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BORDERS DIRECT PAYMENT AGENCY (BDPA) EVALUATION 2009-10

This is an internal evaluation consisting of responses to a questionnaire devised by BDPA staff and sent out to clients of BDPA who are in receipt of a Direct Payment and/or Independent Living Fund.

Eighty three responses were returned out of a possible 236 evaluation questionnaires sent out equating to a 35% response rate. This compares to last year's response rate of 52%. Reasons for this may be the large number of recent referrals of clients using agencies, resulting from the local council's tendering process. Involvement with such client's has in some cases been minimal, and as such they may not find the questionnaire relevant.

The aims of this evaluation are:

- To establish where we are meeting client needs and where we need to improve.
- Where we could be providing a new or alternative service.
- Whether the ways we communicate with clients need to be improved or 'greened'.
- Whether there are training needs which are not being met, and what would make events more attractive or accessible to clients and their staff.

A number of the questions required respondents to assess on a scale of 1 to 5, with 5 equating to 'completely satisfied'.

| | | | | | | |
|---------------|---|---|---|---|---|----------------------|
| Not satisfied | 1 | 2 | 3 | 4 | 5 | Completely satisfied |
|---------------|---|---|---|---|---|----------------------|

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QUESTIONNAIRE RESULTS

(Client comments in *italics*.)

1. ACCESSIBILITY/PROFESSIONALISM/EFFECTIVENESS

Clients were asked if the move to an upstairs office had affected their ability to get support from BDPA.

62% answered 4 or 5, on a scale of 1 to 5, with 5 meaning 'completely satisfied'.

5 responded with 1 or 2, with 1 meaning 'not satisfied', equal to 6%.

I am disappointed that you were unable to move to a totally accessible property.

Clients were asked about their ability to get in touch with us when needed.

93% answered 4 or 5.

Can get support/ advice quickly either by email or telephone.

Always a good response, easy to contact and helpful.

Clients were asked about time waiting for support when they need advice or information.

93% answered 4 or 5

Always return any calls made, and are very polite and helpful.

You can always manage to speak to someone if you have problems with managing direct payments and they will also come out to your home if you need them to.

If I cannot contact the person I want to talk to, I am usually well advised by someone else in the office, which is helpful until my main contact gets in touch with me.

I have always got help and advice whenever I phone. No waiting.

Clients were asked if they felt they were treated with courtesy and confidentiality.

99% answered 4 or 5

The telephone answering, with a welcoming tone, is quite exceptional.

Courtesy and confidentiality along with great sensitivity if I get something wrong.

Clients were then asked about the reliability of BDPA staff to give the information and support needed.

99% answered 4 or 5

In our experience [named member of staff] is a very reliable and efficient member of staff.

They phone me, explain things to me and are very helpful and understanding.

Top service.

First class support.

Some responses indicate a confusion between Social Work and BDPA:
*I have had no dealings with you to date, except that you pay in my money regularly, which is fine. The rest I take on trust.
Can't really remember but I think initial/all contact has to be made through central Council phone no.*

2. SUPPORT RECEIVED

Clients were asked about their general satisfaction with the support received from BDPA.

96% answered 4 or 5

They were then asked to identify what our strengths and any areas where we could have given better support.

A number of responses highlighted the usefulness or necessity of the payroll service, and the 'voice at the end of the phone'.

Very efficient, prompt assisting with any queries/problems which arise. An arrangement to call back is always kept. Have not identified any weaknesses.

Processing monthly payroll & general advice.

Visits to make sure we are coping with all areas of BDPA.

They have been very helpful in dealing with the Inland Revenue and other financial aspects of Direct Payment.

Clarity, confidentiality, supportive, prompt attention, practical help on all levels.

You are always there at the end of the phone for help.

Strengths are response speed (re enquiries). No areas for improvement.

Being able to contact on the telephone and receive first class help and advice.

Explaining things properly is one of the strengths that helps me to understand, don't think you could do it any better as it's fine.

Easy to contact. Always got time for me. Treat me like a person, not just a number.

A payroll service that we could not do without.

Constant reliable support.

Areas identified where support could be improved on:

Information and advice on employment of young people.

Could check now and then to make sure everything is ok. I have 4 weeks respite per year.

Approve of contact with DP users via in person/events. However

consultation get-togethers - currently are always the same/not useful.

The staff you employ is a great help to me, I need not feel anxious about contacting them for help or information. More like-minded people like

[named staff member] would be a great help. The increase of clients would put stress on the staff. Can I suggest a help line for those of us who need information to help and reassure those clients who are in need of attention.

Clients were asked whether they were satisfied that they had all the information needed at the start of the Direct Payment?

94% answered 4 or 5

Clear explanation at start of direct payment, followed up with readily available support whenever required.

I was a bit confused at the beginning (am 82 years) and do make "senior citizen's" mistakes, however I can get help when I phone.

The whole concept is quite hard to grasp initially as the field of caring etc is new to each user when they start. Simple explanations without tons of documents is what's needed at the outset.

Clients were asked how happy they were with support recruiting and retaining staff. This question caused some confusion.

72% answered 4 or 5

Don't know what recruiting and retaining staff are!

Can't answer, as I am new to Direct Payments, but prefer retaining staff.

I feel that I could do with more support with recruiting staff, however acknowledge that I have left this to slip and not asked for help recently.

They were also asked about support with questions regarding finance and managing the Direct Payment.

83% answered 4 or 5

[named staff member] has kept me up to date and well informed on all these questions.

If we need help you are just a phone call away.

Home visits assisted with finance questions.

We couldn't have done it without the help of BDPA.

Grateful for help and support as I have rheumatoid arthritis and have difficulties.

Excellent support for all these points.

It is clear from some of the responses that not all questions were fully understood by all respondents. This may be due to a combination of factors - new DP clients, those who use care agency staff only, and those who had had little contact with BDPA for whatever reason.

Again, there seems to be some confusion of which support comes from BDPA and what is the area of responsibility of the care manager:

Dislike any involvement in PAYE maybe list and advise initially on what you can actually spend your money on!

3. INFORMATION SHARING

Clients were asked if they or their staff attended any training sessions/information events organised by BDPA.

23 replied 'yes', equating to 28%

53 replied 'no', equating to 64%

Asked if they found it informative/helpful/interesting, 91% of those who attended answered 4 or 5.

Clients were asked to give the reasons they had not attended events, and what could we change to make attendance easier.

10 respondents said they would not be interested in attending at all.

Responses ranged from not feeling training was necessary or relevant, to problems with location and health reasons.

We feel relatively in control of our direct payment situation - and can get any additional help via phone calls to SBC officers or BDPA staff.

Have only very recently started with Direct Payments.

These are all very relevant if you are employing unknown staff, but in my situation this is not the case.

It would be easier to attend if the courses were nearer home.

I prefer to read the documentation. It's quicker.

*Not interested in giving up any more of **my** life!*

Prior engagements and health reasons have meant been unable to attend but would like to in the future.

Work commitments stop me attending but the training sessions are relevant to employers and employees.

PA's did not show any interest.

Staff up to date with training and I would find difficulty attending training sessions.

Just not able most of time, and I don't like large crowds.

I do not like events.

Care from an agency.

No requirements at present.

As I only get 3hours a week, did not think it would benefit me.

Do not feel the need.

Clients were asked to identify training areas/issues for themselves or their staff?

Managing aggression/ agitation.

Employment regulations.

Moving and handling - 7 respondents

First Aid - 5 respondents

Infection control - 5 respondents

Food hygiene - 3 respondents

Re - assessment.

Access to additional support/resources eg. hydrotherapy, respite.

Wheelchair management.

Confidentiality.
Changes to employment regulations.
Dementia awareness.

*I feel I would benefit from more of an insight into how to deal with aggression/ agitation due to head injury.
Would like advice as to how often these various certs require renewing eg first aid etc. Does the certificate of first aid lapse?
Most staff receive training in other agencies that they are also employed with.*

Electronic communication

Clients were asked about their use of home computers, with a view to possibly increasing our use of electronic communication if this was seen as desirable.

51 clients (61%) said they have a home computer and printer. 30 (36%) said they did not.

50 clients (60%) have internet access, 31 (37%) said they did not.

29 clients (35%) stated that they currently communicate with us by email.
52 (63%) said they did not.

Asked if they would prefer to have documents, timesheets etc sent by email to print at home, 24 (29%) said 'yes' and 51 (61%) said 'no'.

Asked if they would prefer to use email, website for more areas of support, 22 (27%) said 'yes', 51 (61%) said 'no'.

It is apparent from further comments that this is a matter of personal preference.

*We find it the best way to keep a record of everything to do with DP.
If BDPA could have a job section on the website so adverts could be posted there.*

I find email very helpful and easy to use as my disabilities make paper handling difficult.

Sometimes it is not easy to write, I use my computer quite often, but don't know how to put timesheets etc on it yet.

I use email as preferred method of communication and would like to be able to email time sheets/ get pay slips electronically.

I seldom use my laptop and prefer not to. I intend to discontinue my internet.

I already do ask if I need documents sent by email and either [named staff member] phones or emails me by return. Thank you.

I always prefer paper.

I am a bit nervous on my computer.

No use when technical problems arise!

Cannot use these as I have limited hand use due to rheumatoid arthritis.

Asked if they used online services for banking/ paying staff/paying HM Revenue and Customs/other, 21 clients (25%) answered 'yes' and 55 (66%) answered 'no'.

I write cheques however I think it would be better for the carers I employ if I were able to pay through banking.

Sometimes online payment, made when postal strike for instance.

Paying staff, bills when possible.

I pay staff online, and would like to do HRM Revenue on-line as well.

I started online at one point and got into such a muddle I backed out (with my bank).

Why are you asking this question what does it have to do with your ability to provide a quality service?

4. SATISFACTION

Clients were asked to complete the following:

What BDPA do best is:

Apply their service with exemplary courtesy, efficiency and professionalism.

Answer all the questions you have.

Display understanding and ability to empathise when problems arise and follow up with practical solutions.

Deal with wages and tax office.

Manage payroll and holiday entitlements as well as tax returns.

Support me if I have problems, ie. pays etc

Being very helpful, courteous, confidential.

Face to face communication.

Being helpful and friendly.

Responding to requests for advice.

Be helpful.

Everything.

Support.

Administration of staff wages, keeping me informed.

The comprehensive payroll service and support.

Help [client name] stay in her own home.

Gives first class information.

Communication; making it clear what is required.

Managing payroll etc.

Offer practical and supportive help when needed.

Given you tailored support.

Just about everything!

Guidance with courtesy.

Make life easier.

Allow you to get on with your life without too much interference.

Being there when you need to talk.

Look after me and other disabled people very well.

*Help organise staffing.
Support and provide info for the DP users and family.
All round support.
Helpful with any advice needed.
Give us independence.
Difficult to pick out one thing. Very good all round service.
Answer queries by phone immediately - visit us at home to audit our books
from time to time.
Motivated staff, give good support and advice.
Provide answers to ad hoc questions.
Personable and helpful once we had met you.
Provide the ability to tailor homecare requirements to suit individual
circumstances.
They are always there ready to help if you need help.
Provide support when needed.*

I wish BDPA could:

*Move south.
Continue the good work!
(Have) more power over Social Work.
Provide a list each year of each individual's holiday entitlement.
Be clearer on how to use funding.
Keep a register of interested workers - and actively pursue creating one.
Stop using acronyms!
Help with housing issues. Aids/appliances for clients.
Be more helpful and useful around employment.
Be involved in assessment.
Manage respite care without going through SW dept!
Carry on giving the good services they deliver.
Get its act together.
Help more with carer recruitment including interviewing and providing a
room for interviewing.
Have more model documents on website.
Continue in the same vein.*

The hardest part of having a Direct Payment/ILF has been:

*Managing this with inevitable escalating costs of care.
Coping with my own inefficiency in dealing with paperwork on time!
Getting on DP in the first place.
Recruiting staff.
Getting it all set up in the beginning.
Not sure what I can use funding for.
Finding suitable workers.
Isn't hard.
Keeping the cheque book separate!
Having to adhere to agreed hours every week (not flexible).
Having this service/ but hindered by the programme : not all users want or
access at present.*

Managing the account myself.
Finding the right employees in my area.
Keeping my paperwork and finances in order.
None.
Finding staff.
Organisation at beginning.
Recruiting staff for only a few hours per week.
Getting suitable staff.
The paperwork involved and difference locally/nationally to eligibility criteria.
Finding carers (esp male)
Employing staff.
Fear.
Understanding why 'powers' reclaim Ian's other financial allowance.
Finding people in my age group to do things with.
No complaints.
Relying on my daughter to take charge as I am not able.
Nothing at all (perfect).
No problem.
Restrictions imposed by finance and Care Manager.
Keeping records - yet another lot!
Getting a receipt from the Care Company.
What is this to do with your quality assurance?
Nothing.
Finding out from Social Work if this can continue due to changes in son's circumstances.
Keeping up with paperwork.
Recruiting carers.
The struggle to get information early on in the process.
Given that my mother has dementia she opens all correspondence to her, she sometimes hides it, forgets about it and this causes disruption!
No problems.

I wish I had known:

That getting old was such a problem!
That the services of BDPA were available sooner than I did, I was reluctant to request a Direct Payment because of lack of confidence in my ability to manage it.
You don't know what you don't know and the system is not fit for purpose.
Seems to be higher needs DP users :days
About BDPA much sooner.
About this service earlier.
About DP earlier.
Ian could reclaim it in expenses for himself.
The amount of paperwork.
Using Hawick Care Co. who send us one invoice each month has made our admin easier.
Individual email addresses at BDPA as it would have inspired more confidence.

*Of the availability of this facility as it might have helped with my father before his death.
It would be so easy!*

5. COMPLAINTS

Asked if they had ever had cause to complain about the support from BDPA, 79 respondents said 'no', equating to 95%. One said 'yes'.

No complaints.

No as response times very quick.

I made my dissatisfaction known re delays in recruitment process and poor information.

Thinking about it after this questionnaire.

Asked if they felt able to approach us about the complaint, the one respondent said 'yes'.

6. EXTENSION OF SERVICE

Clients were asked if they could identify ways in which BDPA might improve and extend the services available to clients in the future.

Cannot think of anything at present.

In my case I've been fully satisfied by everything.

More staff hours would enable you to expand the excellent service which you provide.

I feel very well supported already.

I feel money management would be of benefit for me also keep employment documents.

Not at this moment in time.

Bank relief staff.

At present no extension necessary.

No - don't think you have the capacity to achieve more than you can at the moment.

Not as yet. In the future, it would be helpful if I could be advised of any new developments/changes to benefits so that I can ensure my sister always receives the correct benefits.

Carer recruitment.

The current situation is very good for my circumstances.

Happy with support given.

7. RESPONDENT PROFILE

Funding:

50 respondents (36%) are in receipt of Direct Payment and/or Independent Living Fund.

37 respondents (45%) are the friend/relative/carer of someone who receives Direct Payments/Independent Living Funds

One respondent did not wish to say.

Care provider:

31 respondents (37%) use a care agency.

54 respondents (65%) employ staff directly.

Some clients use a combination of agency and directly employed staff.

2 respondents (2.5%) have respite only.

One respondent did not wish to say.

8. ANY OTHER COMMENTS

I wish DP could get information from social work now, not month later. So we have time to arrange things.

ILF has changed our lives for the better and BDPA has been a great help and feel I could ring them at anytime for anything.

As I have got older I have found that written explanations are more difficult to understand, although I do understand when it is explained and shown to me.

I have always found everyone helpful and friendly.

Staff are always very polite and pleasant - full of useful information.

Just to say a BIG thank you and keep up the excellent service you provide.

The fact that this service exists is very important - a good back up to other services available. I find the support of the staff invaluable.

I am very happy using BDPA. I have no complaints, they have been very polite and helpful to me and my problems thank you BDPA.

Negative comments were about the questionnaire format:

Find these 1-5 sat/not sat type questionnaires are "ticking boxes" rather than identifying the broad scope of users abilities/disability DP allocation:variable!

What have these questions to do with your evaluation?

And concerns about confidentiality amongst carers:

One of the worst problems with sending staff on training courses is the lack of confidentiality amongst the carers.

Adverts in paper placed by BDPA should not give a rate of pay this leads to unrest and demands by carers.

CONCLUSIONS

The vast majority of responses to this questionnaire were extremely positive. In particular clients highlighted the importance of the payroll service and the availability of staff to answer questions and deal with problems as they arise.

A great deal of value is attached to the level of personal service and the courtesy of telephone responses. Despite the increase in client numbers, it would appear those who require a higher level of support have not felt any loss of support.

Some confusion is apparent over the role of the BDPA and of the Care Manager from SBC. Some of this can be attributed to the large number of clients who recently transferred to a Direct Payment in the wake of SBC putting care contracts out to tender. Not all of these clients have required a great deal of input from BDPA and as a result may be less clear on where the Agency fits in.

RECOMMENDATIONS

Training and 'event' uptake remains low, but there are a variety of reasons for this, not least that clients prefer by and large to use one-to-one support as and when the need arises. People in receipt of a Direct Payment often have too much on their plate to want to think ahead to potential employment issues. It can be a leap too far to consider what might go wrong with employees until something does occur. For this reason clients value the '*constant reliable support*'. BDPA continue to offer personnel advice and support while signposting employers to the employment law experts available to them, if they take up the full employer's liability insurance.

Training uptake is higher among employees, and employers continue to request this, especially in the areas of moving and handling, first aid, dementia awareness and infection control.

As regards increasing the use of electronic communication, it appears that those clients who prefer this method are already using it, and there is little to be gained from BDPA promoting it further at present. Health problems can render the use of email easier or harder dependent on personal circumstances and it is indicative of the flexible nature of support that this is tailored to individual preference.

Clients do not in general like the amount of paperwork required. They also highlight the eternal issue of finding suitable staff, particularly when needed at short notice. Periodic requests for a bank of relief staff cannot practically be answered by the BDPA at this time.

Given the high level of satisfaction with the service offered, it is clear that clients want more of the same.

| Borders Direct Payment Agency | | | | | | | | | | | | | |
|--|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------|
| Monthly Statistics - Apr 09 - Mar 10 | | | | | | | | | | | | | |
| | Apr-09 | May-09 | Jun-09 | Jul-09 | Aug-09 | Sep-09 | Oct-09 | Nov-09 | Dec-09 | Jan-10 | Feb-10 | Mar-10 | Totals |
| Referrals | | | | | | | | | | | | | |
| Community Care | 8 | 19 | 12 | 8 | 7 | 9 | 5 | 8 | 8 | 5 | 6 | 10 | 105 |
| Agency Transfers | | | 79 | | 2 | 2 | | | | | | | 83 |
| CHAD | 1 | 1 | 2 | 0 | 0 | 1 | 1 | 1 | 0 | 0 | 0 | | 7 |
| Total referrals | 9 | 20 | 93 | 8 | 8 | 12 | 6 | 9 | 8 | 5 | 6 | 10 | 186 |
| Number of adult DP clients | 139 | 155 | 237 | 244 | 249 | 255 | 257 | 255 | 257 | 258 | 258 | 262 | |
| Number of CHAD clients | 21 | 21 | 23 | 23 | 23 | 20 | 21 | 23 | 23 | 23 | 23 | 23 | |
| Number of ILF only clients | 21 | 20 | 21 | 21 | 20 | 20 | 18 | 18 | 18 | 18 | 19 | 19 | |
| Total number of clients | 181 | 196 | 281 | 288 | 282 | 296 | 288 | 298 | 288 | 299 | 300 | 304 | |
| Files closed this month | | | | | | | | | | | | | |
| Community Care | 0 | 1 | 1 | 0 | 1 | 4 | 2 | 4 | 5 | 4 | 2 | 0 | 24 |
| CHAD | 0 | 0 | 0 | 0 | 0 | 3 | 0 | 0 | 0 | 0 | 0 | 0 | 3 |
| Total files closed this month | 0 | 1 | 1 | 0 | 1 | 7 | 1 | 4 | 5 | 4 | 2 | 0 | 27 |
| Total files closed to date | 109 | 110 | 111 | 111 | 112 | 119 | 121 | 126 | 130 | 134 | 138 | 138 | |
| Payroll Service | | | | | | | | | | | | | |
| Community Care - Clients/Employees | 111 | 104 | 107 | 112 | 116 | 116 | 123 | 127 | 130 | 129 | 131 | 132 | |
| Community Care - Payslips/Employees | 221 | 226 | 235 | 236 | 243 | 243 | 248 | 240 | 243 | 238 | 236 | 238 | |
| CHAD - Clients/Employees | 7 | 7 | 7 | 6 | 6 | 6 | 6 | 7 | 7 | 10 | 9 | 9 | |
| CHAD - Payslips/Employees | 11 | 10 | 11 | 10 | 10 | 10 | 9 | 11 | 11 | 14 | 14 | 13 | |
| BDPA Payslips/Employees | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 | 7 | 8 | 7 | 8 | |
| Total Payslips/Employees | 239 | 243 | 263 | 263 | 280 | 280 | 284 | 269 | 281 | 290 | 267 | 269 | 3088 |
| Logged incoming telephone calls | | | | | | | | | | | | | |
| Community Care | 317 | 354 | 349 | 375 | 310 | 367 | 340 | 264 | 277 | 387 | 361 | 448 | 4149 |
| CHAD | 12 | 10 | 18 | 3 | 13 | 15 | 17 | 22 | 15 | 10 | 18 | 9 | 162 |
| Total logged calls | 329 | 364 | 367 | 378 | 323 | 382 | 367 | 289 | 292 | 399 | 379 | 467 | 4283 |
| Logged incoming emails | 421 | 293 | 344 | 263 | 271 | 368 | 364 | 369 | 270 | 376 | 380 | 330 | 3888 |
| Client contact | | | | | | | | | | | | | |
| Community Care - Home visits | 32 | 43 | 35 | 49 | 43 | 41 | 32 | 27 | 27 | 25 | 28 | 52 | 434 |
| Community Care - Visits to office by clients/careers | 10 | 9 | 11 | 6 | 12 | 10 | 16 | 15 | 11 | 11 | 11 | 9 | 131 |
| CHAD - Home visits | 1 | 1 | 2 | 0 | 0 | 1 | 1 | 4 | 1 | 2 | 0 | 0 | 13 |
| CHAD - Visits to office by clients/careers | 0 | 2 | 0 | 0 | 0 | 1 | 0 | 0 | 2 | 0 | 0 | 4 | 9 |
| Total client contact visits | 43 | 66 | 48 | 66 | 66 | 63 | 49 | 48 | 41 | 38 | 39 | 65 | 687 |
| Recruitments advertised | | | | | | | | | | | | | |
| Community Care Clients | 2 | 3 | 6 | 5 | 2 | 3 | 2 | 4 | 5 | 5 | 2 | 5 | 44 |
| CHAD Clients | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| Total no. of recruitment packs sent | 40 | 77 | 50 | 35 | 23 | 29 | 12 | 20 | 45 | 83 | 21 | 67 | 662 |
| Enhanced Disclosures processed | | | | | | | | | | | | | |
| Adult service only | 4 | 7 | 4 | 14 | 13 | 9 | 3 | 6 | 2 | 4 | 10 | 4 | 80 |
| CHAD processed | 1 | 3 | 2 | 0 | 1 | 1 | 2 | 6 | 0 | 0 | 0 | 1 | 17 |
| Total Disclosures | 6 | 10 | 6 | 14 | 14 | 10 | 6 | 12 | 2 | 4 | 10 | 4 | 97 |
| Care Packages Direct Payments | | | | | | | | | | | | | |
| Hours per week | 2097 | 2141 | 2806 | 2960 | 3088 | 3167 | 2992 | 3257 | 3207 | 3162 | 3094 | 3123 | |
| Respite value | £66,199 | £70,600 | £71,065 | £76,614 | £80,420 | £78,299 | £78,451 | £82,036 | £83,980 | £83,582 | £81,722 | £81,722 | |
| Total annual value | £1,372,890 | £1,406,017 | £1,813,406 | £1,914,314 | £2,000,766 | £2,063,420 | £1,944,676 | £2,169,036 | £2,080,039 | £2,061,863 | £2,002,373 | £2,020,720 | |
| Care Packages ILF | | | | | | | | | | | | | |
| Hours per week | 1273 | 1259 | 1285 | 1285 | 1285 | 1305 | 1215 | 1215 | 1215 | 1240 | 1240 | 1240 | |
| Total annual value | £788,177 | £778,726 | £801,647 | £808,482 | £808,482 | £826,893 | £732,703 | £738,686 | £738,686 | £747,830 | £748,381 | £748,889 | |