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Dear Ms Gregory,

Introduction of charges to Nursing Homes

I am writing as Chairman of the Surrey Care Association in response to the letter sent to a number of our members regarding the introduction of charges to Nursing Homes.

A number of our members have expressed their dismay at receiving your letter.

The first thing to note is that we are disappointed that there was no consultation with providers prior to the implementation of this change. The Nursing Home sector is beleaguered and fragile, so a letter which shunts costs onto providers was never going to be well-received. Such correspondence is potentially damaging at a time when co-production, co-design and partnership working need to be central to shaping services which are effective, responsive and efficient.

With regard to the substance of the proposed change we have a number of significant concerns:

1. We understand that the services of Community Psychiatric Nurses (CPN) are classified as primary care services which are commissioned and paid for by the CCG. As such, these services should be free at the point of delivery to the patient irrespective of whether he or she is a resident of a nursing home or not.
2. We question whether it is legal to charge Nursing Homes for primary care services which are delivered by the NHS. An alternative would be charge the individual, but we would question the legality of this, too.
3. We are not clear how the charge is justified within the contractual relationship between the CCG and Nursing Home provider organisations. Our view is that continuing healthcare funding is for meeting ongoing healthcare needs, and that primary care service requirements are out with this scope.

We are also concerned that the processes which would underpin this change are not workable:

1. It is often the GP who requests a visit from a CPN. It would be unfair for a Nursing Home to fund a cost stream over which it has no control.
2. It is not clear how this charge would be triggered.

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3. If a Nursing Home needs the support of a CPN but that service is charged for then they may revert to A&E instead, which would be a perverse outcome.
4. Even if contractual and legal, the level of fee proposed is disproportionate to the general level of fees paid for Nursing Home Care.

We would ask for an immediate retraction of the letter and that this proposal is put on hold pending due consultation and further consideration.

Yours sincerely,



David Holmes
Chairman
Surrey Care Association

cc. Erica Lockhart
Sara Barrington