

QUESTIONNAIRE TO ASSIST IN THE IDENTIFICATION OF THE COST OF STANDARD DOMICILIARY CARE IN DERBY November 2018

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

All Home Care organisations 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** if you need help with the questionnaire.

Please return your questionnaire by 23 November 2018.

1. COMPANY INFORMATION

Name of Company:	
Address of local office:	
Address of Head Office (where applicable)	
E mail address	
Are you a: (Please identify)	Sole trader, partnership, limited company, public limited company or other?

2. WHO ACCESSES YOUR SERVICES?

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

Specify Date	No.
Derby City funded	
Direct Payments	
Self funders	
Total number of Care Packages	

3. STAFF 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 2018 – 31 March 2019 and anticipated costs for 1 April 2019 to 31 March 2020.

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

This will help us to compare information across consistent periods.

Please identify the actual weekly total staff costs against each of the staff groups shown below. This includes Employer's National Insurance costs. Please ensure that evidence is available to substantiate this information if requested.	2018-19		2019-20		Difference	
	%	£	%	£	%	£
Front Line Care Worker						
Management Staff						
Back office/administrative staff						
Agency						
Total Weekly Costs for all staff						
Staff recruitment (eg advertising/agency finder fees)						
Staff training						
Vetting checks						
Uniforms and disposables						
Call monitoring						

Pensions	2018-19	2019-20	Difference
*Weekly cost of staff pensions			

* Calculate this by totalling the annual payments (Employer contribution only not the Employee element) made to the pension scheme divided by 52 weeks.

4. COST PRESSURES

4.1 National Living Wage				
The National Living Wage (NLW), the statutory minimum for workers aged 25 and over, will increase by 4.9% to £8.21 per hour. Rates for younger workers will also increase above inflation and average earnings. This will apply from 1 April 2019 .				
How many of your staff will be affected by this change?				
What is the difference in cost between applying this in 2018-19 to 2019-20?	£			
Were there any other cost rises that took place following the introduction of the national living wage in April 2018 and will these apply in 2019-20?	Yes		No	
If yes, please quantify and/or provide further explanation				

4.2. National Apprenticeship Levy				
Is your organisation affected by this?	Yes		No	
If yes, what impact has this had?				

4.3 CQC Regulatory Fee -			
Will this affect your organisation?	Yes		No
If yes, what will be the impact?			

5. ADDITIONAL COSTS

Please let us know of any other costs that you incurred in 2018/19 that you had not anticipated and significant increases known for 2019/20?

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 2018/19	Anticipated Cost in 2019/20	Reason

What other factors and costs would you like Derby City Council to consider?

.....

.....

.....

.....

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

Date

NAME

DATE

POSITION

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

THANK YOU FOR YOUR TIME