

# Independent Care Matters

the newsletter for independent care providers in York  
and North Yorkshire

## More money needed for care

**I**CG is to engage with North Yorkshire County Council and with City of York Council through new working parties to negotiate an agreed method to calculate and pay a fair system of fees.

### In York (CYC)

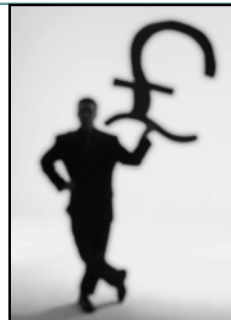
The move follows CYC's agreement to improve its increase for this year from its original 1.5% offer, across the board, in March. Following a protest led by ICG and supported by care providers the Council raised the amount of increase for home care (domiciliary) by 4% to 5.5%. For care homes CYC agreed to put in a further £300k to raise the fee rate paid on existing 'aged contracts' to £418 for nursing home places and £310 for residential contracts per week. The payment of lower fees for existing clients who receive the same standard of care has been a longstanding source of grievance for care providers. For new placements CYC now pays £430 for nursing places and £320 for residential places—so there is still a gap, though this has been lessened.

### In North Yorkshire (NYCC)

This year NYCC agreed to raise its fee rate by 3% and to raise that of aged contracts in line with the new basic price. This means that in North Yorkshire the fee for nursing placements is now £417 and for residential care ranges from £294.60 (basic) to £321.40 (enhanced). At ICG's instigation NYCC agreed to award an extra 0.5% to domiciliary care. NYCC pays less than CYC.

### ICG's view

We are glad to have made some progress on fees with both authorities but as the latest Joseph Rowntree Foundation report shows (see page 5) there remains a gap to be bridged between what local authorities pay and the true cost of providing high quality care for vulnerable people. We intend to keep up the pressure until a fair level of settlement is reached.



Issue 1

Summer 2004



### Inside this issue:

Welcome message from ICG Chair	2
Getting together	2
Recourse to law over fees	3
NYCC and electronic invoicing	3
ICG Survey results	4
JRF Report	5
Direct Payments - concerns	6
Your letters	7
ICG Board	8

## Legal challenges

Within neighbouring local authority areas of Durham and Leeds, care providers have in recent times chosen to mount a legal challenge to their Councils. Individual providers notified the council of their fee requirements based upon their own assessment rather than the Council's designated fee. Each then invoiced the council for the difference and proceeded to court action when the extra money was not forthcoming. In Durham providers raised

£48,000 for legal fees. In each case the councils negotiated an improved settlement before the court case.

ICG favours negotiation. However, we are in contact with Durham and Leeds and are keeping the situation under review. (See page 3)

Tell us your views.

## Independent Care Group strengthens its organisation



Mike Padgham  
Chair of ICG

**W**elcome to the first edition of the Independent Care Group newsletter. I am very pleased to tell you that we are strengthening our organisation to enable us to provide an improved service to members.

At the end of last year

five new (voluntary) Directors joined the ICG Board. Each brings a wealth of experience gained from running their own care provider businesses—both care homes and domiciliary care services. For more information on the Board—see the back page.

We have also appointed a new Development Director, **Keren Wilson**, to take forward an ambitious action plan to make ICG more effective. This includes setting up new communications channels to allow us to disseminate information - like this newsletter.

Through **Independent Care Matters** we will bring you useful local information to keep you

abreast of local issues. We also have a letters page so we hope you will write to us to raise items of interest and concern.



Keren Wilson  
Development Director

If you have not done so already, I invite you to join the ICG and to help to make it your association.

**Mike Padgham**  
Chair

## Getting together

Managing a care business can be quite an isolating experience.

**Maggie Knowles**, Manager of Fulford Nursing Home, York has recognised this. She says, 'I have been in post for about eight months and I have not found a way of networking with others in the care business. I would like to be able to chat about things like staffing and inspections with peo-

ple in the same position. This can be quite a lonely job.'

ICG can help. It has been rolling out a programme of local meetings across the area. These meetings give people an opportunity to raise issues and concerns, to hear about the work of ICG and to network with other care providers.

The first meetings have been held in Scarborough and Harrogate.

The York meeting is at the end of July. Further dates are planned for Skipton and Selby. Follow up meetings will be held every three months. Invitations are issued.

If your business is not near any of those centres and you would like to get involved in holding a meeting for care providers in your locality then please contact us and we'd be glad to help.

**Contact ICG on 01423 816 582**

# Recourse to law over fees

ICG supports the principle that good quality care must be paid for at a fair price. It recognises the difficulties, however, in persuading local authorities to pay a fair price for the service provided. ICG supports care providers in their efforts to be paid a realistic price for the service they give to people in their care.



The greatest problem faced by the care market is inadequate fees paid to care providers by local authorities for the care of vulnerable people. ICG understands that this has forced some care providers to take various local authorities to court across the country in order to achieve a fair price for care.

ICG supports one such provider in our area, **Yorkshire Care Developments Ltd** in its current litigation battle with North Yorkshire County Council over payment of a fair market price for the quality of its care.

ICG calls on both the Government and local authorities to address the issue of inadequate fee levels without delay before the social care market collapses.

## NYCC and electronic invoicing



**ICG has taken up the issue of the introduction of electronic invoicing with NYCC on behalf of members.**

Members complained about a letter sent out in June to all domiciliary care providers (in the first instance) telling them about NYCC's plan to introduce electronic invoicing. The letter was written in coercive terms and proposed a cost to providers of £500 per annum with an additional charge for each transaction.

ICG then wrote to all domiciliary care providers to gauge the response. Many people were upset about the lack of consultation. Comments included:

- 'I was unhappy with the original letter, the wording and the threatening tone it used'

- 'We do not have the IT capacity'

**'NYCC has entered into this arrangement for the benefit of its own organisation, therefore it should pay the associated cost.'**

- 'Considering how tight our budgets are, asking us to pay £500 plus per year to receive monies that are rightfully ours is an insult'
- 'Is it not enough that we have to fight for appropriate fee levels ... without having additional costs heaped upon us.'

ICG is in favour of embracing new technology and more efficient working practices.

However, many domiciliary care businesses are small businesses which have to issue a large number of invoices for small amounts; therefore the new system will cost them money.

For a large business we can see that there can be advantages.

ICG is asking NYCC to look at its proposal again.

For an update on negotiations call **ICG on 01423 816 582**



## Free help to develop your staff

Would you like to know how best to develop your staff and how to get access to funding?

There is a new free service on offer. A social care broker will visit you and help you put in place a workforce development plan which could help your staff become more effective.

For more details call the Social Care Brokerage Service on  
**01904 520 170**

## ICG Survey of care homes— what you have told us

98% of care homes say they do not consider fee rates to be adequate according to an ICG survey conducted earlier this year.

The survey also reveals a significant feeling of pessimism within the sector with more than 50% of care homes saying that they do not believe they will be in business in three years time. Care homes with a larger proportion of private clients were more confident.

A further 97% says that we need a commitment from local authorities to work towards a fair price for care using a model such as the Joseph Rowntree Foundation toolkit ([see page 5](#)).

**98%**  
unhappy  
with fees

### Advertisement



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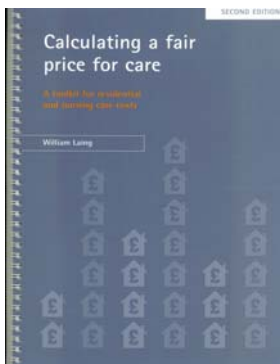
**Telephone now on 0191 373 5099 or 0773 484 7807  
Ask for Nick Todd**

**New Joseph Rowntree Foundation Report shows that care homes remain under funded**

Calculations in the new Joseph Rowntree Foundation Report by William Laing show that council fees are now close to the rate appropriate for care homes meeting the minimum level of facilities for existing premises set by the revised National Minimum Standards a year ago.

Across England the average gap between a 'fair fee' for homes meeting the higher standard and the actual fees that councils are prepared to pay is £127 per week for nursing care and £83 per

week for personal care. The report states 'a large number of local authorities continue to maintain fee rates at levels that undermine the stability of their care home markets. Inadequate fee levels for state funded clients have been a major factor in the recent years' decline in care home capacity.'



JRF Report  
Second Edition by William Laing of Laing & Buisson

**\*Around two thirds of all people coming into nursing homes are paid for by their local authority.**



# Who cares about your care fees?

*We do!*

Moving into a care home is an important step. NHFA can provide you with the advice and information you may need when making important and sometimes difficult decisions.

NHFA can work with you, the care provider, giving advice and information for you and your prospective residents:

- How finance can be arranged to meet care costs over the long term
- Entitlements to benefits from the Local authority, health authority or DWP Benefits Agency to assist with the funding
- What legal matters may need attention
- Access to our advice line for care providers

NHFA Ltd is an independent organisation and all advice is free.

Over the last 12 years NHFA has helped thousands of individuals and families gain peace of mind in meeting care costs whilst also preserving capital, and with that independence and dignity.

To discuss the service further contact Diana Roberts on 01242 253297.  
For an information pack call our advice line on the number below.



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## Direct Payments—concerns over safeguards

**ICG has been raising the issue of the protection of vulnerable adults with its local authority contacts.**

It is our belief that more protection is needed for the service user when direct payments are made in lieu of social service provisions.

Currently, if a service user receiving direct payments chooses a registered care provider then in accordance with Government

regulations the person who comes into their home to give help will have been trained appropriately and will have been checked out by the Criminal Record Bureau (CRB).

If however, a service user employs a carer independently, no such safeguards are in place. We have been told of a case where a vulnerable adult is employing someone with a criminal record at the same time as commissioning

work from an ICG member's domiciliary care agency.

This not only places the service user at risk but also has implications for the registered care provider.

The issue has also been drawn to the attention of Health Minister, Dr Stephen Ladyman.

### Minimum Wage

**From October this year the minimum wage will increase to the following:**

**18–21 year olds will go up to £4.10**

**Over 21 years old will go up to £4.85**

### Money for training

**Are you part of an employer-led partnership? If not we urge you to join now in order to get money for training through TOPSS. To find out more:**

**call Jeyda Williams on 01904 520 170**

### Reducing Falls

Selby and York PCT is offering free training for home carers (within its area) to help them identify fall risk factors.

Similar training for care home staff is being planned.

**For more information, contact Sue Vicary on 01904 724 119**

# Your letters ...

## Moving story ...

Dear ICG

I think this issue may be of interest to you and other members. I run a domiciliary care business in York and I'm having to move our office due to the fact that the landlord is seeking planning permission to convert the offices to residential accommodation.

I contacted our local branch of CSCI to let them know and ask for guidance on the procedures and they informed me that I would have to do a completely new registration. I reminded them that I was already registered and have the certificate but that was not enough. I had to go through the whole procedure again—new forms, new CRB checks etc. plus the full registration fee of £1,400.

We paid £1,400 last year then another £900 two weeks ago for the coming year. Had I been aware that I had to go through the whole procedure I may have done things differently. How can they ask us to do this? Nothing is changing at all except our address. I could understand that they want to do another site visit, even at minimal cost, but not this.

We are all supposed to be working in partnership to ensure that standards are upheld. We think they are excellent and appear to be working really well, but this is bureaucracy gone mad. This money and time should be spent on training not re-registering to this level for the sake of change of address. I would like to hear from anyone with a similar experience.

**Denise Wells**

**Managing Director, York Helpers**

**ICG has written to CSCI to ask:**

**If this is the rule, why is it not better publicised? And could a simpler, less bureaucratic, more cost effective solution not be found?**



Dear ICG

**I would like to draw attention to the problems of getting patients receiving nursing care reassessed to show that their care needs have increased.**

When someone has been in a nursing home for some years the amount of care they need and therefore the amount of nursing hours may increase significantly. This means that the cost of their care increases and we need the local authority to come and re-assess their needs in order to ensure that we are paid at the rate prescribed for a higher level of care. Two things are hindering this from happening. One is that the form provided by the local authority for homes to apply for re-assessment is inappropriate. It appears to be aimed at people living in their own homes and asks questions like 'are you able to collect your own pension?' Secondly, the delay in the reassessment being carried out causes the nursing home real problems. In our case, we have had to wait nine months to have one of our patients re-assessed.

The fact that annual reviews have not been carried out by the council, in accordance with our contract, has not helped.

Would ICG look into this please?

**Angie Jackson**  
**Ashfield Court, Harrogate.**

**ICG will take this up with NYCC**

## Dear ICG—Can anything be done about excessive red tape?

Take my experience with CSCI over registration for my Domiciliary Care Agency: after I was registered for the first time in December 2003 I was advised by my accountant to operate as a Limited Company. I thought it would be a simple task for CSCI to manually add 'Ltd' to all the documentation as I was newly registered.

However, the Inspectorate informed me that I needed to re-apply as a new agency and send a further cheque to register again and since there had been a fee increase to send a further cheque. I had to complete all the documentation again and may have to pay again for two referees (e.g. s). After 5 months, I am still waiting for confirmation. Surely, adding 'Ltd' to all existing documentation is a minor clerical task? I may also be asked to go through the interview process again.

Red Tape—tell me about it!!

**Christine Mitchell**

**Oakville Nursing Home & Domiciliary Care Agency**

**ICG will raise this issue with CSCI. Do you think it is reasonable?**



## Independent Care Group



The voice of independent care providers in York and N Yorkshire

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**Independent Care Group**  
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Harrogate  
HG2 8QP.

ICG represents independent care providers in York and North Yorkshire including care home providers for all client groups, domiciliary care agencies and extra care house providers, in the private and voluntary parts of the independent sector.

It has two main objectives:

- To provide a central forum for providers of care to identify, consider and act upon areas of concern collectively
- To work with statutory agencies so that the best possible environment and support is provided for vulnerable people.

With this issue—look out for the ICG special offer on a **Care Home Quality Management System** specifically designed to help care homes meet all the requirements of the Care Standards. It is particularly suitable for small and medium sized care homes.

## The ICG Board of Directors

The ICG Directors all run their own care businesses in York and North Yorkshire.

Their businesses range from small family run care homes for elderly people to larger care businesses, from care for vulnerable adults in small apartments and care homes, to domiciliary care agencies which send carers into people's own homes.

**Board members work for ICG on a purely voluntary basis.**



Some members of the ICG Board (back row from left) Jim Lawson, Mike Padgham (Chair), Richard Inman (Co Sec) John Fisher, (front row) Keith Ludlam (Vice Chair), Tony Conroy and Gill Gallagher.

Not pictured are Karen Shann, Phil Burgan, Harry Larcombe, Alan Summarsell and Andrea Clark.

Without the support of the Board, ICG would cease to exist.