

Cabinet - 16 June 2009 Adults Social Care Redesign

Resource Allocation System (RAS) – Background Information

Approach to testing RAS in Cheshire County Council

The approach to testing and modelling the RAS in Cheshire was as follows and in two distinct stages:

Stage one being around a reasonably representative sample of services-user cases, allowing for later refinement of questions, and giving a basis for the initial points for £s allocations and an algorithm for taking account of unpaid carer support (ie, support from family and friends).

Stage two was more thoroughly rigorous and comprehensive, using a statistically significant sample to represent the target population, aiming at 95% confidence level and 9% confidence interval. This was intended to test the use of the questionnaire with well-briefed care managers based on clients on the current caseload, identify the cost of each of these individual's care package, carry out a reasonableness test – ie, could the RAS allocation work for individuals – and then to carry out further modelling and undertake variance analysis. It is important to reaffirm at a population level the averaging out of variances. High level packages of £1000 were taken out of the RAS and provision will be made through a support planning approach/Best Value approach. A contingency also needed to be agreed to ensure the functioning of the financial framework.

Development of the National RAS

The National RAS is being developed to assist Councils by providing an “off-the-shelf” framework that can be utilized locally based on local requirements. It contains three main components:

- A financial framework to develop a RAS;
- An (agreed) self-assessment/RAS questionnaire with suggested scores;
- A systems map

The Department of Health has commissioned 12 Local Authorities who have developed their own RAS and also in co-production with Citizen Leaders to undertake this work. Cheshire County Council (now Cheshire East) was one of these authorities. The aim was for the work developed by these Councils to be evaluated by the group in Autumn 2009, with an ongoing commitment to share progress regionally.

There are key commonalities between the local RAS and the National RAS Framework, which it is important to highlight at the outset before describing any differences.

These commonalities are:

- The basis that the RAS is about a transparent and equitable way of providing resource to meet eligible need.
- The RAS is only ever an indicative amount, with LAs overriding duty to meet assessed eligible needs remaining.
- The RAS is affordable and sustainable.
- That the financial frameworks (or process/approach) used to determine how the RAS should be calculated locally, were the same.
- Likewise the system maps - showing the stage at which the RAS should be deployed – were the same.
- There are high levels of synergy around the domains of need on which the RAS questionnaires are based.

The key differences between the local RAS and the National RAS are in relation to the financial framework, where in the National RAS there will be different allocation tables for different service-user groups and the Budget envelope covers all budget areas, eg Residential Care. Also, in Cheshire we have been in a position to carry out a more thorough and comprehensive approach to the testing and modelling as described above.

Finally, work is still underway by the National RAS group in relation to taking account unpaid carer support (from family and friends) and therefore the resource available to individuals, whereas the Cheshire RAS has addressed this.