

- 1) Please explain the process and provide key dates for engaging with care home providers between now and March 2023 to discuss, review and understand the findings of the Fair Cost of Care exercise and to take providers through the response submitted to the DHSC on the 14<sup>th</sup> October 2022.

The Council has actively engaged with local care home partners throughout the Fair Cost of Care process.

The Council will also recommence its annual fee consultation and engagement process with local care home providers from early December 2022, building on the Fair Cost of Care exercise.

The process will allow providers to update their Fair Cost of Care submissions and provide further information, where appropriate, as well as encouraging responses from providers who were not able to submit information, in order to get a more representative understanding of cost.

The process will run through to March 2023, when 23/24 fee rates will be considered by the Council's Cabinet.

- 2) Care England is happy to support all local authorities to engage with providers and to meet the openness and transparency obligations of both parties as stated in the Market Sustainability Guidance and will continue to lobby central government for the funding needed for all local authorities to meet its Care Act obligations. Please state any support you feel Care England can offer your authority to assist care home providers this winter to accept new referrals from the local authority and NHS.

No support required from Care England at this time.

- 3) Please detail how the local authority share of the £162m allocated to the fair cost of care process issued with this year's local authority funding settlement for 2022/23 was spent, or will be spent, during the period 2022/23. Please state the amount received and what funds were allocated to, or will be allocated/paid to 65+ care homes.

£0.74m has been allocated to 65+ care homes in 2022/23 to support market sustainability.

- 4) Care England collects annual average care home fees for residential and nursing care on an annual basis. Please provide the average 2021/22 external provider fee rates for 65+ care homes with and without nursing per resident per week. For ease, Care England will accept the same values or calculation methodology as reported in Annex A of the Fair Cost of Care template (row 136) as submitted to the DHSC on 14 October 2022 to make provision easier for the local authority.

£541 for care homes without nursing and £585 for care homes with nursing (excluding Funded Nursing care).

Please note that this represents an average fee and only for provision deemed in scope of the national Fair Cost of Care exercise.

- 5) Please provide the average 2022/23 external provider fee rates for 65+ care homes with and without nursing per resident per week so far, for this financial year. For ease, Care England will accept the same values or calculation methodology as reported in Annex A of the Fair Cost of Care template (row 137) as submitted to the DHSC on 14 October 2022 to make provision easier for the local authority.

£581 for care homes without nursing and £628 for care homes with nursing (excluding Funded Nursing care).

Please note that this represents an average fee and only for provision deemed in scope of the national Fair Cost of Care exercise.

- 6) Care England wish to understand the authority's current cost of care assumptions and would ask for the latest cost of care data to be provided. For ease, Care England will accept the total fair cost of care median values for 65+ Residential, Residential Enhanced, Nursing and Nursing Enhanced as at April 2022 as reported on Annex A of the Fair Cost of Care template (row 71) as submitted to the DHSC on the 14<sup>th</sup> October 2022 to make provision easier for the local authority.

Local work to understand the current and future cost of care is ongoing with the local market. This includes the opportunity for local providers who were not able to submit information originally, to provide cost information. This is to help ensure the information received is as representative as possible of the true cost of providing care locally.