



# **Ethical Home Care Commissioning Charter 2022**

A plan to revolutionise  
the way care is commissioned  
throughout the UK

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# Commissioning

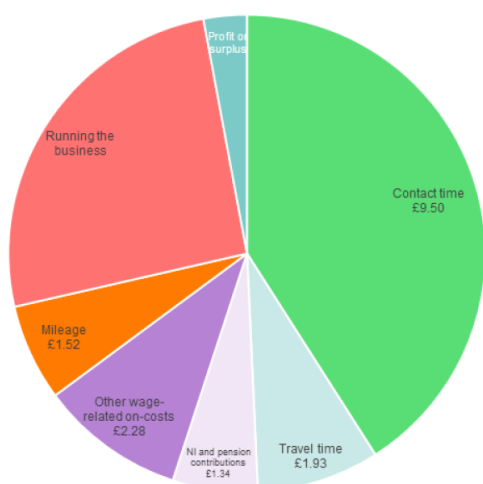
The current system is built on a lack of trust and fails to encourage a professional service where providers, carers and clients are valued. The sector is not just in crisis, it is broken and this charter asks for a minimum commitment from Councils and Government to fix it.

We have written the charter after consulting with Councils; local and national elected politicians; the APPG on Social Care; home care (Domiciliary) providers; and most importantly, carers and their clients.

“OUR CHARTER IS NO MORE THAN A REQUEST THAT LOCAL AUTHORITIES, GOVERNMENT AND OTHER PUBLIC BODIES INVOLVED IN THE DELIVERY OF HOME CARE ACCEPT AND COMMIT TO RECOGNISING AND ADDRESSING THE CRISIS IN HOME CARE, BY ADOPTING AND EMBRACING THESE PRINCIPLES, AIMS AND OBJECTIVES.”

## Minimum Price for Home Care @ National Living Wage

2022-2023



Careworkers' contact time	£9.50
Careworkers' travel time	£1.93
NI and pension contributions	£1.34
Other wage-related on-costs	£2.28
Mileage	£1.52
Running the business	£5.95
Profit or surplus	£0.68
<b>Minimum hourly price</b>	<b>£23.20</b>

# Minimum price for home care rises 8.2%

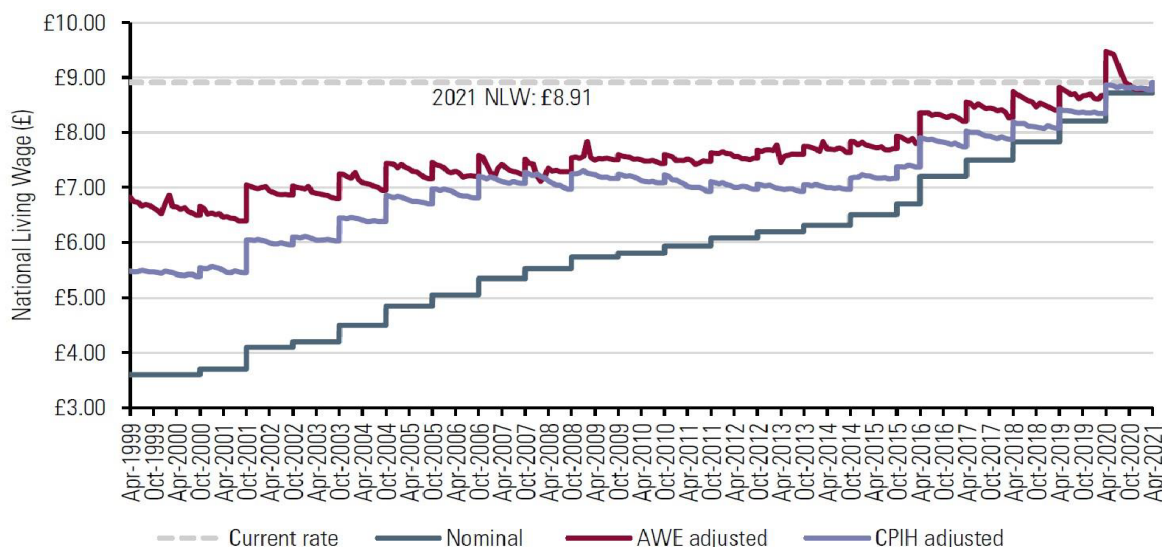
The Homecare Association's (formally known as the UKHCA) Minimum Price for 2022–2023 of £23.20 per hour is £1.77 or 8.2% higher than their equivalent rate of £21.43 per hour for 2021–2022.

Wage inflation is the main driver of this increase in cost, though inflation in non-wage costs is also a factor.

When setting rates for 2022–2023, a number of commissioners, if they offer an increase at all, may attempt to offer either a rate equivalent to the increase in the National Living Wage, or an increase in line with the Consumer Price Index (CPI). Neither of these options comes close to covering the increased costs providers will experience from April 2022.

Data from the Low Pay Commission show that National Living Wage has tracked well above the CPI for many years, though the gap has narrowed in recent years.

**The real and relative value of the National Living Wage/National Minimum Wage, UK, 1999–2021**



Source: LPC analysis using ONS CPIH index, ONS Average Weekly Earnings (AWE) Seasonally Adjusted Total Pay, UK, 1999–2021  
Note: For AWE adjustment and CPIH adjustment, figures are in 2021 prices.

The Homecare Association has produced evidence to show that an award based solely on an inflationary index, such as CPI, does not reflect wage inflation experienced by employers. For example, CPI is a measure of how the prices of goods and services bought by households rise or fall. However, the cost of homecare is largely determined by: (a) *wage levels and their resulting on-costs*; (b) *the costs of employing managers and supervisors, and* (c) *meeting other regulatory requirements.*

**Colin Angel, UKHCA's Policy Director in 2021, said:**

*'Councils and the NHS must recognise the true costs of home care. Paying providers fees, which in some cases barely cover the costs of the wage bill, continues to destabilise an already fragile state-funded market.*

*Persistently underestimating providers business costs is taking a risk with the quality of services, the experience of the workforce, and providers' ability to comply with the legal requirements placed on them.*

*UKHCA [now Homecare Association] will continue to challenge central government on the overall funding of social care. However, it is local authorities and the NHS, which are responsible for determining the prices they pay for home care services at a local level.'*



**Peter Davies, a GMB Senior Organiser,** who along with our care teams has been working throughout the GMB to investigate the state of commissioning for home care, said:

*"The reality is that our local authority commissioners are bound by the money they have available to them to pay for the care, rather than having to design and set out what a fair commissioning rate for providers would be.*

*However, we see a growing public demand for care to be recognised as the frontline and professional service that it is. It is now time we all responded to that demand and valued home care properly.*

*"If you look at the Homecare Association rate, you can not really argue against any of it and here's the tragic thing; it simply is not paid anywhere near that rate now. We need to sort the commissioning process out, end the built-in discrimination that it causes and the government need to put the resources in to make sure we can deliver that care."*

## 1. Hours & Minute Measurement

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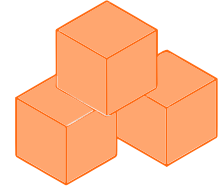
Home care should not be commissioned by the minute, or even the hour. No other publicly funded service is commissioned or measured by the hour or minute. If all of the local authorities that actually include this measurement in their commissioning process imposed it to the letter, the care system would collapse. The measurement has never been equality checked and it is not used anywhere else in public service delivery. **The defining difference within care is that it is predominantly women who are doing this work.**

The time measurement is often ignored and authorities allow the providers, once they complete the actual care 'tasks' to mark their visit as 'further care declined' to enable them to draw down the full resource for that visit. This is understandable but open to abuse.

**We request that local authorities and other public bodies involved in the delivery of home care accept and commit to ending the problem of minute and hours, (Task and Time).**

## 2. Block Commissioning

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We need to end any reference to 'Time & Task'. Home care should be commissioned as a block of care and be person-centred so that providers and carers can rota and plan their service over a sustainable shift pattern.

This will ensure that carers are paid for all of their time that they are committing to that block of care; it will discourage the 'none' payment of stand time, travel, training and hand-over; and enable providers to improve and sustain a more valued workforce.

A block of care should be no less than 5 hours and must include the current HMRC mileage rate and an accurate picture of travel and time commitment.

**We request that local authorities and other public bodies involved in the delivery of home care accept and commit to a block care delivery model of commissioning and ending the culture of 'Time & Task' in home care delivery.**

### 3. Paying the Rate & Retention

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Most, if not all local authorities, have their own Job Evaluation Scheme where they measure and give a value in monetary terms to all jobs that sit within the sector.

These rates and schemes have been tested through an Equality Impact Assessment (EIA) and this includes their own evaluated rate for a domiciliary care worker.

Very few carers are paid more than the National Living Wage and staff turnover is running at 47%, by far the biggest problem that the sector is facing. We do not know of any EIAs in the actual commissioning processes for care. Clearly the impact of low pay and 'no' pay is disproportionate and discriminatory for this predominantly female workforce.

**We ask that the job evaluated rate of pay in our local authorities should be the benchmark and £15 the ultimate goal for their sector development and commissioning process. This must drive the journey to increasing the value of care in our communities.**

### 4. Training

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Councils must recognise and value the training and professional development of staff within the sector.

Much more can be achieved where development partnerships are established.

We request that this should be given a heavy weight within the commissioning process.

Training and skills within the sector should be:

- Transferable (skills for care)
- Person-centred
- Contribute to a career pathway
- Include reference to tackling social isolation and client wellbeing. Focused on prevention and not 'Task & Time.'

### 5. Social Value

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Councils should recognise social value. They should assess how all of their listed preferred providers contribute to the social value of those who deliver the care to clients, as well as the value the service has for those clients.

This can be evidenced, in part, by asking providers:

- **How they consult with their workforce?**
- **Do they recognise trade unions and if so; do they have formal agreements in place to evidence that?**
- **How do they add social value to the communities where they deliver their service?**

We request social value should be given a heavy weight/score within commissioning processes.

## 6. Reviewing Delivery

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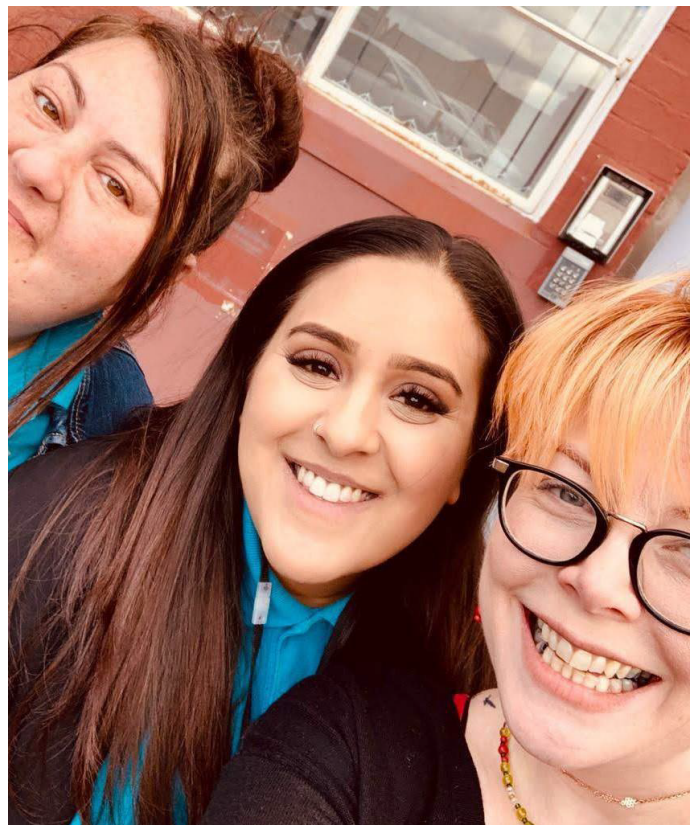
There are various groups and bodies that exist to look at partnership working and have an interest in the home care sector. Few are constituted, and we know of none that offer a seat or voice to all interested parties.

**We request that local authorities and other public bodies involved in the delivery of home care, accept and commit to resourcing and attending a commissioning body.**

**At the commissioning body all partners within the home care sector can come together to review home care delivery within their communities, with a view to continually measuring and improving the service.**

**This should include:**

- **Home care providers**
- **Trade Unions who are recognised within areas of delivery**
- **Councillors and MPs**
- **Commissioning officers**





## Useful Links

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**GMB National**

[gmb.org.uk](http://gmb.org.uk)

**The Homecare Association**

[homecareassociation.org.uk](http://homecareassociation.org.uk)

**TUC**

[tuc.org.uk](http://tuc.org.uk)

**ACAS**

[acas.org.uk](http://acas.org.uk)

**Equality & Human Rights  
Commission**

[equalityhumanrights.com](http://equalityhumanrights.com)

**Chartered Institute of  
Personnel Development**

[cipd.co.uk](http://cipd.co.uk)

**Labour Research Department  
Publications**

[lrdpublications.org.uk](http://lrdpublications.org.uk)

**Government Information**

[direct.gov.uk](http://direct.gov.uk)

## Endorsed & Supported by:

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**GMB General Secretary**

**GMB President**

**All GMB Regional Secretaries**

**Labour MPs**

**West Yorkshire Mayor**



[gmb.org.uk/care](https://gmb.org.uk/care)