

Residential and Nursing Care Proposed Inflationary Increase
2014/15 – Summary of Consultation Outcomes

1) Survey Responses - Summary Raw Data

Overall response rate: 20% (16 out of 79 Care Homes)

Is the Home: Residential care or Nursing care?

	No. of homes	%
Nursing care	5	31.25%
Residential care	11	68.75%
Total	16	100

Do you agree with our proposal of awarding a 1% inflationary increase for 2014/15 (applicable to all packages below £650 per week)?

	No. of homes	%
Yes	0	0
No	16	100
Total	16	100

2) Survey Responses - Summary of Headline Trends

Overall:

79 Providers were consulted, of which a total of 16 responses were received (20.25%). All 16 providers responding do not agree with the 1% uplift.

3) Survey Responses - Summary of Free Text Narrative

*The following summarises the main issues raised in the narrative responses of providers to the proposal to award a 1% inflationary increase in 2014/15. Issues or concerns are shown in **black**; positive comments are in **green**.*

What impact will the proposal for a 1% inflationary increase for 2014/15 (packages below £650 per week) have:

a) On your organisation as provider?

- Reduction in staff hours
- Additional financial strain/financial ruin
- Not in line with inflation
- Does not cover costs, including environment, maintenance,
- Cost of living increase, staffing costs, minimum wage

b) On the delivery of services?

- Limit re-investment into care staff
- Limited opportunity to make efficiency savings through control of wages.
- Staffing levels
- Reducing facilities/redecorating investment
- Impact on environment improvements/ new equipment/ non essential aids
- Financial viability

Appendix D – Summary of Consultation Responses – 1% Inflation

- New developments reduced
- Unable to deliver more person centred care
- Things to do will be rationed or deferred.
- Failure to adequately reward staff
- Direct contact will staff will not be affected as staff levels will remain the same

Are there any key risks arising from this proposal that Nottingham City Council need to be aware of?

- Possible closure
- Reduced quality/provision
- Increase in the cost of care for residents that need relocating
- Serious impact on quality of care
- Risks are manageable but long term impact will eventually impact service
- Impact on staff skills if subsidised training no longer available
- Tired looking property
- Shrinking provision of wholly publicly funded residents
- Inability to provide excellent and consistent standards of care

What actions could be taken to mitigate the impact of any risks:

a) By you as provider?

- Reduce staffing
- Reduce manager salaries
- Further cuts can only be done at the expense of the quality of care delivered to residents
- Balance between highest quality and lowest cost
- Negotiate block contracted beds
- Supply of goods/services through competitive tender process
- Prioritise money to essential activities
- Very little – little scope to cut costs
- Unfair increase in fees to residents not supported by LA.
- Continue to seek opportunities for efficiency
- Reduce staff turnover
- Staff incentives rather than a fixed pay rate – reward for effort
- Working closely with referring agencies
- Staff focus on value for money approach
- Fees negotiated on individual bases for complex needs

b) By Nottingham City Council or others?

- Increase ancillary service
- Subsidised staff training
- Review urgently proposed increase in fees
- Request an annual inflationary increase of 3.2% from 1st April 2014
- Make more money available to cover increase of costs
- Take into consideration reduced fee increases when undertaking Quality Monitoring Visits
- Switch funding from NHS to Social Services
- Agree appropriate levels of funding in line with time/quality of care given
- Loan equipment for longer
- Speed up process for payments
- Improve NCC contracts and finance processes