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Unit Costs of Health and Social Care 2023

Manual

Jones, K. Weatherly H., Birch, S., Castelli, A., Chalkley, M., Dargan, A., Findlay, D., Forder, J., Gao, M., Hinde, S., Markham, S. Premji, S. Teo, H.











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University of Kent
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Kent CT2 7NF

Centre of Health Economics
University of York
York
YO10 5DD

If you would like a copy of this manual, please contact Karen Jones (K.C.Jones@kent.ac.uk).

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Contents

Introduction 1

The Unit Costs of Health and Social Care Programme (2022-2027) 1

The manual now contains a table of contents linked to pages in the document. 3

1. Services for older people 6

1.1 Private sector nursing homes for older people (age 65+) 7

1.2 Private sector residential care for older people (age 65+) 8

1.3 Local authority own-provision residential care for older people (age 65+) 9

1.4 Local authority own-provision day care for older people (age 65+) 10

2. Services for people requiring mental health services 11

2.1 NHS National Cost Collection - mental health services 13

2.2 Local authority own-provision residential care homes for adults requiring long-term mental health services 14

2.3 Local authority own-provision social services day care for adults requiring mental health services (age 18-64) 15

2.4 Private and voluntary sector day care for adults requiring mental health services (age 18-64) 16

2.5. Behavioural activation delivered by a non-specialist 17

3. Services for adults who misuse drugs or alcohol 19

3.1. NHS National Cost Collection – unit costs for misuse of drugs or alcohol 21

3.2. Alcohol health worker/Alcohol liaison nurse/Substance misuse nurse 22

4. Learning disability support for adults 23

4.1. Local authority own-provision day care for adults requiring learning disability support (age 18-64) 25

4.2. Specialised supported housing 26

4.3. Positive behavioural support for adults with learning disabilities and behaviour that challenges 27

5. Services for adults requiring physical support 29

5.1. Local authority own-provision residential care homes for adults requiring physical support (age 18-64) 31

5.2. Voluntary and private sector residential care homes for adults requiring physical support (age 18-64) 32

5.3. Local authority own-provision day care for adults requiring physical support (age 18-64) 33

6. Hospital and related services 35

6.1. NHS National Cost Collection – unit costs for hospital services 36

6.2. NHS wheelchairs 37

6.3. Self-management programmes 38

6.4. National Cost Collection – unit costs for sexual health 39

6.5. Screening interventions for sexually-transmitted infections (STIs) 40

7. Care packages 41
7.1. Patient costs following discharge from acute medical units 43
7.2. End of life care 44
7.3. Smoking cessation services 46
7.4. Social prescribing 47
7.5. Low intensity interventions for the management of obsessive-compulsive disorder (OCD) 48
7.6. The cost of diagnosis and early support in patients with cognitive decline 50
8. Scientific and professional staff 53
8.1. Cost components for scientific and professional staff 54
8.2. Annual and unit costs for community-based scientific and professional staff 56
9. Nurses, doctors and dentists 57
9.1. Qualified nurses 59
9.2. Annual and unit costs for qualified nurses 61
9.3. Costs and unit estimations for a GP practice nurse 62
9.4. Costs and unit estimations for a General Practitioner (GP) 63
9.4.1. Commentary for GPs 65
9.5. Online consultation costs 66
9.6. Telephone triage – GP-led and nurse-led 67
9.7. NHS dentist – Performer-Only 68
9.8. Dentist – Providing-Performer 69
9.9. NHS dental charges 70
10. Social care staff and services 73
10.1. Social worker (adult services) 75
10.2. Social work assistant 76
10.3. Community Occupational Therapist (local authority) 77
10.4. Home care worker 78
10.5. Home care manager 79
10.6. Support and outreach worker 80
10.7. Reablement 81
11. Hospital-based health care staff 84
11.1. Hospital-based scientific and professional staff 85
11.1.1. Hospital-based scientific and professional staff – unit cost components 86
11.1.2. Annual and unit costs for hospital-based scientific and professional staff 88
11.2. Hospital-based nurses 89
11.2.1. Hospital-based nurses – unit cost components 90
11.2.2. Annual and unit costs for hospital-based nurses 91
11.3. Hospital-based doctors 92

11.3.1. Hospital-based doctors – unit cost components 93
11.3.2. Annual and unit costs for hospital-based doctors 95
12. Sources of information 96
12.1. Inflation indices 98
12.1.1. The NHS Cost Inflation Index (NHSCII) 98
12.1.2. The Personal Social Services (PSS) Pay & Prices Index 99
12.2. NHS staff earnings estimates 101
12.3. Examples of roles in each Agenda for Change band 104
12.4. Training costs of health and social care professionals 106
12.5. Time use of community care professionals 108
12.6. Glossary 109
12.6.1. Overheads 109
12.6.2. Time use and unit costs 109
12.7. List of useful websites 111

List of tables

Table 1: Stakeholder Survey: Primary discipline of respondents 1
Table 2: Stakeholder Survey: Previous use of the Unit Cost Manual 2
Table 3: Stakeholder Survey: Manual sections used by the readers 2
Table 4: Stakeholder Survey: Satisfaction levels with the Unit Cost manual 2
Table 5: Stakeholder Survey: Views of stakeholders 3
Table 6: Stakeholder Survey: Potential new services and unit costs 4
Table 1.1.1: Costs and unit estimation for private sector nursing homes (age 65+) 7
Table 1.2.1: Costs and unit estimations for private sector residential care (age 65+) 8
Table 1.3.1: Costs and unit estimations for local authority own-provision residential care (age 65+) 9
Table 1.4.1: Costs and unit estimations for local authority own-provision day care (age 65+) 10
Table 2.1.1: NHS National Cost Collection for mental health services 13
Table 2.2.1: Costs and unit estimations for local authority residential care homes for adults requiring long-term mental health support 14
Table 2.3.1: Costs and unit estimations for local authority own-provision social services day care for adults requiring mental health support (age 18-64) 15
Table 2.4.1: Costs and unit estimations for private and voluntary sector day care for adults requiring mental health support (age 18-64) 16
Table 2.5.1: Costs and unit estimations for behavioural activation delivered by a non-specialist 17
Table 3.1.1: NHS National Cost Collection – unit costs for misuse of drugs or alcohol 21
Table 3.2.1: Costs and unit estimations for an Alcohol health worker/Alcohol liaison nurse/Substance misuse nurse 22
Table 4.1.1: Local authority own-provision day care for adults requiring learning disability support (age 18-64) 25
Table 4.2.1: Specialised supported housing 26
Table 4.3.1: Service use and cost for adults over the first 6 months of PBS (N=3) 28
Table 5.1.1: Costs for local authority own-provision residential care homes for adults requiring physical support (age 18-64) 31
Table 5.2.1: Costs for voluntary and private sector residential care homes for adults requiring physical support. 32
Table 5.3.1: Costs for local authority day care for adults requiring physical support (age 18-64) 33
Table 6.1.1: Unit costs for hospital services 36
Table 6.2.1: NHS wheelchair costs 37
Table 6.3.1: Costs of self-management support using a digital health system for chronic obstructive pulmonary disease. 38
Table 6.4.1: National Cost Collection - unit costs for sexual health 39
Table 6.5.1: Health service costs per screening intervention for sexually-transmitted infections 40
Table 7.1.1: Summary of patient resource use and costs following discharge from acute medical units 43
Table 7.2.1: Estimated average cost of care services in the last twelve months of life 44
Table 7.2.2: Cost of hospital and social care services by diagnostic group per decedent in the final year of life 45

Table 7.3.1 Average cost per quit (with approximate 95% CI) calculated at the 12-week time point, with supporting information. 46
Table 7.4.1: Overview of Social Prescribing Pilot (Inputs) 47
Table 7.5.1: Cost of supported cCBT and guided self-help 48
Table 7.5.2: Total societal costs between baseline and 12 months 49
Table 7.6.1: Cost per new patient associated with memory assessment services 50
Table 7.6.2: Cost of care and services received outside memory assessment services reported by carers 50
Table 8.1: Agenda for Change bands for scientific and professional staff 53
Table 8.2.1: Annual and unit costs for community-based scientific and professional staff 56
Table 9.2.1: Annual and unit costs for qualified nurses 61
Table 9.3.1: Costs and unit estimations for nurses working in a GP practice nurse (Band 5) 62
Table 9.4.1: Costs and unit estimations for a General Practitioner (GP) 63
Table 9.4.2: Unit costs for a GP 64
Table 9.5.1: Average cost for all initial primary care actions in response to an e-consultation 66
Table 9.6.1: Costs and unit estimations for a telephone triage 67
Table 9.7.1: Costs and unit estimations for a Performer-Only dentist 68
Table 9.8.1: Costs and unit estimations for a Providing-Performer dentist 69
Table 9.9.1: NHS dental charges 70
Table 10.1.1: Costs and unit estimations for a social worker (adult services) 75
Table 10.2.1: Costs and unit estimations for a social work assistant 76
Table 10.3.1: Costs and unit estimations for a community occupational therapist 77
Table 10.4.1: Costs and unit estimations for a home care worker 78
Table 10.5.1: Costs and unit estimations for a home care manager 79
Table 10.6.1: Costs and unit estimations for a support and outreach worker 80
Table 10.7.1: Cost per case of reablement services 81
Table 11.1.1: Hospital-based scientific and professional staff – Agenda for Change (band) 85
Table 11.1.2: Annual and unit costs for hospital-based scientific and professional staff 88
Table 11.2.1: Agenda for Change (AfC) bands for hospital-based nurses 89
Table 11.2.2: Annual and unit costs for hospital-based nurses 91
Table 11.3.1: Work performed under each job title for hospital-based doctors 92
Table 11.3.2: Annual and unit costs for hospital-based doctors 95
Table 12.1.1: The NHS Cost Inflation Index 98
Table 12.1.2: The PSS annual percentage increases for adult services (all sectors) 99
Table 12.1.3: The PSS annual percentage increases for adult local authority services 100
Table 12.1.4: The PSS annual percentage increases for adult independent sector services 100
Table 12.2.1: Mean annual basic pay per FTE for non-medical occupational groupings 101
Table 12.2.2: Mean annual basic pay per FTE for nursing, midwifery & health visiting staff by Agenda for Change band 101
Table 12.2.3: Mean annual basic pay per FTE for allied health professional staff by Agenda for Change band 101

Table 12.2.4: Mean annual basic pay per FTE for administration and estates staff by Agenda for Change band 102
Table 12.2.5: Mean annual basic pay per FTE for NHS staff groups 102
Table 12.3.1: Agenda for Change bands for Physiotherapists 104
Table 12.3.2: Agenda for Change bands for Occupational Therapist 104
Table 12.3.3: Agenda for Change bands for Speech and Language Therapists 104
Table 12.3.4: Agenda for Change bands for Chiropodists/Podiatrists 104
Table 12.3.5: Agenda for Change bands for Psychologists 105
Table 12.3.6: Agenda for Change bands for Pharmacists 105
Table 12.4.1: Training costs of health and social care professionals, excluding doctors 106
Table 12.4.2: Training costs of doctors (after discounting) 107
Table 12.5.1: Time use of community care professionals 108

Introduction

Knowing the cost of specific health and social care services is crucial information for making decisions about what support is provided to those who need help, assisting service providers to plan for the future of their services, and more generally for prioritising and allocating scarce resources and budgets. To support resourcing decisions, the Personal Social Services Research Unit (PSSRU) at the University of Kent has produced annual cost estimates for the delivery of health and social care services for 29 years. The consistency, comprehensiveness, and robustness of what has been produced over time has seen the volumes become a cornerstone of economic evaluations and a resource to inform deliberations among decision-makers.

The annual publication is freely available online. The work is underpinned by three key principles:

1. The provision of *robust, consistent* estimates of costs based on economic theory and reflecting the long-run marginal opportunity cost.
2. *Comprehensive coverage* of available health and social care services, reflective of new service developments.
3. *Clarity and accessibility* in the presentation of cost estimates.

Unit costs represent the total expenditure incurred to produce one unit of output in health and social care. For example, the cost of one hour of a nurse or GP's time, or a face-to-face appointment with a social worker or perhaps a Speech and Language Therapist. It could also be a week in a residential care or nursing home or the cost of a day care attendance.

The Unit Costs of Health and Social Care Programme (2022-2027)

In 2022, PSSRU and the Centre for Health Economics (CHE) at the University of York began a new collaboration to continue to estimate unit costs for health and social care and to deliver an annual manual. This new phase of the Programme runs for five years (2022 to 2027) and is funded by the National Institute for Health and Care Research (NIHR) Policy Research Programme (PRP).

i) Stakeholder Survey (2023)

During the first year of the new programme, the research team developed a stakeholder survey that explored how our unit cost estimations have been used. Feedback from this survey will inform changes to the Unit Cost Manual, including the content, layout, organisation, and accessibility of the Manual, and will help identify key new services, resources, or unit costs for inclusion in the Unit Cost Programme.

The link to the online survey was distributed between September and November 2023 to members of the public, voluntary, community and social enterprise (VCSE) organisations, economists, researchers, clinicians, administrators, and other professionals who have an interest in unit costs in health and social care in England, including those who presently use the Unit Cost Manual as well as those who do not.

Overall 57 individuals completed the survey. Table 1 shows a description of who the respondents were.

Table 1: Stakeholder Survey: Primary discipline of respondents

Primary discipline	Sample
Economists	34
Researcher	32
Administrator	2
Members of the public	3
Other profession	2

Overall, 37 respondents worked in health care, 17 in social care, 3 in Government and 6 Higher Education. Table 2 shows the use of the manual.

Table 2: Stakeholder Survey: Previous use of the Unit Cost Manual

Section used	Sample
Manual is used frequently	27
Manual is used occasionally	9
Aware of the manual but not used it before	5
Not aware of the manual	8

Table 3 highlights the sections of the manual that are used. This information will be used to inform the organisation of future manuals.

Table 3: Stakeholder Survey: Manual sections used by the readers

Sample	Sections
30	Hospital and related services
30	Nurses, doctors and dentists
28	Inflation indices
26	Hospital-based health care staff
24	Social care staff and services
22	Services for people requiring mental health support
21	Services for older people
19	NHS staff earning estimations
18	Scientific and professional staff
17	Training costs of health and social care
15	Overheads
14	Care packages
14	Time use of community care professionals
11	Services for children and their families
9	Services for adults requiring physical support
7	Services for adults who misuse drugs and alcohol
5	Learning disability support for adults
1	List of useful websites

Table 4 focuses on respondents' overall perceptions of the manual. Overall, the majority of respondents held a positive view of the manual. However, there are areas that will be explored for future manuals, such as improving navigation and how the manual can provide enough detail to meet the needs of readers.

Table 4: Stakeholder Survey: Satisfaction levels with the Unit Cost manual

	Strongly agree/agree	Neither disagree/agree	Disagree/Strongly disagree
The manual is comprehensive	28	3	3
The manual is high quality	31	0	3
The manual is useful	33	0	1
The manual is easy to navigate	21	8	5
The manual is easy to understand	28	5	0
The manual is accessible	27	6	1
The manual is well organised	27	5	2
The manual has enough detail to support my needs	22	7	5

The research team wanted to hear about what new services would help users of the manual. Table 5 highlights what the respondents said in the survey and the changes we have made so far.

Table 5: Stakeholder Survey: Views of stakeholders

What you said	The changes we have made so far
UCHSC is still an important part of my job as a health economist, but it hasn't really changed over the last 20 years. I think it still has a role but it needs updating to reflect modern use of technology and also differing needs.	The aim of the stakeholder survey is to inform future Unit Cost manuals which will include updating to reflect modern use of technologies and also differing needs.
I think the manual is great but ideally it should be available as an on-line interactive database - it is cumbersome to try and examine trends or changes from the previous year. It is also time-consuming to extract the data and convert to excel for example. If it were a data base it could also include NHS tariffs etc. But please don't stop doing it.	We have a draft cost inflator Excel spreadsheet that can be used to input local information. The spreadsheet will be uploaded on to the Unit Cost webpage in 2024.
It is not always easy to find the information I need. The pdf format makes it really difficult to navigate and the ordering isn't always intuitive and also changes.	The manual now contains a table of contents linked to pages in the document.
Explanation of link/overlap with Reference Costs. Dentistry units of activity. Perhaps guidance on the use of NHS reference costs? Appreciate outside your domain, but both resources are generally used together, so some synergy in having guidance in one place? A guide to using the NHS cost collection data for hospital unit costs would be helpful.	We are going to run a webinar in 2024 that will cover NHS reference costs and Dentistry unit costs.
A directory of other sources, e.g. Trust financial returns, Scottish costs, prescription costs, reference costs, NHS PPA, eMIT, etc.	We will amend our directory of other sources in future manuals
More on inpatient stays and by specialty would be useful More detailed hospital unit cost data as this is often used to calculate secondary care impacts of re-orientation of care pathways from secondary to primary care.	We have included more information on inpatient stays in the 2023 manual. We will continue to explore if more information can be included in future manuals.
Services for children.	Our current contract does not include services for children as this is a separate service to adult social care.
Care homes for adults with autism and complex needs – the schema was removed due to old data. A small charity supporting adults with Asperger's/autism would like to see a new schema. Various - basically lots of the ones that have been removed. Overtime, some detail has been removed from the PSSRU, on the justification of some of the underlying data being limited (e.g. time/proportion sent patient facing) - I'd rather have this information included, but with appropriate caveats/warnings, so all have easy access to such data. I realise these have been removed for a good reason, but sometimes they are still better than nothing.	We will be putting all sections that have been removed due to old data in a section at the end of future manuals.

Table 6 highlights potential new services suggested within the survey that could be included in future Unit Cost manuals. The suggestions will be discussed during our Unit Cost advisory group meeting in March 2024 and future meetings with DHSC colleagues. The new services are dependent on available data.

Table 6: Stakeholder Survey: Potential new services and unit costs

Potential new services and unit costs
Unit cost per hour of an independent sector care home worker and an independent sector domiciliary care worker, as well as a unit cost per contact hour of domiciliary care similar to the Homecare Association minimum price. Currently there are cost breakdowns for local authority social workers but on-costs[1] are very different for independent sector staff.
Private data on the costs of care but there is potentially enough information in the public domain. The Scottish Care Home Census is worth being aware, it includes the overall fee rate across all funder types (LA/NHS/self-funded).
Unit costs for family (unpaid) carers.
Costs of remote care, in any setting.
Costs of drug prescriptions (the prescribing cost itself in hospital care), end of life costs for different groups of diseases (by type of cancer in oncology, and maybe more diseases included), costs of some other devices and tests (saw that there are for NHS wheelchairs and Screening interventions for Sexually Transmitted Infections (STIs)), so having the same for some tests and devices would also be great as a reliable source of information for other researchers.
Possible something to help with costing digital interventions - e.g. how to cost development and updating of an app? But maybe that's not possible at a generic level, and would depend on the specifics.
Unit costs in other sectors e.g. primary care, including dentistry and more measures for mental health.
Something that covered a range of estimates for implementation costs of different types of programmes would be enormously helpful - just for some ballparks that could be used as 'holding' figures while new evidence is generated etc. These could of course be obtained through a systematic review etc. but I'm starting to wonder is some level of standardisation (e.g. for the purposes of budget impact modelling) could be helpful.
I mainly use the unit costs of GP time to calculate the cost of primary care appointments. It would be very helpful, in my opinion, to work collaboratively with NHS Digital/England who provide the data on GP appointments in a format that allows disaggregation by appointment type (face-to-face, video/online, telephone, home visits). This is quite important given that due to COVID-19 related practices have changed the way they interact with patients.
It is very difficult to understand the differences between the different types of professionals, and which cases to use each band/type, or if with qualification or not costs included etc. The changes in the inflation indices are also a bit tricky to navigate from different publication years.

[1] Essential associated costs: salary oncosts, for example, include the employer's national insurance contributions.

SERVICES

1. Services for older people

1.1. Private sector nursing homes for older people (age 65+)

1.2. Private sector residential care for older people (age 65+)

1.3. Local authority own-provision residential care for older people (age 65+)

1.4. Local authority own-provision day care for older people (age 65+)

1.1 Private sector nursing homes for older people (age 65+)

The fees in the table below reflect fees charged to self-funders, albeit in homes with a mix of local authority, NHS, and self-funded clients. The Competition & Markets Authority (CMA) (2017) found that local authority fees were on average 41% below those paid by self-funders in the same care home.[1] Using Adult Social Care Finance Return (ASC-FR)[2] returns for 2022/2023, the median cost per person for supporting older people in all nursing homes was £878 per week and the mean cost was £910. We used the following unique identifiers within the ASC-FR: 8713501, 8714101, 8714701, 8715301 and 8715901 (numerator in thousands of pounds), 8713502, 8714102, 8714702, 8715302 and 8715902 (denominator in thousands of pounds). The standard NHS nursing care contribution is £220.[3] When we add the standard NHS nursing care contribution to Personal Social Services (PSS) expenditure, the total expected median cost is £1,098 and the mean cost is £1,130.

Table 1.1.1: Costs and unit estimation for private sector nursing homes (age 65+)

Costs and unit estimation	2022/2023 values	Notes
A. Fees	£1,329 per week	The direct unit cost of private sector nursing homes is assumed to be the fee. Where a market is competitive, such as that for private sector nursing homes, it is reasonable to assume that the fee will approximate the full cost of providing the service (e.g. care costs and care home fees including accommodation and utility costs. The fee is taken from Carterwood Index 2023.[4]
External services B. Nursing C. GP services D. Other external services	 £9 per week £13 per week £6 per week	Information has been drawn from the article in the 2018 volume by Sach et al.(2018)[5] which compares the mean cost of contacts per resident using data collected from GP records compared to care home records over a seven-month period. The total costs incurred per resident per week are £28. Costs have been up-rated using the NHS Cost Inflation Index (see Section 12.1).
E. Personal living expenses	£25.65 per week	The Department for Work and Pensions (DWP) personal allowance for people in residential care or a nursing home is £25.65 per week.[6] 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 nursing home. Short-term care can be provided for up to eight weeks.[7]
Dependency		No current information is available on the relationship of dependency (e.g. a resident needing help with personal care) with cost.
Occupancy	81 per cent [8]	

Unit costs 2022/2023	
Establishment cost per permanent resident week (A)	£1,329
Establishment cost plus personal living expenses per permanent resident week (A to E)	£1,382
Establishment cost per permanent resident per day (A divided by 7)	£190
Establishment cost plus personal living expenses per permanent resident per day (A to E divided by 7)	£197

[1] CMA Competition & Markets Authority (2017) Care homes market study, Final report, https://assets.publishing.service.gov.uk/media/5a1fdf30e5274a750b82533a/care-homes-market-study-final-report.pdf.

[2] NHS Digital (2023) *Adult Social Care Finance Return (ASC-FR)*, NHS Digital 2022/2023, Adult Social Care Activity and Finance Report, England, 2022-23 - NHS Digital, in collaboration with the Department of Health and Social Care.

[3] Department of Health and Social Care (2023) Funding for nursing in care homes, Department of Health & Social Care, London. https://www.gov.uk/government/news/increased-funding-for-care-homes-providing-nursing

[4] Carterwood Limited (2023) *Caterwood Index, Elderly care homes*. Carterwood Limited, Bristol. Carterwood Index | Elderly care homes - Carterwood, improve decision making.

[5] Sach, T., Desborough, J., Houghton, J. and Holland, R. (2018) A comparison of two sources of primary and social care resource use data in a care home setting, in L. Curtis and A. Burns (eds.) *Unit Costs of Health and Social Care 2018*, Personal Social Services Research Unit, University of Kent, Canterbury.

[6] Department of Health & Social Care (2022) *Social Care – Charging for care and support,* Department of Health & Social Care, London. Social care - charging for care and support: local authority circular - LAC(DHSC)(2022)1 - GOV.UK (www.gov.uk).

[7] Age UK (2023) *Paying for short-term and temporary care in a care home*. Age UK, London. Paying for short-term and temporary care in a care home (ageuk.org.uk).

[8] Office for National Statistics (2023) *Care homes and estimating the self-funding population, England: 2022 to 2023*. Care homes and estimating the self-funding population, England - Office for National Statistics (ons.gov.uk).

1.2 Private sector residential care for older people (age 65+)

The fees in the table below reflect fees charged to self-funders, albeit in homes with a mix of local authority, NHS and self-funded clients. The Competition & Markets Authority (CMA) (2017) found that local authority fees were on average 41% below those paid by self-funders in the same care home[1], so the fees below are not necessarily representative of what local authorities or self-funders pay. Using Adult Social Care Finance Return (ASC-FR) returns for local authority funded clients for 2022/2023[2], the median cost per person for supporting older people in a residential care home provided by non-local authority run organisations was £791 per week, with a mean cost of £787 per week. We used the following unique identifiers within ASC-FR: 8713801, 8714401, 8715001, 8715601 and 8716201 (numerators in thousands of pounds), 8713802, 8714402, 8715002, 8715602 and 8716202 (denominator in thousands of pounds).

Table 1.2.1: Costs and unit estimations for private sector residential care (age 65+)

Costs and unit estimation	2022/2023 values	Notes
A. Fees	£983 per week	The direct unit cost of private sector nursing homes is assumed to be the fee. Where a market is competitive, such as that for private sector nursing homes, it is reasonable to assume that the fee will approximate the full cost of providing the service (e.g. care costs and care home fees including accommodation and utility costs. The fee was taken from Carterwood Index for 2023.[3]
External service B. Nursing C. GP services D. Other external services	 £9 per week £13 per week £6 per week	Information has been drawn from the article in the 2018 volume by Sach et al. (2018)[4] which compares the mean cost of contacts per resident using data collected from GP records compared to care home records over a seven-month period. The total costs incurred per resident per week are £28. Costs have been up-rated using the NHS Cost Inflation Index (see Section 12.1).
E. Personal living expenses	£25.65 per week	The Department for Work and Pensions (DWP) personal allowance for people in residential care or a nursing home is £25.65 per week.[5] This has been used as a proxy for personal consumption.
Occupancy	81 per cent[6]	

Unit costs 2022/2023	
Establishment cost per permanent resident week (A)	£983
Establishment cost plus personal living expenses per permanent resident week (A to E)	£1,036
Establishment cost per permanent resident per day (A divided by 7)	£140
Establishment cost plus personal living expenses per permanent resident per day (A to E divided by 7)	£148

[1] CMA Competition & Markets Authority (2017) *Care homes market study, Final report*, https://assets.publishing.service.gov.uk/media/5a1fdf30e5274a750b82533a/care-homes-market-study-final-report.pdf

[2] NHS Digital (2023) *Adult Social Care Finance Return (ASC-FR)*, NHS Digital 2022/23, Adult Social Care Activity and Finance Report, England, 2022-23 - NHS Digital, in collaboration with the Department of Health and Social Care.

[3] Carterwood Limited (2023) *Caterwood Index, Elderly care homes.* Carterwood Limited, Bristol. Carterwood Index | Elderly care homes - Carterwood, improve decision making

[4] Sach, T., Desborough, J., Houghton, J. and Holland, R. (2018) A comparison of two sources of primary and social care resource use data in a care home setting, in L. Curtis and A. Burns (eds.) *Unit Costs of Health and Social Care 2018*, Personal Social Services Research Unit, University of Kent, Canterbury.

[5] Department of Health & Social Care (2022) *Social Care – Charging for care and support,* Department of Health & Social Care, London. Social care - charging for care and support: local authority circular - LAC(DHSC)(2022)1 - GOV.UK (www.gov.uk)

[6] Office for National Statistics (2023) *Care homes and estimating the self-funding population, England: 2022 to 2023.* https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/socialcare/articles/carehomesandestimatingtheselffundingpopulationengland/2022to2023

1.3 Local authority own-provision residential care for older people (age 65+)

This table uses data from the Adult Social Care Finance Return (ASC-FR)[1] return for 2022/2023 for local authority expenditure.

Table 1.3.1: Costs and unit estimations for local authority own-provision residential care (age 65+)

Costs and unit estimation	2022/2023 values	Notes
Capital costs A. Buildings and oncosts B. Land	 £189 per week £33 per week	Based on the new-build and land requirements for local authority residential care establishments. These allow for 57.3 square metres per person.[2] Capital costs have been depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.
C. Other capital costs		Capital costs not relating to buildings and oncosts are included in the local authority expenditure costs, therefore no additional cost has been added for items such as equipment and durables.
D. Total local authority expenditure (minus capital)	£1,456 per week	The median estimate is taken from ASC-FR 2022/2023. Capital charges relating to buildings and oncosts have been deducted. The mean cost is lower at £1,269, per week [using unique identifiers: 8713701, 8714301, 8714901, 8715501, 8716101 (numerators in thousands of pounds), 8713702, 8714302, 8714902, 8715502, 8716102 (denominator in thousands of pounds)]. It is reasonable to assume that the expenditure will approximate the full cost of providing the service (e.g. care costs and care home fees including accommodation and utility costs).
E. Overheads		Social services management and support services (SSMSS) costs are included in ASC-FR total expenditure figures; therefore no additional overheads have been added.
External services F. Community nursing G. GP services H. Other external services	 £9 per week £13 per week £6 per week	Information has been drawn from the article in the 2018 volume by Sach et al.[3] which compares the mean cost of contacts per resident using data collected from GP records compared to care home records over a seven-month period. The total costs incurred per resident per week are £28. Costs have been up-rated using the NHS Cost Inflation Index.
I. Personal living expenses	£25.65 per week	The Department for Work and Pensions (DWP) personal allowance for people in residential care or a nursing home is £25.65 per week.[4] This has been used as a proxy for personal consumption.
Use of facility by client	52.18 weeks per year	
Occupancy	78 per cent[5]	

Unit costs 2022/2023	
Establishment cost per permanent resident week (includes A to E)	£1,679
Establishment cost plus personal living expenses and external services per permanent resident week (includes A to I)	£1,732
Establishment cost per permanent resident day (includes A to E divided by 7)	£240
Establishment cost plus personal living expenses and external services per permanent resident day (includes A to I divided by 7)	£247

[1] NHS Digital (2023) *Adult Social Care Finance Return (ASC-FR)*, NHS Digital 2022/23, Adult Social Care Activity and Finance Report, England, 2022-23 - NHS Digital, in collaboration with the Department of Health and Social Care.

[2] Building Cost Information Service Construction Data (2023). BCIS | Building Cost Information Service Construction Data

[3] Sach, T., Desborough, J., Houghton, J. and Holland, R. (2018) A comparison of two sources of primary and social care resource use data in a care home setting, in L. Curtis and A. Burns (eds.) *Unit Costs of Health and Social Care 2018*, Personal Social Services Research Unit, University of Kent, Canterbury.

[4] Department of Health & Social Care (2022) *Social Care – Charging for care and support,* Department of Health & Social Care, London. https://www.gov.uk/government/publications/social-care-charging-for-local-authorities-2022-to-2023/social-care-charging-for-care-and-support-local-authority-circular-lacdhsc20231

[5] Laing & Buisson (2022) *Laing & Buisson Care Homes Complete Dataset 2021/2022*, Laing & Buisson, London.

1.4 Local authority own-provision day care for older people (age 65+)

As day care expenditure is now combined with other expenditure in the ASC-FR data collection[1], this table uses data from the Personal Social Services Expenditure return (PSS EX1) for 2013/14,[2] which has been up-rated using the PSS Pay & Prices Inflator. For 2022/2023, the mean cost is £180 per week (including capital costs). These data do not report on the number of sessions clients attended each week.

Based on information provided by ten local authorities,[3] we have calculated an average cost per client attendance and a cost per client hour. We have used this information to calculate the cost of a client session lasting 4.6 hours.

Table 1.4.1: Costs and unit estimations for local authority own-provision day care (age 65+)

Costs and unit estimation	2022/2023 values	Notes
Capital costs A. Buildings and oncosts B. Land	£8.37 per client attendance £2.15 per client attendance	Based on the new-build and land requirements for local authority day care facilities (which do not distinguish client group).[4] Capital costs have been depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.
C. Other capital costs		Capital costs not relating to buildings and oncosts are included in the local authority expenditure figures, therefore no additional cost has been added for items such as equipment and durables.
D. Local authority expenditure per day (minus capital)	£68 per client attendance	The total local authority expenditure was taken from PSS EX1 2013/14 and has been up-rated using the PSS Pay & Prices Index. Based on PSSRU research,[3] older people attend on average 2.5 times per week for 4.6 hours. Capital charges relating to buildings have been deducted.
E. Overheads		Social services management and support services (SSMSS) costs are included in PSS EX1 total expenditure figures, therefore no additional overheads have been added.
Use of facility by client	2.5 times	Assumes clients attend 2.5 times per week.[3]
Occupancy		No information is available.
Unit costs 2022/2023		
Per client attendance for 2.5 hours (includes A to D)	£78	
Per client hour (includes A to D/4.6 hours)	£17	

[1] NHS Digital (2023) *Adult Social Care Finance Return (ASC-FR)*, NHS Digital 2022/23, Adult Social Care Activity and Finance Report, England, 2022-23 - NHS Digital, in collaboration with the Department of Health and Social Care.
[2] NHS Digital (2014) *PSS EX1 2013/14*, Personal Social Services: Expenditure and Unit Costs, England - 2013-14, Provisional release - NHS Digital
[3] Based on research carried out by PSSRU in 2014.
[4] Building Cost Information Service Construction Data (2023). BCIS | Building Cost Information Service Construction Data

2. Services for people requiring mental health services

2.1 NHS National Cost Collection - mental health services

2.2 Local authority own-provision residential care homes for adults requiring long-term mental health support

2.3 Local authority own-provision social services day care for adults requiring mental health support (age 18-64)

2.4 Private and voluntary sector day care for adults requiring mental health support (age 18-64)

2.5 Behavioural Activation delivered by a non-specialist

2.1 NHS National Cost Collection - mental health services

These figures show the average unit cost to the NHS of providing defined services to NHS patients in England in a given financial year. They show how NHS providers spend money to provide health care to patients.[1] We have drawn on NHS England, National Cost Collection 2021/2022 to report on the NHS national costing data for selected mental health services. Costs have been up-rated to 2022/2023 prices using the appropriate NHS Cost Inflation Index (see Section 12.1).

Table 2.1.1: NHS National Cost Collection for mental health services

Mental health reference costs	**2022/2023**
Mental Health Care Contacts (Patient Level Information and Costing System (PLICS))	£266
Mental Health Provider Spells (PLICS)	£549
IAPT Contacts	£135
Mental health care clusters (per bed day)	£277
Mental health specialist teams (per care contact)	
A&E mental health liaison services	£334
Criminal justice liaison and diversion services	£325
Prison health, adult and elderly	£240
Forensic community, adult and elderly	£523
Other Mental Health Specialist Teams, adult and elderly	£296
Other psychiatric liaison services, adult and elderly	£277
Psychiatric liaison – acute hospital/ Nursing Homes, Adult and Elderly	£304
Secure mental health services	
Secure mental health care clusters (per bed day)	£740
High dependency secure provision personality disorder	£1,009
Low Secure Services	£724
Medium Secure Services	£751
Psychosexual services, adult and elderly	£193
Specialist mental health services	
Specialist Mental Health Services For Deaf Adults, Admitted Patient	£963
Eating disorder (adults) – admitted (per bed day)	£760
Specialist perinatal – admitted (per bed day)	£1,013

[1] Calculated using *National Cost Collection for the NHS 2021/2022*. NHS England » 2021/22 National Cost Collection Data Publication

2.2 Local authority own-provision residential care homes for adults requiring long-term mental health services

This table uses the Adult Social Care Finance Return (ASC-FR)[1] returns for 2022/2023 for expenditure data.

Table 2.2.1: Costs and unit estimations for local authority residential care homes for adults requiring long-term mental health support

Costs and unit estimation	2022/2023 values Age 18-64	Notes
Capital costs A. Buildings and oncosts	£136 per resident week	Based on the new-build and land requirements for homes for people requiring mental health support.[2] Capital costs have been depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.
B. Total local authority expenditure (minus capital) C. Overheads	£985 per resident week	The median revenue weekly cost estimate for adults aged 18-64 requiring long-term mental health support [using unique identifier: 8713001 (numerator in thousands of pounds), 8713002 (denominator in thousands of pounds)]. The mean weekly cost is £986. Capital costs have been deducted. It is reasonable to assume that the expenditure will approximate the full cost of providing the service (e.g. care costs and care home fees including accommodation and utility costs). Social services management and support services (SSMSS) costs are included in ASC-FR expenditure figures, so no additional overheads have been added.
Other costs D. Personal living expenses	£25.65 per week	The DWP personal allowance for people in residential care or a nursing home is £25.65 per week.[3] 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		No information is available.

Unit costs 2022/2023	
Age 18-64	
Per resident week median establishment costs (includes A to B)	£1,121
Per resident week (median) (includes A to D).	£1,147
Per resident day establishment costs (includes A to B divided by 7)	£160
Per resident day (includes A to D divided by 7)	£164
Age 65+	
Per resident week median establishment costs (includes A to B)	£753
Per resident week (median) (includes A to D).	£779
Per resident day establishment costs (includes A to B divided by 7)	£108
Per resident day (includes A to D divided by 7)	£111

[1] NHS Digital (2023) *Adult Social Care Finance Return (ASC-FR)*, NHS Digital 2022/23, Adult Social Care Activity and Finance Report, England, 2022-23 - NHS Digital, in collaboration with the Department of Health and Social Care.
[2] Building Cost Information Service Construction Data (2023) BCIS | Building Cost Information Service Construction Data
[3] Department of Health & Social Care (2022) *Social Care – Charging for care and support,* Department of Health & Social Care, London. https://www.gov.uk/government/publications/social-care-charging-for-local-authorities-2022-to-2023/social-care-charging-for-care-and-support-local-authority-circular-lacdhsc20231

2.3 Local authority own-provision social services day care for adults requiring mental health services (age 18-64)

As day care expenditure is now combined with other expenditure in the ASC-FR data collection,[1] this table uses the Personal Social Services Expenditure return (PSS EX1)[2] for 2013/2014 for local authority expenditure, which has been up-rated using the PSS Pay & Prices Index. For 2022/2023, the mean cost is £163 per client week (including capital costs). These data do not include the number of sessions clients attended each week.

Based on information provided by ten local authorities,[3] we have calculated an average cost per client attendance and a cost per client hour. For day care for people requiring mental health support, the average number of sessions attended per week was three, which is also the number of sessions recommended as part of a total recovery programme.[4]

Table 2.3.1: Costs and unit estimations for local authority own-provision social services day care for adults requiring mental health support (age 18-64)

Costs and unit estimation	2022/2023 values	Notes
Capital costs A. Buildings and oncosts B. Land	£8.37 per client attendance £2.15 per client attendance	Based on the new-build and land requirements for local authority day care facilities (which do not distinguish client group).[5] Capital and land costs have been depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 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 expenditure (minus capital) E. Overheads	£51 per client attendance	The average cost per week has been taken from PSS EX1 2013/2014 and up-rated using the PSS Pay & Prices Index. Assuming people requiring mental health support attend on average 3 times per week (4.1 hours). 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	3 times per week[3]	
Unit costs 2022/2023		
Per client attendance (includes A to D)		£61
Per client hour (includes A to D divided by 4.1 hours)		£15

[1] Calculated using NHS Digital (2023) *Adult Social Care Finance Return (ASC-FR)*, NHS Digital 2022/23, Adult Social Care Activity and Finance Report, England, 2022-23 - NHS Digital, in collaboration with the Department of Health and Social Care.
[2] NHS Digital (2014) *PSS EX1 2013/14* Personal Social Services: Expenditure and Unit Costs, England - 2013-14, Provisional release - NHS Digital.
[3] Based on research carried out by PSSRU in 2014.
[4] Salford City Council (2011) *Mental health,* Salford City Council. http://www.salford.gov.uk/mentalhealth.htm.
[5] Building Cost Information Service Construction Data (2023). BCIS | Building Cost Information Service Construction Data.

2.4 Private and voluntary sector day care for adults requiring mental health services (age 18-64)

This table uses the Personal Social Services Expenditure return (PSS EX1)[1] for 2013/2014 for expenditure costs, which have been up-rated using the PSS Pay & Prices Index (see Section 12.1). For 2022/2023, the mean cost is £108 per week (including capital costs).

Based on information provided by ten local authorities,[2] we have calculated an average cost per client attendance and a cost per client hour. We have used this information to calculate the cost of a client session lasting 4.1 hours, which is a typical standard unit of day care for most local authorities responding to our information request.

For day care for people requiring mental health support, 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]

Table 2.4.1: Costs and unit estimations for private and voluntary sector day care for adults requiring mental health support (age 18-64)

Costs and unit estimation	2022/2023 values	Notes
Capital costs A. Buildings and oncosts	£8.37 per client attendance	Based on the new-build and land requirements for local authority day care facilities[4] (which do not distinguish client group). Capital and land costs have been depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.
B. Land	£2.15 per client attendance	
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. Average expenditure (minus capital)	£36 per client attendance	The mean cost per week has been taken from PSS EX1 2013/2014 and up-rated using the PSS Pay & Prices Index. Assuming people requiring mental health support attend 3 times per week for 4.1 hours in duration.[3] Capital charges relating to buildings have been deducted.
E. 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	3 times per week[3]	
Occupancy		No information is available.
Unit costs 2022/2023		
Per client attendance (includes A to D)	£46	
Per client hour	£11	

[1] NHS Digital (2014) *PSS EX1 2013/14*. Personal Social Services: Expenditure and Unit Costs, England - 2013-14, Provisional release - NHS Digital
[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
[4] Building Cost Information Service Construction Data (2023) BCIS | Building Cost Information Service Construction Data.

2.5. Behavioural activation delivered by a non-specialist

Behavioural Activation (BA) provides a straightforward, effective treatment for depression which can be delivered in a group setting or to individuals. This schema provides the costs for group-based BA which 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 five days training in BA and one-hour clinical supervision fortnightly from the principal investigator.[1] Sessions are usually attended by 10 people. Costs are based on Agenda for Change (AfC) band 7, the grade normally used for this service.

Table 2.5.1: Costs and unit estimations for behavioural activation delivered by a non-specialist

Costs and unit estimation	2022/2023 values	Notes
A. Wages/salary	£89,946 per year	Based on the mean full-time equivalent basic salary for two mental health nurses on AfC band 7 of the 2022/2023 NHS staff earnings estimates.[2]
B. Salary oncosts	£27,472 per year	20.6 per cent of salary for employer's contribution to superannuation has been included.
C. Initial qualifications	£18,813	Qualification costs have been calculated using the method described in Netten et al. (1998).[3] This cost is for two mental health nurses for the initial three years of training.
D. Specific training for behavioural activation	£777	Individual therapist 5-day training costs were £641.55. The costs have been up-rated to 2022/2023 values using the NHS Cost Inflation Index.
E. Overheads		The overheads (below) have be taken from the HM Treasury public Expenditure statistics analysis.[4,5]
Management, administration, and estates staff	£27,711 per year	Management and other non-care staff costs included administration and estates staff.
Non-staff	£39,452 per year	Non-staff costs include costs to the provider for office, travel/transport, publishing, training courses and conferences, supplies, and services (clinical and general), and utilities such as water, gas and electricity.
F. Capital overheads	£8,951 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. Capital costs have been depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.
Total cost	**£213,122**	
Working days per year	199	Working days calculated by deducting leave days from 260 weekdays per annum (e.g. 8 statutory days, 27 annual leave days, 5 training/study days, 13 sick days).[6]
Working hours per week	1,496	Working hours calculated by multiplying the number of working days per annum by the number of hours per day (7.5 hours).
Working weeks per year	39.9	Working weeks calculated by dividing the number of working hours per annum by the number of hours per week (37.5 hours).
Unit costs 2022/2023		
Cost per session per person attending the group	£19	
Cost per session per person attending the group (with qualifications)	£21	
Cost per 12 group sessions per person	£227	
Cost per 12 group sessions per person (with qualifications)	£249	

[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.

[2] NHS Digital (2023) *NHS staff earnings estimates, 12-month period from May 2022 – April 2023* (not publicly available), NHS Digital, 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] HM Treasury (2022) *Public Expenditure: statistical analysis*. HM Treasury, London, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1091951/E02754802_PESA_2022_elay.pdf

[5] Previous manuals have used the NHS Improvement (2019) *NHS Foundation Trusts: Consolidated Accounts 2018/19* Consolidated_foundation_trust_accounts_2018_19.pdf (england.nhs.uk). The overheads are lower than previously reported.

[6] NHS Digital (2023) *NHS sickness absence rates*, https://digital.nhs.uk/data-and-information/publications/statistical/nhs-sickness-absence-rates/july-2023-provisional-statistics

3. Services for adults who misuse drugs or alcohol

3.1. NHS National Cost Collection – unit costs for misuse of drugs or alcohol

3.2. Alcohol health worker/Alcohol liaison nurse/Substance misuse nurse

3.1. NHS National Cost Collection – unit costs for misuse of drugs or alcohol

These figures show the average unit cost to the NHS of providing defined services to NHS patients in England in a given financial year. They show how NHS providers spend money to provide health care to patients.[1] We have drawn on NHS England's National Cost Collection 2021/2022 to report on the NHS national costing data for selected alcohol and drug services. All costs have been up-rated to 2022/2023 prices using the NHS Cost Inflation Index (see Section 12.1).

Table 3.1.1: NHS National Cost Collection – unit costs for misuse of drugs or alcohol

Drug and alcohol services (adults)	£ Mean
Alcohol services – admitted patient	£585
Alcohol services – community contacts	£79
Alcohol services – outpatient attendance	£82
Drug services – admitted patient	£616
Drug services – community contacts	£90
Drug services – outpatient attendance	£125

[1] Calculated using *National Cost Collection for the NHS 2021/2022*. NHS England » 2021/22 National Cost Collection Data Publication

3.2. Alcohol health worker/Alcohol liaison nurse/Substance misuse nurse

In the majority of hospitals, alcohol health workers are qualified nurses: however, they can also be staff with alternative qualifications (NVQ in health and social care, counselling skills) or experience in substance misuse. They work predominantly in non-emergency admission units followed by A&E, specialist gastroenterology/liver wards, and general medical wards.[1]

Table 3.2.1: Costs and unit estimations for an Alcohol health worker/Alcohol liaison nurse/Substance misuse nurse

Costs and unit estimation	2022/2023 values	Notes
A. Wages/Salary	£37,577 per year	Based on the mean full-time equivalent basic salary for Agenda for Change band 6 of the 2022/2023 staff earnings estimates.[2] See NHS Terms and Conditions of Service Handbook for information on payment for unsocial hours and shift work.[3]
B. Salary oncosts	£11,192 per year	20.6 per cent of salary for employer's contribution to superannuation has been included.
C. Initial qualifications	£9,406	See Table 12.4.1 for detailed information on training costs for specific health and social care professionals. These have been calculated using the method described in Netten et al. (1998).[4]
D. Overheads		The overheads (below) have be taken from the HM Treasury public expenditure statistics analysis.[5,6]
Management, administration and estates staff	£11,509 per year	Management and other non-care staff costs include administration and estates staff.
Non-staff	£16,386 per year	Non-staff costs include costs to the provider for drugs, office, travel/transport, publishing, training courses and conferences, supplies and services (clinical and general), utilities such as water gas and electricity.
E. Capital overheads	£8,951 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.[7] Treatment space has not been included.
Total cost (without qualifications)	**£85,615 per year**	
Total cost (with qualifications)	**£95,022 per year**	
Working time		
Working weeks	40	Working weeks are calculated by dividing the working hours per annum by the hours per week (37.5 hours).
Working days	199	Working days are calculated by deducting leave days from 260 weekdays per annum (e.g. 8 statutory days, 27 annual leave days and 5 training/study days).
Working hours	1,496	Working hours are calculated by multiplying the number of working days per annum by the number of hours per day (7.5 hours).
Ratio of direct to indirect time (face-to-face contact)	1:0.19	Marsden & colleagues (2019) reported that every hour of face-to-face time required 28 minutes of non-face-to-face time.

Unit costs 2022/2023	**without qualifications**	**with qualifications**
per hour	£57	£64
per hour (face-to-face contact)	£84	£93

[1] Baker, S., & Lloyd, C. (2012) *A national study of acute care Alcohol Health Workers*, Alcohol Research UK. http://alcoholresearchuk.org/downloads/finalReports/FinalReport_0115.pdf.

[2] NHS Digital (2023) *NHS staff earnings estimates, 12-month period from May 2022 – April 2023* (not publicly available), NHS Digital, Leeds.

[3] NHS Employers (2024) *NHS Terms and Conditions of Service Handbook,* NHS Employers, London. NHS Terms and Conditions of Service Handbook | NHS Employers

[4] 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.

[5] HM Treasury (2022) *Public Expenditure: statistical analysis*. HM Treasury, London, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1091951/E02754802_PESA_2022_elay.pdf

[6] Previous manuals have used the NHS Improvement (2019) *NHS Foundation Trusts: Consolidated Accounts 2018/19* Consolidated_foundation_trust_accounts_2018_19.pdf (england.nhs.uk). The overheads are lower than previously reported.

[7] Building Cost Information Service Construction Data (2023) BCIS | Building Cost Information Service Construction Data.

4. Learning disability support for adults

4.1. Local authority own-provision day care for adults requiring learning disability support (age 18-64)

4.2. Specialised supported housing

4.3. Positive behavioural support for adults with learning disabilities and behaviour that challenges

4.1. Local authority own-provision day care for adults requiring learning disability support (age 18-64)

As day care expenditure is now combined with other expenditure in the ASC-FR data collection,[1] this table uses the Personal Social Services Expenditure return (PSS EX1) (2013/2014)[2] for expenditure costs, which have been up-rated using the PSS Pay & Prices Index. For 2022/2023, the mean cost is £397 per week (including capital costs). These data do not include the number of sessions clients attended each week.

Based on information provided by ten local authorities,[3] we have calculated an average cost per client attendance and a cost per client hour. We have used this information to calculate the cost of a client session lasting 4.8 hours, which is a typical standard unit of day care for most local authorities responding to our information request.

Table 4.1.1: Local authority own-provision day care for adults requiring learning disability support (age 18-64)

Costs and unit estimation	2022/2023 values	Notes
Capital costs A. Buildings and oncosts B. Land	£8.37 per client attendance £2.15 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 depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.[4]
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. Local authority expenditure (minus capital)	£97 per client attendance	The mean cost per week has been taken from PSS EX1 (2013/2014) and up-rated using the PSS Pay & Prices Index. Assuming people requiring learning disability support attend on average for 4.8 hours in duration.[3] Capital charges relating to buildings have been deducted.
E. 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	4 times per week	Assumes clients attend 4 times per week.[3]
Occupancy		No information is available.
Unit costs 2022/2023		
Per client attendance (includes A to D)		£107
Per client hour (includes A to D divided by 4.8 hours)		£22

[1] NHS Digital (2023) *Adult Social Care Finance Return (ASC-FR), NHS Digital 2022/23*, Adult Social Care Activity and Finance Report, England, 2022-23 - NHS Digital, in collaboration with the Department of Health and Social Care.
[2] NHS Digital (2014) *PSS EX1 2013/14.* Personal Social Services: Expenditure and Unit Costs, England - 2013-14, Provisional release - NHS Digital.
[3] Based on research carried out by PSSRU in 2014.
[4] Building Cost Information Service Construction Data (2023). BCIS | Building Cost Information Service Construction Data.

4.2. Specialised supported housing

Supported living schemes offer care and support for people in communal living settings. Support includes:

Assessment of ongoing care needs
Hands-on care and practical assistance
Skills training
Escort to community settings
Advice and support

A sub-category of supported housing is 'Specialised Supported Housing' (SSH) which is provided or managed by registered providers which are all regulated by the Regulator of Social Housing. This relates to supported housing that is exempted entirely from social rent requirements and is defined as those properties developed in partnership with local authorities or the health service (See Housing LIN[1] for a more detailed definition).

Costs were collected from 29 registered providers from research carried out by Housing LIN.[1] The costs have been up-rated to the current prices using the PSS Pay and Prices Index (see Section 12.1). The table below illustrates how a person with a learning disability living in Specialised Supported Housing requires state funding of on average £1,989 per week for care and housing costs.

Table 4.2.1: Specialised supported housing

	2022/2023			
	Average weekly rent	**Average weekly service charge**	**Care packages**	**Total costs**
Shared SSH	£235	£67	£1,692	£1,994
Self-contained SSH	£246	£62	£1,692	£2,000
All SSH	£232	£65	£1,692	£1,989

[1] Housing LIN (2018) *Funding supported housing for all, Specialised Supported Housing for people with a learning disability,* https://www.mencap.org.uk/sites/default/files/2018-04/2018.052%20Housing%20report_FINAL_WEB.pdf.

4.3. Positive behavioural support for adults with learning disabilities and behaviour that challenges

Positive Behavioural Support (PBS) is a flexible service that aims to maintain people with learning disabilities whose behaviour challenges in the community, and to increase the ability of carers and professionals to cope with such behaviours (http://www.skillsforcare.org.uk/Topics/Learning-disability/Positive-behavioural-support/Positive-behaviour-support.aspx). The service supports adults (18 years old and over) in four areas of practice: early intervention for high-risk groups (e.g. training workshops for carers and professionals working with people with learning disabilities and behaviour that challenges); crisis prevention and management (e.g. early identification of behaviours that may lead to placement breakdowns); technical support for those with the most complex issues (e.g. intensive behavioural intervention); and placement development (e.g. returning people in out-of-area placements to their 'home' borough).

A study carried out by Iemmi et al. (2015) [1] found that the service was effective in improving the outcomes (behaviours that challenge, activity engagement, community participation) of individuals at a total cost of services of £2,709 per week (see table 4.3.1 (overleaf) which uses average costs for a sample of three people). The economic analysis adopted a public service perspective, including health and social care services and criminal justice services. The PBS intervention formed nearly ten per cent of this cost (£270). The total cost of the PBS intervention lasting 15 months is estimated to cost £17,264 per adult. The total cost of services received for adults in receipt of additional support was £140,957 per year.

These costs were calculated using a representative high-intensity case, and the PBS intervention includes staff costs (behaviour analyst, assistant behaviour analyst, support worker), overheads (IT, telephone, photocopying, training, human resources cost, accommodation costs, meetings, analysis, and report formulation), travel costs, and clinical supervision. Iemmi et al (2015) noted that by maintaining people with less severe challenges in the community (£9 to £180 per week) and those with more severe behavioural needs in less service-intensive residential accommodations (£1,293 to £4,066 per week), the service may potentially reduce public services cost in the long term.[1]

See Hassiotis et al. (2014)[2] for a study addressing the clinical and cost effectiveness of staff training in PBS.

The costs have been up-rated to 2022/2023 values using the PSS Pay and Prices Index and the Hospital and Community Health Services (HCHS) Pay and Prices Inflation Index (see Section 12.1), where appropriate.

[1] Iemmi, V., Knapp, M., Saville, M., McWade, P., McLennan, K. & Toogood, S. (2015) Positive behavioural support for adults with intellectual disabilities and behaviour that challenges: an initial exploration of the economic case, *International Journal of Positive Behavioural Support*, 5,1, 16-25.

[2] Hassiotis, A., Strydom, A., Crawford, M., Hall, I., Omar, R., Vickerstaff., V., Hunter, R., Crabtree, J., Cooper, V., Biswas, A., Howie, W. & King, M. (2014) Clinical and cost effectiveness of staff training in Positive Behaviour Support (PBS) for treating challenging behaviour in adults with intellectual disability: a cluster randomised controlled trial, *BMC Psychiatry*, 14: 219.

Table 4.3.1: Service use and cost for adults over the first 6 months of PBS (N=3)

	No. using	No. contacts mean (SD)	Contact: hours, mean (SD)	Weekly cost (2022/23) mean	SD
Health and social care					
Supported housing (days)	1	182		£416	£721
Other than residential home (days)	1	35.5		£125	£217
Total residential care				**£541**	**£938**
Community-based care					
Psychiatrist	2	2 (0)	0.9 (0.2)	£16	£14
Nurse	3	5 (2.6)	0.8 (0.1)	£9	£5
Social worker	3	48.3 (17.2)	0.4 (0)	£170	£74
Care worker	1	182	24	£1,833	£3,176
Other services (paid through direct payments)	2	78		£175	£151
Total community-based care				**£2,203**	**£3,420**
Day care centre	1	78	6	£78	£95
Total health and social care				**£2,822**	**£4,453**
Positive behavioural support for adults with intellectual disabilities and behaviour that challenges				£307	
Total health and social care (+PBSS)				**£3,129**	**£4,453**

5. Services for adults requiring physical support

5.1. Local authority own-provision residential care homes for adults requiring physical support (age 18-64)

5.2. Voluntary and private sector care homes for adults requiring physical support (age 18-64)

5.3. Local authority own-provision day care for adults requiring physical support (age 18-64)

5.1. Local authority own-provision residential care homes for adults requiring physical support (age 18-64)

Table 5.1.1: Costs for local authority own-provision residential care homes for adults requiring physical support (age 18-64)

Costs and unit estimation	2022/2023 values	Notes
Capital costs		
A. Buildings and oncosts	£184 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.[1] Capital costs have been depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.
B. Land costs	£26 per resident week	
C. Total local authority expenditure (minus capital)	£1,427 per resident week (median)	Data comes from the ASC-FR data return (ASC-FR) for 2022/2023.[2] The mean weekly cost is £1,811. Capital charges relating to buildings and land have been deducted. It is reasonable to assume that the expenditure will approximate the full cost of providing the service (e.g. care costs and care home fees including accommodation and utility costs).
D. Overheads		No additional overheads have been added.
Other costs		
E. Personal living expenses	£25.65 per week	The DWP personal allowance for people in residential care or a nursing home is £25.65 per week.[3] 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		No information is available.
Unit costs 2022/2023		
Cost per resident week establishment costs (A to C)	£1,637	
Cost per resident week care package costs (A to E)	£1,662	
Per resident day establishment costs (includes A to C divided by 7)	£234	
Per resident day (includes A to E divided by 7).	£237	

[1] Building Cost Information Service Construction Data (2023) BCIS | Building Cost Information Service Construction Data.

[2] NHS Digital (2023) *Adult Social Care Finance Return (ASC-FR), NHS Digital 2022/23* Adult Social Care Activity and Finance Report, England, 2022-23 - NHS Digital, in collaboration with the Department of Health and Social Care.

[3] Department of Health & Social Care (2022) *Social Care – Charging for care and support,* Department of Health & Social Care, London. Social care - charging for care and support: local authority circular - LAC(DHSC)(2022)1 - GOV.UK (www.gov.uk).

5.2. Voluntary and private sector residential care homes for adults requiring physical support (age 18-64)

Table 5.2.1: Costs for voluntary and private sector residential care homes for adults requiring physical support.

Costs and unit estimation	2022/2023 values	Notes
Capital costs A. Buildings and oncosts B. Land costs	£140 per resident per week £26 per resident per week	Based on the new-build and land requirements for residential care establishments. These allow for 57.3 square metres per person. [1] Capital costs have been depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.
C. Total expenditure (minus capital)	£1,013 - per resident per week (median)	Data comes from the ASC-FR data return (ASC-FR) for 2022/2023. [2] The mean weekly cost is £1,051. Capital charges relating to buildings and land have been deducted. It is reasonable to assume that the expenditure will approximate the full cost of providing the service (e.g. care costs and care home fees including accommodation and utility costs).
D. Overheads		No additional overheads have been added.
Other costs		
E. Personal living expenses	£25.65 per week	The DWP personal allowance for people in residential care or a nursing home is £25.65 per week.[3] 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		No information is available.
Unit costs 2022/2023		
Cost per resident week establishment costs (A to C)		£1,179
Cost per resident week care package costs (A to E)		£1,205
Per resident per day establishment costs (includes A to C divided by 7)		£168
Per resident per day (includes A to E divided by 7).		£172

[1] Building Cost Information Service Construction Data (2023) BCIS | Building Cost Information Service Construction Data.

[2] NHS Digital (2023) *Adult Social Care Finance Return (ASC-FR), NHS Digital 2022/23*, Adult Social Care Activity and Finance Report, England, 2022-23 - NHS Digital, in collaboration with the Department of Health and Social Care.

[3] Department of Health & Social Care (2022) *Social Care – Charging for care and support,* Department of Health & Social Care, London. Social care - charging for care and support: local authority circular - LAC(DHSC)(2022)1 - GOV.UK (www.gov.uk).

5.3. Local authority own-provision day care for adults requiring physical support (age 18-64)

As day care is now combined with other expenditure in the ASC-FR data collection, this table uses the Personal Social Services Expenditure return (PSS EX1)[1] for 2013/2014 for expenditure costs which have been up-rated using the PSS Pay & Prices Index (see Section 12.1). For 2022/2023, the mean cost is £267 per week (including capital costs). These data do not include the number of sessions clients attended each week.

Based on information provided by ten local authorities,[2] we have calculated an average cost per client attendance and a cost per client hour. We have used this information to calculate the cost of a client session lasting 4.25 hours.

Table 5.3.1: Costs for local authority day care for adults requiring physical support (age 18-64)

Costs and unit estimation	2022/2023 values	Notes
Capital costs		
A. Buildings and oncosts B. Land	£8.37 per client attendance £2.15 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 depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.[3]
C. Other capital costs		Capital costs not relating to buildings and oncosts are included in the local authority expenditure figures, therefore no additional cost has been added for items such as equipment and durables.
Revenue costs		
D. Per day expenditure (minus capital)	£96 per client attendance	The average cost per week has been taken from PSS EX1 2013/2014[1] and up-rated using the PSS Pay & Prices Index. Assuming people with physical disabilities attend on average 2.7 times per week (4.25 hours in duration),[2] the average cost per client attendance is £96. Capital charges relating to buildings have been deducted.
E. 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 2.7 times per week.[2]
Occupancy		No information is available.
Unit costs 2022/2023		
Total cost per attendance (includes A to D)	£106	
Cost per hour (includes D/4.25 hours)	£23	

[1] NHS Digital (2014) *PSS EX1 2013/14* Personal Social Services: Expenditure and Unit Costs, England - 2013-14, Provisional release - NHS Digital
[2] Based on research carried out by PSSRU in 2014.
[3] Building Cost Information Service Construction Data (2023) BCIS | Building Cost Information Service Construction Data.

6. Hospital and related services

6.1. NHS National Cost Collection – unit costs for hospital services

6.2. NHS wheelchairs

6.3. Self-management programmes

6.4. NHS National Cost Collection – unit costs for sexual health

6.5. Screening interventions for sexually-transmitted infections (STIs)

6.1. NHS National Cost Collection – unit costs for hospital services

National Cost Collection costs are the average unit cost to the NHS of providing defined services to NHS patients in England in a given financial year. They show how NHS providers spend money to provide health care to patients. We have drawn on NHS England, National Cost Collection 2021/2022 to report on the NHS costs for selected mental health services.[1] All costs have been up-rated to 2022/2023 prices using the NHS Cost Inflation Index (see Section 12.1).

Table 6.1.1: Unit costs for hospital services

	2022/2023 values
Elective/non-elective Health Care Resource Group (HRG) data, average cost per episode	
Elective inpatient stays	£6,256
Non-elective inpatient stays (long stays)[2]	£4,719
Non-elective inpatient stays (short stays)	£857
Day cases	£1,111
Outpatient attendances	£217
PALLIATIVE CARE	
Inpatient, specialist palliative care (19 years and over), average cost per bed day (19 years and over)	£305
Inpatient, specialist palliative care (19 years and over)	£638
Hospital specialist palliative care support (19 years and over)	£187
Hospital Specialist Palliative Care Support (18 years and under)	£322
Outpatient, medical specialist palliative care attendance (19 years and over)	£243
Outpatient, medical specialist palliative care attendance (18 years and under)	£152
Outpatient, non-medical specialist palliative care attendance (19 years and over)	£92
Outpatient, non-medical specialist palliative care attendance (18 years and under)	£636
AMBULANCE SERVICES (Weighted average of attendances)	
Hear and treat and refer	£67
See and treat and refer	£287
See and treat and convey	£417
Average of all	£254
COMMUNITY SERVICES, average cost per group session (one-to-one)	
Physiotherapy	£71 (£78)
Occupational therapy	£56 (£106)
Speech therapy services	£112 (£137)
Dietician	£83

[1] NHS England (2023) *National Cost Collection for the NHS 2021/2022*. NHS England » 2021/22 National Cost Collection Data Publication

[2] Long-stay is when a patient remains in hospital beyond an expected length of stay for clinical reasons. 21-22 Annex DtB - Guidance on currencies (england.nhs.uk)

6.2. NHS wheelchairs

National Cost Collection costs are the average unit cost to the NHS of providing defined services to NHS patients in England in a given financial year. They show how NHS providers spend money to provide health care to patients. We have drawn on NHS England, National Cost Collection 2021/2022 to report on the NHS costs for NHS wheelchairs.[1,2] All costs have been up-rated to 2022/2023 prices using the NHS Cost Inflation Index (see Section 12.1).

Table 6.2.1: NHS wheelchair costs

	Total values 2022/2023	Total annual costs 2022/2023	Notes
Capital costs (adult)			Capital value has been depreciated over five years at a discount rate of 3.5 per cent to allow for the expected life of a new chair. In practice, 50 per cent of wheelchairs supplied have been reconditioned, not having been worn out by the time their first users ceased to need them.
Wheelchair Services - equipment, low need	£299	£66	
Wheelchair Services -equipment, medium need	£390	£86	
Wheelchair Services - equipment, high need, manual	£736	£163	
Wheelchair Services - equipment, high need, powered	£1,311	£290	
Revenue costs			Revenue costs exclude therapists' time but include the staff costs of maintenance, and all costs for pressure relief. The cost of reconditioning has not been included in the cost of maintenance.
Repair And Maintenance, All needs, manual	£45	£10	
Repair And Maintenance, All needs, powered	£207	£46	
Overheads			No estimate of management overheads is available. They are likely to be minimal.
Unit costs 2022/2023			
Per high need, manual per year		£163	
Per high need, powered per year		£290	

[1] NHS England (2023) *National Cost Collection for the NHS 2021/2022*. NHS England » 2021/22 National Cost Collection Data Publication

[2] Previous manuals have used information from UK wheelchairs.

6.3. Self-management programmes

Empowering patients is one of the key priorities listed for the NHS Five Year Forward View and the King's Fund have provided a summary of a number of well-established self-management programmes that aim to empower people to improve their health (https://www.kingsfund.org.uk/projects/gp-commissioning/ten-priorities-for-commissioners/self-management).

Here we draw from a study that have provided the costs of the programme. We will continue to add to this section as new costs become available.

Self-management support using digital health system for chronic obstructive pulmonary disease (COPD)

Andrew Farmer and colleagues (2017)[1] conducted a randomised controlled trial of a digital health system supporting clinical care through monitoring and self-management support in community-based patients with moderate to very severe chronic obstructive pulmonary disease. The aim of the study was to determine the efficacy of a fully automated internet-linked, tablet computer-based system of monitoring and self-management support (EDGE, sElf-management anD support proGrammE) in improving quality of life and clinical outcomes. Patients were informed that the EDGE platform was not a replacement for their usual clinical care, and the conclusion drawn was that there appears to be an overall benefit in generic health status. The effect sizes for improved depression score, reductions in hospital admissions, and general practice visits, warrant further evaluation.

To provide an annual cost for the self-management support, we have used the costs provided by Farmer & colleagues (2017)[1] and assumed that the equipment would be replaced every 5 years. We have up-rated the costs to 2022/2023 values using the PSS Pay, Independent Sector, Index.

Table 6.3.1: Costs of self-management support using a digital health system for chronic obstructive pulmonary disease.

	Fixed costs	Annual costs
Equipment costs		
Tablet computer (Android tablet computer (Samsung Galaxy Tab))	£410	£91
Bluetooth-enabled pulse oximeter probe	£515	£114
Clinician reviewing summary of the oxygen saturation, heart rate, and symptom diary module, once a week following the review.		£406
Total costs		**£611**

[1] Farmer, A., Williams, V., Verlardo, C., Ahmar Shah, S. Mee Yu, L.., Rutter, H., Jones, L., Williams, N., Heneghan, C., Price, J., Hardinge, M. & Tarassenko, L. (2017) Self-management support using a digital health system compared with usual care for chronic obstructive pulmonary disease: randomized controlled trial, *Journal of Medical Internet Research*, https://www.jmir.org/2017/5/e144

6.4. National Cost Collection – unit costs for sexual health

These figures show the average unit cost to the NHS of providing defined services to NHS patients in England in a given financial year. They show how NHS providers spend money to provide health care to patients. We have drawn on NHS England, National Cost Collection 2021/2022 to report on the NHS national costing data for selected sexual health services.[1] All costs have been up-rated to 2022/2023 prices using the NHS Cost Inflation Index (see Section 12.1).[2]

Table 6.4.1: National Cost Collection - unit costs for sexual health

	National average (2022/2023)
Genito-Urinary Medicine (GUM) infections (total)	
Elective inpatient stays	£4,284
Non-elective inpatient stays (long stay)[3]	£2,590
Non-elective inpatient stays (short stays)	£561
Day cases	£326
Genito-Urinary Medicine (GUM) infections - Consultant-led (outpatient)	
Non-admitted, face-to-face, first	£180
Non-admitted, face-to-face, follow-up	£139
Non-admitted, non-face-to-face, first	£426
Non-admitted, non-face-to-face, follow-up	£143
Genito-Urinary Medicine (GUM) infections - Non-consultant-led (outpatient)	
Non-admitted, face-to-face, first	£103
Non-admitted, face-to-face, follow-up	£111
Non-admitted, non-face-to-face, first	£173
Non-admitted, non-face-to-face, follow-up	£146
Community health services (outpatient)	
HIV/AIDS specialist nursing (adult)	
Face-to-face	£171
Non face-to-face	£523
Outpatient attendances	
Family planning clinic, face-to-face, consultant led, first	£304
Family planning clinic, face-to-face, consultant led, follow-up	£90
Family planning clinic, non-face-to-face, non-consultant led, first	N/A
Family planning clinic, non-face-to-face, non-consultant led, follow-up	£230
Outpatient attendances	
Family planning clinic, face-to-face, non-consultant led, first	£121
Family planning clinic, face-to-face, non-consultant led, follow-up	£95
Family planning clinic, non-face-to-face, non-consultant led, first	£44
Family planning clinic, non-face-to-face, non-consultant led, follow-up	£27

[1] NHS England (2023) *National Cost Collection for the NHS 2021/2022*. NHS England, Leeds. NHS England » 2021/22 National Cost Collection Data Publication

[2] Additional costs have been included compared to previous manuals

[3] Long-stay is when a patient remains in hospital beyond an expected length of stay for clinical reasons. 21-22 Annex DtB - Guidance on currencies (england.nhs.uk)

6.5. Screening interventions for sexually-transmitted infections (STIs)

In 2013, Louise Jackson and colleagues (2014)[1] carried out a study to compare the costs and outcomes of two sexually transmitted infection (STI) screening interventions. The participants were men aged 18 years and over within six amateur football clubs in London. Eligible football clubs were grouped by similar characteristics into three pairs, and each of the pairs was randomised to a study arm (captain-led, sexual health advisor-led and poster-only), after which, resource use data were collected prospectively and unit costs were applied. In total, 153 men received the screening offer; 50 per cent of the men in the captain-led accepted the offer, 67 per cent in the sexual health advisor-led and 61 per cent in the poster-only.

The costs of each intervention are shown in Table 6.5.1. All costs have been up-rated to 2022/2023 costs using the PSS Pay and Prices Inflation Index.

Table 6.5.1: Health service costs per screening intervention for sexually-transmitted infections

Resources used	Cost item		N	Unit costs - 2023	Total costs - 2023
Intervention costs					
Recruitment of club	Per club		2	£725	£1,451
Poster pack	Per pack		2	£92	£184
Test kit	Per player		46	£10	£445
Promotion	Per club	Captain led[1]	2	£175	£351
		Health visitor led[2]	2	£316	£632
		Poster-only[3]	2	£175	£351
Specimen collection box [4]	Per club		2	£95	£190
Transport of specimen collection box	Per club		2	£232	£464
Processing costs					
Additional storage facilities			2	£20	£40
Sample processing	Per player tested	Captain led	28	£18	£517
		Health visitor led	31		£572
		Poster-only	31		£572
Patient admin and result notification	Per player tested	Captain led	28	£7	£185
		Health visitor led	31		£205
		Poster-only	31		£205
Total cost per intervention		**Captain led**	**28**		**£3,827**
		Health visitor led	**31**		**£4,182**
		poster-only	**31**		**£3,902**
Average cost per player screened		**Captain led**	**28**		**£137**
		Health visitor led	**31**		**£135**
		Poster-only	**31**		**£126**

1) Captain-led and poster STI screening promotion; includes the costs for a member of staff (healthcare assistant) from the clinic to undertake the sample processing, notification, preparing of materials and safe return of samples to the clinic. The forgone time taken by the team captain to prepare for and deliver the intervention was excluded.

2) Sexual health advisor-led and poster STI screening promotion; included a sexual health advisor to lead the screening promotion. It was assumed that the health advisor would also take the materials to the club, prepare the 'promotion' and ensure the safe return of completed specimen samples to the clinic in accordance with trial processes and clinical governance requirements. Travel costs are included.

3) Poster-only STI screening promotion (control/comparator). It was assumed that a member of staff (healthcare assistant) from the clinic undertaking the testing and notification would need to be on-site before and after the promotion.

4) Includes costs for the first year of the design elements of the posters, test kit, pens and specimen collection boxes and for the first year of the storage facilities, depreciated at three per cent over three years.

[1] Jackson, L., Roberts, T., Fuller, T., Sebastian, S., Sutcliffe, L., Saunders, J., Copas, A., Mercer, C., Cassell, J. & Estcourt, C. (2014) Exploring the costs and outcomes of sexually transmitted infection (STI) screening interventions targeting men in football club settings: preliminary cost-consequence analysis of the SPORTSMART pilot randomised controlled trial. *Sexually Transmitted Infections*, 91 (2). Pp. 100-105. http://sro.sussex.ac.uk/53486/1/100.full.pdf.

7. Care packages

7.1. Patient costs following discharge from acute medical units

7.2. End of life care

7.3. Smoking cessation services

7.4. Social prescribing

7.5. Low intensity interventions for the management of obsessive-compulsive disorder

7.6. The cost of diagnosis and early support in patients with cognitive decline

7.1. Patient costs following discharge from acute medical units

Acute medical units (AMU) are the first point of entry for patients who are admitted for urgent investigation or care by their GP, an outpatient clinic or the Emergency Department. They allow for those who need admission to be correctly identified, and for those who could be managed in ambulatory settings to be discharged. The Acute Medicine Outcome Study (AMOS) carried out by Franklin et al. (2014) found that readmission rates for older people in the year following discharge from AMUs are high.[1] Further work was therefore carried out to identify the resource use of 644 people, aged over 70, based in Nottingham and Leicester and who had been discharged from an acute medical unit within 72 hours of admission.

Data were taken from Electronic Administrative Record (EAR) systems on a range of health and social care services potentially used by all patients participating in the study, collected for three months post-AMU discharge (January 2009-February 2011). Resource use was then combined with national unit costs to derive total patient costs, which have been updated to current prices using the NHS Cost Inflation Index (see Section 12.1). The table below provides the secondary care and social care resource use and costs for 456 patients residing in Nottingham, and for a subset of these patients (250) for which the primary care costs were available. The mean cost for the 456 patients (excluding primary care) was £2,095, and £2,598 for the 250 patients for which all resource use was available (see Table 7.1.1).

Table 7.1.1: Summary of patient resource use and costs following discharge from acute medical units

	No. of service users (mean number of events per service user) [a]	Mean cost (£) for 456 patients	Mean cost (£) per patient including primary care (n = 250)
Hospital care	360 (4)	£1,838	£1,754
Inpatient care [b]	119 (2)	£1,263	£1,153
Day case care	71 (1)	£155	£165
Outpatient care	358 (3)	£412	£420
Critical care [c]	3 (1)	£8	£16
Ambulance service	17 (2)	£21	£17
Intermediate care	5 (Not applicable)	£12	£4
Mental health care	28 (4)	£45	£51
Social care	76 (4)	£179	£244
Total costs (exc. primary care)	**377 (5)**	**£2,095**	**£2,070**
Primary care [d]	243 (6)	-	£265
Consultations	113 (3)	-	£34
Home visits	42 (7)	-	£28
Procedures	25 (3)	-	£5
Other events [e]	202 (22)	-	£62
Medication	232 (21)	-	£124
Wound dressings	64 (4)	-	£12
Total costs including primary care [f]	**248 (7)**	**-**	**£2,335**

a) Mean number of events for inpatient care is based on mean number of episodes, and not number of spells. Mean number of events for 'total' does not include primary care events classed as 'other events', 'medication' or 'wound dressing'.
b) Mean length of hospital stay for those patients with an inpatient admission over the trial period was 12 days.
c) Mean length of intensive care stay for those patients with an intensive care admission was 15 days.
d) Mean number of events for primary care service users only includes face-to-face contacts (i.e. consultations, home visits, and procedures)
e) 'Other events' includes all non-face-to-face entries on the EAR system that require staff time to execute, i.e. administration, telephone calls etc. Entries that were electronic and external to the practice or created by an electronically automated system (i.e. did not require staff time to execute) were excluded from this analysis.
f) Mean number of events includes only face-to-face contacts across all services apart from mental health care (see also point (d))

[1] Franklin, M., Berdunov, V., Edmans, J., Conroy, S., Gladman, J. Tanajewski, L., Gkountouras, G. & Elliott, R. (2014) Identifying patient-level health and social care costs for older adults discharged from acute medical units in England, *Age and Ageing*, 43, 703-707.

7.2. End of life care

Research carried out by the Nuffield Trust (2012)[1] on behalf of the National End of Life Care Intelligence Network examined the health and social care service use patterns across seven local authorities for a cohort of 73,243 people who died.

Table 7.2.1 provides the total cost of care services received in the last twelve months of life, and 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.

The costs have been up-rated to 2022/2023 prices using the Personal Social Services (PSS) and NHS Pay & Prices Index. Hospital care accounted for 64 per cent of total care costs, and social care costs for 36 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.

Table 7.2.1: 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	**£590**	**£8,051**	**66%**	**65,624**	**£10,782**
Inpatient emergency	£419	£5,721	47%	54,577	£7,677
Inpatient non-emergency	£112	£1,526	12%	58,165	£1,921
Outpatient	£48	£657	5%	50,155	£959
A&E	£11	£147	1%	48,000	£225
Social care	**£343**	**£4,676**	**34%**	**20,330**	**£33,656**
Residential and nursing care	£275	£3,749	28%	10,896	£25,198
Home care	£53	£725	5%	10,970	£4,839
Other	£15	£202	1%	4,084	£3,619
Total	**£933**	**£12,727**	**100%**	**85,954**	**N/A**

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). Table 7.2.2 shows these costs by diagnostic group. 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, 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.

Table 7.2.2: Cost of hospital and social care services by diagnostic group per decedent in the final year of life

	Average costs, final year, £ per person 2023			
	Number	**Hospital care**	**Social care**	**Hospital and social care**
All people	73,243	£8,050	£4,676	£12,726
No diagnoses	22,118	£3,963	£5,746	£9,709
Any diagnosis	51,125	£9,817	£4,213	£14,029
Hypertension	21,241	£10,987	£3,865	£14,852
Cancer	19,934	£11,508	£1,805	£13,314
Injury	17,540	£11,856	£5,616	£17,471
Atrial fibrillation	13,567	£11,100	£4,578	£15,678
Ischaemic heart disease	13,213	£11,260	£3,901	£15,161
Respiratory infection	11,136	£12,321	£3,105	£15,427
Falls	10,560	£10,893	£7,109	£18,002
Congestive heart failure	10,474	£11,314	£4,430	£15,743
Chronic obstructive pulmonary disease	9,392	£11,052	£3,491	£14,543
Anaemia	9,210	£12,978	£4,209	£17,187
Diabetes	8,697	£11,296	£4,347	£15,643
Cerebrovascular disease	8,290	£11,123	£5,786	£16,909
Peripheral vascular disease	6,780	£12,816	£3,856	£16,672
Dementia	6,735	£9,278	£12,394	£21,672
Renal failure	6,570	£12,935	£4,450	£17,385
Angina	6,549	£12,095	£3,943	£16,039
Mental disorders, not dementia	4,814	£12,131	£5,009	£17,141
Iatrogenic conditions	4,190	£17,483	£3,513	£20,996
Asthma	3,480	£11,742	£3,443	£15,185
Alcoholism	2,437	£10,708	£1,608	£12,316
Non-rheumatic valve disorder	2,059	£13,184	£3,036	£16,220

7.3. Smoking cessation services

Quit 51 offer a smoking cessation service in accordance with National Institute for Health and Care Excellence (NICE) guidelines. The remit of the service is to provide a maximum of 12 sessions of support with an accredited adviser and provision of tailored pharmacotherapy to smokers attempting to quit. A session is typically 15 minutes duration although the introduction to a session will generally take longer in order to cover triaging and discussions around individual background and requirements. Assuming a patient continues with the service for the full duration, they should receive a minimum of 90 minutes contact time with an adviser covering a period up to 12 weeks after quitting.

Information for this schema has been drawn from Walker et al. (2018)[1] who analysed data from Quit-51 smoking cessation services across five English regions between March 2013 and March 2016 (n=9116). A cost for each individual using the service was estimated based on the pharmacotherapy prescribed and time spent with an adviser. With respect to pharmacotherapy, the costs, including prescription and value added tax (VAT) for each treatment were as follows within the analysis carried out by Walker et al: Nicotine Replacement Therapy (NRT) (combination) - £19.95 per week; Varenicline - £76.80 per month and Bupropion £69.45 per month. Service use data was multiplied by an hourly charge of £29.31 that included the cost of the adviser, room, equipment, travel and advertising. Central overheads for the service were not included and neither were costs to the individual for travel and parking.

The following table provides the average cost per person quitting (with approximate 95% CI) calculated at the 12-week time point, with supporting information. Costs have been up-rated to 2022/2023 values using the NHS Cost Inflation Index (see Section 12.1). See https://www.herc.ox.ac.uk/publications/830311 for a summary of the background and method used to derive the costs reported here.

Table 7.3.1 Average cost per quit (with approximate 95% CI) calculated at the 12-week time point, with supporting information.

Variable	Levels	12 weeks (N)	Total cost	Cost per head	Number quitting	Quit rate (%)	Mean cost per quit (£)
Age	12-19	509	£59,293	£116	116	23%	£511
	20-29	1189	£153,871	£129	296	25%	£520
	30-49	3911	£618,220	£158	1262	32%	£490
	50-69	2955	£506,808	£172	1068	36%	£475
	70+	538	£90,570	£168	192	36%	£472
Gender	Male	4249	£677,498	£159	1425	34%	£475
	Female	4867	£751,984	£155	1510	31%	£498
Treatment	NRT	7373	£1,026,003	£139	2117	29%	£485
	Varenicline	1708	£398,283	£233	799	47%	£498
	Bupropion	35	£5,195	£148	19	54%	£273
FTND	0-3	1534	£285,487	£185	622	41%	£459
	4-5	1884	£361,268	£192	727	39%	£497
	6-7	1676	£326,061	£195	641	38%	£509
	8-10	766	£145,045	£189	236	31%	£615
Deprivation	1-3	886	£164,171	£185	319	36%	£515
	4-6	1838	£321,126	£175	635	35%	£506
	7-8	2157	£362,428	£168	698	32%	£519
	9-10	3321	£544,689	£164	1180	36%	£462

[1] Walker, N., Yang, Y., Kiparoglou, V., Pokhrel, S., Robinson, H. & van Woerden, H. (2018) An examination of user costs in relation to smokers using a cessation service based in the UK, *BMC Health Services Research* (2018) 18:182.

7.4. Social prescribing

Social prescribing enables GPs, nurses and other primary care professionals to refer people to a range of local, non-clinical services. Social prescribing schemes can involve a variety of activities which are typically provided by voluntary and community sector organisations. Examples include volunteering, arts activities, group learning, gardening, befriending, cookery, healthy eating advice and a range of sports.

There is a growing body of evidence assessing the impact of social prescribing to healthcare demand and cost.[1] Much of the focus has been on the benefit of social prescribing where policy makers and commissioners have drawn from areas of good practice like Rotherham.

The Rotherham Social Prescribing pilot was commissioned by NHS Rotherham as part of a GP-led Integrated Case Management Pilot and delivered by Voluntary Action Rotherham (VAR). It received around £1m as part of a programme to provide 'additional investment in the community'. Funded for two years from April 2012 to March 2014, it aimed to increase the capacity of GP practices to meet the non-clinical needs of their patients with long-term conditions. The five most common types of referral to funded services were for information and advice, community activity, physical activities, befriending and enabling. Twenty-four voluntary and community organisations (VCOs) received grants to deliver a menu of 31 separate social prescribing services. 1,607 patients were referred to the service.[2]

Excluding the grants provided to the VCOs for delivering the social prescribing services, the average cost per person per year for those referred to the scheme was £177. Including grants to providers and additional support grants, the average cost per person referred per year was £398.

A number of positive economic benefits to commissioners linked to the Social Prescribing Pilot were estimated: total NHS cost reductions by the end of the pilot of £552,000; a return on investment of 50 pence for each pound (£1) invested and potential NHS cost reductions of £415,000 in the first year post-referral when the service was running at full capacity.

If the benefits identified were fully sustained over a longer period, the authors estimated that the costs of delivering the service for a year would be recouped after between 18 and 24 months and the five year cost reductions for commissioners for each full year of service delivery could be as high as £1.9 million: a return on investment of £3.38 for each pound (£1) invested. The authors also estimated that even if the benefits were sustained but dropped off at a rate of 33 per cent each year, they could lead to total cost reductions of £807,000; a return on investment of £1.41 for each pound (£1) invested. See also an evaluation of a Social Prescribing Service set in Doncaster[3] for cost information on a different service.

Table 7.4.1 provides the direct costs to the Clinical Commissioning Group of commissioning the pilot but excludes other costs such as time taken to develop the service model and consultations with GPs and voluntary sector organisations, costs to the Foundation Trust which supported the development of a complex client management system and also volunteer time. All costs have been up-rated to 2022/2023 levels using the PSS Pay and Prices Index (see Section 12.1).

Table 7.4.1: Overview of Social Prescribing Pilot (Inputs)

2023 costs	Year 1	Year 2	Total	Cost per person referred per year
Grants to providers + additional support grants	£398,038	£378,472	£776,509	£242
Salaries and overheads	£274,923	£347,195	£622,118	£194
Total	£672,962	£725,667	£1,398,627	£435

[1] Polley, M., Bertotti, M. Kimberlee, R., Pilkinton, K., & Refsum, C. (2017) *A review of the evidence assessing impact of social prescribing on healthcare demand and cost implications*, University of Westminster.

[2] Dayson, C. & Bashir, N. (2014) *The social and economic impact of the Rotherham Social Prescribing Pilot: Main Evaluation Report*, Centre for Regional Economic Research, Sheffield Hallam University, Sheffield. https://shura.shu.ac.uk/18961/1/Dayson-SocialAndEconomicImpact-Rotherham%28VoR%29.pdf

[3] Dayson, C., & Bennett, E. (2016) *Evaluation of Doncaster Social Prescribing Service: understanding outcomes and impact*, https://shura.shu.ac.uk/17298/1/eval-doncaster-social-prescribing-service.pdf

7.5. Low intensity interventions for the management of obsessive compulsive disorder (OCD)

Information for this schema has been drawn from a study carried out by Lovell et al. (2017)[1] to explore the cost-effectiveness of three low intensity interventions for the management of obsessive compulsive disorder (OCD):

a) Cognitive behavioural therapy (CBT) delivered using OCFighter (received by 157 people in the study), a commercially produced computerised Cognitive Behavioural Therapy (cCBT) program for people with OCD to design, carry out and monitor their treatment progress. Participants randomised to OCFighter were given an access ID and password to log in to the system and advised to use the program at least six times over a 12 week period. OCFighter was available to patients for 12 months following activation. Participants received six brief (ten minute) scheduled telephone calls from a psychological wellbeing practitioner (PWP) (total direct clinical input 60 minutes). The support offered consisted of a brief risk assessment, ensuring patients had been able to access OCFighter, reviewing progress and solving any difficulties that were impeding progress.

b) Guided self-help (received by 158 people in the study) which consisted of a self-help book focused on information about OCD, maintenance and guidance on how to implement the NICE-recommended treatment for OCD (i.e. CBT using exposure response therapy). Participants received six brief (ten minute) scheduled telephone calls from a PWP, with one initial session of up to 60 minutes (either face-to-face or by telephone, dependent on patient preference) followed by up to 10-30 minute sessions over a 12-week period (total direct clinical input six hours).

c) Waiting list for high-intensity CBT (received by 158 people).

Table 7.5.1 provides a breakdown of mean costs associated with the supported cCBT and guided self-help intervention. Table 7.5.2 provides total societal costs: health and social care costs which include the cost of the intervention and employment losses, out-of-pocket expenses and out-of-pocket savings. The costs have been up-rated to 2022/2023 values using the PSS Pay and Prices Index.

Table 7.5.1: Cost of supported cCBT and guided self-help

	Intervention mean cost (2022/2023)	
Cost component	**Supported cCBT**	**Guided self-help**
Number of sessions attended	2.3	4.11
Total session minutes	30.20	142.90
Cost of materials (£)	£82	£7.05
Cost of training (£)	£24	£44
Cost of PWP contacts (£)	£93	£439
Total cost (£)	£198	£491

Table 7.5.2 (overleaf) shows that from baseline to 12 months guided self-help was the least expensive group (£2.867) compared with £2,912 for the cCBT group and £3,378 for the waiting list option.

[1] Lovell, K. Bower, P., Gellatly, J., Byford, S., Bee, P., McMillan, D., Arundel, C., Gilbody, S., Gega, L., Hardy, G., Reynolds, S., Barkham, M., Mottram, Pl, Lidbetter, N., Pedley, R., Molle, J., Peckham, E., Knopp-Hoffer, J., Price, O., Connell, J., Heslin, M., Foley, C., Plummer, G. and Roberts, C. (2017) Clinical effectiveness, cost-effectiveness and acceptability of low-intensity interventions in the management of obsessive-compulsive disorder: the Obsessive-Compulsive Treatment Efficacy randomised controlled Trial (OCTET). *Health Technology Assessment* (Winchester, England) 21(37).pp.1-132.

Table 7.5.2: Total societal costs between baseline and 12 months

	Supported cCBT		Guided self-help		Waiting list	
2023 costs	**Valid**	**Mean**	**Valid**	**Mean**	**Valid N**	**Mean**
Intervention cost	157	£188	158	£464	158	£0
Baseline to 3 months						
Health and social care services	118	£444	130	£382	129	£485
Employment losses	118	£105	130	£125	129	£64
Out-of-pocket expenses	118	£167	130	£86	129	£137
Out-of-pocket savings	118	£0	130	£0	129	-£4
Total employment losses, out-of- pocket expenses and out-of- pocket savings.	**118**	**£272**	**130**	**£211**	**129**	**£197**
Total costs	**118**	**£717**	**130**	**£593**	**129**	**£683**
Between 3 and 6 months						
Health and social care services	102	£493	115	£446	117	£641
Employment losses	102	£121	115	£30	117	£34
Out-of-pocket expenses	102	£53	115	£58	117	£119
Out-of-pocket savings	102	-£4	115	-£1	117	-£11
Total employment losses, out-of- pocket expenses and out-of- pocket savings.	**102**	**£170**	**115**	**£87**	**117**	**£142**
Total	**102**	**£663**	**115**	**£533**	**117**	**£783**
Between 6 and 12 months						
Health and social care services	88	£804	100	£662	100	£960
Employment losses	88	£12	100	£78	100	£241
Out-of-pocket expenses	88	£159	100	£155	100	£242
Out of pocket savings	88	-£75	100	£0	100	-£16
Total employment losses, out-of- pocket expenses and out-of- pocket savings.	**88**	**£96**	**100**	**£233**	**100**	**£468**
Total	**88**	**£900**	**100**	**£895**	**100**	**£1,428**
Baseline to 12 months (including intervention costs)						
Health and social care services	157	£1,929	100	£1,954	100	£2,086
Employment losses	157	£239	100	£233	100	£339
Out-of-pocket expenses	157	£379	100	£299	100	£498
Out of pocket savings	157	£365	100	£381	100	£455
Total employment losses, out-of- pocket expenses and out-of- pocket savings.	**157**	**£983**	**100**	**£913**	**100**	**£1,292**
Total	**157**	**£2,912**	**100**	**£2,867**	**100**	**£3,378**

7.6. The cost of diagnosis and early support in patients with cognitive decline

Average costs of health and social care of mild, moderate and severe dementia are estimated to be £27,666, £31,125 and £52,215, respectively, per person per year which includes one-off costs of £7,274 per person related to end-of-life care.[1] The costs have been up-rated to 2022/2023 using the PSS Pay and Prices Index and the NHS Cost Inflation Index (see Section 12.1).

Research carried out by Pennington & colleagues (2016)[2] investigated the costs of supporting patients with suspected dementia, including assessment and support six months after diagnosis. The study is based on the costs incurred by 1,353 patients from 69 Memory Assessment Services (MAS) and the mean patient age was 78 years (range 42-98 years). These costs were estimated using 2013/14 sources of data and have been up-rated to 2022/2023 values using the NHS Cost Inflation Index and PSS Pay and Prices Index (see Section 12.1).

Table 7.6.1 shows that slightly under half of all costs were attributed to assessment with post-diagnosis support accounting for 23% and 29% attributed to follow-up.

Table 7.6.2 shows the costs of additional health and social care reported by carers after imputation of missing data and after excluding psychosocial support that may have been provided by MAS.

Table 7.6.1: Cost per new patient associated with memory assessment services

	Mean (£)	Standard Deviation (£)	Median (£)
Assessment (including imaging)[a]	£1,088	£915	£897
Post diagnosis support	£517	£430	£436
Follow-up	£643	£602	£464
Total	**£2,249**	**£1,947**	**£1,797**

[a] Costs include a proportion of administration, management and audit costs

Table 7.6.2: Cost of care and services received outside memory assessment services reported by carers

	Baseline (£)			3 month follow-up			6-month follow-up		
	Mean	Median	Range	Mean	Median	Range	Mean	Median	Range
Health care	£73	£0	£0-£8,367	£36	£0	£0-£668	£71	£2	£0-£1,083
Social care	£94	£0	£0-£4,570	£125	£0	£0-£7,383	£209	£0	£0-£9,793
Psychosocial	£15	£0	£0-£1,866	£5	£0	£0-£457	£15	£0	£0-£914
Social security	£170	£0	£0-£828	£177	£0	£0-£828	£226	£16	£0-£828
Total formal care	**£182**	**£0**	**£0-£14,804**	**£167**	**£0**	**£0-£8,508**	**£296**	**£2**	**£0-£11,790**
Informal Care	£1,986	£1,883	£0-£5,364	£2,032	£1,788	£0-£5,301	£2,157	£1,788	£0-£5,364
Total societal cost	**£2,338**	**£1,883**	**£0-£20,996**	**£2,375**	**£1,788**	**£0-£14,636**	**£2,678**	**£1,807**	**£0-£17,983**

[1] Wittenberg, R., Knapp, M., Hu, B., Comas-Herrera, A., King, D., Rehill, A., Shi, C., Banerjee, S., Patel, A., Jagger, C. & Kingston, A. (2018) The costs of dementia in England, Research Article, *Geriatric Psychiatry*, DOI: 10.1002/gps.5113.

[2] Pennington, M., Gomes, M., Chrysanthaki, T., Hendriks, J., Wittenberg R., Knapp, M., Black, N. & Smith, S. (2016) The cost of diagnosis and early support in patients with cognitive decline, *Geriatric Psychiatry*, https://doi.org/10.1002/gps.4641.

COMMUNITY-BASED HEALTH CARE STAFF

8. Scientific and professional staff

The table provides the unit costs for community-based allied health professionals (bands 4-8). Each Agenda for Change (AfC) band can be matched to professionals using the AfC generic profiles. Examples of roles by band are shown below and in more detail by job type in Table 12.3. Reference should also be made to the explanatory notes when interpreting the unit costs.

Table 8.1: Agenda for Change bands for scientific and professional staff

Job titles by band	
Band 2	Clinical support worker (Physiotherapy, Occupational Therapy, Speech and Language Therapy).
Band 3	Clinical support worker, higher level (Physiotherapy, Occupational Therapy, Speech and Language Therapy).
Band 4	Occupational therapy technician, Speech and language therapy assistant/associate practitioner, Podiatry technician, Clinical psychology assistant practitioner, Pharmacy technician.
Band 5	Physiotherapist, Occupational Therapist, Speech and Language Therapist, Podiatrist, Clinical psychology assistant practitioner (higher level), Counsellor (entry level).
Band 6	Physiotherapist specialist, Occupational Therapist specialist, Speech and Language Therapist specialist, Podiatrist specialist, Clinical psychology trainee, Counsellor, Pharmacist, Arts Therapist (entry level).
Band 7	Physiotherapist (advanced), Specialist physiotherapist (respiratory problems), Specialist physiotherapist (community), Physiotherapy team manager, Speech and Language Therapist (advanced), Podiatrist (advanced), Podiatry team manager, Clinical psychologist, Counsellor (specialist), Arts Therapist.
Band 8a	Physiotherapist principal, Occupational therapist principal, Speech and Language Therapist principal, Podiatrist principal.
Band 8a-b	Physiotherapist consultant, Occupational Therapist consultant, Clinical psychologist principal, Speech and Language Therapist principal, Podiatric consultant (surgery), Arts Therapist principal.
Band 8a-c	Counsellor professional manager, Counsellor consultant, Consultant Speech and Language Therapist.
Band 8c-d	Clinical psychologist consultant, Podiatric consultant (surgery), Head of arts therapies, Arts Therapies consultant.
Band 8d-9	Clinical psychologist consultant (professional), Lead/head of psychology services, Podiatric consultant (surgery), Head of service.

8.1. Cost components for scientific and professional staff

A. Wages/salary

Based on the mean full-time equivalent basic salary for Agenda for Change (AfC) bands 4-9 of the April 2021/March 2022 NHS staff earnings estimates for allied health professionals.[1] See NHS Terms and Conditions of Service Handbook for information on payment for unsocial hours.[2]

B. Salary oncosts

Employer's national insurance is included plus 20.6 per cent of salary for employer's contribution to superannuation.

C. Qualification costs

See Table 12.4.1 for detailed information on training costs for specific health and social care professionals. These have been calculated using the method described in Netten et al. (1998).[3]

The cost of training for scientific and professional staff includes the cost of pre-registration tuition; infrastructure costs (such as libraries); costs or benefits from clinical placement activities; and lost production costs during the period of training where staff are away from their posts. Although further training is available to scientific and professional staff to enable them to progress to higher grades, the cost of post-graduate training is only known for doctors.

To calculate the cost per hour including qualifications for scientific and professional staff, the appropriate expected annual cost shown in Table 12.4.1 should be divided by the number of working hours. This can then be added to the cost per working hour.

D. Overheads

The overheads have be taken from the HM Treasury public expenditure statistics analysis (2022).[4,5] Management and other non-care staff costs include administration and estates staff. Non-staff costs to the provider for office, travel/transport, publishing, training courses and conferences, supplies and services (clinical and general), and utilities such as water, gas and electricity.

E. Capital overheads

Based on the new-build and land requirements of NHS hospital facilities but adjusted to reflect shared use of office space for administration, and recreational and changing facilities.[6]

F. Travel

No information is 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 of 56p per mile, and a reduced rate thereafter of 20p per mile, irrespective of the type of car or fuel used.[7]

G. Working time

Working days are calculated by deducting leave days from 260 weekdays per annum (e.g. 8 statutory days, 28 annual leave days and 5 training/study days).
Working hours are calculated by multiplying the number of working days per annum by the number of hours per day (7.5 hours).

[1] NHS Digital (2023) *NHS staff earnings estimates, 12-month period from May 2022 – April 2023* (not publicly available), NHS Digital, Leeds
[2] NHS Employers (2024) *NHS Terms and Conditions of Service Handbook,* NHS Employers, London. NHS Terms and Conditions of Service Handbook | NHS Employers
[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] HM Treasury (2022) Public Expenditure: statistical analysis. HM Treasury, London, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1091951/E02754802_PESA_2022_elay.pdf
[5] Previous manuals have used the NHS Improvement (2019) *NHS Foundation Trusts: Consolidated Accounts 2018/19* Consolidated_foundation_trust_accounts_2018_19.pdf (england.nhs.uk). The overheads are lower than previously reported.
[6] Building Cost Information Service Construction Data (2023). BCIS | Building Cost Information Service Construction Data.
[7] NHS Employers (2017) *Mileage allowances – Section 17*, NHS Employers, http://www.nhsemployers.org/your-workforce/pay-and-reward/agenda-for-change/nhs-terms-and-conditions-of-service-handbook/mileage-allowances.

Working weeks are calculated by dividing the number of working hours per annum by the number of hours per week (37.5 hours).

H. Ratio of direct to indirect time

Based on a study by Shearer et al. (2019),[1] the ratio of direct to indirect time was 1:0.91; every hour of face-to-face time required 55 minutes of non-face-to-face time. See Table 12.5 for information on a PSSRU survey carried out in 2014/2015 providing estimates of time use for community staff.

I. London multiplier and non-London multiplier

See information produced by NHS Employers[2] for information on Inner and Outer London supplements and the market forces factor (MFF) which estimates the unavoidable cost differences between healthcare providers, based on their geographical location.

[1] Shearer, J. Lynch, T., Chamba, R., Clarke, S., Hempel, R., Kingdon, D., O'Mahen, H., Remington, B., Rushbrook, S., Russell, I., Stanton, M., Swales, M., Watkins, A., Whalley, B. & Byford, S. (2019) refractory depression – cost-effectiveness of radically open dialectical behaviour therapy: findings of economic evaluation of RefraMED trial, *BJPsych Open*, DOI: 10.1192/bjo.2019.57

[2] NHS Employers (2024) *NHS Terms and Conditions of Service Handbook, Annex 9: High cost area supplements*. NHS Terms and Conditions of Service Handbook | NHS Employers

8.2. Annual and unit costs for community-based scientific and professional staff

The table provides the annual and unit costs for community-based scientific and professional staff. See notes facing for assistance in interpreting each cost item. See Chapter 18 for examples of roles in each band. **Please note that there are no staff on Bands 1-3 for this staff group.**

Table 8.2.1: Annual and unit costs for community-based scientific and professional staff

	Band 4	Band 5	Band 6	Band 7	Band 8a	Band 8b	Band 8c	Band 8d	Band 9
A. Wages/salary	£25,130	£28,843	£37,376	£45,221	£51,505	£60,499	£72,277	£86,100	£104,450
B. Salary oncosts	£6,910	£8,187	£11,123	£13,822	£15,983	£19,077	£23,129	£27,884	£34,196
C. Qualifications	See note	See note	See note	See note	See note	See note	See note	See note	See note
D. Overheads									
Management, admin and estates staff	£7,562	£8,739	£11,446	£13,934	£15,927	£18,780	£22,516	£26,900	£32,721
Non-staff	£10,766	£12,442	£16,296	£19,838	£22,676	£26,737	£32,056	£38,299	£46,585
E. Capital overheads	£6,799	£6,799	£6,799	£6,799	£6,799	£6,799	£6,799	£6,799	£6,799
F. Travel	See note	See note	See note	See note	See note	See note	See note	See note	See note
Total costs (excluding qualifications)	**£57,166**	**£65,010**	**£83,039**	**£99,614**	**£112,890**	**£131,892**	**£156,776**	**£185,981**	**£224,751**
Working time									
Working days per year	209	209	209	209	209	209	209	209	209
Working hours per year	1,570	1570	1,570	1,570	1,570	1,570	1,570	1,570	1,570
Working weeks	42	42	42	42	42	42	42	42	42
H. Ratio of direct to indirect time	See note	See note	See note	See note	See note	See note	See note	See note	See note
London/non-London multipliers	See note	See note	See note	See note	See note	See note	See note	See note	See note
Unit costs 2022/2023									
Cost per working hour	**£36**	**£41**	**£53**	**£63**	**£72**	**£84**	**£100**	**£118**	**£143**

9. Nurses, doctors and dentists

9.1. Qualified nurses

9.2. Annual and unit costs for qualified nurses

9.3. Costs and unit estimations for a General Practitioner (GP) practice nurse

9.4. Costs and unit estimations for a GP

9.5. Online consultation costs

9.6. Telephone triage – GP-led and nurse-led

9.7. NHS dentist - Performer-Only

9.8. Dentist - Providing-Performer

9.9. NHS dental charges

9.1. Qualified nurses

A. Wages/salary

Based on the mean full-time equivalent basic salary for Agenda for Change (AfC) bands 4-9 of the April 2022/March 2023 NHS staff earnings estimates for qualified nurses.[1] See NHS Terms and Conditions of Service Handbook for information on payment for unsocial hours.[2] See Table 12.3 for further information on pay scales.

B. Salary oncosts

Employer's national insurance is included, plus 20.6 per cent of salary for employer's contribution to superannuation.

C. Qualifications

See Table 12.4.1 for detailed information on training costs for specific health and social care professionals. These have been calculated using the method described in Netten et al. (1998).[3]

The cost of training nurses includes the cost of pre-registration tuition; infrastructure costs (such as libraries); costs or benefits from clinical placement activities; and lost production costs during the period of training where staff are away from their posts. Although further training is available to nurses to enable them to progress to higher grades, the cost of post-graduate training is only known for doctors.

D. Overheads

The overheads have be taken from the HM Treasury public expenditure statistics analysis (2022).[4,5] Management and other non-care staff costs include administration and estates staff. Non-staff costs include costs to the provider for office, travel/transport, publishing, training courses and conferences, supplies and services, and utilities such as water, gas, and electricity.

E. Capital overheads

Based on the new-build and land requirements of NHS hospital facilities but adjusted to reflect shared use of office space for administration, and recreational and changing facilities.[6]

F. Travel

No information is 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 of 56p per mile, and a reduced rate thereafter of 20p per mile.[7]

G. Working time

Working days are calculated by deducting leave days from 260 weekdays per annum (e.g. 8 statutory days, 28 annual leave days, 5 training/study days, 14 sick days).[8]
Working hours are calculated by multiplying the number of working days per annum by the number of hours per day (7.5 hours).

[1] NHS Digital (2023) *NHS staff earnings estimates, 12-month period from May 2022 – April 2023* (not publicly available), NHS Digital, Leeds.
[2] NHS Employers (2024) *NHS Terms and Conditions of Service Handbook,* NHS Employers, London. NHS Terms and Conditions of Service Handbook | NHS Employers
[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] HM Treasury (2022) *Public Expenditure: statistical analysis.* HM Treasury, London, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1091951/E02754802_PESA_2022_elay.pdf
[5] Previous manuals have used the NHS Improvement (2019) *NHS Foundation Trusts: Consolidated Accounts 2018/19* Consolidated_foundation_trust_accounts_2018_19.pdf (england.nhs.uk). The overheads are lower than previously reported.
[6] Building Cost Information Service Construction Data (2023) BCIS | Building Cost Information Service Construction Data
[7] NHS Employers (2024) *NHS Terms and Conditions of Service Handbook, Mileage allowances – Section 17*, NHS Employers, London. NHS Terms and Conditions of Service Handbook | NHS Employers
[8] NHS Digital (2023) *NHS sickness absence rates*. https://digital.nhs.uk/data-and-information/publications/statistical/nhs-sickness-absence-rates/july-2023-provisional-statistics

Working weeks are calculated by dividing the number of working hours per annum by the number of hours per week (37.5 hours).

H. Ratio of direct to indirect time

Based on a study by Ball & Philippou (2014)[1] on average Grade 5 community nurses spent 44 per cent of their time on direct care and a further 18 per cent of their time on care planning, assessment, and co-ordination. For Grade 6 these figures were 34 per cent and 21 per cent and for Grade 7/8, 27 per cent and 22 per cent. Also see the McKinsey report,[2] for comparative purposes.

[1] Ball, J. & Philippou, J., Pike, G. & Sethi, J. (2014) *Survey of district and community nurses in 2013*, Report to the Royal College of Nursing, King's College London.

[2] Department of Health (2010) *Achieving world class productivity in the NHS, 2009/10-2013/14: The McKinsey Report,* Department of Health, London.

9.2. Annual and unit costs for qualified nurses

This table provides the annual and unit costs for qualified nurses. See notes facing for assistance in interpreting each cost item. See Table 12.4.1 for examples of roles in each band. Refer to notes on facing page for references. **Please note that there are no staff on Bands 1-3 in this staff group**.

Table 9.2.1: Annual and unit costs for qualified nurses

	Band 4	Band 5	Band 6	Band 7	Band 8a	Band 8b	Band 8c	Band 8d	Band 9
A. Wages/salary	£23,843	£30,241	£37,577	£44,973	£50,789	£59,357	£70,176	£83,132	£100,121
B. Salary oncosts	£6,467	£8,668	£11,192	£13,736	£15,737	£18,684	£22,406	£26,863	£32,707
C. Initial qualifications	£9,406	£9,406	£9,406	£9,406	£9,406	£9,406	£9,406	£9,406	£9,406
D. Ongoing training	See note	See note	See note	See note	See note	See note	See note	See note	See note
E. Overheads									
Management, admin and estates staff	£7,153	£9,183	£11,509	£13,855	£15,700	£18,418	£21,849	£25,959	£31,348
Non-staff	£10,184	£13,074	£16,386	£19,726	£22,352	£26,222	£31,108	£36,958	£44,630
F. Capital overheads	£8,951	£8,951	£8,951	£8,951	£8,951	£8,951	£8,951	£8,951	£8,951
G. Travel	See note	See note	See note	See note	See note	See note	See note	See note	See note
H. Total costs per year (including qualifications)	**£66,006**	**£79,524**	**£95,022**	**£110,648**	**£122,935**	**£141,038**	**£163,897**	**£191,270**	**£227,164**
Working time									
Working days per year	199	199	199	199	199	199	199	199	199
Working hours per year	1496	1496	1496	1496	1496	1496	1496	1496	1496
Working weeks	40	40	40	40	40	40	40	40	40
I. Ratio of direct to indirect time									
Unit costs 2022/2023									
Cost per working hour	£38	£47	£57	£68	£76	£88	£103	£122	£146
Cost per working hour including qualifications	£44	£53	£64	£74	£82	£94	£110	£128	£152

9.3. Costs and unit estimations for a GP practice nurse

Table 9.3.1: Costs and unit estimations for nurses working in a GP practice nurse (Band 5)

Costs and unit estimation	2022/2023 values	Notes
A. Wages/salary	£30,241 per year	Based on the mean full-time equivalent basic salary for Agenda for Change band 5 of the April 2022/March 2023 staff earnings estimates for nurses.[1] See NHS Terms and Conditions of Service Handbook for information on payment for unsocial hours.[2] See Section 12.2 for further information on pay scales.
B. Salary oncosts	£8,668 per year	20.6 per cent of salary for employer's contribution to superannuation has been included.
C. Initial qualifications	£9,406 per year	Qualification costs have been calculated using the method described in Netten et al. (1998).[3] Current cost information has been gathered from various sources. The cost of training a GP practice nurse includes the cost of pre-registration tuition; infrastructure costs (such as libraries); costs or benefits from clinical placement activities; and lost production costs during the period of training where staff are away from their posts.
D. Ongoing training		No information is available
E. Overheads		The overheads (below) have be taken from the HM Treasury public expenditure statistics analysis (2022).[4,5]
Management and administration	£9,183 per year	No information available on management and administrative overheads for practice nurses. The same level of support has been assumed for practice nurses as for other NHS staff.
Office, general business and premises (including advertising and promotion)	£13,074 per year	No information is available on overheads for a practice nurse. All information on office and general business expenses is drawn from the GP earnings and expenses report. Office and general business, premises and other expenses calculated as the ratio of practice nurse salary costs to all GP employees' salary costs
F. Capital overheads		
Buildings	£8,951 per year	Calculated as the ratio of GP practice nurse salary costs to net remuneration of GP salary and based on new-build and land requirements for a GP practitioner's suite and depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.[6]
F. Travel		No information is 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 of 56p per mile, and a reduced rate thereafter of 20p per mile, irrespective of the type of car or fuel used. [7]
Total cost	**£79,524 per year**	
Working days per year	199	
Working hours per year	1,496	
Working weeks	40	
Ratio of direct to indirect time		No current information is available.
Duration of contact		No current information is available.
Patient contacts		No current information is available.
London multiplier		Review NHS Employers[8] and NHS Improvement[9] for information on London supplements and the market forces factor (MFF) which estimates the unavoidable cost differences between healthcare providers, based on their geographical location.
Unit costs 2022/2023		
£47	per hour	
£53	per hour with qualifications	

[1] NHS Digital (2023) *NHS staff earnings estimates, 12-month period from May 2022 – April 2023* (not publicly available), NHS Digital, Leeds.

[2] NHS Employers (2024) *NHS Terms and Conditions of Service Handbook,* NHS Employers, London. NHS Terms and Conditions of Service Handbook | NHS Employers

[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] HM Treasury (2022) *Public Expenditure: statistical analysis.* HM Treasury, London, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1091951/E02754802_PESA_2022_elay.pdf

[5] Previous manuals have used the NHS Improvement (2019) *NHS Foundation Trusts: Consolidated Accounts 2018/19* Consolidated_foundation_trust_accounts_2018_19.pdf (england.nhs.uk). The overheads are lower than previously reported.

[6] Building Cost Information Service Construction Data (2023). BCIS | Building Cost Information Service Construction Data

[7] NHS Employers (2024) *NHS Terms and Conditions of Service Handbook, Mileage allowances – Section 17*, NHS Employers, London. NHS Terms and Conditions of Service Handbook | NHS Employers

[8] NHS Employers (2024) *NHS Terms and Conditions of Service Handbook, Annex 9: High cost area supplements*. NHS Terms and Conditions of Service Handbook | NHS Employers

[9] NHS Improvement (2019) *2019/20 payment reform proposals*, https://improvement.nhs.uk/resources/201920-payment-reform-proposals/.

9.4. Costs and unit estimations for a General Practitioner (GP)

Table 9.4.1: Costs and unit estimations for a General Practitioner (GP)

Costs and unit estimation	2022/2023 values	Notes
A. Net remuneration	£164,184 per year	Average income before tax for GPMS[1] contract in the UK.[2]
B. Practice expenses:		
Direct care staff	£30,675 per year	Each FTE equivalent practitioners employed 0.63 FTE nurse (including practice nurses, advanced level nurses and extended role and specialist nurses) includes salary and oncosts.[3]
Administrative and clerical staff	£41,049 per year	Each FTE equivalent practitioner (excluding GP registrars and GP retainers) employed 2.02 FTE administrative and clerical staff, includes salary and oncosts.[3]
Office and general business	£12,151 per year	All office and general business, premises and other expenses, including advertising, promotion and entertainment, are based on expenditure taken from the GP earnings and expenses report.[2] Each GP employs 2.91 members of staff, including practice nurses, other patient care staff, plus administrators and clerical staff.[3] Office and general business, premises, and other expenses calculated as the ratio of GP salary costs to all GP employee's salary costs. Based on information taken from the GP earnings and expenses report.[2] Overall the cost for office and general business is £23,011 (uprated to 2022/2023 using the NHS Cost Inflation Index – see Section 12.1). It is assumed that the costs are shared equally between GPs and staff.
Premises	£23,342 per year	Overall the cost for premises is £44,203 (uprated to 2022/2023 using the NHS Cost Inflation Index – see Section 12.1).[2] It is assumed that the premises are shared equally between GPs and staff.
Other: includes advertising, promotion, and entertainment	£24,755 per year	The overall 'other' costs is £46,879 (uprated to 2022/2023 using the NHS Cost Inflation Index – see Section 12.1).[2] It is assumed that the costs are shared equally between GPs and staff.
Car and travel	£1,070 per year	
C. Qualifications	£55,902	Qualification costs have been calculated using the method described in Netten et al. (1998).[4] The cost of training a GP includes the cost of pre-registration tuition; infrastructure costs (such as libraries); costs or benefits from clinical placement activities; and lost production costs during training. The investment in training has been depreciated over the expected working life of the doctor.[5] This includes the cost of the two-year foundation programme, two years on a General Practice Vocational Training Scheme (GP-VTS) and a further year as a general practice registrar.[6]
D. Capital costs: Premises	£13,919 per year	Based on new-build and land requirements for a GP practitioner suite. Capital costs have been depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.[7]
Working days per year	217	Working days are calculated by deducting leave days from 260 weekdays per annum (e.g. 8 statutory days, 30 annual leave days and 5 sick days).[8]
Working weeks per year	43	Working weeks are calculated by dividing the number of working hours per annum by the number of hours per week (48 hours).
Hours per week	48	Working hours are calculated by multiplying the number of working days per annum by the number of hours per day (10 hours).
Surgery	10 minutes[9]	
Unit costs for 2022/2023 are given in table overleaf		

[1] A combined General Medical Service (GMS) and a Primary Medical Service (PMS) contract.
[2] NHS Digital (2023) *GP earnings and expenses 2021/2022*, NHS Digital, Leeds. England - NHS England Digital.
[3] NHS Digital (2022) *General Practice Workforce, 2022,* NHS Digital, Leeds. General Practice Workforce, 30 November 2022 - NHS England Digital.
[4] 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.
[5] 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.
[6] Department of Health and Social Care (2021). Education and training tariff guidance and prices for 2021 to 2022. Education and training tariff guidance and prices for 2021 to 2022 financial year - GOV.UK (www.gov.uk).
[7] Building Cost Information Service Construction Data (2023) BCIS | Building Cost Information Service Construction Data.
[8] NHS Digital (2023) *NHS sickness absence rates*. https://digital.nhs.uk/data-and-information/publications/statistical/nhs-sickness-absence-rates/july-2023-provisional-statistics.
[9] Previous manuals used 9.22 minutes per consultation time.

Table 9.4.2: Unit costs for a GP

Unit cost 2022/2023	Including direct care staff costs		Excluding direct care staff costs	
	With qualification costs	Without qualification costs	With qualification costs	Without qualification costs
Annual (including travel)	£367,047	£311,144	£336,372	£280,469
Annual (excluding travel)	£365,977	£310,074	£335,301	£279,399
Per hour of GMS activity	£178	£151	£163	£136
Per hour of patient contact	£296	£251	£272	£226
Per minute of patient contact	£4.94	£4.19	£4.53	£3.77
Per surgery consultation lasting 10 minutes[1]	£49	£42	£45	£38
Prescription costs per consultation	£34			
Prescription costs per consultation (actual cost)	£28			

[1] Previous manuals used 9.22 minutes per consultation time.

9.4.1. Commentary for GPs

General note about GP expenditure. NHS England and the British Medical Association's General Practitioners Committee agreed an initial set of funding and contractual arrangements for 2021/22.

Allowing for full-time equivalence (FTE). NHS Digital has estimated that the number of FTE practitioners was 26,714 FTE in 2022.[1] FTE practice staff included 16,803 practice nurses (includes specialist nurses, advanced level nurses, extended role, and specialist nurses), 15,944 direct patient care staff, and 73,868 administrative and clerical staff.

Direct care staff. In 2022, each FTE equivalent practitioner employed 0.63 FTE nurse (including practice nurses, advanced level nurses and extended role and specialist nurses). All direct care staff have been costed at the same level as a band 6 GP practice nurse.

Qualifications. The equivalent annual cost of pre-registration and postgraduate medical education. See Table 12.4.1 for detailed information on training costs for specific health and social care professionals. These have been calculated using the method described in Netten et al. (1998).[2]

The cost of training GPs include the cost of pre-registration tuition; infrastructure costs (such as libraries); costs or benefits from clinical placement activities; and lost production costs during the period of training where staff are away from their posts. The investment in training has been depreciated over the expected working life of the doctor.[3] This includes the cost of the two-year foundation programme, two years on a General Practice Vocational Training Scheme (GP-VTS) and a further year as a general practice registrar.[4]

Prescription costs. Prescription costs per consultation are £34 (net ingredient cost) and £28 (actual cost). The net ingredient cost (NIC) is the basic cost of the drug, while the actual cost is the NIC less the assumed average discount plus the container allowance, plus on-cost for appliance contractors. The NIC does not take account of dispensing costs, fees or prescription charges income. The prescription cost per consultation has been calculated by first dividing the number of prescriptions per GP by the number of consultations per GP to give the number of prescriptions per GP consultation and multiplying this by the actual cost per GP prescription and the NIC per GP prescription.

Activity. The average length of GP consultations in the UK is 10 minutes

[1] NHS Digital (2022) *General Practice Workforce, 2022,* NHS Digital, Leeds. General Practice Workforce, 30 November 2022 - NHS England Digital

[2] 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.

[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] Department of Health and Social Care (2021) *Education and training tariff guidance and prices for 2021 to 2022*. Education and training tariff guidance and prices for 2021 to 2022 financial year - GOV.UK (www.gov.uk)

9.5. Online consultation costs

Information for this schema was taken from a one-month observational study carried out in South West England by Hannah Edwards and colleagues[1] to evaluate an online consultation system in primary care. Thirty-six general practices covering 396,828 patients took part in the pilot and 7,472 patients completed an 'e-consultation'. Patient records (n=485) were abstracted for eight practices.

To contact their GP, a patient completed an online form describing the nature of their problem (hereafter referred to as an 'e-consultation'). This was submitted to their practice, which committed to responding by the end of the next working day. The study calculated the average cost of all initial primary care actions in response to an e-consultation was £37.70. The cost was driven mainly by the time needed for a GP to triage the e-consultations (5 minutes assumed based on interviews with practice staff) and the relatively high proportion of e-consultations that resulted in a face-to-face or telephone consultation with a GP. When considering further follow-up actions taken in the subsequent 30 days, the average cost associated with an e-consultation increased to £50.72. Staff time was valued using data from the Unit Costs of Health & Social Care 2015 and then up-rated to current 2022/2023 values using the NHS Cost Inflation Index (see Section 12.1).

Table 9.5.1: Average cost for all initial primary care actions in response to an e-consultation

All initial response actions	Number	% all e-consultations (n=482)	Average cost per e-consultation (2023)
GP face-to-face appointments	186	39	£15.42
GP telephone calls	187	39	£9.40
Nurse face-to-face contacts	70	15	£2.13
Nurse telephone appointments	0	0	£0.00
Prescriptions	151	31	£1.51
Fit notes	31	6	£0.45
Routine referral letters	56	12	£0.81
2-week wait referral letters	10	2	£0.15
GP given advice by email	125	26	£0.00
Other GP actions	108	22	£0.00
Unknown GP actions	15	3	£0.00
GP-led triage cost			£14.05
Average cost of e-consultation			**£43.92**

[1] Edwards, H., Marques, E, Hollingworth, W., Horwood, J., Farr, M., Bernard, E., Salisbury, & Northstone, K. (2017) Use of a primary care online consultation system, by whom, when and why: evaluation of a pilot observational study in 36 general practices in South West England, *BMJ Open* 2017:7:eO16901.

9.6. Telephone triage – GP-led and nurse-led

Telephone triage is increasingly used to manage workloads in primary care. A study carried out between 1 March 2011 and 31 March 2013 by John Campbell and colleagues[1,2] aimed to assess the effectiveness and cost consequences of GP-led and nurse-led triage compared with usual care for requests for same-day appointments. Based on a review of 5,567 clinician contact forms for GP-led triage and 5,535 forms for nurse-led triage, the study found that mean clinician contact times for interventions were 4 minutes (SD 2.83) for GP triage and 6.56 minutes (SD 3.83) for nurse triage. Using national cost estimates, a detailed breakdown of the costs is provided below. Mean costs per intervention, including training, were £20 for GP-led triage and £9 (including computer decision support software) for nurse-led triage. The figures have been up-rated to 2022/2023 values using the NHS Cost Inflation Index (see Section 12.1).

Table 9.6.1: Costs and unit estimations for a telephone triage

Costs and unit estimation	Nurse-led triage	GP-led triage
	2022/2023 values	**2022/2023 values**
A. Wages/salary and oncosts	£38,910[3] per year	£164,184[4] per year
B. Overheads		
Staff overheads	£9,183 per year	£43,934 per year
Non-staff	£13,074 per year	£114,949 per year
C. Initial qualifications	£9,406	£55,902
D. Capital[5,6]	£8,951 per year	£13,919 per year
E. Other costs		
Staff training	£6,558 per year	£3,654 per year
Computer decision support software	£9,086 per year	
Working time[7]		
Weeks per year	40	43
Hours per week	37.5	48
Hours per year	1,496	2,064
Average time per intervention (minutes)[8]	6.56	4
Standard deviation	3.83	2.83
Unit costs 2022/2023		
Total annual costs (including set-up costs)	£95,647	£386,510
Cost per hour of face-to-face contact (including set-up costs)	£83	£323
Cost per intervention excluding other costs (including other costs)	£9.04	£20.27

[1] Campbell, J., Fletcher, E., Britten, N., Green, C., Holt, T., Lattimer, V., Richards, D., Richards, S. Salisbury, C., Calitri, R., Bowyer, V., Chaplin, K., Kandiyali, R., Murdoch, J., Roscoe, J., Varley, A., Warren, F., & Taylor, R. (2014) Telephone triage for management of same-day consultation requests in general practice (the ESTEEM trial): a cluster-randomised controlled trial and cost-consequence analysis, *The Lancet,*. https://doi.org/10.1016/S0140-6736(14)61058-8

[2] Campbell, J., Fletcher, E., Britten, N., Green, C., Holt, V., Lattimer, V., Richards, D., Richards, S., Salisbury, C., Taylor, R., Calitri, R., Bowyer, V., Chaplin, K., Kandiyali, R., Murdoch, J., Price, L., Roscoe, J., Varley, A. & Warren., F. (2015) The clinical effectiveness and cost-effectiveness of telephone triage for managing same-day consultation requests in general practice: a cluster randomised controlled trial comparing general practitioner-led management systems with usual care (the ESTEEN trial), *Health Technology Assessment, 19,13,* https://doi.org/10.3310/hta19130

[3] Based on the salary of a GP practice nurse (AfC band 5) plus oncosts

[4] Average income before tax.

[5] HM Treasury (2022) *Public Expenditure: statistical analysis.* HM Treasury, London, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1091951/E02754802_PESA_2022_elay.pdf

[6] Previous manuals have used the NHS Improvement (2019) *NHS Foundation Trusts: Consolidated Accounts 2018/19* Consolidated_foundation_trust_accounts_2018_19.pdf (england.nhs.uk). The overheads are lower than previously reported.

[7] Taken from Table 25 in Campbell et al and up-rated using the PSS Pay & Prices Index

[8] See Table 23 in Campbell et al[2]

9.7. NHS dentist – Performer-Only

A Performer-Only dentist is a qualified dentist who works in a Providing-Performer practice (e.g. a local dental practice). They are sometimes referred to as Associates.[1] In 2015, a survey of dentists carried out by PSSRU in collaboration with the General Dental Council provided information to estimate practice staff overheads and equipment used by dentists working all or some of the time with NHS patients. In total, responses were received from 251 practices with some or all NHS activity. See article in Units Costs of Health & Social Care 2017 for more information. The costs below apply only to Performer-Only dentists with registered NHS activity. Dentists who performed only private dentistry have been excluded (n=50). Values have been up-rated using the NHS Cost Inflation Index (see Section 12.1).

Table 9.7.1: Costs and unit estimations for a Performer-Only dentist

Costs and unit estimation	2022/2023 values	Notes
A. Net remuneration	£69,462 per year	This is the average taxable income (average gross earnings less average total expenses) for self-employed primary care Performer-Only dentists in 2021/2022.[2] The values have been up-rated using the NHS Cost Inflation Index (see Section 12.1).
B. Practice expenses:		
Direct care staff	£63,749 per year	As salary expenses for Performer-Only dentists are declared as an expense by Providing-Performer dentists,[2] to avoid double-counting, employee expenses have been calculated using the PSSRU survey. This found that on average each FTE dentist (carrying out some or all NHS activity) employs 1.43 FTE of a dental nurse, 0.17 FTE of a hygienist/dental therapist, 0.23 FTE of a practice manager (AFC band 6) and 0.50 FTE of 'other' staff (AfC band 2, e.g. receptionist, dental technician, cleaner).
Office and general business	£4,281 per year	All office and general business, premises and other expenses including advertising, promotion and entertainment are based on expenditure taken from the Dental Earnings and Expenses report.[2]
Premises	£2,462 per year	Includes insurance, repairs, maintenance, rent and utilities.
Car and travel	£1,070 per year	
Other	£18,516 per year	Includes a variety of expenses, including laboratory costs, materials costs, advertising, promotion, and entertainment costs.
C. Qualifications		No cost is available
D. Ongoing training		No cost is available
E. Capital costs		Assumed to be included as rent (see above). Based on the new-build and land requirements of a dentist surgery but adjusted to reflect shared use of both treatment and non-treatment space, depreciated capital costs would be £8,617 per annum.[3]
F. Equipment costs	£6,375 per year	Total equipment costs (e.g. dentist chairs, cabinetry and all dental technology) per practice with all or some NHS activity was valued at £60,417 per FTE dentist. Costs have been depreciated over ten years as this was the most frequently cited replacement time.
Total cost (excluding qualifications)	**£165,916 per year**	
Working time	34.85 hours per week	The average total number of weekly hours worked by Performer-Only dentists in 2019/2020 was 34.85.[4]
Ratio of direct to indirect time:		Based on information taken from the Dental Working Hour's survey, Performer-Only dentists spent 84.25 per cent of their working time on clinical activities in 2019/2020.
Clinical time	1:0.19	
2022/2023 unit costs		
Per hour	£116	
Per hour of patient contact time	£147	

[1] NHS Digital (2019) *A guide to NHS dental publications,* NHS Digital, Leeds. https://files.digital.nhs.uk/AD/73DD0A/nhs-dent-stat-eng-18-19-anx4-gui.pdf.
[2] NHS Digital (2023) *Dental earnings and expenses estimates, England and Wales, Time Series*, NHS Digital, Leeds. Dental Earnings and Expenses Estimates - NHS England Digital.
[3] Building Cost Information Service Construction Data (2023) BCIS | Building Cost Information Service Construction Data.
[4] NHS Digital (2020) *Dental Working Hours: Working Patterns, Motivation and Morale 2018/19 and 2019/20,* NHS Digital, Leeds. Dentists' Working Patterns, Motivation and Morale - 2018/19 and 2019/20 - NHS Digital.

9.8. Dentist – Providing-Performer

The costs below relate to a Providing-Performer, which is a dentist who holds a health service contract and who also acts as a Performer, delivering dental services themselves.[1] In 2015, a survey of dentists carried out by PSSRU in collaboration with the General Dental Council provided information to estimate practice staff overheads and equipment used by dentists working all or some of the time with NHS patients. In total, responses were received from 251 practices with some or all NHS activity. See article in Unit Costs of Health & Social Care 2017 for more information. The costs below apply only to Providing-Performer dentists with registered NHS activity. Dentists who performed only private dentistry have been excluded. The data has been up-rated to 2022/2023 values using the NHS Cost Inflation Index (see Section 12.1).

Table 9.8.1: Costs and unit estimations for a Providing-Performer dentist

Costs and unit estimation	2022/2023 values	Notes
A. Net remuneration	£144,491 per year	This is the average taxable income of self-employed primary care Providing-Performer dentists in 2020/2021.[2] The data has been up-rated to 2022/2023 values using the NHS Cost Inflation Index (see Section 12.1).
B. Practice expenses:		
Employee expenses	£63,749 per year	As salary expenses for Performer-Only dentists are declared as an expense by Providing-Performer dentists,[2] to avoid double-counting, employee expenses have been calculated using the PSSRU survey. This found that on average each FTE dentist (carrying out some or all NHS activity) employs 1.43 FTE of a dental nurse, 0.17 FTE of a hygienist/dental therapist, 0.23 FTE of a practice manager (AFC band 6) and 0.50 FTE of 'other' staff (AfC band 2, e.g. receptionist, dental technician, cleaner).
Office and general business expenses	£22,262 per year	All office and general business, premises and other expenses including advertising promotion, and entertainment are based on expenditure taken from the Dental Earnings and Expenses report and up-rated using the NHS Cost Inflation Index (see Section 12.1).[2]
Premises	£26,329 per year	Includes insurance, repairs, maintenance, rent and utilities.
Car and travel	£2,248 per year	
Other	£151,554 per year	Includes a variety of expenses, including laboratory costs, materials costs, advertising, promotion and entertainment costs, which have been divided equally between the dental staff (dentists and nurses/hygienists).[2]
C. Initial qualifications		No costs available
D. Ongoing training		No costs available
E. Capital costs		Assumed to be included as rent (see above).
F. Equipment costs	£6,375	Total equipment costs (e.g. dentist chairs, cabinetry and all dental technology) per practice with all or some NHS activity was valued at £60,417 per FTE dentist. Costs have been depreciated to reflect that ten years was the most frequently cited replacement time.
Total cost	**£417,008 per year**	
Working time	41.3 weeks per year	The average total number of weekly hours worked by Providing-Performer dentists in 2019/2020 was 42.41.
Ratio of direct to indirect time:	1:0.35	Based on information taken from the Dental Working Hours survey,[3] Providing-Performer dentists spent 74.15 per cent of their working time on clinical activities. [4]
2022/2023 unit costs		
Per hour	£161	
Per hour of patient contact	£222	

[1] NHS Digital (2019) *A guide to NHS dental publications,* NHS Digital, Leeds. https://files.digital.nhs.uk/AD/73DD0A/nhs-dent-stat-eng-18-19-anx4-gui.pdf.
[2] NHS Digital (2023) *Dental earnings and expenses estimates, England and Wales, Time Series*, NHS Digital, Leeds. Dental Earnings and Expenses Estimates - NHS England Digital.
[3] NHS Digital (2020) *Dental Working Hours: Working Patterns, Motivation and Morale 2018/19 and 2019/20,* NHS Digital, Leeds. Dentists' Working Patterns, Motivation and Morale - 2018/19 and 2019/20 - NHS Digital.
[4] NHS England (2024) – Publication date for *Dental Working Hours: Working Patterns, Motivation and Morale 2022/2023.* NHS England, London.

9.9. NHS dental charges

Paying adults are charged according to the treatment band. The table below shows the NHS dental charges applicable to paying adults from 1 April 2023, by treatment band.

Table 9.9.1: NHS dental charges

Treatment Band	Charges from 1 April 2023[1]	
Emergency dental treatment	£25.80	This covers emergency care in a primary care NHS dental practice such as pain relief or a temporary filling.
Band 1	£25.80	Examination, diagnosis (including x-rays), advice on how to prevent future problems, a scale and polish if needed, and application of fluoride varnish or fissure sealant.
Band 2	£70.70	This covers everything listed in Band 1 above, plus any further treatment such as fillings, root canal work or removal of teeth.
Band 3	£306.80	This covers everything listed in Bands 1 and 2 above, plus crowns, dentures and bridges and other laboratory work.

[1] Help with NHS dental costs | NHSBSA

COMMUNITY-BASED SOCIAL CARE

10. Social care staff and services

10.1. Social worker (adult services)

10.2. Social work assistant

10.3. Community occupational therapist (local authority)

10.4. Home care worker

10.5. Home care manager

10.6. Support and outreach worker

10.7. Reablement

10.1. Social worker (adult services)

Table 10.1.1: Costs and unit estimations for a social worker (adult services)

Costs and unit estimation	2022/2023 values	Notes
A. Salary	£37,600 per year	Information taken from the Adult Social Care Workforce Data (Skills for Care, 2022/2023)[1] showed that the mean basic salary, based on the weighted mean annual salary for a local authority and independent sector social worker working in adult services was £37,600.
B. Salary oncosts	£11,200 per year	Employer's national insurance contribution is included, plus 19.8 per cent of salary for employer's contribution to superannuation.[2]
C. Initial qualifications	£9,956 per year	Qualification costs have been calculated using the method described in Netten et al. (1998).[3] See Table 12.4.1 for detailed information on training costs for specific health and social care professionals. The cost of training for a social care includes the cost of pre-registration tuition; infrastructure costs (such as libraries); costs or benefits from clinical placement activities; and lost production costs during the period of training where staff are away from their posts
D. Ongoing training		No current information is available. Although further training is available to social workers to enable them to progress to higher grades, the cost of post-graduate training is only known for doctors.
E. Overheads		
Direct overheads	£14,152 per year	Direct overheads 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	£7,808 per year	Indirect overheads include general management and support services such as finance and human resource departments.
F. Capital overheads	£4,458 per year	Based on the new-build and land requirements for a local authority office and shared facilities for waiting, interviews and clerical support.[4] Capital costs have been depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.
G. Travel		No information is available on average mileage covered per visit.
Total costs	**£85,174 per year**	
Working time		
Working days per year	217	Working days are calculated by deducting leave days from 260 weekdays per annum (e.g. 8 statutory days, 29 annual leave days and 6 sick days).[5]
Working hours per year	1,608	Working hours are calculated by multiplying the number of working days per annum by the number of hours per day (7.4 hours).
Working weeks per year	43.46	Working weeks are calculated by dividing the number of working hours per annum by the number of hours per week (37 hours).
Ratios of direct to indirect time on:		No current information is available on client-related activity.
Client-related work		No information is available.
Duration of visit		No information is available.
Unit costs 2022/2023		
Per hour with qualifications	£53	
Per hour without qualifications	£44	

[1] Skills for Care (2022/2023) *Adult social care workforce estimates*, Workforce estimates (skillsforcare.org.uk)
[2] Local Government Pension Scheme Advisory Board (2023) *Fund Valuations 2022*, LGPS Advisory Board, London. LGPS Scheme Advisory Board - 2022 Valuations - Report (lgpsboard.org)
[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] Building Cost Information Service Construction Data (2023). BCIS | Building Cost Information Service Construction Data.
[5] Skills for Care (2022). The workforce employed by adult social services departments, England 2022 The workforce employed by adult social services departments, England 2022 Final (skillsforcare.org.uk)

10.2. Social work assistant

Table 10.2.1: Costs and unit estimations for a social work assistant

Costs and unit estimation	2022/2023 values	Notes
A. Salary	£27,990 per year	The mean basic salary of a social work assistant in 2023.[1]
B. Salary oncosts	£7,894 per year	Employer's national insurance contribution is included, plus 19.8 per cent of salary for employer's contribution to superannuation.[2]
C. Initial qualifications		No information is available.
D. Ongoing training		No information is available.
E. Overheads		
Direct overheads	£10,406 per year	Direct overheads includes costs to the provider for administration and management, as well as for office, training, and utilities such as water, gas and electricity.
Indirect overheads	£5,741 per year	Indirect overheads include general management and support services such as finance and human resource departments.
F. Capital overheads	£4,458 per year	Based on the new-build and land requirements for a local authority office and shared facilities for waiting, interviews and clerical support.[3] Capital costs have been depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.
G. Travel		No information is available on average mileage covered per visit.
Total costs	**£56,490 per year**	
Working time		
Working days per year	217	Working days are calculated by deducting leave days from 260 weekdays per annum (e.g. 8 statutory days, 29 annual leave days and 6 sick days). [4]
Working hours per year	1,608	Working hours are calculated by multiplying the number of working days per annum by the number of hours per day (7.4 hours).
Working weeks per year	43	Working weeks are calculated by dividing the number of working hours per annum by the number of hours per week (37 hours).
Ratios of direct to indirect time		
Client-related work		No current information is available about the proportion of social work assistant time spent on client-related outputs.
Unit costs 2022/2023		
Per hour without qualifications	£35	

[1] Social work assistant salary 2022. Skills for Care (2022/2023) *Adult social care workforce estimates*, Workforce estimates (skillsforcare.org.uk)
[2] Local Government Pension Scheme Advisory Board (2023) *Fund Valuations 2022*, LGPS Advisory Board, London. LGPS Scheme Advisory Board - 2022 Valuations - Report (lgpsboard.org)
[3] Building Cost Information Service Construction Data (2023) BCIS | Building Cost Information Service Construction Data.
[4] Skills for Care (2022) The workforce employed by adult social services departments, England 2022 The workforce employed by adult social services departments, England 2022 Final (skillsforcare.org.uk)

10.3. Community occupational therapist (local authority)

Table 10.3.1: Costs and unit estimations for a community occupational therapist

Costs and unit estimation	2022/2023 values	Notes
A. Wages/salary	£39,000 per year	Information taken from the Adult Social Care Workforce Data (Skills for Care, 2022/2023)[1] showed that the mean basic salary, based on the mean annual salary for a local authority occupational therapist working in adult services was £37,508.
B. Salary oncosts	£11,681 per year	Employer's national insurance contribution is included, plus 19.8 per cent of salary for employer's contribution to superannuation.[2]
C. Initial qualifications	£5,867 per year	Qualification costs have been calculated using the method described in Netten et al. (1998).[3] See Table 12.4.1 for detailed information on training costs for specific health and social care professionals. The cost of training for community occupational therapists include the cost of pre-registration tuition; infrastructure costs (such as libraries); costs or benefits from clinical placement activities; and lost production costs during the period of training where staff are away from their posts.
E. Ongoing training		Although further training is available to community occupational therapists to enable them to progress to higher grades, the cost of post-graduate training is only known for doctors.
F. Overheads		
Direct overheads	£14,698 per year	Direct overheads 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	£8,109 per year	Indirect overheads include general management and support services such as finance and human resource departments.
G. Capital overheads	£4,458 per year	Based on the new-build and land requirements for a local authority office and shared facilities for waiting, interviews and clerical support.[4] Capital costs have been depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.
Total costs	**£83,814 per year**	
Working time		
Working days per year	217	Working days are calculated by deducting leave days from 260 weekdays per annum (e.g. 10 statutory days, 25 annual leave days and 6 sick days). [5]
Working hours per year	1,608	Working hours are calculated by multiplying the number of working days per annum by the number of hours per day (7.4 hours).
Working weeks per year	43	Working weeks are calculated by dividing the number of working hours per annum by the number of hours per week (37 hours).
Ratio of direct to indirect time		
Client-related work		No current information is available on the proportion of time spent with clients.
Unit costs 2022/2023		
Per hour with qualifications	£52	
Per hour without qualifications	£48	

[1] Skills for Care (2022/2023) *Adult social care workforce estimates*, Workforce estimates (skillsforcare.org.uk)

[2] Local Government Pension Scheme Advisory Board (2023) *Fund Valuations 2022*, LGPS Advisory Board, London. LGPS Scheme Advisory Board - 2022 Valuations - Report (lgpsboard.org)

[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] Building Cost Information Service Construction Data (2023). BCIS | Building Cost Information Service Construction Data.

[5] Skills for Care (2022). The workforce employed by adult social services departments, England 2022 The workforce employed by adult social services departments, England 2022 Final (skillsforcare.org.uk)

10.4. Home care worker

Table 10.4.1 provides information on the costs of a home care worker. Salary information is taken from the Adult Social Care Workforce Data (Skills for Care, 2022/2023).[1]

Table 10.4.1: Costs and unit estimations for a home care worker

Costs and unit estimation	2022/2023 values	Notes
A. Wages/salary	£23,700 per year	Based on the weighted mean annual salary for a local authority and independent sector care worker for 2022/2023.[1]
B. Salary oncosts	£6,418 per year	Employer's national insurance contribution is included, plus 19.8 per cent of salary for employer's contribution to superannuation.[2]
C. Initial qualifications		No information is available.
D. Ongoing training		No information is available.
E. Overheads		
Direct overheads	£8,734 per year	Direct overheads 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	£4,819 per year	Indirect overheads include general management and support services such as finance and human resource departments.
F. Travel		No information available on average mileage covered per visit.
Total costs	**£43,671 per year**	
Working time		
Working days per year	217	Working days are calculated by deducting leave days from 260 weekdays per annum (e.g. 8 statutory days, 29 annual leave days and 6 sick days).[3]
Working hours per year	1,608	Working hours are calculated by multiplying the number of working days per annum by the number of hours per day (7.4 hours).
Working weeks per year	43.46	Working weeks are calculated by dividing the number of working hours per annum by the number of hours per week (37 hours).
Ratios of direct to indirect time		No current information is available on the proportion of time spent with clients.
Face-to-face contact		No current information is available
Duration of visit		No current information is available
Service use		No current information is available
Unit costs 2022/2023		
Per weekday hour	£27	

[1] Skills for Care (2022/2023) *Adult social care workforce estimates*, Workforce estimates (skillsforcare.org.uk)

[2] Local Government Pension Scheme Advisory Board (2023) *Fund Valuations 2022*, LGPS Advisory Board, London. LGPS Scheme Advisory Board - 2022 Valuations - Report (lgpsboard.org)

[3] Skills for Care (2022). The workforce employed by adult social services departments, England 2022 The workforce employed by adult social services departments, England 2022 Final (skillsforcare.org.uk)

10.5. Home care manager

Salary information in this table is taken from the Adult Social Care Workforce Data (Skills for Care, 2022/2023)[1] and has been based on the salary of a registered manager.

Table 10.5.1: Costs and unit estimations for a home care manager

Costs and unit estimation	2022/2023 values	Notes
A. Wages/salary	£36,700 per year	Based on the weighted mean annual salary for a local authority and independent sector registered manager for 2022/2023.[1]
B. Salary oncosts	£10,890 per year	Employer's national insurance contribution is included, plus 19.8 per cent of salary for employer's contribution to superannuation.[2]
C. Initial qualifications		No information is available.
D. Ongoing training		No information is available.
E. Overheads:		
Direct	£13,801 per year	Direct overheads include costs to the provider for administration and management, as well as for office, training and utilities such as water, gas and electricity.
Indirect	£7,614 per year	Indirect overheads include general management and support services such as finance and human resource departments.
F. Capital overheads	£4,458 per year	Based on the new-build and land requirements of a local office and shared facilities for waiting, interviews and clerical support.[3] Capital costs have been depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.
G. Travel		No information available on average mileage covered per visit.
Total costs	**£73,464 per year**	
Working time		
Working days per year	217	Working days are calculated by deducting leave days from 260 weekdays per annum (e.g. 8 statutory days, 29 annual leave days and 6 sick days).[4]
Working hours per year	1,608	Working hours are calculated by multiplying the number of working days per annum by the number of hours per day (7.4 hours).
Working weeks per year	43	Working weeks are calculated by dividing the number of working hours per annum by the number of hours per week (37 hours).
Ratios of direct to indirect time		
Client-related work		No current information is available on the proportion of time spent with clients.
Unit costs 2022/2023		
Per weekday hour	£46	

[1] Skills for Care (2022/2023) *Adult social care workforce estimates*, Workforce estimates (skillsforcare.org.uk)

[2] Local Government Pension Scheme Advisory Board (2023) *Fund Valuations 2022*, LGPS Advisory Board, London. LGPS Scheme Advisory Board - 2022 Valuations - Report (lgpsboard.org)

[3] Building Cost Information Service Construction Data (2023). BCIS | Building Cost Information Service Construction Data.

[4] Skills for Care (2022). The workforce employed by adult social services departments, England 2022 The workforce employed by adult social services departments, England 2022 Final (skillsforcare.org.uk)

10.6. Support and outreach worker

Community outreach workers act as a liaison between community programmes, services, and community members. Their focus might be on health or education, and they often assist a particular ethnic group or segment of the population, such as older people. The job description varies according to the organisation and responsibilities.[1]

Table 10.6.1: Costs and unit estimations for a support and outreach worker

Costs and unit estimation	2022/2023	Notes
A. Wages/salary	£24,900 per year	Information taken from the Adult Social Care Workforce Data (Skills for Care, 2022/2023)[2] showed that the mean basic salary for a support and outreach worker, based on the weighted mean annual salary for a local authority and independent sector outreach worker was £24,900.
B. Salary oncosts	£6,831 per year	Employer's national insurance contribution is included, plus 19.8 per cent of salary for employer's contribution to superannuation.[3]
C. Initial qualifications		No information is available.
D. Overheads		No information is available.
Direct overheads	£9,202 per year	Direct overheads 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	£5,077 per year	Indirect overheads include general management and support services such as finance and human resource departments.
E. Capital overheads	£4,458 per year	Based on the new-build and land requirements for a local authority office and shared facilities for waiting, interviews and clerical support.[4] Capital costs have been depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.
Total costs	**£50,468 per year**	
F. Working time		
working days	217	Working days are calculated by deducting leave days from 260 weekdays per annum (e.g. 8 statutory days, 29 annual leave days and 6 sick days). [5]
working hours per year	1.608	Working hours are calculated by multiplying the number of working days per annum by the number of hours per day (7.4 hours).
working weeks	43	Working weeks are calculated by dividing the number of working hours per annum by the number of hours per week (37 hours).
Ratio of direct to indirect time		
Client-related work		No current information is available on the proportion of time spent with clients.
Unit costs 2022/2023		
Per hour.	£31	

[1] Career Trend (2017) What is the job description of a community outreach worker? https://careertrend.com/about-4618849-job-description-community-outreach-worker.html

[2] Skills for Care (2022/2023) *Adult social care workforce estimates*, Workforce estimates (skillsforcare.org.uk)

[3] Local Government Pension Scheme Advisory Board (2023) *Fund Valuations 2022*, LGPS Advisory Board, London. LGPS Scheme Advisory Board - 2022 Valuations - Report (lgpsboard.org)

[4] Building Cost Information Service Construction Data (2023). BCIS | Building Cost Information Service Construction Data.

[5] Skills for Care (2022). The workforce employed by adult social services departments, England 2022 The workforce employed by adult social services departments, England 2022 Final (skillsforcare.org.uk)

10.7. Reablement

Reablement is a goals-focused intervention comprising intensive, time-limited (typically up to 6 weeks) assessment and therapeutic work delivered in the usual place of residence. Its purpose is to restore/regain self-care and daily living skills for individuals at risk of needing social care support, or an increase in its intensity to continue living in their own homes.[1]

In 2015, Beresford et al. (2019)[1] surveyed reablement services in 139 local authorities of the 152 local authorities in England. When collecting costs, data collection and analysis took the perspective of the NHS and Personal Social Services, therefore the relevant costs were those falling on the budgets of the Clinical Commissioning Groups (CCGs) (representing the NHS) and/or local authorities (representing Personal Social Services). Although the authors recognised that overheads should be included, they were unsure whether overheads were given. Beresford et al were not able to check with participants in the survey as to what they included in the costs (see page 21 of the referenced report for more information). The planned duration of reablement was, on average, six weeks, with one or two home visits per day. Actual duration was, on average, four weeks.

Using cluster analysis, the authors derived three types of reablement input:

1) Functional reablement (services which reported that they re-enabled in the areas of personal care, domestic, skills, safety, information, helping people to move about inside their home, health-related needs and confidence-building).

2) Comprehensive reablement (services which stated that they re-enabled in all the domains. Thus, they were similar to services delivering 'functional' reablement, but also helped people with getting out and about, and with social activities).

3) Social reablement (services which reported that they re-enabled in the areas of safety, information, getting out and about, social activities and confidence-building).

Of the 143 reablement services which were reported in the survey, 42 (29%) provided information on expenditure, and 100 (70%) provided information on annual caseload or the typical number of cases per month. Overall, the authors were able to calculate the cost per case for 37 (26%) reablement services.

The average cost per case was £1,626 for comprehensive services. Another study[2] referenced in the NICE guidelines (2017)[3] reported a mean cost per person of £1,484, based on annual service budgets of the commissioners and providers that voluntarily participated in the Audit. The mean duration of reablement was 34.5 days (see Bauer et al. 2019).[4] All costs have been up-rated to 2022/2023 values using the PSS Pay and Prices Index (see Section 12.1).

Table 10.7.1: Cost per case of reablement services

Expenditure on reablement services as reported by services	Average cost per case	Minimum cost per case	Maximum cost per case
Total expenditure for functional services (n=10)	£1,818	£637	£2,576
Total expenditure for comprehensive services (n=24)	£1,743	£23	£3,842
Total expenditure for social reablement services (n=3)	N/R	N/R	N/R

N/R: Not reported given the small number of services reporting cost data.

[1] Beresford, B., Mann, R., Parker, G., Kanaan, M., Faria, R., Rabiee, P., Weatherly, H., Clarke, S., Mayhew, E., Duarte, A., Laver-Fawcett, A. & Aspinal, F. (2019) *Reablement services for people at risk of needing social care: the MoRe mixed-methods evaluation*, https://www.ncbi.nlm.nih.gov/books/NBK540371/

[2] NAIC (2015) *National Audit of Intermediate Care 2015*, NAIC, London. https://britishgeriatricssociety.wordpress.com/2015/11/11/national_audit_intermediate_care/.

[3] National Institute for Health and Care Excellence (2017) *Intermediate care including reablement*, NICE, London https://www.nice.org.uk/guidance/ng74/resources/intermediate-care-including-reablement-pdf-1837634227909

[4] Bauer, A., Fernandez, J.L., Henderson, C., Wittenberg, R. & Knapp, M. (2019*) Cost-minimisation analysis of home care reablement for older people in England: A modelling study*, https://pubmed.ncbi.nlm.nih.gov/31006936/.

HOSPITAL-BASED HEALTH CARE STAFF

11. Hospital-based health care staff

11.1. Hospital-based scientific and professional staff

11.1.1. Hospital-based scientific and professional staff unit cost components

11.1.2. Annual and unit costs for hospital-based scientific and professional staff

11.2. Hospital-based nurses

11.2.1. Hospital-based nurses' cost components

11.2.2. Annual and unit costs for hospital-based nurses

11.3. Hospital-based doctors

11.3.1. Hospital-based doctors' cost components

11.3.2. Annual and unit costs for hospital-based doctors

11.1. Hospital-based scientific and professional staff

The table overleaf provides the unit costs for hospital-based scientific and professional staff, and replaces the individual schema previously found in this section. Each Agenda for Change (AfC) band can be matched to professionals using the AfC generic profiles. Examples of roles by band are shown below and in more detail by job type in Table 12.3. Reference should also be made to the explanatory notes when interpreting the unit costs.

Table 11.1.1: Hospital-based scientific and professional staff – Agenda for Change (band)

	Job titles by band
Band 2	Clinical support worker (Physiotherapy, Occupational Therapy, Speech and Language Therapy).
Band 3	Clinical support worker (higher level) (Physiotherapy, Occupational Therapy, Speech and Language Therapy).
Band 4	Occupational therapy technician, Speech and Language Therapy assistant/associate practitioner, Podiatry technician, Clinical psychology assistant practitioner, Pharmacy technician.
Band 5	Physiotherapist, Occupational Therapist, Speech and Language Therapist, Podiatrist, Clinical psychology assistant practitioner (higher level), Counsellor (entry level).
Band 6	Physiotherapist specialist, Occupational Therapist specialist, Speech and Language Therapist specialist, Podiatrist specialist, Clinical psychology trainee, Counsellor, Pharmacist, Arts therapist (entry level).
Band 7	Physiotherapist (advanced), Specialist Physiotherapist (respiratory problems), Specialist Physiotherapist (community), Physiotherapy team manager, Speech and Language Therapist (advanced), Podiatrist (advanced), Podiatry team manager, Clinical psychologist, Counsellor (specialist), Arts Therapist.
Band 8a	Physiotherapist principal, Occupational Therapist principal, Speech and Language Therapist principal, Podiatrist principal.
Band 8a-b	Physiotherapist consultant, Occupational Therapist consultant, Clinical psychologist principal, Speech and Language Therapist principal, Podiatric consultant (surgery), Arts Therapist principal.
Band 8a-c	Counsellor professional manager, Counsellor consultant, Consultant Speech and Language Therapist.
Band 8c-d	Clinical psychologist consultant, Podiatric consultant (surgery), Head of arts therapies, Arts Therapies consultant.
Band 8d-9	Clinical psychologist consultant (professional), Lead/head of psychology services, Podiatric consultant (surgery), Head of service.

11.1.1. Hospital-based scientific and professional staff – unit cost components

A. Wages/salary

Based on the mean full-time equivalent basic salary for Agenda for Change (AfC) bands 4-9 of the May 2022/April 2023 NHS staff earnings estimates for allied health professionals.[1] See NHS Terms and Conditions of Service Handbook for information on payment for unsocial hours.[2] See section 12.2 for further information on pay scales.

B. Salary oncosts

Employer's national insurance is included, plus 20.6 per cent of salary for employer's contribution to superannuation.

C. Qualification costs

See Table 12.4.1 for detailed information on training costs for specific health and social care professionals. These have been calculated using the method described in Netten et al. (1998).[3]

The cost of training for hospital-based scientific and professional staff includes the cost of pre-registration tuition; infrastructure costs (such as libraries); costs or benefits from clinical placement activities; and lost production costs during the period of training where staff are away from their posts. Although further training is available to hospital-based scientific and professional staff to enable them to progress to higher grades, the cost of post-graduate training is only known for doctors.

To calculate the cost per hour including qualifications for hospital-based scientific and professional staff, the appropriate expected annual cost shown in Table 12.4.1 should be divided by the number of working hours. This can then be added to the cost per working hour.

D. Overheads

The overheads (below) have be taken from the HM Treasury public Expenditure statistics analysis in 2022.[4,5] Management and other non-care staff costs include administration and estates staff. Non-staff costs include costs to the provider for drugs, office, travel/transport, publishing, training courses and conferences, supplies, and services (clinical and general), and utilities such as water, gas and electricity.

E. Capital overheads

Based on the new-build and land requirements of NHS hospital facilities but adjusted to reflect shared use of office space for administration, and recreational and changing facilities.[6]

F. Working time

Working days are calculated by deducting leave days from 260 weekdays per annum (e.g. 8 statutory days, 30 annual leave days, sick days and training days).[7]
Working hours are calculated by multiplying the number of working days per annum by the number of hours per day (7.5 hours).
Working weeks are calculated by dividing the number of working hours per annum by the number of hours per week (37.5 hours).

[1] NHS Digital (2023) *NHS staff earnings estimates, 12-month period from May 2022 – April 2023* (not publicly available), NHS Digital, Leeds.
[2] NHS Employers (2024) *NHS Terms and Conditions of Service Handbook.* NHS Terms and Conditions of Service Handbook | NHS Employers
[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] HM Treasury (2022) Public Expenditure: statistical analysis. HM Treasury, London, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1091951/E02754802_PESA_2022_elay.pdf
[5] Previous manuals have used the NHS Improvement (2019) *NHS Foundation Trusts: Consolidated Accounts 2018/19* Consolidated_foundation_trust_accounts_2018_19.pdf (england.nhs.uk). The overheads are lower than previously reported.
[6] Building Cost Information Service Construction Data (2023). BCIS | Building Cost Information Service Construction Data.
[7] NHS Digital, *NHS sickness absence rates*, https://digital.nhs.uk/data-and-information/publications/statistical/nhs-sickness-absence-rates/july-2023-provisional-statistics

H. Ratio of direct to patient-related time

See previous editions for time spent on patient-related activities. See also Table 12.5 for information on a PSSRU survey carried out in 2014/2015 providing estimates of time use for hospital-based staff.

I. London and non-London multipliers

See information produced by NHS Employers[1] and NHS Improvement[2] for information on Inner and Outer London supplements and the Market Forces Factor (MFF) which estimates the unavoidable cost differences between healthcare providers, based on their geographical location.

1 NHS Employers (2019) Annex 9: High cost area supplements, https://www.nhsemployers.org/tchandbook/annex-4-to-10/annex-9-high-cost-area-supplements

2 NHS Improvement (2019) *2019/20 payment reform proposals*, https://improvement.nhs.uk/resources/201920-payment-reform-proposals/.

11.1.2. Annual and unit costs for hospital-based scientific and professional staff

This table provides the annual and unit costs for hospital-based scientific and professional staff. See notes facing for assistance in interpreting each cost item and the beginning of this chapter for examples of roles in each band. **Please note that there are no staff on Bands 1-3 for this staff group.**

Table 11.1.2: Annual and unit costs for hospital-based scientific and professional staff

	Band 4	Band 5	Band 6	Band 7	Band 8a	Band 8b	Band 8c	Band 8d	Band 9
A. Wages/salary	£25,130	£28,843	£37,376	£45,221	£51,505	£60,499	£72,277	£86,100	£104,450
B. Salary on-costs	£6,910	£8,187	£11,123	£13,822	£15,983	£19,077	£23,129	£27,884	£34,196
C. Initial qualifications	See note	See note	See note	See note	See note	See note	See note	See note	See note
D. Ongoing training	See note	See note	See note	See note	See note	See note	See note	See note	See note
E. Overheads									
Management, admin and estates staff	£7,529	£8,702	£11,397	£13,875	£15,860	£18,700	£22,420	£26,786	£32,582
Non-staff	£11,160	£12,898	£16,892	£20,565	£23,506	£27,716	£33,230	£39,701	£48,291
F. Capital overheads	£4,459	£4,459	£4,459	£4,459	£4,459	£4,459	£4,459	£4,459	£4,459
G. Travel									
Total cost (without a qualification cost)	**£55,189**	**£63,089**	**£81,247**	**£97,942**	**£111,314**	**£130,451**	**£155,515**	**£184,930**	**£223,978**
H. Working time									
Working days per year	211	211	211	211	211	211	211	211	211
Working hours per year	1613	1613	1613	1613	1613	1613	1613	1613	1613
Working weeks	43.0	43.0	43.0	43.0	43.0	43.0	43.0	43.0	43.0
I. Ratio of direct to indirect time	See note	See note	See note	See note	See note	See note	See note	See note	See note
London/non-London multiplier	See note	See note	See note	See note	See note	See note	See note	See note	See note
Unit costs 2022/2023									
Cost per working hour	£34	£39	£50	£61	£69	£81	£96	£115	£139

11.2. Hospital-based nurses

The table overleaf provides the unit costs for hospital nurses bands 2-9. Each Agenda for Change (AfC) band can be matched to professionals using the AfC generic profiles. Reference should be made to the explanatory notes when interpreting the unit costs. See below for examples of roles in each band.

Table 11.2.1: Agenda for Change (AfC) bands for hospital-based nurses

Job titles by band	
Band 2	Clinical support worker nursing (hospital)
Band 3	Clinical support worker higher level nursing (hospital/mental health)
Band 4	Nurse associate practitioner acute, Nursery nurse (neonatal)
Band 5	Nurse, Nurse (mental health)
Band 6	Nurse specialist/team leader
Band 7	Nurse advanced/team manager
Band 8a	Modern matron
Bands 8a-c	Nurse consultant
Bands 8c-8d & 9	Nurse/Midwife consultant higher level

11.2.1. Hospital-based nurses – unit cost components

A. Wages/salary

Based on the mean full-time equivalent basic salary for Agenda for Change (AfC) bands 2-9 of the May 2021/April 2022 NHS staff earnings estimates for nurses.[1] See NHS Terms and Conditions of Service Handbook for information on payment for unsocial hours.[2] See section 12.2 for further information on pay scales.

B. Salary oncosts

Employer's national insurance is included, plus 20.6 per cent of salary for employer's contribution to superannuation

C. Qualification costs

See Table 12.4.1 for detailed information on training costs for specific health and social care professionals. These have been calculated using the method described in Netten et al. (1998).[3]

The cost of training for hospital-based nurses includes the cost of pre-registration tuition; infrastructure costs (such as libraries); costs or benefits from clinical placement activities; and lost production costs during the period of training where staff are away from their posts. Although further training is available to nurses to enable them to progress to higher grades, the cost of post-graduate training is only known for doctors.

D. Overheads

The overheads have be taken from the HM Treasury public Expenditure statistics analysis 2022.[4,5] Management and other non-care staff costs include administration and estates staff. Non-staff costs include costs to the provider for drugs, office, travel/transport, publishing, training courses and conferences, supplies, and services (clinical and general), and utilities such as water, gas and electricity.

E. Capital overheads

Based on the new-build and land requirements of NHS hospital facilities but adjusted to reflect shared use of office space for administration, and recreational and changing facilities.[6]

F. Working time

Working days are calculated by deducting leave days from 260 weekdays per annum (e.g. 8 statutory days, 30 annual leave days and 14 sick days).[7]
Working hours are calculated by multiplying the number of working days per annum by the number of hours per day (7.5 hours).
Working weeks are calculated by dividing the number of working hours per annum by the number of hours per week (37.5 hours).

G. Ratio of direct to patient-related time

See Table 12.5 for further information.

[1] NHS Digital (2023) *NHS staff earnings estimates, 12-month period from May 2022 – April 2023* (not publicly available), NHS Digital, Leeds.
[2] NHS Employers (2024) *NHS Terms and Conditions of Service Handbook,* NHS Employers, London. NHS Terms and Conditions of Service Handbook | NHS Employers
[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] HM Treasury (2022) Public Expenditure: statistical analysis. HM Treasury, London, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1091951/E02754802_PESA_2022_elay.pdf
[5] Previous manuals have used the NHS Improvement (2019) *NHS Foundation Trusts: Consolidated Accounts 2018/19* Consolidated_foundation_trust_accounts_2018_19.pdf (england.nhs.uk). The overheads are lower than previously reported.
[6] Building Cost Information Service Construction Data (2023). BCIS | Building Cost Information Service Construction Data.
[7] NHS Digital, *NHS sickness absence rates*, https://digital.nhs.uk/data-and-information/publications/statistical/nhs-sickness-absence-rates/july-2023-provisional-statistics

11.2.2. Annual and unit costs for hospital-based nurses

This table provides the annual and unit costs for hospital-based nurses (see the notes facing for assistance in interpreting each cost item). See also the beginning of this chapter for examples of roles in each band. Please note that there are no staff on Bands 1-3 for this staff group.

Table 11.2.2: Annual and unit costs for hospital-based nurses

	Band 4	Band 5	Band 6	Band 7	Band 8a	Band 8b	Band 8c	Band 8d	Band 9
A Wages/salary	£23,843	£30,241	£37,577	£44,973	£50,789	£59,357	£70,176	£83,132	£100,121
B Salary oncosts	£6,467	£8,668	£11,192	£13,736	£15,737	£18,684	£22,406	£26,863	£32,707
C Initial qualifications	£9,406	£9,406	£9,406	£9,406	£9,406	£9,406	£9,406	£9,406	£9,406
D Ongoing training	See note	See note	See note	See note	See note	See note	See note	See note	See note
E Overheads									
Management, admin and estates staff	£7,123	£9,144	£11,461	£13,797	£15,633	£18,340	£21,757	£25,849	£31,215
Non-staff	£10,557	£13,552	£16,986	£20,448	£23,171	£27,182	£32,246	£32,246	£46,264
F Capital overheads	£4,061	£4,061	£4,061	£4,061	£4,061	£4,061	£4,061	£4,061	£4,061
Total cost (with qualification cost)	**£61,458**	**£75,073**	**£90,682**	**£106,421**	**£118,797**	**£137,030**	**£160,053**	**£181,558**	**£223,774**
G Working time									
Working days per year	203	203	203	203	203	203	203	203	203
Working hours per year	1553	1553	1553	1553	1553	1553	1553	1553	1553
Working weeks	41.4	41.4	41.4	41.4	41.4	41.4	41.4	41.4	41.4
H Ratio of direct to indirect time									
Face to face contacts	See notes	See notes	See notes	See notes	See notes	See notes	See notes	See notes	See notes
Units costs 2022/2023									
Cost per working hour	£34	£42	£52	£62	£70	£82	£97	£115	£138
Cost per hour (including qualifications)	£40	£48	£58	£69	£77	£88	£103	£121	£144

11.3. Hospital-based doctors

The table overleaf provides the unit costs for hospital doctors. Reference should be made to the explanatory notes when interpreting the unit costs. See below for examples of work performed under each title.

Table 11.3.1: Work performed under each job title for hospital-based doctors

Work performed under each job title	
Foundation doctor FY1 **Foundation doctor FY2**	Foundation doctors are a grade of medical practitioner undertaking a two-year, general postgraduate medical training programme, which forms the bridge between medical school and specialist/general practice training. They have the opportunity to gain experience in a series of posts in a variety of specialty and healthcare settings.[1]
Registrar	A registrar is a specialist in training for medical consultancy.[2]
Associate specialist	An associate specialist grade is normally reached by doctors taking a non-consultant career path involving becoming a staff grade after being a foundation doctor.[2]
Consultant: medical, surgical, and psychiatric	Consultants are senior hospital-based physicians or surgeons who have completed their entire specialist training and been placed on the specialist register in their chosen speciality. A consultant typically leads a team of doctors which comprises specialty registrars and foundation doctors, all training to work in the consultant's speciality, as well as other 'career grade' doctors such as clinical assistants, clinical fellows, speciality doctors, associate specialists and staff grade doctors.[2]

[1] NHS, UK (2016) *The Foundation Programme*, http://www.foundationprogramme.nhs.uk/pages/home
[2] Prospects (2016) *Job profile, hospital doctors*, https://www.prospects.ac.uk/job-profiles/hospital-doctor

11.3.1. Hospital-based doctors – unit cost components

A. Wages/salary

Based on the mean full-time equivalent basic salary for Agenda for Change (AfC) of the May 2021/April 2022 NHS staff earnings estimates for doctors.[1] See NHS Terms and Conditions of Service Handbook for information on payment for unsocial hours and shift work.[2] See section 12.2 for further information on pay scales.

B. Salary oncosts

Employer's national insurance is included, plus 20.6 per cent of salary for employer's contribution to superannuation has been included.

C. Qualification costs

See Table 12.4.2 for detailed information on qualifications for each grade of hospital-based doctors. These costs have been calculated using the method described in Netten et al. (1998).[3]

The cost of training for hospital-based doctors includes the cost of pre-registration tuition; infrastructure costs (such as libraries); costs or benefits from clinical placement activities; and lost production costs during the period of training where staff are away from their posts. Each year after registration a substantial proportion of the salary (100% or 60% depending on the level of seniority) can be attributed to the investment costs of training for subsequent stages in the doctor's career. This cost, together with additional expenditure representing infrastructure costs for maintaining post-graduate medical education, is taken as the total training cost for that year. During training Health Education England pays 50 per cent of the professional's salary plus oncosts to the employing NHS Trust.

D. Overheads

The overheads have be taken from the HM Treasury public Expenditure statistics analysis 2022.[4,5] Management and other non-care staff costs include administration and estates staff. Non-staff costs include costs to the provider for drugs, office, travel/transport, publishing, training courses and conferences, supplies, and services (clinical and general), and utilities such as water, gas and electricity.

E. Capital overheads

Based on the new-build and land requirements of NHS hospital facilities.[6] Adjustments have been made to reflect shared use of administration and recreational facilities, including accommodation for night-time duties. Treatment space has not been included. Capital costs have been depreciated over 60 years at a discount rate of 3.5 per cent, declining to 3 per cent after 30 years.

F. Working time

Working days are calculated by deducting leave days from 260 weekdays per annum (e.g. statutory days, annual leave days, training/study days and sick days for specific doctor categories).[7]

Working hours are calculated by multiplying the number of working days per annum by the number of hours per day (10 hours).

Working weeks are calculated by dividing the number of working hours per annum by the number of hours per week (see Table 11.3.2).

[1] NHS Digital (2023) *NHS staff earnings estimates, 12-month period from May 2022 – April 2023* (not publicly available), NHS Digital, Leeds.

[2] NHS Employers (2023) *NHS Terms and Conditions of Service Handbook,* NHS Employers, London. NHS Terms and Conditions of Service Handbook | NHS Employers

[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] HM Treasury (2022) Public Expenditure: statistical analysis. HM Treasury, London, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1091951/E02754802_PESA_2022_elay.pdf

[5] Previous manuals have used the NHS Improvement (2019) *NHS Foundation Trusts: Consolidated Accounts 2018/19* Consolidated_foundation_trust_accounts_2018_19.pdf (england.nhs.uk). The overheads are lower than previously reported.

[6] Building Cost Information Service Construction Data (2023). BCIS | Building Cost Information Service Construction Data.

[7] NHS Digital, *NHS sickness absence rates*, https://digital.nhs.uk/data-and-information/publications/statistical/nhs-sickness-absence-rates/july-2023-provisional-statistics

G. London and non-London multiplier

See information produced by NHS Employers[1] and NHS Improvement[2] for information on Inner and Outer London supplements and the Market Forces Factor (MFF) which estimates the unavoidable cost differences between healthcare providers, based on their geographical location.

[1] NHS Employers (2024) *NHS Terms and Conditions of Service Handbook,* Annex 9: High cost area supplements. NHS Terms and Conditions of Service Handbook | NHS Employers

[2] NHS Improvement (2019) *2019/2020 payment reform proposals*, https://improvement.nhs.uk/resources/201920-payment-reform-proposals/.

11.3.2. Annual and unit costs for hospital-based doctors

This table provides the annual and unit costs for hospital-based doctors. See also the beginning of this chapter for examples of work performed under each title.

Table 11.3.2: Annual and unit costs for hospital-based doctors

	Hospital-based doctors						
	Foundation doctor FY1	**Foundation doctor FY2**	**Registrar**	**Associate specialist**	**Consultant: medical**	**Consultant: surgical**	**Consultant: psychiatric**
A Wages/salary	£29,243	£33,711	£49,009	£94,583	£106,756	£105,165	£106,752
B Salary oncosts	£8,325	£9,862	£15,124	£30,802	£34,989	£34,442	£34,988
C Qualifications	£30,490	£32,927	£46,761	£56,322	£73,518	£73,518	£73,518
E Overheads							
Management, admin, and estates staff	£8,828	£10,240	£15,071	£29,466	£33,310	£32,808	£33,309
Non-staff	£13,085	£15,177	£22,338	£43,672	£49,370	£48,625	£49,368
F Capital overheads	£5,411	£5,411	£5,411	£3,303	£8,544	£8,544	£8,544
Total costs	**£95,382**	**£107,328**	**£153,714**	**£258,148**	**£306,488**	**£303,102**	**£306,480**
G Working time							
Working days per year	215	213	214	212	212	214	214
Working hours per year	2146	2128	2135	2121	2142	2142	2142
Working weeks	44.71	44.33	44.48	44.18	44.63	44.63	44.63
London/non-London multiplier	See note	See note	See note	See note	See note	See note	See note
Units costs 2022/2023							
Cost per working hour	£30	£35	£50	£95	£109	£107	£109
Cost per working hour (including qualifications)	£44	£50	£72	£122	£143	£141	£143

12. Sources of information

12.1. Inflation indices

12.2. NHS staff earnings estimates

12.3. Examples of roles in each Agenda for Change (AfC) band

12.4. Training costs for health and social care professionals

12.5. Time use of community care professionals

12.6. Glossary

12.7. List of useful websites

12.1. Inflation indices

12.1.1. The NHS Cost Inflation Index (NHSCII)

The NHS Cost Inflation Index (NHSCII) constructed by the DHSC, in conjunction with the ONS who have worked with the NHS and the University of York to address the gap. The NHSCII identifies an appropriate inflation measure for each item of spend in four broad categories: NHS providers, general practice, prescribing and dentistry to create an overall inflation measure for the NHS. This index gives a more accurate measure of productivity than previously.

Table 12.1.1: The NHS Cost Inflation Index

	Annual % increases on previous year		
	(NHS Providers)		
	NHSCII prices	**NHSCII pay**	**NHSCII pay and prices**
2015/2016	0.56%	0.30%	0.40%
2016/2017	2.06%	2.10%	2.09%
2017/2018	1.30%	1.21%	1.24%
2018/2019	1.59%	1.60%	1.60%
2019/2020	1.30%	2.58%	2.14%
2020/2021	0.84%	3.41%	2.49%
2021/2022	1.70%	3.07%	2.57%
2022/2023*	6.34%	7.41%	7.03%

* 2022/2023 figures are provisional, next year's publication will use additional data that become available.

12.1.2. The Personal Social Services (PSS) Pay & Prices Index

The Adult PSS Pay & Prices Index is calculated by the Department of Health and Social Care (DHSC). Skills for Care (SfC) data have been used to calculate the pay percentages from 2019/20 onwards, in place of the Annual Survey of Hours and Earnings (ASHE) data used for previous years. Skills for Care data are taken from the Adult Social Care Workforce Data Set (ASC-WDS) which consists of non-mandatory returns from the independent sector (covering 51% of all CQC regulated locations) and mandatory returns from all local authorities in England. Skills for Care weight the independent sector returns to remove any geographical, service type and sector biases.

Table 12.1.2: The PSS annual percentage increases for adult services (all sectors)

	Annual % increases			
	Pay & prices (excluding capital)	**Pay & prices (including capital)**	**Pay**	**Pay data source**
2008/2009	3.2%	2.7%	3.0%	ASHE
2009/2010	2.4%	0.9%	2.4%	ASHE
2010/2011	2.5%	2.5%	2.2%	ASHE
2011/2012	0.9%	1.1%	-0.4%	ASHE
2012/2013	0.8%	1.2%	0.2%	ASHE
2013/2014	1.1%	1.6%	0.7%	ASHE
2014/2015	1.0%	1.6%	0.9%	ASHE
2015/2016	1.7%	1.7%	2.3%	ASHE
2016/2017	3.1%	3.7%	3.8%	ASHE
2017/2018	2.8%	3.6%	2.7%	ASHE
2018/2019	3.1%	3.1%	3.4%	ASHE
2019/2020	3.3%	3.1%	3.8%	SfC
2020/2021	3.8%	3.3%	4.9%	SfC
2021/2022	3.9%	3.9%	3.9%	SfC
2022/2023	7.2%	7.4%	6.2%	SfC

[1]Provided by the Department of Health and Social Care, 2023.

Table 12.1.3: The PSS annual percentage increases for adult local authority services

	Annual % increases			
	Pay & prices (excluding capital)	Pay & prices (including capital)	Pay	Pay data source
2008/2009	3.3%	2.8%	3.2%	ASHE
2009/2010	2.3%	0.8%	2.3%	ASHE
2010/2011	2.3%	2.3%	1.9%	ASHE
2011/2012	1.3%	1.5%	0.2%	ASHE
2012/2013	0.6%	1.0%	-0.1%	ASHE
2013/2014	1.6%	2.1%	1.4%	ASHE
2014/2015	1.0%	1.6%	0.9%	ASHE
2015/2016	3.0%	2.8%	4.1%	ASHE
2016/2017	0.9%	1.8%	0.9%	ASHE
2017/2018	2.9%	3.8%	2.9%	ASHE
2018/2019	2.6%	2.8%	2.8%	ASHE
2019/2020	3.3%	3.1%	3.8%	SfC
2020/2021	1.1%	0.9%	1.3%	SfC
2021/2022	3.1%	3.1%	2.8%	SfC
2022/2023	4.9%	5.3%	3.0%	SfC

Provided by the Department of Health and Social Care, 2023.

Table 12.1.4: The PSS annual percentage increases for adult independent sector services

	Annual % increases			
	Pay & prices (excluding capital)	Pay & prices (including capital)	Pay	Pay data source
2010/2011	2.5%	2.5%	2.2%	ASHE
2011/2012	0.8%	1.1%	-0.4%	ASHE
2012/2013	0.8%	1.2%	0.2%	ASHE
2013/2014	1.0%	1.6%	0.6%	ASHE
2014/2015	1.0%	1.6%	0.9%	ASHE
2015/2016	1.6%	1.5%	2.1%	ASHE
2016/2017	3.3%	3.9%	4.1%	ASHE
2017/2018	2.7%	3.6%	2.7%	ASHE
2018/2019	3.1%	3.2%	3.4%	ASHE
2019/2020	3.3%	3.1%	3.9%	SfC
2020/2021	4.1%	3.6%	5.4%	SfC
2021/2022	4.1%	4.0%	4.1%	SfC
2022/2023	7.5%	7.7%	6.6%	SfC

Provided by the Department of Health and Social Care, 2023.

12.2. NHS staff earnings estimates[1]

Table 12.2.1: Mean annual basic pay per FTE for non-medical occupational groupings

Non-medical occupational grouping	Mean annual basic pay per FTE
Ambulance staff	£30,602
Administration and estates staff	£34,002
Healthcare assistants and other support staff	£21,571
Nursing, midwifery and health visiting staff	£34,760
Nursing, midwifery and health visiting learners	£25,471
Scientific, therapeutic and technical staff	£37,301
Healthcare scientists	£34,422

Table 12.2.2: Mean annual basic pay per FTE for nursing, midwifery & health visiting staff by Agenda for Change band

Band	Mean annual basic pay per FTE
Band 2	Not available
Band 3	Not available
Band 4	£23,843
Band 5	£30,241
Band 6	£37,577
Band 7	£44,973
Band 8a	£50,789
Band 8b	£59,357
Band 8c	£70,176
Band 8d	£83,132
Band 9	£100,121

Table 12.2.3: Mean annual basic pay per FTE for allied health professional staff by Agenda for Change band

Band	Mean annual basic pay per FTE
Band 4	£25,130
Band 5	£28,843
Band 6	£37,376
Band 7	£45,221
Band 8a	£51,505
Band 8b	£60,499
Band 8c	£72,277
Band 8d	£86,100
Band 9	£104,450

[1] Salaries have been provided by NHS Digital and more specific enquiries relating to pay by grade or staff group should be directed to them: https//digital.nhs.uk/.

Table 12.2.4: Mean annual basic pay per FTE for administration and estates staff by Agenda for Change band

Band	Mean annual basic pay per FTE
Band 1	£20,207
Band 2	£20,933
Band 3	£22,562
Band 4	£25,225
Band 5	£29,980
Band 6	£36,799
Band 7	£44,513
Band 8a	£50,877
Band 8b	£59,963
Band 8c	£71,498
Band 8d	£85,147
Band 9	£102,469

Table 12.2.5: Mean annual basic pay per FTE for NHS staff groups

NHS staff group	Mean basic salary per full-time equivalent
All Nurses, health visitors and Midwives	
Nurses, health visitors and midwives	£37,160
Support to nurses, health visitors and midwives	£22,539
ST&T staff - Allied Health Professions	
Allied Health Professions	£39,829
Support to Allied Health Professions	£23,429
ST&T staff	
ST&T staff	£43,085
Support to ST&T staff	£25,267
Ambulance staff [1]	
Registered Ambulance Staff	£37,024
Support to Registered Ambulance Staff	£24,837
Former Pay Negotiating Council Groups	
Senior managers	£86,870
Managers	£59,696
Admin & Clerical	£28,854
Maintenance & works	£26,277

Source of tables: NHS Digital (2022) *NHS staff earnings estimates, 12-month period from April 2021– March 2022* (not publicly available), NHS Digital, Leeds.

General notes for NHS earnings estimates

Inspection of data suggests that discretionary point payments are sometimes included with basic pay for consultants.

These figures represent payments made using the Electronic Staff Record (ESR) to NHS staff who are directly paid by NHS organisations. It does not include, for example, elements of pay for clinical staff which are paid to the individual by universities, or other non-NHS organisations providing NHS care.

Figures based on data from all NHS organisations who are using ESR (two Foundation Trusts have not taken up ESR).

12.3. Examples of roles in each Agenda for Change band

Table 12.3.1: Agenda for Change bands for Physiotherapists

Band 2	Clinical support worker (physiotherapy)
Band 3	Clinical support worker higher level (physiotherapy)
Band 5	Physiotherapist
Band 6	Physiotherapist specialist
Band 7	Physiotherapist advanced, specialist physiotherapist, physiotherapy team manager
Band 8a	Physiotherapist principal
Bands 8a-b	Physiotherapist consultant

Note: No band 4

Table 12.3.2: Agenda for Change bands for Occupational Therapist

Band 2	Clinical support worker (occupational therapy)
Band 3	Clinical support worker higher level (occupational therapy)
Band 4	Occupational Therapy technician
Band 5	Occupational Therapist
Band 6	Occupational Therapist specialist
Band 7	Occupational Therapist advanced/team manager
Band 8a	Occupational Therapist principal
Bands 8a-b	Occupational Therapist consultant

Table 12.3.3: Agenda for Change bands for Speech and Language Therapists

Band 2	Clinical support worker (speech and language therapy)
Band 3	Clinical support worker higher level (speech and language therapy)
Band 4	Speech and Language Therapy assistant/associate practitioner
Band 5	Speech and Language Therapist
Band 6	Speech and Language Therapist specialist
Band 7	Speech and Language Therapist advanced
Band 8a	Speech and Language Therapist principal
Bands 8a-c	Speech and Language Therapist consultant

Table 12.3.4: Agenda for Change bands for Chiropodists/Podiatrists

Band 2	Clinical support worker (podiatry)
Band 3	Clinical support worker higher level (podiatry)
Band 4	Podiatry technician
Band 5	Podiatrist
Band 6	Podiatrist specialist
Band 7	Podiatrist advanced/team manager
Band 8a	Podiatrist principal
Bands 8a-b	Podiatric registrar
Bands 8c-d	Podiatric consultant
Band 9	Podiatric consultant

Table 12.3.5: Agenda for Change bands for Psychologists

Band 4	Clinical psychology assistant practitioner
Band 5	Clinical psychology assistant practitioner higher level, Counsellor entry level
Band 6	Clinical psychology trainee, Counsellor
Band 7	Clinical psychologist, Counsellor Specialist
Bands 8a-b	Clinical psychologist principal
Bands 8a-c	Counsellor professional manager/consultant
Bands 8c-d	Clinical psychologist consultant
Bands 8d & 9	Professional lead/Head of psychology services

Table 12.3.6: Agenda for Change bands for Pharmacists

Band 2	Pharmacy support worker
Band 3	Pharmacy support worker higher level
Band 4	Pharmacy technician
Band 5	Pharmacy technician higher level/Pharmacist entry level
Band 6	Pharmacist
Band 7	Pharmacist specialist
Bands 8a-b	Pharmacist advanced
Bands 8b-c	Pharmacist team manager
Bands 8b-d	Pharmacist consultant
Bands 8c-9	Professional manager pharmaceutical services

12.4. Training costs of health and social care professionals

Tables 12.4.1 and 12.4.2 provide a breakdown of the training costs incurred using standard estimation approaches.[1] The investment costs of education should be included when evaluating the cost-effectiveness of different approaches to using health service staff so that all the costs implicit in changing the professional mix are considered. For the most part, these investment costs are borne by the wider NHS and individuals undertaking the training, rather than NHS Trusts. The tables show details of the total investment incurred during the working life of the professional after allowing for the distribution of the costs over time. The expected working life of the professional, based on previous research carried out at PSSRU, has been noted in brackets in Table 12.4.1 after the title of the professional group.[2]

The cost of training for health service professionals includes the cost of pre-registration tuition; infrastructure costs (such as libraries); costs or benefits from clinical placement activities; and lost production costs during the period of training where staff are away from their posts. Although further training is available to all professionals to enable them to progress to higher grades, the cost of post-graduate training is only known for doctors (see table 12.4.2). Each year after registration a substantial proportion of the salary (100% or 60% depending on the level of seniority) can be attributed to the investment costs of training for subsequent stages in the doctor's career. This cost, together with additional expenditure representing infrastructure costs for maintaining post-graduate medical education, is taken as the total training cost for that year. During training Health Education England pays 50 per cent of the professional's salary plus oncosts to the employing NHS Trust.

Table 12.4.1: Training costs of health and social care professionals, excluding doctors

Pre-registration					
Professional (working life in years)	**Tuition[3]**	**Living expenses/lost production costs[4]**	**Clinical placement[5]**	**Total investment**	**Expected annual cost discounted at 3.5%**
Scientific and professional					
Physiotherapist (24.3)	£26,822	£37,510	£7,500	£71,582	£5,858
Occupational therapist (23.5)	£26,822	£37,510	£7,500	£71,582	£5,867
Speech and language therapist (24.7)	£26,822	£37,510	£7,500	£71,582	£6,015
Dietitian (23.3)	£26,822	£37,510	£7,500	£71,582	£6,087
Radiographer (24.3)	£26,822	£37,510	£7,500	£71,582	£5,834
Hospital pharmacist (27.6)	£35,165	£49,178	£25,086	£106,204	£8,369
Nurse (24)	£26,822	£37,510	£7,500	£71,582	£9,406
Social worker (19) (degree)	£26,822	£37,510	£7,500	£71,582	£9,956

[1] 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.

[2] Estimates of expected working life have been calculated using the 2001 census and where possible, the 2017/18 Labour Force Survey.

[3] Based on the maximum fee loan; https://www.thecompleteuniversityguide.co.uk/university-tuition-fees/university-tuition-fees-and-financial-support/if-you-come-from-england/

[4] Drawn from https://university.which.co.uk/advice/student-finance/whats-the-average-cost-of-living-at-university.

[5] The placement tariff for non-medical placements is £3,270+MFF per annum in 2019/20 Gov.uk (2019) Education & Training Tariffs, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/791560/education-and-training-tariffs-2019-to-2020.pdf.

Table 12.4.2: Training costs of doctors (after discounting)

Doctor (working life in years)	Tuition	Living expenses/lost production costs	Clinical placement	Placement fee plus Market Forces Factor	Salary (inc overheads) and post-graduate centre costs	Total investment	Expected annual cost discounted at 3.5%
Doctor (22)							
Pre-registration training: years 1-5	£51,014	£71,343	£171,912	NA	NA	£294,269	£24,160
Foundation officer 1 (included in pre-reg training)	£51,014	£71,343	£171,912	£10,486	£58,080	£362,835	£30,490
Foundation officer 2	£51,014	£71,343	£171,912	£20,766	£63,629	£378,664	£32,927
Registrar group	£51,014	£71,343	£171,912	£40,525	£128,699	£463,493	£46,761
Associate specialist	£51,014	£71,343	£171,912	£48,943	£183,961	£527,173	£56,322
GP	£51,014	£71,343	£171,912	NA	£193,201	£487,470	£55,902
Consultant	£51,014	£71,343	£171,912	£66,018	£280,789	£641,075	£73,518

12.5. Time use of community care professionals

The table provides information from an online survey carried out by PSSRU in 2014/2015 (see Preface to the Unit Costs of Health & Social Care 2015 for more details). The link for the survey was distributed non-selectively through various channels. Given the small sample from which the ratios of direct to indirect time have been calculated, the ratios have not been used in the unit cost calculations but have been tabulated here so that readers can use them where appropriate.

Table 12.5.1: Time use of community care professionals

Community professionals	Sample size	Average number of hours worked (including unpaid overtime)	% of hours worked spent with patients	% of hours worked spent on other patient-related tasks (a)	% of hours worked spent on non-direct activities (b)	Other time (definition not provided but includes travel)	Average mileage per professional per week	Ratios of direct to indirect time on: client-related work
Nurses								
(bands 5 and 6)	44	39	54%	29%	13%	5%	102	1:0.20
(bands 7 and 8)	31	40	42%	33%	19%	6%	71	1:0.33
Physiotherapists (bands 5-8)	11	41	35%	38%	22%	5%	132	1:0.37
Occupational therapists (bands 4-7)	6	40	51%	36%	11%	2%	42	1:0.15
Speech and language therapists (bands 5-6)	7	40	38%	50%	9%	3%	84	1:0.14

Clinical psychologists: Ratio of direct to indirect time on face-to-face contacts to all activity: 1:2:03 based on information taken from a study by Professor John Marsden and Colleagues.[1]

[1] Marsden, J., Stillwell, G., James, K., Shearer, J., Byford, S., Hellier, J., Kelleher, M., Kelly, J., Murphy, C. & Mitcheson, L. (2019) Efficacy and cost-effectiveness of an adjunctive personalized psychosocial intervention in treatment-resistant maintenance opioid agonist therapy: a pragmatic, open-label, randomized controlled trial, *The Lancet*, 6, 5, 391-402.

12.6. Glossary

Annuitising Converting a capital investment (such as the cost of a building) into the annual equivalent cost for the period over which the investment is expected to last.

Capital overheads The cost of buildings, fixtures and fittings employed in the production of a service.

Care package costs Total costs for all services received by a patient.

Department for Work and Pensions (DWP) is the largest government department in the United Kingdom, created on 8 June 2001, from the merger of the employment part of the Department for Education and Employment and the Department of Social Security and headed by the Secretary of State for Work and Pensions, a Cabinet position.

Discounting Adjusting costs using the time preference rate spread over a period of time to reflect their value at a base year.

Durables Items such as furniture and fittings.

Long-term The period during which fixed costs such as capital can be varied.

Marginal cost The cost of an additional unit of a service.

Oncosts Essential associated costs: salary oncosts, for example, include the employer's national insurance contributions.

Opportunity cost The value of the alternative use of the assets tied up in the production of the service.

Short-term The period during which durable assets cannot be immediately added to or removed from the existing stock of resources.

Time preference rate The rate at which future costs or benefits are valued in comparison to current or base year's costs or benefits.

12.6.1. Overheads

NHS overheads

Management and other non-care staff overheads include administration and estates staff.

Non-staff overheads 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.

Local authority overheads

Direct overheads 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 include general management and support services, such as finance and human resource departments.

SSMSS Social services management and support services: the overheads incurred by a local authority, as defined by CIPFA guidelines. These include indirect overheads such as finance and personnel functions.

12.6.2. Time use and unit costs

Per average stay Cost per person for the average duration of a typical stay in that residential facility or hospital.

Per client/patient hour Cost of providing the service for one hour of client/patient attendance. The costs of time not spent with clients are allocated to the time spent with clients.

Per clinic visit Cost of one client attending a clinic. This allows for overall time spent on non-clinical activity to be allocated to the total time spent with clients in any setting.

Per consultation Cost per attendance in a clinic or surgery. This also allows for overall time spent on non-clinical activity to be allocated to the total time spent with clients.

Fee per resident week For example, in care homes the fee charged is assumed to cover care costs, accommodation and hotel costs, ancillary costs and operator's profit.

Per example episode Cost of a typical episode of care, comprising several hours of a professional's time.

Per home visit Cost of one visit to a client/patient at home. This includes the cost of time spent travelling for the visit, the proportion of time spent on non-clinical activity which is attributable to visiting patients in their own home, and the time spent on visiting patients at home.

Per hour of home visiting Cost of one hour spent by a professional undertaking visits to clients/patients at home. This includes the cost of time spent travelling. It also allows for overall time spent on non-clinical/patient activity to be allocated to the total time spent with clients/patients in any setting.

Per hour in clinic Cost of one hour spent by a professional in a clinic. Time spent on non-clinical activity is allocated to the total time spent with clients/patients in any setting.

Per hour of direct contact/per hour of face-to-face contact Hourly cost of time spent with, or in direct contact with, the client/patient. Some studies include travel time in this cost. When this is the case, it has been noted in the schema.

Per hour on duty Hourly cost of time spent by a hospital doctor when on duty. This includes time spent on call when not actually working.

Per hour worked Hourly cost of time spent by a hospital doctor when working. This may be during the normal working day or during a period of on-call duty.

Per inpatient day Cost per person of one day and overnight in hospital.

Per patient day Cost per person of receiving a service for one day.

Per procedure Cost of a procedure undertaken in a clinic or surgery. This includes the cost of time spent on non-clinical activity and the total time spent with clients.

Per resident week Cost per person per week spent in a residential facility.

Per client attendance Cost per person per attendance.

Per client session Cost for one person attending one session.The length of a session will be specified in the schema and may vary between services.

Per short-term resident week Total weekly cost of supporting a temporary resident of a residential facility.

Price base The year to which cost information refers.

Ratio of direct to indirect time spent on client/patient-related work/direct outputs/face-to-face contact/clinic contacts/home visits The relationship between the time spent on direct activities (such as face-to-face contact) and time spent on other activities. For example, if the ratio of face-to-face contact to other activities is 1:1.5, each hour spent with a client requires 2.5 paid hours.

12.7. List of useful websites

Adult Social Care Finance Return (ASC-FR)

Building Cost Information Service

BCIS is the UK's leading provider of cost and price information for construction and property occupancy.

Care Quality Commission

The Care Quality Commission is the health and social care regulator for England and replaces the Healthcare Commission, Commission for Social Care Inspection and the Mental Health Act Commission which all ceased to exist on 31 March 2009.

Chartered Institute of Public Finance and Accountancy (CIPFA): http://www.cipfa.org/

The CIPFA Statistical Information Service (SIS) was established as a partnership between individual authorities and CIPFA. SIS has been undertaking detailed annual surveys of local authority operations for more than a century, and the 'CIPFA Statistics' still remain the only impartial and comprehensive account of the extent and achievements of each individual council. Surveys are conducted in the following areas: education, environmental services, environmental health, housing, leisure, planning, public protection, social services and transport.

Department of Health and Social Care

Department for Work and Pensions

Federation of Ophthalmic & Dispensing Opticians

Hospital Episode Statistics (HES):

This is the national statistical data warehouse for England of the care provided by NHS hospitals and for NHS hospital patients treated elsewhere. HES is the data source for a wide range of health-care analysis for the NHS, Government and many other organisations and individuals. The HES database is a record-level database of hospital admissions and is currently populated by taking an annual snapshot of a sub-set of the data submitted by NHS Trusts to the NHS-Wide Clearing Service (NWCS). Quarterly information is also collected. A separate database table is held for each financial year, containing approximately 11 million admitted patient records from all NHS Trusts in England.

Joseph Rowntree Foundation

This website provides information on housing and care.

LaingBuisson

LaingBuisson, an independent company, provides data, statistics, analysis and market intelligence on the UK health services.

Livability

National Audit Office

National Council for Palliative Care

National End of Life Care Intelligence network

NHS Digital

National Institute for Health and Clinical Excellence

National Library of Medicine

Personal Social Services Expenditure Data (PSS EX1 data)

Reference Costs

This website gives details on how and on what NHS expenditure was used. The Reference Costs/Reference Costs Index publication is the richest source of financial data on the NHS ever produced. As in previous years, its main purpose is to provide a basis for comparison within (and outside) the NHS between organisations, and down to the level of individual treatments.

Social Care Institute for Excellence

Social Care Online

YoungMinds

YoungMinds is a national charity committed to improving the mental health of all children and young people.