

The Case for Insourcing Social Care and Other Essential Public Services

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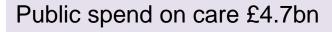
The problem with social care



- Those who provide it are underpaid, overworked and under appreciated
 - Mostly women
 - Many part time
- Whilst faceless international corporations extract millions from it
 - Private equity driven leveraged buy-outs
 - Specialist real estate investors
- And those who receive it can never be sure what to expect
 - Moveable eligibility criteria
 - Varying with geographical location
 - Front end providers forced into low-cost (to them) strategies

The care economy

- The attraction of marketised public services to global investors
- Leveraged buy-out and the debt it creates
- Real estate extraction and the cost it creates
- Impact on front line provision
- Impact on staff



approaching half of capacity among medium-to-large for-profit groups... may be subject to leasing arrangements.' - LaingBuisson

Delivery point losses minimise tax

'the UK ... has the highest gross yields of all countries' – Aedifca, landlord to Care UK and Maria Malaband



A national care service then?



- Yes, but what does that really mean?
- Who provides?
 - Public/private/third sector does it matter?
 - Local/national/regional maybe
- Who commissions whatever that means
 - Who decides on local need?
- Who is responsible?
 - Accountability
 - Link with control

Residential care example: HC-One





Biggest UK care provider

Ultimate owner is Skyfall GP Ltd registered in Cayman Islands



Financed by Safanad

Dubai based private equity with Well Tower US health care real estate specialist debt facilty

In 2022 HC-One earned £382m with gross profit of £51m

But a loss of £25m

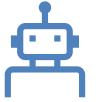
Home Care Examples





Helping Hands

Part of Midshires Owned by Livingbridge Private Equity Co.



Home Instead

Franchise operation

Hi Global Holdings

Ultimately part of Honor Technology Inc. – \$2.1bn corporation

'the world's largest senior care network and technology platform'



Cera Care Group

Multiple brands, including Premier Care and Allied Health Care

> Fast growing 'digital first' European care company

15,000 'patients' a day across UK and Germany

Private equity funded

Extraction through real estate: Aedifca S.A*



- Social care real estate specialist owns 114 homes in the UK
- Triple net contracts
- Average rent £6748 per bed space
- EBIT profit margin £5635

"We consider that the group EBIT margin is applicable to the UK which has the highest gross yields of all countries"

> *Extracting Profits Through Care Home Real Estate: The Billion-Pound Property Speculation Fuelling Britain's Care Crisis, Kotecha V., Centre for International Corporate Tax Accountability and Research, 2023

For smaller investors?



WHAT MAKES RENT-A-CARE-ROOM DIFFERENT FROM OTHER?

We invest in our staff as well as in our properties. We secure and retain the best possible minds in the industry, individuals chosen specifically for our company to drive the quality of our services and the success of our care homes.

The healthcare industry relies on a knowledgeable, skilled, and competent workforce which in turn must be driven by a strong, ethical, and cultured management team.

A quote from our Statement of Purpose:

INVEST IN A BUY TO LET

CARE HOME

"...Person-centred quality care provision, delivered in a safe environment by qualified staff in a well – managed, homely setting..."

What You Receive?

Each Care Room will be issued lease hold ownership

Legal Title Pack

LUXURY PROPERTY GLOBAL 5 Merchants Square London UK Office: +442030702333 or +447743576631 Email: grahamlpiw@gmail.com ** johnjegan@luxurypropertyglobal.com Web: www.luxurypropertyglobal.com

PEACE OF MIND

completed

Our properties are not newly built empty developments. We only purchase pre-existing care

that the 'development' is not

operational and

RETURNS



URY PROPERTY GLOBAL

HEN YOU NEED THE BEST

e: +447743576631 or +442030702333 yproperty@gmail.com or lordjohnjegan@gmail.com eb: www.luxurypropertyglobal.com

Assured Returns

fear 1	Year 2 & 3	Year 4 & 5	
3%	9%	10%	
>%	9.5%	10%	
.5%	10%	10%	
0%	10%	10%	

Guaranteed Buy-back

OPTION 1

n 3 Years	In 5 Years	In 9 Years	In 15 Years	In 20 Years
1%	15%	23%	30%	40%
81,750	£86,250	£92,250	£97,300	£105,000
1%	15%	23%	30%	40%
109,000	£115,000	£123,000	£130,000	£140,000
7%	15%	23%	30%	40%
136,250	£143,750	£153,000	£162,000	£175,000
1%	15%	23%	30%	40%
163,500	£172,500	£184,500	£195,000	£210,000

Guaranteed buy back options from RB Carehomes (3, 5, 9, 15 & 20 years). RB Carehomes, as the care home owner will guarantee the buyback of care homes at a fixed price (appreciation)

Selling at your own discretion. As the owner, you can sell the care home(s) as and when you wish, to any third party. Just inform RB Carehomes of the proposed sale and the company will draft the relevant transfer documents

OPTION 2

Children's social care: GB News 9/11/23



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Nationalisation or a national service

- National service
 - Only government can create universal service framework
 - And ensure funding is available
 - But should they also be a direct provider?
- Nationalisation
 - 1948 model
 - Lack of joined upness
 - Subsequent decentralisation attempts



ED

Municipalisation of a national service



- · Local authorities in partnership with health
 - Subsidiarity
 - Accountability
 - Responsiveness
- Integration with prevention and early support
 - Community services that help people stay at home
- Existing infrastructure
 - Many UK councils already provide at some level

Examples



- Halton Borough Council
 - Purchase and operate
- Pembrokeshire County Borough Council
 - Response to warnings about Allied Health Care
- Trafford Council
 - Purchase on the open market
- Skye Council
 - Purchase from HC-One

Why don't we do it then?



- Unaffordable?
 - But public sector capital is cheaper than private sector capital
 - Do we really think that care workers should continue to be underpaid and overworked?
 - Whilst we watch 20 % plus of funding go to profit and extraction through leveraged buy outs and other techniques
 - And there are no incentives on providers to pursue a people centred approach based on prevention and community support
- Is the problem low paid women or over rewarded Private Equity and Real Estate investors?



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