Parent psychiatric assessment ^a	Once	£134	£134
Total cost of service provision			£68,214
Total costs of support for Family A			£93,906

Family B

In summer 2011 a court-directed RPA was to be initiated for Family B. The parents requested to be assessed as a couple. The parents and two children began the RPA that summer, during which time another baby was born. Due to aggressive incidents between the couple, the parents were separated into two different facilities and assessed separately. During the period of the RPA, the mother attended an intervention group for perpetrators of domestic abuse, completed a psychiatric assessment, and the children were also given a psychotherapy assessment. The father's individual RPA began with the two older children at the other facility. The mother's RPA with her new baby ended at the end of the summer due to her poor care skills and maltreatment of the baby. The baby was placed with the father and other siblings. The RPA provided a week of intensive parenting support to help him care for the young baby. The assessment was completed, and the father was considered able to provide for the care needs of the children. The family was accommodated, and a community assessment was completed. The local authority concluded the father should be the primary carer, and in spring 2012 a Residence Order was granted for the three children, and a Supervision Order for 12 months.

Family B's social care process costs per annum

Social process costs	Frequency/ length	Unit cost	Sub-total
CiN – 3 ongoing support	5 days	£14	£72
CiN - 8	Once	£2,358	£2,358
Cost of CiN social care case management ac	ctivity	•	££2,430.00
LAC – 1 child becomes looked after	Once	£623	£623
LAC – 3 ongoing support, in RPA	135 days	£33 (per day)	£4,397
LAC – 3 ongoing support, placed with parent	156 days	£33 (per day)	£5,081
LAC – 3 ongoing support, first 3months of placement	90 days	£8 (per day)	£699
LAC – 6	Once	£641	£641
LAC – 2	Once	£249	£249
LAC – 7	Once	£4,339	£4,339
LAC – 4	Once	£420	£420
Cost of LAC social care case management a	ectivity		£16,449
Total cost of all social care case management	ent activity		£18,879
Service provision costs			
RPA initiated	12 weeks	£1,326 (per week)	£15,914
2nd RPA initiated	17 weeks	£1,326 (per week)	£22,545
Consultant paediatrician	Twice	£172 (per consultation)	£344
LA parenting support	12 weeks	£29 (per week)	£348
Parenting support and visits	6 weeks	£1,289 (per week)	£7,733
Parent psychiatric assessment	Once	£134	£134
Child psychotherapy assessment	Twice	£67 (per visit)	£134
Total cost of service provision		£47,153	
Total costs of support for Family B			£66,031

Family C

In this family, three children have previously been removed and adopted; when it was apparent the mother wanted to raise the baby, a referral was made to social care. This referral led to an initial assessment in autumn 2011. The mother has a diagnosis of depression, and both parents have learning difficulties. A core assessment was completed in spring 2012 and an RPA followed. This was to give the parents an opportunity to show they could care for the needs of the baby. The RPA began from birth in late spring 2012. The RPA was planned for 12 weeks, but the parents terminated the assessment early by leaving the unit. The father was asked to leave due his aggressive behaviour with staff and other service users, and then the mother left with him. The RPA lasted 8 weeks, until summer 2012. The baby was placed in local authority foster care and an interim care order was granted in late summer 2012, and a care order and placement order in winter 2012. A year later the baby was placed with adoptive parents who had previously adopted one of the baby's siblings.

Family C's social care process costs per annum

Social process costs	Frequency/length	Unit cost	Sub-total
CiN – 3 medium level – ongoing support	5.5 months	£202 (per month)	£1,112
CiN – 5	Once	£616	£616
Cost of CiN social care case management activ	ity		
LAC – 1 child becomes looked after	Once	£1,008	£1,008
LAC – 5 find subsequent placement	Once	£319	£319
LAC – 3 ongoing support, during RPA	62 days	£33 (per day)	£2,019
LAC – 3 ongoing support, LA foster care	157 days	£53 (per day)	£8,314
LAC – 3 ongoing support, first 3 months of	90 days	£8 (per day)	£699
placement			
LAC – 3 additional support for care order	55 days	£10 (per day)	£569
LAC – 3 fee & allowance foster care in LA	23 weeks	£164 (per week)	£3,771
LAC – 6 review	Twice	£641	£1,283
LAC – 2 care planning	Twice	£249	£498
LAC – 7 legal	Once	£4,339	£4,339
Cost of LAC social care case management acti	£24,547		
Total cost of all social care case management	£26,275		
RPA initiated	8 weeks	£1,326 per week	£10,610
Total cost of service provision			£10,610
Total costs of support for Family C			£35,156