

Freedom of Information Request: Use of Resource Allocation System (RAS)

Section 1: Use of Resource Allocation System

1. Do you currently use a Resource Allocation System (RAS) or a similar tool to estimate the costs of care based on care assessments? If not, please proceed to Section 3.

Yes. Suffolk County Council (SCC) uses *Formulate for Adult Social Care* (referred to locally as “the RAS”) to calculate an **Estimated Budget (EB)** that informs care and support planning. This is purchased from Imosphere.

2. If you use a RAS or similar tool:

a. Please provide the name of the supplier or provider of your RAS. **Imosphere.**

b. Have you made any customisations or further developments to the RAS to suit your service’s needs, or do you use it as originally supplied? Please describe your approach.

SCC has applied **local configuration** so the tool reflects Suffolk market conditions and local policy. Examples include:

- Local **hourly rates** (urban/rural) for essential daily living tasks.
- Local per-day **daytime safety** rates (standard and 1:1).
- **Night support** rates (per-visit, sleep-in; waking nights currently £0 in community configuration).
- **Household task** inclusions (housework, shopping, appointments, paperwork/finances).
- **Social / work, training, education & volunteering** activity rates and overlap rules.
- **Adjustments** for Supported Living (shared background support reductions), **Shared Lives** weekly cap, **Live-in carer** weekly caps, **Care Home** weekly caps, and **Respite** (sustainability) maxima and rates.
- Optional outputs enabled (e.g., **Global Need Band, QA checks, CHC checklist prediction, “What-ifs,” total estimated hours**).
- Reduction of daytime allocations when **education** is meeting needs.

c. If you have customised or developed the RAS, please specify which service areas were changed and the date of the most recent change for each area. Use the table below for your response:

Service / Area	Customised or As Supplied	Date of Last Change	Description of Change
Community (home care & community-based support)	Customised	Oct 2025	Local urban/rural hourly rates; daytime safety per-day rates; household task inclusions; social/WTEV activity rates & overlap; night support settings; education-day reductions;
Supported Living	Customised	Oct 2025	Apply community day rates; night rates same as community; proportionate reductions for shared background support based on number sharing
Shared Lives	Customised	Oct 2025	Weekly cap £221.83 (default and LD), configured as definitive cap (includes all support).
Live-in Carer (Live-in care worker)	Bespoke/custom	Oct 2025	Weekly caps: Default £1,151; LD £1,205. Bespoke development (Jira CS-2137) to support lower/higher dependency rates.
Residential Care	Customised	Oct 2025	Standard weekly caps (e.g., £912 per week across categories incl. dementia). Dynamic commissioning component available but caps approach configured.
Nursing Care	Customised	Oct 2025	Standard weekly caps (e.g., £912 per week across categories incl. dementia).
Carer Sustainability (Respite)	Customised	Oct 2025	Include sustainability allocation up to 6 weeks/year with standard (£912) and high-need (£1,012.50) weekly

Nursing Care								
Residential Care								
Supported Living								
Other services								

We do not hold this information in this format and would only be able to provide a report on committed vs actual.

7. Do you apply any deflators (reductions) to your rates? If so, which services are affected and how are the deflators applied?

There are **no general “deflators”** to rates described. However, the model applies **reductions** for:

- **Unpaid support** (see Q4).
- **Shared background support** in Supported Living based on the **number sharing** (e.g., two tenants = 50%, three = 67%, four = 75%, etc.).
- **Education-day** reductions where needs are met by education.
These are allocation logic reductions rather than across-the-board price

8. For each service area listed below, please indicate whether you use the RAS to calculate the estimated cost, and provide the following details:

a. How is the cost allocated (e.g., per hour, per night, per session)?

b. How accurate is the estimate compared to the eventual planned cost (for example, the percentage value of the support plan against the estimated cost for people in this cohort)?

Older People:

Service Area	Allocation Method (how the cost is allocated in RAS)	Accuracy of Estimate (%)	Additional Comments
Day Care / Daytime activities	Per-activity day safety/social rates (e.g., social/WTEV activities 3h “per activity”; daytime safety per-day rate)	Not measured via RAS config	Social & WTEV can overlap to avoid double funding; daytime safety has standard and 1:1 day rates.
Direct Payments	EB derived from units × configured rates; DP is a delivery mechanism of the final budget	Not measured via RAS config	EB is indicative; final PB may differ.

Extra Care	Uses configured hourly rate (same as default in SCC config)	Not measured via RAS config	No separate higher Extracare rate configured.
Home Care	Hours × local urban/rural hourly rate(s)	Not measured via RAS config	Urban £26.28 / Rural £26.97 per hour.
Nursing Care	Weekly cap (e.g., £912) when living situation = Nursing	Not measured via RAS config	Standard caps approach configured.
Residential Care	Weekly cap (e.g., £912) when living situation = Residential	Not measured via RAS config	Standard caps approach configured.
Supported Living	Community rates for day; shared background safety reduced by number sharing	Not measured via RAS config	Reductions per # of tenants (e.g., 50%, 67%, 75%, 80%, 83%).
Other services	As configured (e.g., Shared Lives weekly cap)	Not measured via RAS config	Shared Lives weekly cap £221.83 (all support).

Working Age (incl. LD/MH/PD)

Service Area	Allocation Method	Accuracy of Estimate (%)	Additional Comments
Day Care / Daytime activities	Per-activity social/WTEV and day safety per-day rates	Not measured via RAS config	Overlap rule avoids double funding.
Direct Payments	EB from units × configured rates	Not measured via RAS config	EB indicative; DP is mechanism.
Extra Care	Uses standard hourly rate configuration	Not measured via RAS config	No separate WA-only extras.
Home Care	Hours × local hourly rates (urban/rural)	Not measured via RAS config	26.28 (urban) / 26.97 (rural).
Nursing Care	Weekly cap (e.g., £912)	Not measured via RAS config	As above.
Residential Care	Weekly cap (e.g., £912)	Not measured via RAS config	As above.
Supported Living	As for Older People (shared background reductions)	Not measured via RAS config	Apply reductions per number sharing.
Other services	Shared Lives / Live-in carer weekly caps	Not measured via RAS config	Live-in: £1,151 default / £1,205 LD.

Section 2: If you do not use a RAS

9. Have you ever used a RAS in the past? If so, when did you stop using it and what were the reasons for discontinuation?

10. If you do not use a RAS, please describe for each service area below how you estimate the likely cost of a care package at the start of the support planning process. For each area, please include:

- a. The method used to calculate the estimated weekly cost.
- b. How you determine what informal or unpaid support can provide.
- c. How the cost is allocated (e.g., per hour, per night, per session).
- d. How you assess the accuracy of your estimate compared to the eventual planned cost.

Service Area	Calculation Method	Informal/Unpaid Support Consideration	Allocation Method	Accuracy Assessment	Additional Comments
Day Care					
Direct Payments					
Extra Care					
Home Care					
Nursing Care					
Residential Care					
Supported Living					
Other services					

Section 3: Budget and Outturn for 2024/25

This section is to be answered by both RAS and non-RAS users

11. Please provide the budget and actual outturn for each service area for the financial years 22/23, 23/24, 24/25 and 25/26 (forecast):

Service Area	Budget for 25/26 (£)	Outturn for 25/26 (£)	Budget for 24/25 (£)	Outturn for 24/25 (£)	Budget for 23/24 (£)	Outturn for 23/24 (£)	Budget for 22/23 (£)	Outturn for 22/23 (£)
Day Care	15,713,849	14,978,108	14,565,583	13,096,578	11,313,018	12,043,466	9,151,840	10,979,963
Direct Payments	30,878,366	26,894,805	29,367,180	25,524,917	28,917,810	26,384,249	26,578,150	26,526,860
Extra Care	18,035,051	15,692,813	17,140,177	16,004,259	26,065,927	17,055,471	24,437,847	17,816,756
Home Care	95,896,678	92,123,906	86,137,056	84,579,431	68,020,616	79,025,855	59,506,266	61,507,955
Nursing Care	37,273,311	35,766,894	34,691,370	33,197,095	33,065,600	32,531,883	30,129,510	29,009,016
Residential Care	148,832,899	159,691,321	130,397,232	148,032,073	122,792,859	134,302,613	105,129,680	109,235,661
Supported Living	72,179,040	79,236,547	64,883,935	72,950,984	51,412,595	66,442,431	47,165,330	59,124,377
Other services	9,639,653	15,026,986	10,387,565	19,537,760	8,662,480	14,002,701	7,136,004	9,758,807

Section 4: Contact details

12. Please provide the name and contact details of the person completing this FOI request.

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