QUESTIONNAIRE TO ASSIST IN THE IDENTIFICATION OF THE COST OF CARE IN CARE HOMES IN DERBY October 2019

Over the past few years, Derby City Council has sought information from Homes to assist its fee setting process. It is proposed that this consultation is carried out again.

All Homes contracted by Derby City Council are invited to respond.

Please answer all questions as fully as possible in order for us to understand the cost of care that you are providing. If you are unable to answer any question, please provide a reason why.

Where supporting information has been requested, please ensure that this is supplied in compliance with GDPR. As such, if any supporting information contains personal details that can identify an individual, please remove or 'black-out' this information. If you are unable to supply the supporting information requested, please provide relevant alternative documents or a reason why this is not available.

Don't hesitate to contact **David Ash on 01332 640408** in the first instance if you need help with the questionnaire.

Please return your questionnaire by 23rd October 2019.

1. HOME INFORMATION

Name of Home:	
Address of Home:	
E mail address	
Home Registration (please tick):	Care Home With Nursing
	Care Home Without Nursing
Number of Registered Beds:	
Are you a: (Please identify)	Sole trader, partnership, limited company, public limited company or other?

2. WHO ACCESSES YOUR HOME?

This information will be used to better understand the capacity within the market and who is commissioning placements.

Specify Date	Nursing	Non Nursing
Total number of available beds		
Number of Beds Currently Occupied		
Number of Beds Vacant		
Number of Beds Occupied by Other Council placements		
Number of Beds Occupied by Private/Self Funders		
Number of Beds Occupied by residents funded by Derby City Council (include FNC cases if nursing care is provided)		
Number of Beds Occupied by residents funded by the NHS - please include CHC cases, winter beds etc.		

3. RECORDED COSTS

The following questions require you to provide information relating to the current year of recorded costs, compared to those anticipated for the following year.

Please use costs for the periods 1 April 2019 – 31 March 2020 and anticipated costs for 1 April 2020 to 31 March 2021.

You can express as either a percentage (%) or monetary value (£) or both.

This will help us to compare information across consistent periods.

3.1 Staffing	2019-2	2019-20		2020-21		nce
_	%	£	%	£	%	£
Direct care staff costs						
Domestic staff costs						
Kitchen staff costs						
Management/administrative staff costs						
Directly employed specialist staff (if applicable) ie nurses/therapists						
Agency						
Total Annual Staff Costs						
Staff clothing						
Staff recruitment (eg advertising/agency finder						
fees)						
Staff training						
Travelling expenses						

3.2 Establishment	2019-20		2020-21		Difference	
	%	£	%	£	%	£
Waste disposal						
Council tax, water and insurance						
Fire equipment and environmental health						
Heat and light						
Cleaning and consumables						
Bedding and linen						
Crockery, cutlery and utensils						
Repairs and renewals						
Funding repairs						
Fixture and fitting replacement						
Service contracts						
Electrical modifications						
Sundry expenses						
Gardening						

3.3 Administrative Overheads	2019-2	2019-20		2020-21		nce
	%	£	%	£	%	£
Office stationery						
Sundry office expenses						
Telephone and communications						
Professional charges						
Registration fees						

3.4 Miscellaneous	2019-20	2020-21	Difference

	%	£	%	£	%	£
Food						
Consumables and equipment						
Medical expenses and care services						

3.5 Occupancy	2018-1	9 2019-20 (to date)		Differe	nce	
Please advise what the average occupancy rates were (either in % terms, or average number of beds)	%	No.	%	No.	%	No.

3.6 Auto enrolment for pensions	
What was the weekly cost per resident per week	£
of these pensions in 2019-20?	
What will be the difference in cost between	£
applying this in 2019-20 to 2020-21?	

Calculate by totalling the annual payments (Employer contribution only <u>not</u> the Employee element) made to the pension scheme divided by 52 weeks and then divided by your average occupancy as at 3.4 above (or National Average occupancy of 90% of registered beds if not available).

4. OTHER COSTS

4.1 National Living Wage	
The National Living Wage (NLW), the statutory n	ninimum for workers aged 25 and over, increase by
4.9% to £8.21 per hour in 2019.	
How many of your staff was affected by this	
change?	
What was the cost <i>per resident</i> of implementing	£
this?	
What would be the impact of any further increase i	n the NLW?

Yes	No	
	Yes	Yes No

4.3 CQC Regulatory Fee			
Will this affect your organisation?	Yes	No	
If yes, what will be the impact?		<u> </u>	
You can find out more about this at:			
https://www.cqc.org.uk/guidance-providers/fees			
inapoliti www.ioqolorgian galaanoo providoloti ooo			

5. SUPPORTING RESIDENTS

Calculate below by using the total weekly number of hours for all staff divided by 37 hours per week (being a full time equivalent) divided by the average occupancy as at 3.4	2018-19	2019-20	Current
Based on a 37 hour full time equivalent, what was your ratio of residents to ALL Staff based on their needs over the last two years?			
Based on a 37 hour full time equivalent, what is your <i>current</i> ratio of residents to ALL staff based on their <i>current</i> needs i.e. using information available from April 2019 to date?			
Based on a 37 hour full time equivalent, what was your ratio of residents to Care and Nursing Staff based on their needs over the last two years?			
Based on a 37 hour full time equivalent, what is your <i>current</i> ratio of residents to Care and Nursing Staff based on their <i>current</i> needs i.e. using information available from April 2019 to date?			

6. NURSING HOMES

Do you have any additional cost pressures as a result of providing nursing care, please list and quantify

Examples include – equipment, staff training, NHS administration requirements, advocacy, additional inspection costs, specialist staff/assessments etc.

ITEM	2019-20	Anticipated Difference 2020-21	
	£	£	£

7. ADDITIONAL COSTS

Please let us know of any other costs that you have incurred in 2019/20 that you had not anticipated and significant increases known for 2020/21?

Please indicate how much was required and whether this was a one off or new recurring cost pressure?

Please include any increases incurred such as for your running costs associated with utilities, food, equipment etc.

Cost heading	Annual cost in 2019/20	Anticipated Cost in 2020/21	Reason

Approximately how old are your current buildings	

8. OTHER FACTORS

What oth consider?	at other factors affecting your costs would you like Derby City Council to sider?			

I declare and confirm that the information I have provided in this questionnaire is accurate and represents an accurate and true reflection of circumstances relating to the operation of the care home/s detailed.

SIGNATURE
NAME
DATE
POSITION
COMPANY/HOME NAME
CONTACT DETAILS
Please return this completed questionnaire with any supporting information to:
David Ash, Commissioning Support Assistant, Peoples Directorate, ASC Brokerage Team, Derby City Council, Corporation Street, Derby, DE1 2FS

THANK YOU FOR YOUR TIME

or by email to david.ash@derby.gov.uk