

Cabinet Member for Adults and Health	Ref No: AH14 (18/19)
February 2019	Key Decision: Yes
Care Homes & Care Services: Usual Maximum Rates & Fees for Adult Social Care	Part I
Report by Executive Director Children, Adults, Families, Health & Education and Director Adults Operations	Electoral Division(s):All
<p>Summary</p> <p>Rates and fees paid to independent providers of adults' social care provision in the community and in residential and nursing homes are subject to annual review.</p> <p>The County Council has earmarked funding in its budget for 2019/20, which covers both the effect of inflation and the increase in the National Living Wage that will apply from 1 April 2019. The proposals outlined below utilise this funding to support the sustainability of the care market which enable the County Council to meet its statutory obligations under the Care Act and ensure there is sufficiency of supply to meet the needs of adults eligible for care funded by the local authority.</p> <p>This report sets out proposals for increases in a range of fees and rates and the factors considered in setting those fees and rates.</p>	
<p>West Sussex Plan: Policy Impact and Context</p> <p>Independence in Later Life and a Prosperous Place are the two priorities supported by this paper; in terms of recognising the cost of delivering services to support individuals eligible for services, and paying rates and fees that contribute to creating sustainable businesses and attracting new entrants into the West Sussex care market.</p>	
<p>Financial Impact</p> <p>The 2019/20 Adults and Health budget includes funding of £8.2m for the effect of the proposals in this report, of which £0.6m will be met by the Clinical Commissioning Groups in West Sussex because of the pooled budget for learning disabilities.</p>	
<p>Recommendations</p> <p>That the Cabinet Member for Adults and Health agrees:</p> <p>Uplifts that will apply to care services funded by West Sussex County Council Adult Operations from April 2019, as set out in Appendix 1 and detailed within this report.</p>	

PROPOSAL

1. Background and Context

1.1 West Sussex County Council through its department of Childrens, Adults, Families, Health and Education commissions independent care providers to provide care and support services to meet the assessed needs of eligible adults at a fee agreed with those providers.

1.2 In its October 2018 *State of Health Care and Adult Social Care in England 2017-18* report, the Care Quality Commission (CQC) stated that 'the adult social care market remains fragile, with providers continuing to close or cease to trade and with contracts being handed back to local authorities. Two years ago, we warned that social care was 'approaching a tipping point' – as unmet need continues to rise, this tipping point has already been reached for some people who are not getting the care they need'. In Adult Social Care vacancy rates in all regions in 2017/18 were highest for the regulated professions that include registered nurses, allied health professionals and social workers. They reached 16% in the East of England and 15% in London. Vacancy and turnover rates for all staff groups are generally higher in domiciliary care agencies than in care homes. At a meeting in January, care providers in West Sussex (representing learning disability and older people services) shared they are experiencing difficulty in recruiting staff and increasing difficulty in retaining staff due to the increasingly complex nature of the support needs of individuals requiring care.

The report recognises that these workforce challenges are set against a backdrop of ever increasing need for care. Demand is rising inexorably, not only from an ageing population but from the increasing number of people living with complex, chronic or multiple conditions. The capacity of adult social care provision continues to be very constrained: the number of care home beds dropped very slightly in the year. This is also true in West Sussex, according to CQC data there are 3 fewer nursing homes and 1 less care home registered in West Sussex in December 2018 compared with December 2017, however we have experienced a greater number of closures than the change reflected in CQC registrations. Conversely there has been an increase in West Sussex of registered domiciliary care offices over the same period, increasing from 145 to 153. However although the number of organisations continues to grow there are job vacancies across the workforce and negligible increase in capacity, with the Council experiencing hand backs. The impact of reducing supply and increasing demand will reflect in the fees that the County Council will need to pay.

1.3 Independent providers also offer care services to people who will be paying for care themselves. In West Sussex, the proportion of people aged over 65 funding their own care is much higher than those funded by the public purse (around 55% for registered services compared with 33-35% funded by the Council, and the balance, 10-12%, purchased by other local authorities and health); the competition for provision that this creates has a significant impact on the level of the fee that the County Council will need to pay to secure care services. That competition is intensifying and is adding to price pressure, this can be evidenced partly by a 20% increase in the number of

individually agreed rates paid by the Council between April 2018 and December 2018. There remains the argument that private funders subsidise the cost of local authority placements.

- 1.4 The overriding priority when commissioning care is to ensure sufficiency of supply of quality care. Under the Care Act 2014 a local authority has a duty to ensure sustainability of the care market and to ensure that there is diversity and quality in supply. Providers are autonomous businesses responsible for employing, training and setting pay and terms and conditions for their own workforces. The County Council has to set fees that cover the legitimate costs of delivering the service and make a fair return to support the business to be sustainable.
- 1.5 However, despite these factors having an upward influence on fees for care, local authorities must comply with related public law duties; which include ensuring that the funding available to the local authority is used to meet the needs of the entire local population. The County Council, therefore, has to agree fees with providers which are affordable to the public purse and take into reasonable consideration its own finances and budgetary position, alongside those of the market.
- 1.6 Annually, commissioners undertake a review of the rates, fees and charges it pays to independent providers of adult social care based in West Sussex. In addition to statutory and market considerations, commissioners have also considered other factors that include:
 - Contract clauses on price revision and annual inflation.
 - Pressures on providers including (but not limited to) statutory obligations, paying the national living wage, sleep-in costs (predominantly Learning Disabilities supported housing and residential services), auto enrolment of pensions and increased regulatory costs (CQC).
 - Intelligence from the market gained through provider forums, meetings with individual providers, representations from providers and market reports that inform relative ease of commissioning at current rates and the impact of uplifts on the market.
 - Private rates paid in West Sussex and what is a fair 'public' rate/fee to pay, taking account of guides (for example) on minimum rates.
 - Response from West Sussex Partners in Care (the local care association) and representations from other providers on pressures and expectations of the market, difficulties in recruiting and increasingly the difficulty in retaining staff against a backdrop of increased regulation and complexity of need.
- 1.7 This report excludes the Shaw Healthcare Contract and the Reablement Contract, since changes in their costs are governed by the indexation provisions specified in those agreements

2. Proposal Details

The proposals set out below are to bring a level of stability to the care market in West Sussex, and to maintain the County Council's market position in 2019/20 as a prelude to a greater root-and-branch review for 2020/21;

this will be informed both by market insight and our strategic intentions particularly in relation to an increased focus on community led support and embedding prevention within the Adults' commissioning intentions and the operational delivery model within Adults Social Care.

2.1 Summary

2.1.1 For the County Council to ensure both sufficiency and quality of supply it accepts that the rates at which it purchases care will need to rise. The core of its approach takes into account market insight about the relative proportions of provider spending which are accounted for by staffing costs and other types of expenditure. Since care is a relatively low-paid sector, the increase in the National Living Wage from 1st April (4.85%) is used as a proxy for pay inflation. A further general inflationary increase is allowed for other costs. The results initially produced were subject to a process of review and refinement, which was informed by an assessment of the geographical and demographic pressures by the relevant commissioning managers and subsequent discussions with their peers who commission for different customer groups and services. Other factors such as commissioning intentions, market sustainability, recruitment and retention, have also been considered as part of an overriding purpose to maximise the impact of the £8.2m which is available in the 2019/20 budget for the proposals that are subject of this report.

2.1.2 The recommendations for fees and rates for 2019/20 fall into a range of increases to apply from April 2019 (dates between 1st and 8th) as follows:

- a) increase by 2.1 %
- b) increase by 3%
- c) increase by 4%
- d) increase by 4.15%

2.1 Increase of 2.1%

2.2.1 Direct Payment local allocation. Provision will be made to set aside a sum equivalent to an average 2.1% increase in local allocations for Direct Payments in line with the December Consumer Price Index. As in previous years this will be managed by operational teams with individual customer uplifts based on the outcome of the annual care reassessment rather than being applied automatically. The rationale for this is that Direct Payments are used to support individuals in a range of ways, commissioning a range of goods, services and support meaning that there is no as clear method or set of indices that can be applied to arrive at a percentage increase i.e. no clear split between pay and non-pay etc.

To increase the allocation into local budgets by a greater sum than 2.1% would not take account of the level of accruals, nor would it consider the opportunity that community led support presents; the recommended approach enables targeted support that will make better use of the available resources.

2.2 Increase of 3%

- 2.2.1 Day care. The proportion of staff costs in day care services relative to other service costs is evidenced to be lower particularly when compared to other community based services, such as domiciliary care. Therefore the impact of National Living Wage is likely to be less on the overall service cost, however as commissioners increasingly focus on initiatives supporting the 'prevention agenda' services such as day care fall within this remit and we would want services to consider how they can evolve to integrate with, for example, models of community led support. The proposal is for 3% uplift.
- 2.2.2 Domiciliary Care. The County Council remains the single biggest purchaser of care and support at home, albeit that it only purchases around 34% of the domiciliary care available in West Sussex; over 55% of individuals fund their own care and support at home which has an impact on the attractiveness of the Council as a customer and the price providers can command.
- 2.2.2.1 For the last three years, rates for commissioned domiciliary care have been uplifted by applying a mix of indices that take account of national living wage and by CPI which has resulted in compound increase of over 10% in uplifts across three years.
- 2.2.2.2 The average hourly rate paid for commissioned domiciliary care is above the UKHCA minimum cost of care of £18.01. A few providers charge less than the minimum costs of care. There are opportunities for individual providers to request an increase in their contracted rates in response to unforeseen or exceptional change in market factors or their circumstances which has led to a significant change in their costs; where requested this is dealt with outside the annual uplift process.
- 2.2.2.3 Taking those considerations into account, the recommendation is to increase the rates by 3%, based on a mix of KA5H (average weekly earnings) and Consumer Price Index (CPI). The increase will apply from the Sunday after the new financial year, 7th April 2019.
- 2.2.2.4 During 2019/20 commissioners will be exploring approaches to rates and charges for domiciliary care, as part of the commissioning activity to secure alternative arrangements for community based care and support services. The Council will be consulting with the market on the commissioning intentions, approach and commissioning activity.
- 2.2.3. Extra Care. The benefits of extra care housing are recognised in supporting individuals to remain in their own 'home' for longer than is currently possible in the wider community. Given the similarities of extra care housing and domiciliary care, not least the requirement for a registered provider of personal care to deliver planned episodes of care and support in accordance with a support plan (rather than a "wrap around" service), the recommended increase is in line with that proposed for domiciliary care.
- 2.2.3.1 There was a significant increase in the average rate paid for extra care as a result of tendering in 2017, these rates are proportionately lower than average domiciliary care rates because providers do not have to account

for travel time and costs as the care is delivered on one site; awarding the same increase as in domiciliary care would maintain the differential, therefore the recommendation is for an increase of 3%.

2.2.3.2 Note there will be a half year effect on the budget as the increase will be applied in October 2019, in accordance with the terms of the contract.

2.2.4 Shared Lives. These services are both commissioned from independent shared lives providers and directly provided by the Council. Shared Lives is seen as a critical element in a range of accommodation based services providing highly personalised care. The proposed uplift is 3%.

2.2.4.1 The exception to this is the outreach provision within Shared Lives, where an hourly rate is paid to a small number of Shared Lives carers to provide outreach support. The cost of commissioning this service is significantly higher when compared to similar models of support. There are no plans to expand this element of the provision.

2.3 Increase of 4%

2.3.1 Usual Maximum Rates for Care Homes and Care Homes with Nursing. The predominant focus for homes paid usual maximum rates (in West Sussex) is to support people over the age of 65 due to physical frailty, dementia or the requirement for nursing, however in more recent years individuals being referred to these services have an increased level of dependency and more complex conditions.

2.3.1.1 In West Sussex, although the Council remains the single biggest purchaser commissioning around 30% of available beds in the market, self-funders purchase (the majority) over 54% of available beds with the balance bought by other local authorities the NHS. This puts additional pressure on the County Council when setting fees as, in essence, it is competing with self-funders who generally providers favour as they often have lower support needs and are in a position to pay fees at a higher rate. Demand is increasing at a time when supply is reducing, with nursing beds in particular becoming scarce. In the preceding 12 months ending January 2019 there were 8 home closures affecting older people services, reducing market capacity by over 250 beds (a mix of temporary and permanent reduction). There continues to be a high reliance on the use of agency nurses and care workers, this significantly increases providers operating costs.

2.3.1.2 The proposal is to increase usual maximum rates by 4%, recognising pressures on providers related to recruitment, retention and finances and to continue to reduce the gap between the rate paid by the Council and those paid by self-funders.

2.3.1.3 The usual maximum rates that will be paid in 2019/20 are shown in Appendix 1.

2.3.2 Individually agreed rates for all customer groups. Rates for a significant number of customers are based on individual need i.e. services the County Council commissions at individually agreed rates. All residential and nursing

placements for Learning Disability and the majority of those for Mental Health and Physical and Sensory Impairment are agreed rates, as they are negotiated with providers based on the individual nature and needs of those clients. The County Council is the majority purchaser of these types of services and therefore has a greater commissioning responsibility in considering the impact of any increase on these services sustainability and the resulting quality of care. In the last two years commissioners have seen a 75% increase in placements at individually agreed rates within residential and nursing homes for older people, this reflects the increasing complexity of this cohort. The proposal is to give 4% uplift on agreed rates to enable providers to continue to provide the type and level of service required. The exception is where new referrals were made, or rates were altered during the 3-month period 1st January to 31st March 2019 since it is reasonable to assume is that the negotiation would have been based on no further increase for 2019/20.

2.4 Increase of 4.15%

2.4.1 Prevention Services for Learning Disability. These services are delivered by organisations who also provide supported living services, which means they are exposed to the same pressures around recruitment and retention of staff. It is therefore proposed that an equal uplift of 4.15% be applied.

2.4.3 Supported Living. These services are commissioned under framework contracts with maximum ceiling rates. An uplift of 4.15% recognises that the majority of the costs for delivering these services are staff costs (wages, pension etc); this uplift reflects the cost pressures on these organisations as a result of increases to National Living Wage, and the increasing difficulty to recruit and retain staff.

2.4.2.1 Commissioning intentions continue to focus on the benefits of supported living, and commissioners recognise that without appropriate increases to rates paid by commissioners the attractiveness for providers to continue to invest in these services diminishes.

2.4.2.2 The rate set for night time cover under supported living frameworks will not be subject to a uplift but maybe reviewed depending on the outcome of any future judgement on this issue.

2.4.2.3 The increase will apply from the Sunday after the new financial year, 7th April 2019.

2.4.2.4 During 2019/20 commissioners will be exploring approaches to the future model for supported living services and will be consulting with the market on the commissioning intentions, approach and commissioning activity.

Other considerations

2.5.1 Reviews of care should be undertaken at least annually. Consideration was given as to whether changes to fees for individually agreed rates should change at the point of annual review rather than at the beginning of the financial year. This approach will not be adopted for the financial year

2019/20, however the merits of this approach will be reviewed during 2019/20.

2.6 Summary of Proposals

2.6.1 It is therefore proposed that for services for the year 2019/20 the following shall apply to fees and charges for care funded by WSCC for Adults' Services from 7th April for community based services, 8th April for usual maximum rates and 1st October for Extra Care or other dates specified in the contract:

No uplift

- For individually agreed rates negotiated or commenced between 1st January and 31st April 2019 there will be no increase for the financial year 2019/20.

2.1% increase to:

- Local allocation for Direct Payments

3% increase to:

- Day Care
- Domiciliary Care; Care and Support at Home Frameworks (2009 and 2015)
- Extra Care Services
- Shared Lives

4% increase to:

- Band B legacy residential placements, giving a rate of £423.32
- Band C (residential dementia) at standard rate, to pay a rate of £591.75
- Band C (residential dementia) at enhanced rate , to pay a rate of £686.65
- Band D (social care element) of nursing placements at standard rate, to pay a rate of £563.62
- Band D (social care element) of nursing placements at enhanced rate, to pay a rate of £631.95
- Band P (frail with intensive/complex physical care needs) at standard rate, to pay a rate of £528.27
- Band P (frail with intensive/complex physical care needs)at enhanced rate, to pay a rate of £655.39
- Band F (Mental Health all ages) legacy placements, to pay a rate of £407.74
- Individually agreed rates:
- Learning Disability individually agreed rates for residential and nursing care
- Mental Health individually agreed rates for residential care and nursing care
- Physical Disability individually agreed rates for residential care and nursing care.
- Individually agreed rates for residential and nursing care where individuals needs exceed usual maximum rates

4.15% increase to:

- Prevention services for Learning Disability
- Supported Living Frameworks (including Mental Health)

2.6.2 From 8 April 2019 Usual 'Maximum Rates' will be referred to as 'Indicative Rates'.

3. Consultation

3.1 Intelligence has been gathered from requests for increases received from providers, where providers have expressed the financial pressures they are experiencing. Through provider forums for domiciliary care potential approaches to annual increases have been shared and the merits of each discussed.

3.2 Discussions have been held with board members of West Sussex Partners in Care, the local care association, who have shared the pressures faced by providers of residential and domiciliary care. The main focus, as in previous years, is on increases in the National Living Wage, auto enrolment for pensions, change in approach to sleep-in services and increases to CQC regulatory fees.

3.3 Market oversight, and quality, contract and commissioning reviews of providers in the West Sussex care market are undertaken by Contracts and Performance and Commissioning teams. Intelligence is gathered and analysed, through Firefly (market oversight software), that enables proactive and proportionate engagement with providers; this also supports analysis of the volatility, sustainability and sufficiency of the care market.

4. Financial (revenue and capital) and Resource Implications

4.1 In gross terms, the County Council spends over £200m on the care costs which are the subject of this report.

4.2 The 2019/20 Adults and Health budget includes funding of £8.2m for the effect of the proposals in this report, of which £0.6m will be met by the Clinical Commissioning Groups in West Sussex because of the pooled budget for learning disabilities. This consists of:

- £3.6m to recognise the impact of the increase in the National Living Wage in April from £7.83 per hour to £8.21.
- £4.6 m inflation allocation

4.3 Quantifying the impact of the recommendations is not a precise science, because the group of people receiving social care is subject to a significant level of turnover each year. Of itself this will lead to changes in the relative mix of spending and so the cost of any individual element of the package of proposals cannot be stated with complete certainty. Thus affordability has to be assessed in a reasonableness sense by applying the rates summarised in section 2.6 to current customer numbers. On that measure the forecast cost of the recommendations does not account in full for the funding that is available. This will allow around £0.5m to be set aside to manage wider risks in the budgets for commissioned care services, including the ability of

domiciliary care providers to request an increase in their contracted rates and to mitigate the possibility that the number of residential placements for older people purchased at an agreed rate will continue to grow. As a result the £8.2m is allocated in full, as shown in the table below.

	Year 1 2019/20 £m	Year 2 2020/21 £m	Year 3 2021/22 £m
Revenue budget	8.2	8.2	8.2
Forecast cost of proposed uplifts	-7.7	-7.7	-7.7
Budget set aside to manage wider market-related risks	-0.5	-0.5	-0.5
Difference	-	-	-

5. Legal Implications

- 5.1 There is a low risk of legal challenge by providers if they feel that the County Council has not met its duties under the Care Act and are not paying sufficient fees to enable them to be sustainable. The proposals therefore reflect the impact of estimated inflation over the coming year.

6. Risk Assessment Implications and Mitigations

- 6.1 There is a potential risk of legal challenge by providers if they feel that the County Council has not met its duties under the Care Act and is not paying sufficient fees to enable them to be sustainable. The proposals therefore reflect the impact of estimated inflation and the National Living Wage over the coming year.
- 6.2 The County Council is experiencing increasing difficulties in securing placements at its usual maximum rates. This is a reflection of market pressures, where a combination of loss of capacity and growing demand is exerting an upwards influence on prices. The proposals in this report attempt to acknowledge that position by providing increases that take into account both the effect of the National Living Wage and inflation. As a result the County Council is likely to be in a better position to secure services at the indicative rates, which minimises the need to purchase services at a higher rate (see 2.3.2).
- 6.3 As fees paid in respect of care provision is a national, high profile issue, there is a potential reputational risk, if the County Council is not seen to be setting fees at reasonable rates. The proposals above, within the available budget, attempt to mitigate this risk. During the financial year the County Council will undertake work to model fees for care homes' usual maximum rates, develop a structure within which individually agreed rates can be negotiated and work to identify a minimum rate for home care for West Sussex.
- 6.4 In order to ensure the uplifts to fees are paid there is a reliance on a number of teams across Adults Services, Lifelong Services, Business Systems Support and the Capita partnership. Mosaic is the system within which rates are captured and from which purchases for individual are made; it is critical

that the updates are made in a timely manner to ensure on-time payment to providers and notifications to customers. Every effort will be made to ensure that the increases are paid as near as possible to 8th April for Usual Maximum Rates, or other dates as stated in providers' contracts. There is a medium technical risk that if increases in fees are not agreed by the end of February, that due to the work required to update and test the Council's internal payment systems, providers may not get paid at their new rates in April. County Council officers are developing contingency plans in the event this happens, which will include communicating any changes to providers, including arrangements for backdating.

7. Other Options Considered

- 7.1 A number of options for fee increases have been considered including increases based on Retail Price Index and Consumer Price Index and modelling different rises on different breakdowns of estimated staff costs and other costs. Although this means that an alternative set of proposals could be justified, this would do no more than transfer funding between providers on a zero-sum basis. The challenge would be whether this would make better use of the funding that is available. Since the assessment in this report has taken market-related considerations into account, the view of commissioners is that it would not lead to better outcomes than the recommendations in this report will produce.

8. Equality and Human Rights Assessment

- 8.1 All care groups were considered in determining the approach for fees and rates to encourage a fair and uniform approach. The proposals will not have a disproportionate effect, either negative or positive, on any person with a protected characteristic in comparison to those without those characteristics.
- 8.2 Whilst the fee uplifts proposed are applicable to customers who meet the national eligibility threshold and are eligible for financial support from adult social care to meet their assessed needs, they take into consideration our wider Care Act responsibilities to encourage a viable market of diverse, sustainable services delivering quality care all customers regardless of how they are funded. For those customers who are full cost payers and those choosing respite from a personal budget there will be an effect on the sum they are recharged. There may also be a negative impact on residents generally if providers choose to increase their own rates.
- 8.3 Any negative impacts, though, have to be balanced against the duty the County Council has under the Care Act to ensure the sustainability of the care market and to ensure that there is diversity and quality of provision in the market.
- 8.4 The proposals outlined in this paper are intended to support providers to continue to deliver quality services (and improve, where required) to meet all customers' individual needs, circumstances, cultures and lifestyles, hence ensuring that where customers' personal circumstances and support needs

change, that there is sufficient provision in the independent sector available to support them.

- 8.5 In reaching a decision on the level of fees, the Council has considered its duties under the Human Rights Act, and in particular Article 8, and the need to consider the private and home life interests of all those assessed to be in need of residential and other basic care. The Council has endeavoured to ensure that the proposals in this report enable these needs to be met.

9. Social Value and Sustainability Assessment

- 9.1 The proposals support the sustainability of the care market in West Sussex by paying an increase to providers that enables them to meet their statutory duties in relation to staff pay and to meet any increased costs.
- 9.2 The annual increase in usual maximum rates may encourage more providers to support County Council funded customers and also encourage new investors into West Sussex.

10. Crime and Disorder Reduction Assessment

- 10.1 There are no Crime and Disorder Act implications.

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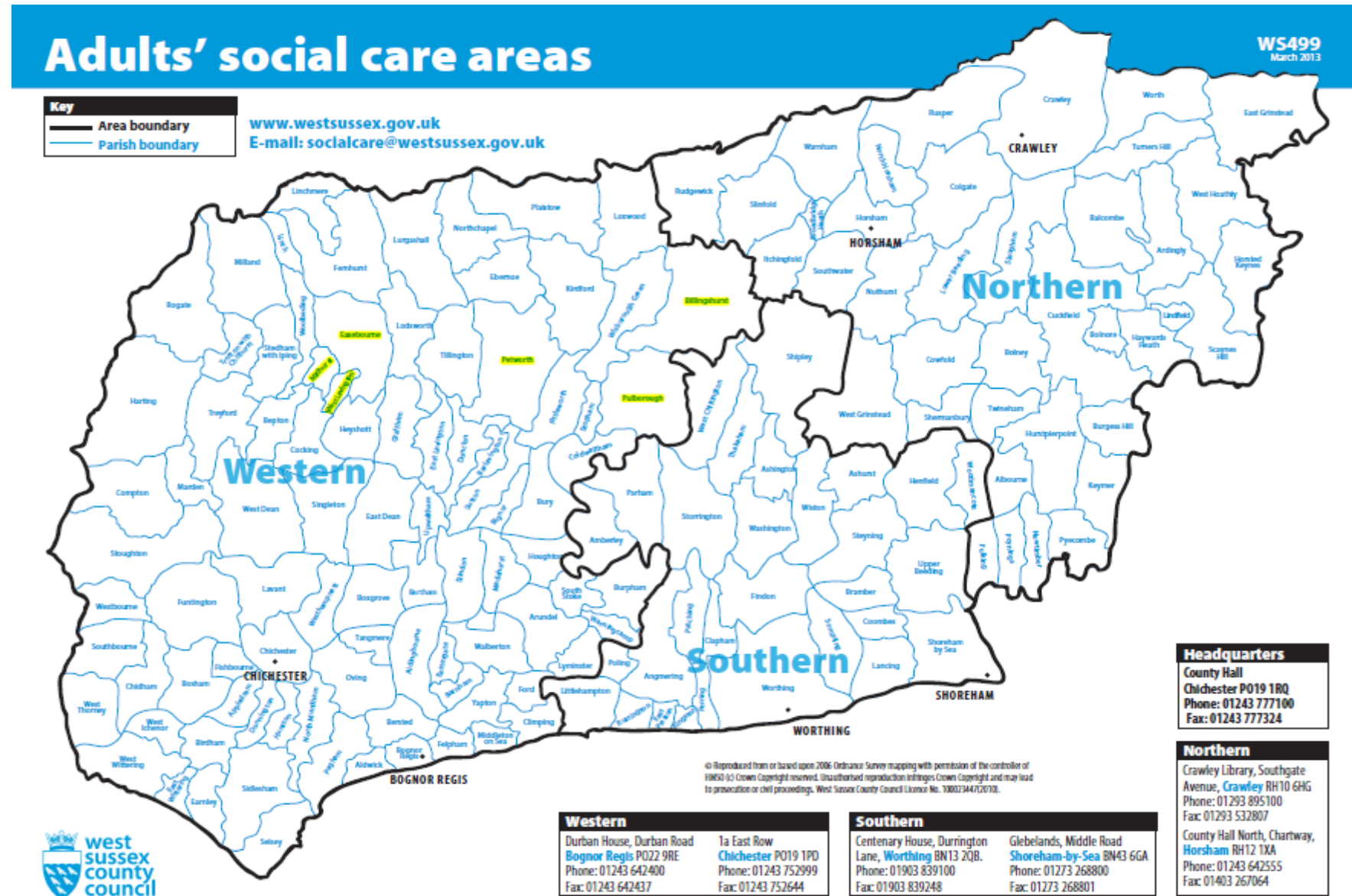
Appendices

Appendix 1: Adults' Social Care Areas for Enhanced and Standard Rates
Appendix 2: Fee Schedule Proposed Fee Rates for 2019-20

Background papers None

Appendix 1

Northern Area and highlighted towns in Western = Enhanced Rates
 Southern & Western Areas (exc. highlighted towns) = Standard Rates



Appendix 2
 Fee Schedule
 Proposed Fee Rates for 2019-20

CARE HOME RATES				
ADULTS' SERVICES INDICATIVE RATES FOR PERSONAL AND NURSING CARE IN REGISTERED CARE HOMES (ALL AGE GROUPS)				
CARE HOMES REGISTERED WITH THE CARE QUALITY COMMISSION TO PROVIDE PERSONAL CARE	2018-19 from 9/04/18 Weekly Rate £		2019-20 from 8/04/19 Weekly Rate £	
Band B – High level of physical care needs	DISCONTINUED 407.04 (in pay)		DISCONTINUED £ (in pay) 423.32	
Band C - Specialist dementia care (intensive/complex)	Standard	568.99	Standard	591.75
	Enhanced	660.24	Enhanced	686.65
Band P - Frail with intensive/complex physical care needs	Standard	507.95	Standard	528.27
	Enhanced	630.18	Enhanced	655.39
Band F - Person with mental health needs	DISCONTINUED £392.06 (in pay)		DISCONTINUED (in pay) £407.74	
CARE HOMES REGISTERED WITH THE CARE QUALITY COMMISSION TO PROVIDE NURSING CARE				
Baseline Social Care Rate (Accommodation and Personal Care element of Nursing Fee)	Standard	541.95	Standard	563.63
	Enhanced	607.64	Enhanced	631.95
NHS CONTRIBUTION TO NURSING CARE – FUNDED NURSING CARE (FNC)				
CARE HOMES WITH NURSING	2018/19 from 1/4/18 Weekly Rate £		2019/20 from 1/4/19 Weekly Rate £	
Standard FNC	£ 158.16		£tbc by DoH	
High FNC	£ 217.59		£tbc by DoH	
WSSC pay fees net of FNC, with reimbursement for all FNC being paid directly from the CCG. This is addition to the baseline social care element.				
N.B. Prices stated are gross.				
<i>Substance Misuse, Learning Disability, Mental Health, Physical Disability and where need exceeds usual maximum rates are agreed on an individual basis.</i>				
Enhanced rates are paid for homes within the Adults' Services Northern area and Northern Chichester (i.e. those homes listed in the West Sussex Care Guide under Midhurst, Pulborough and Billingshurst)				