

Adults Services Portfolio – Summary




Performance Summary





1. Performance highlights this quarter include:



- Following notification in September from the Care Quality Commission (CQC) that WSCC's assurance process would commence (on 2nd December 2024), **the organisation received confirmation from the CQC that the in-person Assurance visit will take place in the week commencing 17th February 2025**, with exact dates to be confirmed. A small officer team has been preparing for this since an information return to the CQC was submitted at the end of September 2024 and are liaising with the CQC in terms of the logistics of their visit. CQC have been undertaking activity remotely, including contact with WSCC partners, voluntary and community groups and they will also use case tracking as a method of evidence gathering to enable them to gain an in-depth understanding of people's journeys through the social care system, their experiences of how care and support decisions are made by our commissioners and social work teams, how they are communicated and implemented, and the impact this has on their lives. Work has been ongoing in Q3 to prepare staff who will speak to CQC and engagement with partners.
- In November 2024, the Care Quality Commission (CQC) [inspection report of the Shared Lives scheme](#) was published which has maintained its good rating. This value for money [scheme](#) offers long and short-term, family-based living arrangements for adults with different care needs, such as people with learning or physical disabilities, mental health issues, dementia or vulnerable older people. The service matches and supports people to live with [shared lives carers](#).
- In collaboration with NHS Sussex and other local partners, West Sussex County Council has been involved in the development of a comprehensive [Winter Plan](#) for 2024/25, focussing on health and social care services. The plan emphasises proactive measures to support vulnerable people during winter months. Key initiatives include identifying at risk individuals through primary care practices, optimising community and voluntary sector support and ensuring clear alternatives to acute hospital admissions. Additionally, the plan prioritises vaccination programmes to enhance community resilience. By prioritising early intervention and coordinated care, access to safe services and extra home care support, and efficient patient discharge processes, the council aims to maintain service quality, safety and the support of residents throughout the winter period.

Our Council Performance Measures

2. The following section provides KPI updates comparing performance over the last three periods (each measure will explain the reporting period).

Adults Services		2024/25 Target	Performance Over The Last 3 Periods			DoT	Year End Forecast
13	<p>Measure: Outcomes of safeguarding risk – where a risk was identified, the outcome/expected outcome when the case was concluded for Section 42 enquiries (% where risk remains).</p> <p>Reporting Frequency: Quarterly</p> <p>Aim Low Measure</p>	8.26%	Jun-24	Sep-24	Dec-24		A
	A		R	R			
			8.8%	10.5%	11.8%		
<p>Performance Analysis: Dec-24: It is again noted that there has been a further increase in the risk remains in Q3. Through reviewing the available data, no specific themes have been identified to attribute this increase to, however as reported in the previous quarter, it has been identified through best practice forums that the interpretation of risk remains can vary. This includes where other risk factors, not related to the specific safeguarding enquiry, are considered as a risk remaining.</p> <p>Actions: Safeguarding audits across the different areas in Adult Operations are taking place in Q4, with the learning and any themes to be shared with the countywide team managers and practitioners. The current safeguarding training is being reviewed and updated. It is therefore hoped that with these interventions, an end of year forecast of Amber is appropriate.</p> <p>Adult Social Care Outcomes Framework (ASCOF) have introduced a measure on 'the proportion of section 42 safeguarding enquiries where a risk was identified and the reported outcome was that this risk was reduced or removed' and the service, with performance and intelligence colleagues, will look to explore how this can be presented in 2025/26.</p>							
11	<p>Measure: Percentage of contacts to adult social care that progress to a social care assessment</p> <p>Reporting Frequency: Quarterly, reported a quarter in arrears.</p> <p>Aim Low Measure</p>	25.0%	Mar-24	Jun-24	Sep-24		G
	G		G	G			
			18.0%	14.4%	12.9%		
<p>Performance Analysis: Dec-24: Performance for Q4 of 2023/24 and Q1 of 2024/25 have been updated to ensure that the number of people who have progressed to an assessment have been confirmed on the case management system.</p> <p>Performance continues to exceed the target reporting low numbers, which shows that less people are going on to receive social care services having initially made contact with the Council. This evidences achievement of the County Council's strategic objectives for people to remain as independent as possible and shows the positive impact the service is having in meeting people's needs through information, advice, and guidance, as well as the provision of preventative services.</p> <p>Actions: The early support project in relation to the Council's information, advice and guidance service and early support principles has been agreed. The principles have been co-produced and will help to enable a prevention-first approach to support adults to feel empowered and retain their independence for longer, enable efficiencies, and help to reduce demand in care and health services.</p>							
36	<p>Measure: Percentage of adults that did not receive long term support after a period of reablement support</p> <p>Reporting Frequency: Annually</p> <p>Aim High Measure</p>	85.5%	2021/22	2022/23	2023/24		A
	R		A	A			
			70.4%	81.7%	77.7%*		
<p>Performance Analysis: Dec-24: The aspiration is for this measure to report as high as possible, as the more people who are in receipt of an effective period of reablement are less likely to receive social care services, which as with KPI 11, is in line with the County Council's strategic objectives for people to remain as independent as possible. Work remains underway to review the Client Level Data dataset and changes are required to bring this KPI in line with the 2024/25 Adult Social Care Outcomes Framework (ASCOF) definition, however 77.7% is the confirmed ASCOF result for 2023/24, against an England score of 79.4%. In view of the England score, a review of the target for this measure is being considered for 2025/26 to bring it more in line with the ASCOF results.</p> <p>Actions: A key priority for the service is to heighten the importance of reablement in order to reduce the need for long-term care and support, ensuring a greater number of people benefit from reablement following hospital discharge or at the start of their community social care needs journey. As part of the reablement programme, functional skill development, equipment, adaptations and technology all provide a framework to support independence and improve wellbeing. It is believed that there are greater opportunities for reablement in the future and this is therefore identified as an area for improvement, with a new Community Reablement Service being commissioned for commencement in April 2025. To support this increased focus on reablement and to ensure we are supporting more people to regain and retain their independence, a programme to review and implement changes to internal systems, practice and resources has also commenced to deliver a more effective approach.</p>							

Adults Services		2024/25 Target	Performance Over The Last 3 Periods			DoT	Year End Forecast
12	Measure: Percentage of adult social care assessments that result in a support plan Reporting Frequency: Quarterly, reported a quarter in arrears. Aim High Measure	80%	Mar-24	Jun-24	Sep-24		A
	R		R	R			
			66.3%	58.4%	65.7%		
Performance Analysis: Dec-24: This indicator is linked to KPI 11, as effectiveness in reducing those who make an initial contact with the Council that then move onto an assessment, should be getting a care plan and social care provision. It should be noted that the overall number of these assessments should reduce. Performance reported is for Q2 as data for this measure is retrospectively updated to ensure the outcome of the assessment and need for a support plan have been completed. As predicted in the previous quarter's report, performance has increased in Q2, following the trend of retrospective updates which shows an improvement in performance reflecting the additional assessments and support plans.							
Actions: This measure will be continually monitored, and performance will be routinely updated throughout the financial year to reflect the additional assessments with the aspiration of getting closer to the target percentage of support plans.							
37	Measure: Percentage of adults that purchase their service using a direct payment Reporting Frequency: Quarterly, reported a quarter in arrears Aim High Measure	27.4%	Jun-24	Sep-24	Dec-24		R
	R		R	R			
			22.7%	*22.2% (Provisional)	*24.1% (Provisional)		
Performance Analysis: Dec-24: The aim of this measure is to be as high as possible, as more people in receipt of a Direct Payment is not only a cost-effective way for the Council to meet people's needs, it also gives more choice and control over how needs are met, as well as improved outcomes. This is the confirmed ASCOF result for 2023/24, against a regional score of 25% (England score 25.5%). Performance has shown a slight improvement.							
Actions: As part of the improvement programme the Direct Payment policy has been reviewed and was republished in December 2024 to include reference to a strengths-based approach, looking at social and other networks to meet customer assessed needs. The ambition is to increase the number of Direct Payment customers whilst stimulating the market with alternative care services combined with strengths-based working, achieving better outcomes and better value for money.							
38	Measure: Percentage of users of adult services and their carers that are reviewed and/or assessed in the last 12 months Reporting Frequency: Quarterly Aim High Measure	60.0%	Jun-24	Sep-24	Dec-24		G
	A		A	G			
			57.4%	56.9%	63.8%		
Performance Analysis: Dec-24: Following the reduction of the target to 60% to better reflect the operational prioritisation of reviews where there is greatest risk, performance has increased significantly and exceeded the target at Q3. Everyone continues to receive their care service and are able to contact the relevant social care team if there are any issues, and then their review will be prioritised.							
Actions: Reviews and assessments of adult social care users continues to be an important piece of work for the service and it is hoped future performance will continue to improve further.							
39	Measure: The percentage of all working age (18-64) adults with a long-term service in employment (paid/unpaid) Reporting Frequency: Annually Aim High Measure	TBC	Jun-24	Sep-24	Dec-24		TBC
			3.4%	3.5%	3.9%		
Performance Analysis: Dec-24: This is a new local measure for 2024/25 and a target is therefore yet to be established. As this was a new indicator for 2024/25, there remains work to do to ensure the employment status of people who receive a long-term service is captured, as the previous collection method did not require completion as a mandatory field (except for Learning Disability customers) during assessment. Additionally, the information collected is being gathered through either new assessments or reviews, and therefore will not reflect the entire cohort of working age customers in receipt of a long-term service. The available reported data reflects those only in paid employment currently, as there is ongoing work underway to identify and record people in voluntary or unpaid work. It is hoped this will be available in Q4.							

Adults Services		2024/25 Target	Performance Over The Last 3 Periods			DoT	Year End Forecast
<p>Actions: This measure replaces a former Adult Social Care Outcomes Framework (ASCOF) measure (the percentage of adults with a learning disability in paid employment) which has been removed. Supporting people into employment remains a priority for the county council and therefore this measure has been introduced to capture all working age adults in receipt of a long-term service in paid and unpaid (including voluntary and work experience) employment and placements. This reflects the ambitions in both the Adult Social Care Strategy and the Council Plan in helping people and communities fulfil their potential.</p>							
40	<p>Measure: The proportion of adults who receive long-term support who live in their home or with family</p> <p>Reporting Frequency: Annually</p> <p>Aim High Measure</p>	TBC	Jun-24	Sep-24	Dec-24		TBC
			35.3%	51.9%	57.1%		
<p>Performance Analysis: Dec-24: The aim for this measure is to be as high as possible, as more people living and supported in their own homes will improve outcomes, as well as being a cost-effective way for the Council to meet people's social care needs when comparing to residential services. This is also in line with our strategic objective to support people to be in their own homes and where independent living is not possible, in places that feel like home recognising that having good connections to other people, such as family, friends and neighbours, is important.</p> <p>This is a new Adult Social Care Outcomes Framework (ASCOF) measure and replaces the former percentage of adults with a learning disability living in settled accommodation. The new measure reflects all customer groups rather than just those with a learning disability. The service is in the process of providing a baseline and projected target, however this will require changes in practice recording as this has not been a requirement of Adult Social Care services. This is linked to the new Client Level Data (CLD) return as part of the Department of Health and Social Care (DHSC) data and reporting roadmap. Although this will be an annually reported measure, data for Q1, Q2 and Q3 has been provided to demonstrate the increasing trajectory of the percentage of adults who receive long-term support who live in their home or with family. A target for this measure is still in development, however the aim will be for a stretch target at around 60%, which would give an amber level of performance at Q3.</p> <p>Actions: The service continues to promote a strengths-based approach in order to reduce new admissions to residential care for customers. This is in line with the aspirations and priorities in the Adult Social Care strategy, supporting empowerment, independent and choice. Refocussing commissioning support to identify new or changed service provision remains in progress. Performance is expected to continue to improve in view of this new amended measure for 2024/25.</p>							
44	<p>Measure: Percentage of people affected by domestic violence and abuse who feel safe upon leaving the service</p> <p>Reporting Frequency: Quarterly</p> <p>Aim High Measure</p>	95.0%	Jun-24	Sep-24	Dec-24		A
			R	A	A		
<p>Performance Analysis: Dec-24: In this reporting period, the Worth Front Door have received 666 Referrals for Victim-Survivors, 57% Police Referrals and 7.5% Self-Referrals primarily via our Worth Duty Phoneline.</p> <p>The Community Safety Wellbeing (CSWB) Team have allocated a further 111 new victim-survivors to the community Independent Domestic Violence Advisors (IDVA) /Independent Sexual Violence Advisors (ISVA) Team and have a current combined caseload of 418. The health IDVA project received a further 80 referrals with an 82% engagement success rate with the referred victim-survivors.</p> <p>The CSWB Team have seen 73% of victim-survivors exit the service in a planned way and 100% were asked if they were feeling safer upon exiting the service, with 90% reporting they did.</p> <p>2% of victim-survivors had their cases and continued support transferred to a Domestic Abuse Practitioner (DAP) due to their children moving to a Family Safeguarding intervention (Child In Need /Child Protection Plan), so the closing client-reporting outcome information was not discussed with them.</p> <p>Actions:</p> <ul style="list-style-type: none"> Dip audit samples have been completed in preparation for the Joint Targeted Area Inspection across the service. The Individual Support and Safety Plan (ISSP) has been updated on Mosaic database and has resulted in an increased level of detail and quality of recording across the IDVA and DAP team. Further Mosaic developments will now progress to allow for scaling and impact to be designed to work alongside this new ISSP work-step and inform this KPI in 2025/2026 reporting. The High Sheriff is attending the Domestic Abuse Hub on 23rd January 2025 to understand how the service supports victims/ survivors and works in partnership. 							

Adults Services	2024/25 Target	Performance Over The Last 3 Periods	DoT	Year End Forecast
	<ul style="list-style-type: none"> Further development work on the evaluation to capture the impact on children. The Worth Training Team has delivered five further Domestic Abuse Training expert modules to 181 professionals working in West Sussex. The Health IDVA Training Team have delivered a further 13 training sessions to 285 health professionals. 			

Finance Summary

Portfolio In Year Pressures and Mitigations

Pressures	(£m)	Mitigations and Underspending	(£m)	Projected Year End Budget Variation (£m)
Underlying demand pressure brought forward from 2023/24 (Localities £5.3m and Lifelong Services £2m)	£7.300m	Staffing vacancies within the Service	(£1.100m)	
Older People's Care Cost – Real Terms Price Pressure	£3.300m	Preventative Services - Activity Volumes and Efficiency Changes	(£1.500m)	
Private Run-out Customers – Payment of Exceptional Arrears	£3.000m	Other Opportunities	(£1.200m)	
Reduction in means-tested income from customer contributions to care	£1.400m			
Supported Living	£3.500m			
Exceptional One-off Items	£0.300m			
Non-Delivery of Savings – Judged as at Significant Risk	£4.200m			
Adults Services Portfolio - Total	£23.000m		(£3.800m)	£19.200m

Financial Narrative on the Portfolio's Position

- As at the end of December, the forecast for the **Adult Services Portfolio is a projected overspend of £19.2m, an increase of £4.1m when compared to the position reported in September.** Given the constant turnover of customers and the challenge of buying care where demand tends to exceed supply, this projection is subject to a risk range, with the upper estimate of this being £20.5m, though equally, there is potential for a reduction depending on demand during the winter.

Localities

- The cost of care packages remains the dominant influence on the Older People's budget. The average gross weekly cost of a customer is now £664, £50 per week more than at the end of March 2024. This is growth of 8.1% whereas the budget was set on an assumed increase of approximately 7%. This is a pattern which intensified during the third quarter with the average cost now 1.2% higher than at the end of September, whereas the assumption made as part of the September

PRR was for growth of up to 1.5% by 31st March 2025. This suggests that the rate of increase will be higher and therefore, overspending due to real terms price pressure has risen to £3.3m.

5. This increase is the product of four main factors:

- **More People in Residential Settings.** As a weighted figure, average weekly cost is influenced by the proportion of customers in residential care compared to non-residential services. Based on headline numbers, the residential proportion has worsened from 46.18% in May 2024, to 46.94%, counter to the ambitions in the Adult Social Care Strategy.
- **Rising Complexity of Needs.** The obvious example is dementia where the number of specialist beds being purchased has grown both in absolute and relative terms.
- **Market Dynamics.** The number of new residential placements bought outside the Shaw Contract which are being purchased at a price negotiated with a provider rather than at a usual maximum rate continues to rise. Since April 2022, the proportion of "agreed rates" has moved from 45% to 59%. Although that makes the figure marginally lower than at the end of September, there was no financial improvement due to the average price being paid increasing by 1.6% to £1,077 per week.
- **Domiciliary Care.** More positively, the rate being paid for packages of domiciliary care purchased under the new framework, that came into place in October, has been falling. It had been expected that these packages would cost an average of £28.66 per hour, however, the price that has been paid has been £26.31. This is an indication of how the priority that the County Council has attached to the sector through its fee uplift decisions in the last few years has stimulated competition. Whilst some mitigation is currently available, it remains to be seen whether this will be maintained given the impact that the changes to the National Living Wage and National Insurance will have on provider costs from 1st April 2025.

6. In contrast, customer numbers remain steady and at a level within budget estimates. The headline total at the end of December was 21 greater than in September, which is consistent with seasonal demand trends. For budget management purposes the more significant issue continues to be the retrospective impact of processing lags. At any one time there tends to be between 200 and 250 residential placements where a person is receiving care but where the initial payment to the provider has not been made. This is an issue which has become compounded by the growing number of people who have privately made their own care arrangements but who have applied to the County Council for a Care Act assessment because their capital is running out. There remain backlogs in carrying out those assessments and substantial arrears continue to be paid to providers.

7. To reduce those backlogs, the rate at which private-run cases are being cleared has been accelerated beyond the planning assumption on which the September forecast was based. In the last quarter significant processing has taken place which has backdated costs to last financial year. As the intention is to maintain throughput at this rate during the fourth quarter, the cost of exceptional processing in 2024/25 is now forecast at £3m, which is £2m more than previously projected.

8. Another complicating factor is the means-tested contributions that people pay towards the cost of their care. For non-residential, income remains lower than in the past. Currently 60% of customers are contributing at a value which funds 18.7% of expenditure. As recently as May 2022 those figures were 67% and 21.2% respectively which is the expectation on which the budget was prepared. It is not believed that levels of wealth in the community have reduced to an extent which would explain that shift. This is corroborated by the fact that around 1,000 cases have pending status in terms of processing, some of which reflects the difficulties that sometimes exist when engaging with customers.
9. A further consideration relates to a backlog of 545 historic financial assessments which were in the process of being cleared at the end of last financial year. An estimated value of £2.9m was made in relation to the expected additional income these cases would produce once those assessments had been finalised and customers had been invoiced for the relevant arrears. That work has been completed; however it is estimated that there will be £1.4m less income receipted than the original calculation. Work is on-going to understand this latest position.
10. The combination of these pressures produce an overspending forecast for Localities of £13m, which includes underlying pressure of £5.3m carried forward from 2023/24.

Lifelong Services

11. The dominant influence on the Lifelong Services budget is delivery of savings. Against a target of £7.6m, forecast delivery has reduced by £0.8m in the third quarter to £3.4m. This represents a shortfall of £4.2m which will transfer for delivery into 2025/26. The main reason for the deterioration is the number of customer reviews which have been completed that have found an increase in needs rather than delivered savings, although, a further 117 reviews have been undertaken which require a support plan to be prepared and, in some cases, new care arrangements to be purchased. This work is being prioritised and may lead to some improvement in the position during the fourth quarter.
12. Spending on care has also increased. As with Older People, this is not driven by growth in numbers, but by rising costs. The average gross weekly cost of people with learning disabilities, who account for approximately 85% of customers in Lifelong Services has risen in 2024/25 by £125 to a figure of £1,286 (+10.7%), of which the growth in the third quarter was £17 or 1.4%.
13. That movement is being driven by Supported Living where weekly spending rose by £38k in the quarter, taking total expenditure on this care category to around £60m. Most of this is attributable to customers with complex needs who have been placed in arrangements where fees are uncapped. Whilst part of that increase is volume-related, the average cost of a Supported Living placement has risen by 15% during the year to date. It should be noted that some of this increase is an indication of a challenging market where demand often exceeds supply. The Commissioning Team continues to work with the market to support supply and price and a review of the current framework is underway.
14. The increase in cost for 2024/25, which allowed for the savings expected from reviews, was around 7%. Based on current spending levels within Supported Living, there will be an overspend of around £3.5m.

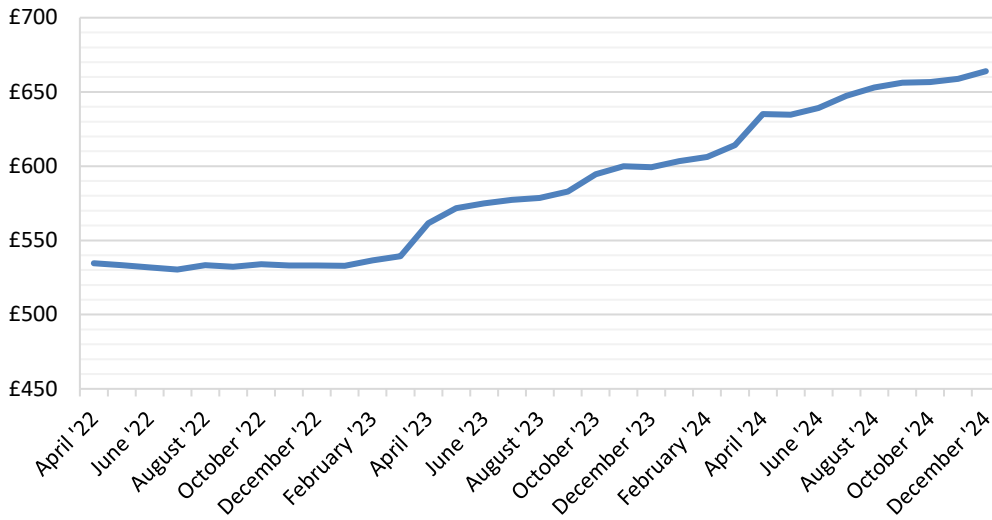
15. Elsewhere within Lifelong Services, pressures have lessened largely due to customer turnover, additional income from customer contributions, a reduced estimate of the cost of Residential College placements and the achievement of Continuing Healthcare status for one particularly expensive customer. This means that the overspending because of exceptional items such as disputes about usual place of residence has fallen to £0.3m.
16. An underlying deficit of £2m was carried forward from 2024/25. Bringing this into the mix, the forecast overspending for Lifelong Services is now £10m.

Summary and Mitigations

17. The total overspending on care budgets is estimated at £23m, which equates to just over 6% of gross spending on care.
18. Mitigations of £3.8m are available to apply against this:
 - **Staffing Underspend (£1.1m)**. There are underspends of £0.7m from vacant posts plus £0.4m connected to new pay grades for Social Workers and Occupational Therapists that were introduced in May 2022. The budget recognises the potential full cost of that arrangement, so there will be an underspend until staff reach the top of their new pay scales.
 - **Preventative Services (£1.5m)**. Activity levels continue to indicate the likelihood of underspending within community equipment and technology enabled care. Part of this is due to efficiency changes, the benefit of which will extend into future years.
 - **Other Opportunities (£1.2m)**. These arise from various budgets, including reprioritising use of the Improved Better Care Fund.
19. These mitigations reduce the overspend forecast to £19.2m. Since winter is always the most volatile time of year for the Adults budget, this projection should be seen as a central estimate. There is also scope for movement in the reported position if the recent reductions in price for domiciliary care are sustained and depending on the rate at which processing of private run-out customers takes place. Although assumptions are included for all these factors, the level of spending incurred by the service creates inevitable potential for variation. Therefore, the projected overspend exists over a range of between £18.5m and £20.5m. Another key influence will be the response of the market to the cost pressures that it will face because of the changes to National Living Wage and National Insurance. The fourth quarter will give more insight into how providers will be planning to manage those increases, especially as the County Council will take a decision by the end of March about the uplift that it will pay for 2025/26.

Cost Driver Information

Average Gross Weekly Cost - Older People

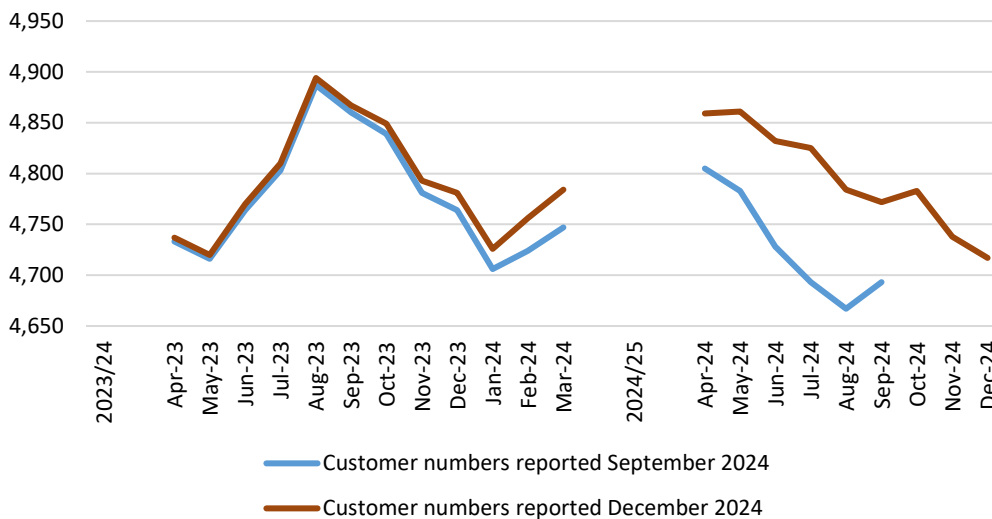


This graph shows the average gross weekly cost of Older People Placements since April 2022.

The average gross weekly cost as at December 2024 is £664. This is £50 per week more than at the end of March 2024. That is growth of 8.1% whereas the budget was set on an assumption of an increase of approximately 7%.

The average cost is now 1.2% higher than at the end of September 2024.

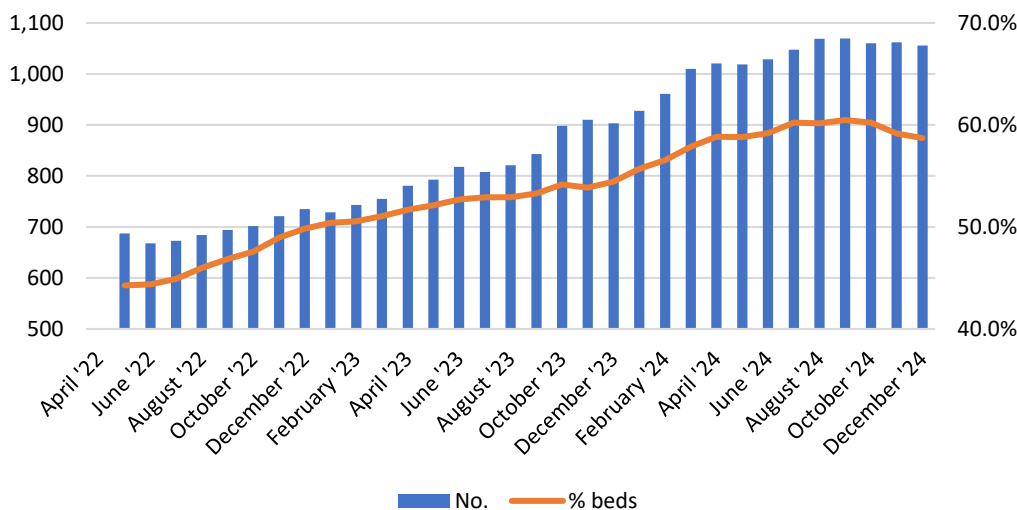
Older People Receiving Funded Social Care



This graph shows a comparison between the customer numbers reported in the social care case system as at September and the situation as it appears as at December.

The graph demonstrates significant processing has taken place which has backdated costs to last financial year and to the first quarter of 2024/25. Since the payment of arrears has been averaging £25k per person, at the point when these are settled there is a material, if one-off, impact on the budget.

Older People's Beds Purchased At Agreed Rates



This graph shows the average beds purchased at a bespoke agreed rate.

Since April 2022, the proportion of "agreed rates" has moved from 45% to 59%. Although that makes the figure marginally lower than at the end of September, there was no upside to this because the average price being paid increased by 1.6% to £1,077 per week. As a result, the cost of such beds is over £200 per week greater than one bought at a typical usual maximum rate.

Savings Delivery Update

20. There are £9.439m of savings to be delivered within the portfolio in 2024/25. Details on each saving are reported in the table below:

Saving Activity	Year	Saving to be delivered in 2024/25	December 2024		Narrative
			Value	Status	
Community Care – including re-directing Residential Customers to Home-based Care Savings	Prior Years	£6.708m	£3.460m	B	Saving delivered.
			£1.348m	A	Estimated savings that will be delivered in Q4.
			£1.900m	R	These are savings where delivery will be delayed until 2026/27.
Occupancy of Shaw contract	Prior Years	£0.318m	£0.318m	B	Saving delivered.
Avila House	Prior Year	£0.054m	£0.054m	B	Saving delivered.
Review of Funding to Promote Care as a Career	2024/25	£0.170m	£0.170m	B	Saving delivered.
Review of Carer Information, Advice Assessment and Support Contract	2024/25	£0.322m	£0.322m	B	Saving delivered.
Review of the Quality, Practice and Development Team	2024/25	£0.100m	£0.100m	B	Saving delivered.
Review of Commissioning Contracts	2024/25	£1.767m	£1.500m	R	The contracts planned to deliver this saving are subject to notice periods of six months. These notice periods have not been served so no benefit will be received in 2024/25.
			£0.267m	B	Savings delivered.

Savings Key:

R Significant Risk **A** At Risk **G** On Track **B** Delivered

Capital Programme

Summary - Capital

- Currently, there are no capital projects in delivery within the Adult Services portfolio.
- A summary of the latest Capital Programme Budget Monitor is reported in **Appendix 4** and full details of all individual schemes are set out in the Budget Report published in February 2024.

Risk

23. The following table summarises the risks within the corporate risk register that would have a direct impact on the portfolio. Risks to other portfolios are specified within the respective portfolio sections.

Risk No.	Risk Description	Previous Quarter Score	Current Score
CR58	The care market is experiencing significant and increasing fragility. This is anticipated to be related to factors such as but not limited to cost pressures, changing requirements and expectations, and workforce challenges and more recently the national announced increases in the national living wage and employer national insurance contributions. The council is not fully funded to cover these additional burdens. There is a risk of failure of social care provision as some care providers may exit the market which will result in funded and self-funded residents of West Sussex being left without suitable care and provider costs increasing	12	20

24. Further detail on all risks can be found in **Appendix 5** - Corporate Risk Register Summary. Full details of the latest Risk Register, including actions and mitigations can be found under the County Council's [Regulation, Audit and Accounts Committee Agenda](#) website.