

## Appendix C

### Notes from the consultation events held with Providers

#### Residential & Nursing Care Homes – 4<sup>th</sup> March 2024

- There are interlinked issues – whilst the Council has budgetary issues, would the Council not be better going bankrupt – and tell the Government. Council should pay the fees that Providers are entitled to, and go bust.
- Not having the budget is not Providers responsibility.
- It is not for the Council to set fees, it is up to Providers to set the fees. Providers need to collectively agree to state that they are not prepared to deliver at Council rates.
- Providers would be better being 70% occupied at their own set rates as opposed to taking Sefton Council placements.
- Providers should be setting their fees and saying to the Council that they even take it or not.
- Council has the details through the cost of care report.
- Fees are 30% lower than they should be.
- Providers don't need to send through information as you have it already through cost of care exercises.
- Base rate should be around £300 more now.
- Council should implement gross payments / collect whole fee by 1<sup>st</sup> October 2024.
- 8.02% does not cover wage increase – for example for Dementia Residential category – as wages paid to Staff have to be above National Living Wage – some Staff are being 'poached' by other Local Authority care homes as they are paying Staff more.
- International Recruitment has changed – which will cause Staffing issues in twelve months' time.
- Sefton know all this information already – so no point in Providers submitting full details as they have the information already.
- Sefton will get caught out through commissioning poor quality services – and this will affect Residents and cause them harm.
- No reasonable profit in Council fees – you cannot fill vacancies on these rates.
- Providers may think it better to reduce their bedspaces.

- We have had ten years of different Governments stating that they will deal with Social Care.
- There will be closures – due to viability issues and owners retiring.
- Homes may just not want to take Sefton Council placements.
- You are wanting to rely on Domiciliary Care, but those Providers are also struggling, so care home generally are a huge required resource that need supporting, as otherwise the whole market will collapse.
- In the last few years, just balancing the books has been an absolute nightmare – costs are always increasing / all our bills coming in are increasing.
- We would just like further funding to take the pressure off – otherwise Providers will just exit the market as we have to provide services so cheaply – for example we have to employ Quality Officers which adds to costs.
- Staff leave due to the pressures, which further adds to costs.
- Residents needs have increased and we have to act like Social Workers for Residents – we have to do three times as much work for Residents than we had to do five years ago.
- Consultation process this year has been rushed – meeting today should have been used by Providers to then submit responses.
- Comment in the slide that last year's increases were high was an insult – this year's proposals are nowhere near what they need to be.
- Providers are doing so much more – such as for Residents – and Staff are doing much more work, but it is still not enough to fully meet Residents needs – we would like to employ more Staff but we cannot afford to, and Staff are leaving due to work pressures.
- Cost of living has gone up / everyone wants more money from Providers.
- Homes are all charging top-ups – purely for viability as we are not charities.
- Agree with all comments made – Providers are really struggling, such as around recruitment, but still struggling to get Staff and then retain them – it is a good week when no Staff resign.
- Increase proposed does not even cover wage bill – even if home was full.
- We are businesses and we are here to make a profit.
- We take on additional burdens such as due to Sefton not paying gross.
- We are not getting enough money and we are being set up to fail.
- By setting settings its fees so low it is giving the impression that Providers are just trying to get more money and they are not, as they have to levy a top-up.

- You cannot run a business for twelve months on these proposed fees.
- We are trying to be constructive by us all saying the same things.
- Staff are leaving to work in sectors such as retail as they can get more money.
- We get inappropriate referrals – such as from Social Workers for placements where people are bed-bound / require two to hoist. They are trying to place Residents in some care homes to save money.
- Some care homes are paying £13-£13.50 an hour (£17 at weekends).
- There are issues around Health & Safety issues for care homes – which costs money (can cost £400-£500 per month extra). There are issues around fire precautions.
- Proposed increases will not cover wage increases.
- COVID is over, so now care homes are not being supported – another pandemic may be around the corner and care homes may not be able to support it.
- We have difficulties with getting Social Workers trying to “emotionally blackmail” us about fee rates – including relating to existing placements.
- Issue with 1:1 care arrangements – such as trying to get an uplift to rates paid for this, so it costs us to provide 1:1.
- It’s becoming very difficult to get nursing residents FNC recently that probably equates to why residents are being put forward for residential care, when they actually have nursing needs. Which is adding more pressure to residential care homes.

## **Community Providers – 4<sup>th</sup> March 2024**

### **Community Support**

- No comments

### **Day Care**

- Concerned that this year’s increases are lower than last year – we are still someway behind actual costs. National Living Wage is going up more than the proposal. Our costs are increasing more and this will be provided in a more detailed response.
- Day Care is unique in some ways as it has had 4/5 years where there was no increase – so has in some ways fallen behind.

### **Domiciliary Care**

- Last year a lot of progress was made to meet actual cost of care exercise findings. Concern is that proposed uplift does not match increase in costs expected in last twelve months. Council may seek to 'claw back' required cost increases identified in the cost of care exercise.

### **Extra Care**

- No comments.

### **ISF**

- No comments.

### **Supported Living**

- No increase to non-Staff cost element of the rate is an issue.
- Sleep-in provision – does the Council require Providers to pay NLW for it.
- Will Staff being paid Real Living Wage be a contractual requirement – not seen any contract variations etc come through to Providers.
- We are paying Real Living Wage, but this is at a cost to our organisation and is not sustained.
- It was hoped that progress on fee increases would be sustained, but this is not the case.
- Other Liverpool City Regions Local Authorities are giving more – such as 12%
- We don't have ongoing engagement during the year on fee rates which is needed.
- Agree with comments around the issue with non-Staff costs not being increased. CPI is still increasing.
- National Insurance costs are higher.
- We are having to commit to digitalisation which is also increasing costs.
- We have had to incur additional costs – such as insurance and utilities – so non-Staff cost increases is an issue as it creates a cost pressure / impact on Provider finances.
- Things are tight already / cashflow.
- There are recruitment issues – as we are competing with care homes and domiciliary care.
- Agree with the points Providers have made on this call.
- There are increases to training costs – such as Oliver McGowan training.

- As Providers we need more engagement – including to better understand Council budget pressures, but also Providers cost pressures, so that the Council can discuss upcoming cost pressures they are facing.