



Ravensmere: long-term care spend, people or price?

Illustrative sample, adult social care returns to 2024/25 · London · Page 1 of 2

Info Insight
Expenditure and demand
forecasting

SAMPLE · Ravensmere is a fictional London borough and its figures are constructed. The comparator, England and every-council figures are published data.

Gross spending on long-term care for adults in Ravensmere rose from £80m in 2018/19 to £121m in 2024/25, an increase of 51 per cent. The number of people it supported fell by 4 per cent. Most of the growth came from what each person's support costs, which a demographic uplift does not measure.

£121m

long-term care spend, 2024/25: +51% since 2018/19 (England +61%)

-4%

people in long-term support, 2018/19 to 2024/25 (England +6%)

£14.1m

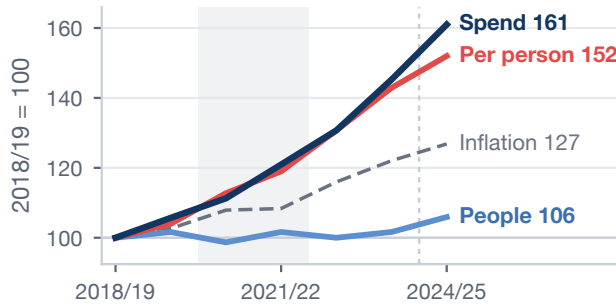
more in 2024/25 than demography and inflation alone predicted

£129m–£156m

in 2030/31 at 2024/25 prices, two paths

01 SPEND, PEOPLE AND SPEND PER PERSON

Adults 18 to 64



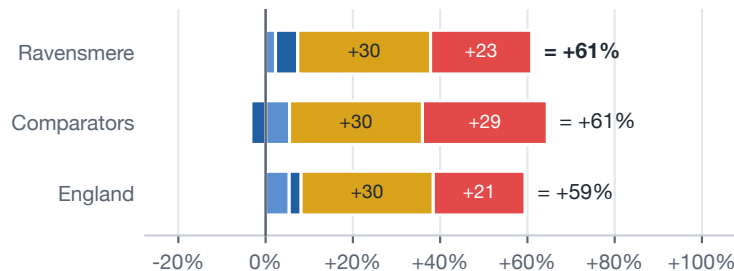
Cash terms, 2018/19 = 100. Grey column: the pandemic years. Dotted line: activity data moves from SALT to client level data.

For those aged 18 to 64, spend rose by 61 per cent, with 6 per cent more people supported and spend per person up 52 per cent, ahead of inflation at 27 per cent. For those aged 65 and over, spend rose by 41 per cent, while 9 per cent fewer people were supported and spend per person up 55 per cent, ahead of inflation at 27 per cent.

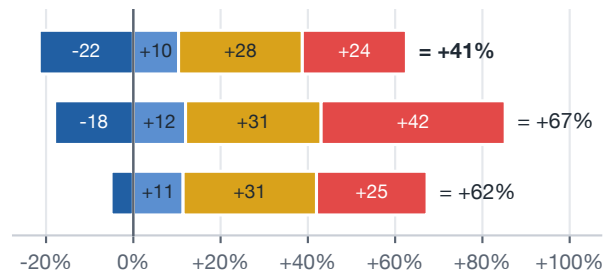
02 WHERE THE GROWTH CAME FROM

Percentage points of the change in spend, 2018/19 to 2024/25, from population, people per 1,000, inflation, real spend per person.

Adults 18 to 64



Adults 65 and over

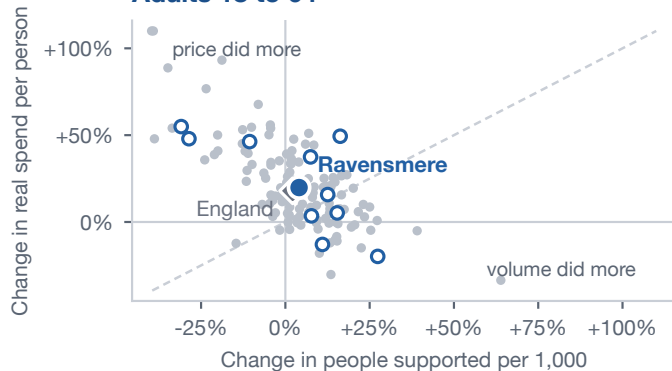


Population growth accounts for 2 points of the 61 per cent rise for those aged 18 to 64 and 10 of the 41 per cent rise for those aged 65 and over. For older people it was more than offset by a fall in the share supported: 17 per cent fewer people per 1,000 aged 65 and over received long-term support. Among working-age adults the share supported rose by 4 per cent, adding 5 points. Real spend per person, the part above inflation, added 23 and 24 points.

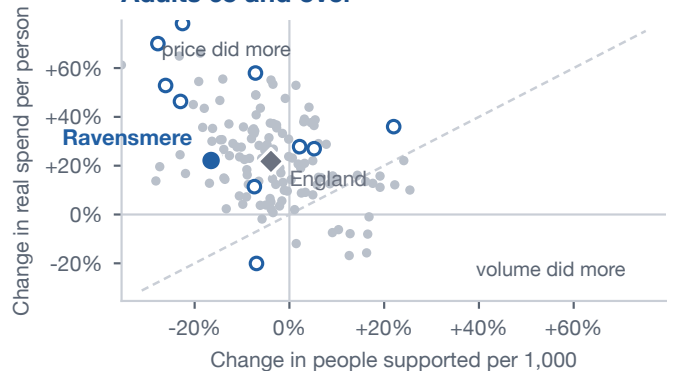
03 EVERY COUNCIL, 2018/19 TO 2024/25

• Ravensmere, ○ its comparators, ◆ England, grey: every other council. Above the dashed line, spend per person did more than the share supported.

Adults 18 to 64



Adults 65 and over



The pattern is national. For those aged 65 and over, real spend per person grew by more than the share supported in 120 of 138 councils, and the share supported fell in 90. For those aged 18 to 64 the same held in 92 of 138. Ravensmere sits on the price side of the line in both age groups.

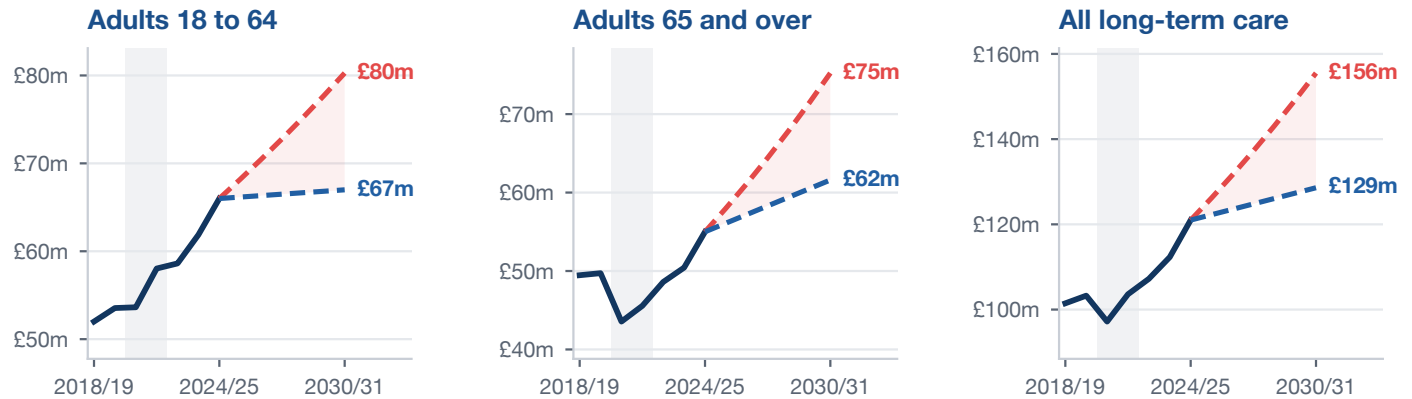


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Applying demographic growth and inflation to the 2018/19 outturn puts Ravensmere's 2024/25 long-term care spend at about £107m. It was £121m, £14.1m (13 per cent) more. For those aged 18 to 64 it was £13.1m short. For those aged 65 and over the uplift landed close (£54m against £55m), but only because a falling share supported cancelled out a rising real cost per person. A forecast that lands close for the wrong reason will not stay close, because the two factors that cancelled need not keep cancelling.

04 TO 2030/31, IN 2024/25 PRICES

Demography only: people per 1,000 and real spend per person held at 2024/25 levels, so spend moves with the projected population. **Recent pace:** the same, with real spend per person rising at its 2018/19 to 2024/25 rate.



In 2024/25 prices, demography alone takes long-term care spend from £121m to about £129m by 2030/31: the population aged 65 and over grows by 12 per cent and that aged 18 to 64 stays about level. If real spend per person keeps its 2018/19 to 2024/25 pace, the figure is about £156m. The £27m between the two paths is the part a demographic uplift does not see.

05 WHAT A FULLER MODEL WOULD ADD

- Existing and new clients modelled separately.** Machine learning on pseudonymised record-level data predicts next year's cost for every person already supported; simulation adds the number and cost of new starters. In a recent county council deployment the twelve-month forecast came within 0.6 per cent of outturn.
- Volume and price by care group and setting.** The split on this page, made for learning disability, mental health, physical support and memory and cognition, and for residential, nursing, home care, supported living and direct payments.
- A range to set the budget against.** A thousand simulated years give a distribution of spend, so the chance of overspending any given budget can be read off, by service line.
- Five years ahead for the MTFP.** Scenario runs for fee rates, the National Living Wage and demand, with prediction intervals in place of two straight lines.

The model, code and methodology are handed over with training, so it stays with the council's own analysts. Validation results are at infoinsight.co.uk/social-care.

06 METHOD AND CAVEATS

Spend is ASC-FR gross current expenditure on long-term care for each age group, in cash, before client contributions and NHS income. People supported are those accessing long-term support at any point in the year. The change in spend is the product of population (ONS mid-year estimates), people supported per 1,000, inflation (HM Treasury GDP deflator) and real spend per person; contributions are shared in proportion to each factor's log change so that they add up. Comparators are the 10 nearest London boroughs, matched on adult population, share of adults aged 65 and over, share aged 85 and over and deprivation (IoD2025 average IMD score): Barnet, Croydon, Enfield, Harrow, Havering, Bexley, Redbridge, Sutton, Kensington and Chelsea, Ealing. The paths to 2030/31 apply ONS 2022-based projections to the 2024/25 position and forecast neither inflation, eligibility nor the care market.

- Ravensmere is not a real council. Its figures are constructed for illustration and describe no council; the comparator, England and every-council figures are as published.
- Activity moved from SALT to client level data in 2024/25 (dotted line). Counts were designed to match, but methods differ; England's count rose by about 3 per cent at the join, and Ravensmere's by 2 per cent. Councils whose count moved by more than a fifth stop at 2023/24 on the every-council chart.
- Spend per person divides a year's spend by everyone supported during it, so it is not the price of a package, and a change in turnover moves it.
- 2020/21 and 2021/22 (shaded) include NHS-funded hospital discharge and lower care home occupancy. Neither end of the window falls in them.
- Inflation here is economy-wide. Care costs follow wages more closely: the National Living Wage rose 46 per cent from April 2018 to April 2024.

07 SOURCES

- Ravensmere: constructed series, not published data. Everything else below is published.
- NHS England and DHSC, Adult Social Care Finance Return (ASC-FR): 2018/19 to 2024/25, gross current expenditure on long-term care, extracted 19 October 2026. OGL v3.0.
- NHS England and DHSC, SALT to 2023/24, client level data from 2024/25: people accessing long-term support during the year (LTS001a), extracted 19 October 2026. OGL v3.0.
- ONS, Mid-year population estimates, via Nomis: mid-2015 to mid-2025, extracted 19 October 2026. OGL v3.0.
- HM Treasury, GDP deflators at market prices, September 2026: financial years, outturn to 2025/26, extracted 19 October 2026. OGL v3.0.
- ONS, Subnational population projections for England, 2022-based: migration category variant, April 2023 boundaries, extracted 19 October 2026. OGL v3.0.
- MHCLG, English Indices of Deprivation 2025, upper-tier summaries: average IMD score, used for the comparator group only, extracted 19 October 2026. OGL v3.0.
- National Living Wage rates: Low Pay Commission, gov.uk. OGL v3.0.