



The
Information
Centre

for health and social care



Information and Guidance for the Personal Social Services Expenditure Return (PSS EX1)

For the collection period
1st April 2008 to 31st March 2009

Issued: May 2009
Version: 1.7

The NHS Information Centre is England's central, authoritative source of health and social care information.

Acting as a 'one-stop-shop' for high quality, national, comparative data, we deliver information for local decision makers, to improve the quality and efficiency of care.

CONTENTS

(Press CTRL and click on relevant section to automatically go to that page)

PSS EX1 SPREADSHEET FOR 2008/09: GENERAL GUIDANCE AND DEFINITIONS OF ACTIVITY ENTRIES	1
THE 2008-09 PILOT	1
CHANGES TO PSSEX1 FOR 2008/09	2
ACTIVITY DATA.....	2
ACTUAL TOTAL NET COST ON A PRE FRS17 BASIS.....	2
SUPPORTED EMPLOYMENT.....	2
NEW SERVICE USER GROUPINGS.....	2
MEMORANDUM ITEMS.....	2
BREAKDOWN OF ADDITIONAL MEMORANDUM ITEMS	3
NURSING CARE PLACEMENTS AND RESIDENTIAL CARE PLACEMENTS.....	3
SUPPORTED AND OTHER ACCOMMODATION.....	3
HOME CARE.....	3
DIRECT PAYMENTS.....	3
DAY CARE / DAY SERVICES.....	4
EQUIPMENT AND ADAPTATIONS.....	4
SUPPORT SERVICES.....	4
SUPPORT SERVICES COSTS WITHIN EACH SERVICE ROW.....	4
DEFINITIONS OF ACTIVITY AND EXPENDITURE FOR NEW MEMORANDUM ITEMS	4
NURSING CARE PLACEMENTS & RESIDENTIAL CARE PLACEMENTS.....	4
SUPPORTED AND OTHER ACCOMMODATION.....	5
HOME CARE.....	6
DIRECT PAYMENTS.....	7
DAY CARE / DAY SERVICES.....	8
EQUIPMENT AND ADAPTATIONS.....	8
SUPPORT SERVICES.....	9
GENERAL GUIDANCE	10
JOINT ARRANGEMENTS/POOLED BUDGETS/CARE TRUSTS.....	10
SECTION 256 (FORMERLY SECTION 28A).....	10
GROSS RECORDING.....	10
PERSONAL AND INDIVIDUAL BUDGETS.....	11
FREE NURSING CARE.....	11
SPECIFIC GRANTS.....	12
GRANTS TO VOLUNTARY ORGANISATIONS.....	12
TAXICARD, CONCESSIONARY FARES AND FREEDOM PASSES.....	12
CAPITAL CHARGES AND OTHER RESIDUAL COSTS ASSOCIATED WITH THE CLOSURE OF ESTABLISHMENTS..	12
CHANGES IN THE DEFINITION OF CAPITAL CHARGES.....	12
REGISTRATION AND INSPECTION.....	13
DELAYED TRANSFERS OF CARE (BED BLOCKING) FINES.....	13
RECONCILIATION BETWEEN PSS EX1 AND RO3 FOR 2008/09	14
CONTACTS	15

PSS EX1 SPREADSHEET FOR 2008/09: GENERAL GUIDANCE AND DEFINITIONS OF ACTIVITY ENTRIES

This document provides general guidance on completing the PSS EX1 spreadsheet for 2008/09 and definitions relating to activity data required for the spreadsheet.

Definitions of the expenditure categories are given in the CIPFA Service Expenditure Analysis (SEA) for Social Services which form part of their Best Value Accounting Code of Practice (BVACOP). The definitions are included as comments against the appropriate rows in column B of the Incl SSMSS sheet of the spreadsheet (hover with the mouse over the appropriate row of column B and the definition will be displayed).

Definitions for the activity data can similarly be displayed by hovering over the appropriate row in column B of the Activity Data sheet.

The 2008-09 Pilot

In September 2008 the Department of Health (DH) published a document entitled "Improved Reporting of Adult Social Care Finance and Activity Data : Revisions to PSS EX1" as a means of engaging stakeholders in proposals to change the way in which PSS EX1 data is collected. In addition to specific recommendations aimed at disaggregating service headings into their constituent parts, the report also proposed the trialling of a new way of collecting PSS EX1, and similar, social care data.

The key conclusions were agreed by the CIPFA Social Care Statistics Working Party (extended, by invitation, to the stakeholders who attended the original meeting in May 2008), the recommendations of which are being implemented in pilot during 2008-09. The pilot will be assessed during 2009 and, subject to findings of the assessment, final implementation of the review will be made in the 2009-10 return.

The 2008-09 return has substantially changed from that completed by local authorities for 2007-08. Those items which are new are highlighted with a gold background colour, they are subject to pilot in 2008-09 and their completion is not mandatory.

It is understood that due to the late notification to councils of the new data items in the collection, completion of the pilot data items will be problematic for some authorities. Councils are encouraged to complete as many of the pilot data items as they can and it should be emphasised that the return of some of the pilot data items does not place any obligation to return the full set.

Further information and documentation on the review of the PSS EX1 can be accessed via our website at:

<http://www.ic.nhs.uk/services/social-care/review-approval-and-development/pssex1>

Changes to PSSEX1 for 2008/09

After reviewing the feedback to the 2008 document, “Improved Reporting of Adult Social Care Finance and Activity Data: Revisions to PSS EX1” published by the Department of Health (DH) and discussions with the CIPFA PSSEX1 Working Group, the changes listed below have been made to the 2008/09 PSS EX1 return:

Activity Data

Councils may notice the absence of items C5.1 & C6.1 – Rehabilitation / Intermediate Care. This is NOT a mistake. We would not expect any data relating to LD or MH under this category, however, the decision was made to keep a uniform numbering system across the client categories to enable easier referencing when under analysis.

Actual Total Net cost on a pre FRS17 Basis

This element (section P) has been removed completely from the form as all local authorities are now required to report on the FRS17 basis.

Supported Employment

In previous years, Supported Employment was shown under its own section (L). This has been removed as an element in its own right and is now split as memorandum lines under Day Care / Day Services under each client category

New Service User Groupings

The current single client group “Older People” now has additional subdivisions for “Older People with Mental Health Needs” and “Older People with Learning Disabilities”, where selected rows of data on expenditure on services are shown as memorandum lines.

Memorandum Items

The additional memorandum items are to be completed on a voluntary basis by councils for 2008/09. To help identify which items are required the form has been colour coded for ease of use. Any cells that are coloured green are mandatory values, whilst all cells coloured yellow are voluntary memorandum items.

Please note:

The majority of memorandum items are breakdowns of the totals previously given within that particular client group. It is not expected however that the sum of memorandum items will normally equal the total reported for the corresponding service line.

For example: The memorandum items for Day Care / Day Services on the 'Incl SSMSS' worksheet – the sum of rows E6.1 and E6.2 is likely to be less than the total reported on row E6.

Additionally 2 memorandum sheets, 'Memo item ratios' and 'Memo cost calculations', have been included in the return for 2008/09. These sheets, also coloured yellow, are **automatically generated** and provide CASSRs with additional information using their memorandum items.

For example: 'Memo item ratios' provides information on various activity and expenditure ratios such as the percentage of older people resident weeks that were respite care.

'Memo cost calculations' is similar to the existing 'Unit costs' sheet, but provides additional Unit costs based on the new memorandum items.

Breakdown of Additional Memorandum Items

Nursing Care Placements and Residential Care Placements

- Rehabilitation / Intermediate Care – introduced for **OP & PSD only**
- Respite Care
- Short Term Care

Supported and Other Accommodation

- Adult Placement Schemes
- Supported Living / Group Homes – **not** introduced for **OP**
- Community Support Services
- Extra Care Housing (ECH) non personal care elements – introduced for **OP only** and spilt between Home Care (below)

Home Care

- Rehabilitation / re-enablement / intermediate home care
- Extra Care Housing personal care element – introduced for **OP only** and spilt between Supported Accommodation (above)

Direct Payments

- Direct Payments to carers – introduced into new "Carers Service" division
- All non-DP expenditure identifiable as for carers services – introduced into new "Carers Service" division
- Direct Payment amounts (amount paid to recipients only)

Day Care / Day Services

- Employment Related Day Services – **not** introduced for **OP**

Equipment and Adaptations

- Telecare equipment and its maintenance
- Prescriptions for equipment and their management costs
- Equipment Store costs and associated transport

Support Services

- **Client support** - sub-divided further into *welfare benefits, advocacy and advisory services*.
- **Operations support** - sub-divided further into *performance management, planning, financial assessment of clients, contract management, brokerage*.
- **Information Technology**;
- **Finance** excluding financial assessment
- **Training**;
- **Premises and property costs**
- **Transport**;
- **All other SSMSS expenditure**

Support Services Costs within each service row

Two additional *memorandum columns (R & S)* have been added against each existing service/client group line in addition to the new memorandum lines discussed above. The first column will identify the amount of gross SSMSS expenditure attributed for each service line to any in house services (“own provision and joint arrangements”), and the second amount attributed on each line to “provision by others and grants to voluntary organisations

Definitions of Activity and Expenditure for New Memorandum Items

Nursing Care Placements & Residential Care Placements

Rehabilitation / Intermediate Care

Definition of Expenditure:

Estimation, either by identification of actual costs or pro rata-ing overall costs, of expenditure on intermediate care / rehabilitation weeks in year. If pro-rata, ensure additional costs of this specific role are included.

Activity Measure:

Numbers of resident weeks.

Respite Care

Definition of Expenditure:

Estimation, either by identification of actual costs or pro rata-ing overall costs, of expenditure on intermediate care / rehabilitation weeks in year. If pro-rata, ensure additional costs of this specific role are included.

Activity Measure:

Numbers of resident weeks.

Short Term Care

Definition of Expenditure:

Estimation, either by identification of actual costs or pro rata-ing overall costs, of expenditure on short term care weeks in year.

Need to exclude:

a. Those temporary placements where the resident was initially admitted on a short term basis but becomes a permanent resident

b. Those where the focus was on rehabilitation or respite.

The focus is principally on stays where the resident was admitted for a defined short period and returned as planned to their original home setting.

Activity Measure:

Numbers of resident weeks.

Supported and Other Accommodation

Adult Placement Schemes

Definition of Expenditure:

Payment by the CASSR for adult placement accommodation in the year where the client is accommodated on a permanent or temporary basis or accommodation in the year where the client is only accommodated on a temporary basis for respite care (where a carer benefits from the stay)

Activity Measures:

Numbers of supported resident weeks in year.

Supported Living / Group Homes

Definition of Expenditure:

Expenditure by CASSR on supported living /group homes. Exclude housing costs (rents etc. for tenants) but include costs of support staff supporting the tenants unless already reported separately under Supporting People lines.

Activity Measure:
Number of tenant weeks in year

Community Support Services

Definition of Expenditure:
Provision of support or oversight by workers for those living in their own accommodation in the community, excluding group homes and supported living settings (which are covered under a different memorandum line (rows 137-140 in the Activity Sheet)).

No personal care involved:

May be part of a care plan for the person supported or for a property / group of properties and those living there.

Activity Measure:
Numbers receiving any support during the year.

Extra Care Housing (ECH) – non personal care elements

See also: Home Care

Definition of Expenditure:
Any expenditure by CASSR on ECH elements not associated with personal care which is to be recorded on the new memorandum line under Home Care.

Further help with definitions can be found at:

<http://icn.csip.org.uk/housing/index.cfm?pid=166>

Activity Measure:
Number of tenant weeks in year.

Home Care

Rehabilitation / re-enablement / intermediate home care

Definition of Expenditure:
The best metric available is an approximate division of expenditure by hours of home care where there is a clearly defined rehabilitative focus.

Normally intermediate care / re-enablement is offered free for a given number of weeks with a clear agreement that if progress is made the adult should expect to be using lower levels or no home care at the end of the rehabilitation / re-enablement process.

Use of activity data to pro-rata expenditure needs to reflect local evidence on higher unit costs of this form of service provision.

Activity Measure:
Numbers supported over a year.

Extra Care Housing (ECH) – personal care element

See also: Supported and Other Accommodation (above)

Definition of Expenditure:

Any expenditure by CASSR on ECH elements associated with personal care and not included under Supported and Other Accommodation.

Further help with definitions can be found at:

<http://icn.csip.org.uk/housing/index.cfm?pid=166>

Activity Measure:

Number of tenant weeks in year (using the same measure as for the equivalent measure in Supported and other accommodation – see above)

Live in Home Care

Definition of Expenditure:

The best metric available is an approximate division of expenditure by hours of home care where the user received live in home care. If this has already been reported in intermediate care it should not be double counted here.

Use of activity data to pro-rata expenditure needs to reflect local evidence on different unit costs of this form of service provision.

Activity Measure:

Numbers supported over a year.

Direct Payments

For continuity, direct payments to carers should still be reported within the client group rows for which the carer cares. The memorandum line on expenditure on carers' direct payments (row 199 in the Incl SSMSS sheet) simply extracts expenditure and support costs for these direct payments, which can be related to numbers of carers receiving direct payments at 31 March 2009 (row 198 in the Activity sheet)..

Direct Payment Amounts Given to Carers – extracted to new Carers Services division

Definition of Expenditure:

All payments of direct payments made to carers in the year

Activity Measures:

- a. Numbers in receipt at 31 March 2009

All non-DP expenditure identifiable as for carers services - New Carers Services division

Definition of Expenditure

Any expenditure by CASSR on providing support to carers excluding actual direct payments. **Exclude** expenditure on respite care in care homes already identified in memorandum rows: B3.2, E3.2, F3.2 and G3.2

Activity Measure:
None

Direct Payment Amounts (given to clients only)

Definition of Expenditure:
The total amount of DP expenditure actually provided to all DP recipients in the year.

Activity Measure:
None

Day Care / Day Services

Employment Related Day Services

Definition of Expenditure:
Expenditure by CASSR on services specifically aimed at assisting CASSR clients into employment.

Activity Measure:
Numbers supported in day care with a view to employment over a year, by client group.

Equipment and Adaptations

For continuity within the current return, equipment and adaptations should still be reported within the client group rows for which the equipment is provided. The memorandum lines included in the new "Across All Divisions" division simply extracts some specific costs for this service.

Telecare Equipment and its Maintenance

Definition of Expenditure:
Expenditure by the CASSR on telecare and infrastructure to deliver telecare support. which is:

A combination of equipment, monitoring and response that can help individuals to remain independent at home. It can include basic community alarm services able to respond in an emergency and provide regular contact by telephone, as well as detectors, which detect factors such as falls, fire or gas and trigger a warning to a response centre.

Activity Measure:
a. Numbers newly provided with one or more telecare services (incl telecare maintenance), funded at least in part by the CASSR, in the year
b. Numbers at March 31 2009 with one or more telecare services (incl telecare maintenance), funded at least in part by the CASSR.

Prescriptions for Equipment and their Management Costs

Definition of Expenditure:

Value of equipment funded through prescriptions and associated transaction costs , where identifiable.

Activity Measure:

Numbers of clients who have received one or more equipment prescriptions in the year.

Equipment Store Costs and Associated Transport

Definition of Expenditure:

Costs borne by the CASSR in respect of stores and associated staff transport for equipment and installation of minor adaptations, but **not** the price of the minor adaptation materials

Activity Measure:

None

Support Services

Total gross Support Services costs should be reported in their constituent parts, as an item independent of service and client type.

This breakdown (based on that used in the CIPFA BVACOP Service Expenditure Analysis (SEA)) is as follows:

Client support (sub-divided further into *welfare benefits, advocacy and advisory services*)

Operations support (sub-divided further into *performance management, planning, financial assessment of clients, contract management, brokerage*);

Information Technology;

Finance excluding financial assessment

Training;

Premises and property costs

Transport

All other SSMSS expenditure

These elements will report both costs incurred within the adult social care department and those recharged from the corporate centre which are added as SSMSS overheads to gross expenditure columns. Many will be collected separately under CASSR or corporate cost centres (such as in house and corporate training costs). Councils are *not* expected to create artificial “cost centres” for such functions but to report the data they have readily available as part of the preparation of the PSSEX1 dataset.. Where a function such as financial assessment is part of a larger cost centre report it if it can be estimated reasonably accurately. No on the data will be reported in a way in which an individual council can be identified – the identification of SSMSS costs is aimed at identifying for the council itself where its ‘overheads’ accrue and the size of them and to show nationally an approximation of their contribution to ASC expenditure.

General Guidance

Joint arrangements/pooled budgets/Care Trusts

The most important principle to bear in mind when completing this form is that expenditure and activity should be recorded in a consistent fashion so that derived unit costs are meaningful. The CIPFA Service Expenditure Analysis states that in the case of pooled budgets and joint arrangements only the CASSRs own expenditure contribution should be recorded; this is also the case for Care Trusts, (BVACOP 2007, and p3.10 paragraph 4.0). In order to produce meaningful unit costs, it follows that only the CASSRs share of activity should be recorded in this spreadsheet. Often this will be clearly known but, if not, it will often be possible to estimate this based on periodic activity returns or a split pro-rata to expenditure. If exceptionally joint activity cannot be split, the total joint expenditure should be entered and the other party's contribution should be shown under income from joint arrangements. Services purchased from other CASSR's should be treated similarly.

Section 256 (formerly section 28a)

From 2006/07 a separate column was introduced to record "Income from NHS" (column I on Incl. SSMSS). Previously this may have been included in the "income from" joint arrangements" or "other income" columns.

Under Section 256 of the National Health Service Act 2006 PCT's can reimburse CASSR expenditure. The CASSR expenditure should be recorded gross of these contributions and the contributions should be shown under "Income from NHS". In order to produce meaningful unit costs, the activity for residential and nursing placements funded wholly by the NHS should be included at lines 95 to 111.

Gross recording

All expenditure should be recorded on a gross basis with contributions from service users being recorded in the income: client contributions column. In particular:

- For supported residents in private residential and nursing homes the full cost should be shown under expenditure and any contribution by the service user should be shown under income: client contributions (it may be necessary to obtain these figures specially or estimate them if your CASSR pays the homes concerned on a net basis).
- In the case of residential homes run by your CASSR, the total gross cost of running the home should be shown under expenditure. Service user contributions by supported residents, contributions by their relatives, and payments by full cost paying residents should all be shown under client contributions. However, in the case of residents paid for by other CASSR's, if possible, reduce expenditure and activity proportionately (if this is not possible, show total expenditure and total activity and show the other CASSR's contribution under other income).
- Third party "top-up" payments (contributions from a third party, usually a relative, to enable a service user to occupy a more expensive place than the CASSR is prepared to pay for) should be excluded, even if the CASSR pays the full cost and reclaims the "top-up" from the third party.

- In the case of direct payments, the total monies to be used for the purchase of services should be shown under expenditure and the service user's contributions should be shown in the income: client contributions column even if the user pays the service provider direct. Note that expenditure on direct payments must be recorded in the provision by others column and not under own provision.

Personal and Individual Budgets

Activity

The principles underlying recording activity data on PSS EX1 should be the same as for RAP and HH1. Many of the activity data on PSS EX1 are sourced from these returns and should be consistent with them. So far as other activity data are concerned: meals, day care sessions, actual hours of home care and direct payments planned to be delivered by an Individual Budget, Personal Budget or "In control" pilot should be included, unless the service user has no social services funding. If the user is planned to receive one of these services provided or commissioned by social services and paid for from social services expenditure as well as other funding sources (e.g. Supporting People, Disabled Facilities Grant (DFG), Independent Living Fund (ILF)), then only include the activity funded by social services. If the individual has no social services funding then exclude them.

For example:

- If the individual receives 60% of funding from social services and 40% from the Supporting People grant, then apportion the activity to include 60% of it in the PSS EX1 return.

"Service users planned to receive services via an Individual Budget, Personal Budget or "In control" pilot should **NOT** be counted under direct payments **UNLESS** a direct payment is being provided to them as part of one of these schemes."

Expenditure

The underlying aim is to record Individual Budget, Personal Budget or "In control" pilot expenditure in a way consistent with the associated activity. Thus social services expenditure should be recorded on the line in the Incl SSMSS sheet of PSS EX1 appropriate to the service user group and the service paid for (e.g. E5 for home care provided to Adults with a physical disability). Expenditure funded from the Supporting People grant that is treated as social services expenditure should be recorded on the Supporting People line for the relevant user group (e.g. E12 for Adults with a physical disability) whatever the service paid for. Expenditure funded from the Supporting People grant that is treated as housing expenditure should not be recorded on PSS EX1 whatever the service paid for nor should expenditure funded from the Disabled Facilities Grant (DFG) or Independent Living Fund (ILF).

Free nursing care

Expenditure on nursing care placements should be recorded net of NHS payments for free nursing care. From 1 April 2003 the NHS has been providing free nursing care. CASSR's will not always know the amounts involved and so may only be able to show expenditure net of such contributions in their accounts. Any such payments passing

through the CASSR's accounts should be netted off any gross payments to give the expenditure to be entered on PSS EX1. The relevant unit costs (UCs 2.1, 2.2, 2.3, 2.7, 2.8, 2.12, 2.13, 2.17, 2.18) showed a one off fall for 2003/04.

NB: This expenditure should not be included in the "Income from NHS" column.

Specific grants

Expenditure funded by specific grants should be included in columns C and D. Specific grants should not be included as income in columns G to J. The total value of specific grants should be entered in cell L190 of the Incl SSMSS sheet.

Grants to voluntary organisations

Grants to voluntary organisations to enable them to provide a service should be included in the appropriate service line (Day care, Home care etc) under the column "Grants to Voluntary Organisations" (Column E). Additionally please record in this column any expenditure for which you are unable to match activity.

Taxicard, concessionary fares and Freedom Passes

Expenditure on these is recorded on RO2 (Highways, Road and Transport Services) rather than RO3 and so should also be **excluded** from PSS EX1.

Capital charges and other residual costs associated with the closure of establishments

Capital charges and other residual costs associated with the closure of establishments should be included in rows B10, E10, F10, G10 or J4 (Other Services) and **not** the residential or day care headings to which they formerly related. This avoids overstating the unit costs as there is no activity data to match this expenditure.

Changes in the definition of capital charges

Record capital charges i.e. *depreciation, loss on impairment of assets, amortisation of deferred charges* and *credit for amortisation of capital grants*. It should be noted that the last element of credit for *amortisation of capital grants* is included and the element of *notional interest* should NOT be included within capital charges. These changes were introduced by CIPFA in the 2006 Local Authority Accounting SORP (Statement of Recommended Practice). Further information about the effect of this change on the definition of total cost can be found in Section 2: Annex B of the 2006 Best Value Code of Practice (BVACOP).

Registration and Inspection

This function was transferred from councils to the National Care Standards Commission and then to the Commission for Social Care Inspection.

Include registration fees paid to CSCI on lines B3, E3, F3 or G3 as appropriate.

Delayed transfers of care (bed blocking) fines

Delayed transfers of care (bed blocking) fines should be included in the “other expenditure” category for the appropriate service user group (rows B10, E10, F10 or G10).

Reconciliation between PSS EX1 and RO3 for 2008/09

Expenditure (and income) on the 'Incl SSMSS' sheet of the PSS EX1 should match that entered on the DCLG RO3 return as follows:

PSS EX1 Row	Corresponding RO3 Row
A3 Total service strategy – Adults	30 Social Services strategy – Adults
B13 Total older people including Supporting People	40 Older people (aged 65 and over) including older mentally ill
E13 Total adults aged under 65 with a physical disability etc incl SP but excluding E6.1 – sheltered employment	51 Adults aged under 65 with physical disability or sensory impairment
F13 Total adults aged under 65 with learning disabilities incl SP but excluding F6.1 – sheltered employment	52 Adults aged under 65 with learning disabilities
G13 Total adults aged under 65 with mental health needs incl SP but excluding G6.1 – sheltered employment	53 Adults aged under 65 with mental health needs
H3 Total Asylum seekers	75 Other adult Social Services - asylum seekers - lone adults
J7 Total other adult services including Supporting People but excluding J4.1 employment related day services	79 Other adult Social Services
K3 Total PSS including Supporting People	90 Total Social Care
E6.1, F6.1, G6.1, J4.1 Supported Employment	80 Supported employment
PSS EX1 Column	Corresponding RO3 Column
G Client contributions (Sales, Fees and Charges)	4 Sales, Fees and Charges
H Joint arrangements I Income from NHS J Other Income	5 Other income
K Total income (including joint arrangements)	6 Total Income
L Net total expenditure	9 Net total cost (excl. spec grants)

*The breakdown of RO3 column 3 (Total expenditure) into column 1 (Employees) and column 2 (Running Expenses) is different to the breakdown of PSS EX1 column F into column C - Own provision (including joint arrangements) and column D - Provision by others and will need to be calculated in addition to the PSS EX1 breakdown.

Contacts

Any CSSR staff who require advice regarding PSS EX1 or who have questions on issues relating to the content and coverage of this return are invited to contact the PSS EX1 Helpdesk at The NHS Information Centre **PSSEX1@ic.nhs.uk**.

The persons responsible for PSS EX1 are:

Anthony Harris: Section Head for Social Care Statistics Collections
The Information Centre for health and social care
1 Trevelyan Square
Boar Lane
Leeds LS1 6AE

Phone 0113 254 7173
Fax 0113 254 7299
E-mail (Internet) PSSEX1@ic.nhs.uk

Dan O'Neill: Information Analyst (**Lead on PSSEX1**)
Address and fax As above
Phone 0113 254 7187
E-mail (Internet) PSSEX1@ic.nhs.uk