



Briefing 08/32 July 2008

The case for change

'Why England needs a new care and support system'

This briefing is issued to Chief Executives, Council Leaders, Social Care and APSE main contacts in England, Wales, Scotland and Northern Ireland.

Key issues: This briefing provides details of the consultation document 'The case for change' issued jointly by the secretaries of state for health, children schools and families, communities and local government, work and pensions, cabinet office, innovation, universities and skills and the Chief Secretary to the Treasury. It recognises the cross-cutting issues affecting social care. This briefing seeks views from APSE member authorities, in particular those outside of England who may be able to share innovation, best practices and their own experiences of reform.

1. Introduction

Since 1948 life expectancy has increased for men and women by an average of 11 years. Today's young people face the prospect of spending a third of their life in retirement, with medical advances increased survival rates and longevity of the population as a whole. Whilst these are obviously welcome improvements in the health and well being of citizens the pressures created on care and support services need to be addressed, in particular the cost, quality, access and overall experience of care services.

The 'Case for change' consultation paper seeks to examine some of the key issues and draw out from all interested parties some possible solutions to help in the development of policy. The consultation will run until November 2008. APSE member authorities are invited to contribute their views to APSE to inform APSE's response to Government.

2. What is care and support?

Care and support can be described as activities, services and relationships that help people to be independent and lead active and healthy lives as well as allowing individuals the opportunity to contribute to society throughout their lives. This includes:

- Living in their own home
- Working
- Cooking
- Shopping
- Caring for a family

And reasons for support can be as diverse as:

- Accidents
- Long-term illness
- Being disabled
- Growing older.

The broad definition of care and support means that on a cross-departmental basis government will be looking for responses for all those involved in care and support. This includes those working in the areas of 'traditional' social care such as domiciliary care, day care services, meals on wheels, care homes counselling and occupational therapy. However the consultation paper makes a deliberate reference to other council services such as housing support services, building adaptation services and support for independent living and assistance with benefits.

The consultation paper makes it clear that disability should be distinguished from impairment or ill health and therefore for the purposes of the paper disability is defined as:

*"disadvantage experienced by an individualresulting from barriers to independent living or education and employment or other opportunities....that impacts upon on people with impairments and or ill / health."

*Source cabinet office

3. Why does the current system of care and support need to change?

In 20 years time the cost of disability benefits could rise to by almost 50% creating a £6 billion gap in funding for social care. However many organisations have criticised this figure and believe that the funding gap is potentially much higher.

The consultation paper also identifies the need to shift from under funding of preventative care such as domiciliary care which would keep people active and allow them to remain in their own homes compared to the more costly care associated with an over-reliance on residential care options.

In terms of financing social care the current care system in England tends to be viewed as penalising those that have saved for their old age whereas benefits tend to provide the same amount of financial support regardless of their financial means. There is a need to address the fact that people generally do not like means testing but would also wish to see resources targeted at those most in need.

Whilst for devolved governments social care is a devolved function benefit payments are not and therefore changes to benefits will have a UK wide impact.

Equally for English authorities comparisons with other systems in the UK will not necessarily address all of the concerns raised in the consultation paper. For example within Scotland the system of free personal care has led to some confusion with citizens mistakenly believing that so called 'hotel costs' would be covered providing totally free support. In reality hotel costs of themselves still cause some confusion and concern when charges need to be made to meet the costs of residential care.

4. Funding care and support

Total state expenditure on care and support in England was estimated at £20 billion which is equivalent to 2% of GDP and 4% of total government expenditure. These figures break down into distinct areas and include £13 billion on social care comprising of £7 billion on the over 65s age group plus £6 billion on people between the ages of 14 – 64. Disability related benefits are at £3.4 billion in England on attendance allowance and £1 billion in carers benefits. There is also around £2 billion on 'other' areas of expenditure which includes supporting people, the independent living fund and disabled facilities grants.

There are three main areas from which funding arises including government, families, and individuals. Based on census information there are estimated to be 5.2 million carers in England and Wales which equate to 1 in 10 of the population.

Currently there is a complex process of individual contributions towards the cost of funding care. If a person requires care in their own home the value of their home is not taken into account. However if a person requires care in a residential home the value of their home is taken into account (unless a spouse partner or other qualifying person continues to live at that home) when an assessment is made on whether they are able to pay for their care.

A survey by GFK NOP on behalf of the Local Government Association in 2008 suggest that people are happy to provide some contribution towards their own or other peoples care costs providing they are clear about what they are paying for, why and what the Government will pay for as a contribution.

5. Fair access to care services (FACS guidelines)

The fair access to care guidelines is referenced in the consultation paper as one of the reasons for perceived unfairness in the system. The guidelines allow for local flexibility in terms of the four levels of care need defined in the guidelines. This means that whilst some authorities will provide support only to those with critical needs some authorities will provide support to those with moderate needs. The current assessment of how needs are met may not take into account support provided by authorities in other ways such as through housing or leisure programmes.

However the local differences in the application of the FACS guidelines whilst allowing for local flexibility need to nevertheless ensure that individuals are not going without the support that they need. The FACS guidance will therefore be examined as part of the consultation paper.

6. Personalisation of care and service transformation

Personalised budgets means that a personal budget is established as a notional cash pot for someone with care and support needs and the person controls how the money is spent on services. 'Putting people first' made a commitment to use this model for all adults who are eligible for social care. Currently there are pilots running for individualised budgets – an approach that includes social care funding with other housing and employment support in the same pot.

The advent of personal and individualised budgets is intended to provide a more person centred approach to care and support. Though the individualised care budget pilots have yet to report they have heavily referenced in the consultation paper.

Running alongside 'The case for change' consultation is a number of other social care and support initiatives including the interim statement on the Adult Social Care Workforce Strategy which provides the basis for a short consultation with stakeholders. Government will publish its final strategy in October 2008. The transformation agenda has a significant impact on the training skills and development of the social care workforce essential to the delivery of the new social care vision for a sector built around the needs of individuals with greater personalisation of services and choice for users.

7. Key questions

The consultation paper seeks to debate a number of issues around the following themes and APSE member authorities are asked to provide their views to APSE in order to coordinate a response from our member authorities. You are asked to email your views to Mo Baines at APSE on mbaines@apse.org.uk:

1. What more can we do to make our vision of independence, choice and control a reality?
2. What should the balance of responsibility be between the family, the individual and the Government?
3. Should the system be the same for everybody or should we consider varying the ways we allocate government funding according to certain principles?
4. Should there be one system for everyone or different systems depending upon the type of care and support somebody has?
5. Which is more important to us: local flexibility or national consistency?
6. What should the balance be between targeting government resources at those who are least able to pay and having a system that supports those who plan and save?

8. APSE Comment

The funding and form of care and support services is increasingly a vexed issue. There is a growing media debate about respecting older people and supporting those with disabilities but with an increasing recognition that the funding of adult social care

services are in urgent need of review and reform if the system is to continue to support the population, facing the types of demographic changes now identified.

Increasing survival rates, longevity and a complex social structure meaning family support cannot always be relied upon due to geographic distances and traditional forms of support being no longer available; all indicate that change and reform needs to be grasped urgently if future needs are to be met.

APSE welcomes the opportunity to debate the many issues facing care and support services but believes that for many local authorities the opportunity to involve wider council services, outside of the traditional boundaries of social care have been missed. Excellent examples exist in some areas whereby building cleaning services have developed service level agreements with older people's services to provide ancillary care package including; domestic cleaning, minor household repairs and support such as gardening, changing plugs and light bulbs, food preparation, help with ordering other goods and services all of which enable older people to remain in their own homes. In addition many councils have adopted strategies to enable older people to remain active with enhanced leisure programmes for older citizens tailored to individual needs. However finding start up funding for initiatives or calling upon existing funds can often be a barrier to developing good innovative practice.

Moreover whilst the majority of social care providers are now from the private sector there is a lack of transparency in benchmarking information to ensure value for money for councils, individuals and families contributing towards the cost of care packages. Simply examining the costs of care without examining the value for money aspects of providers and disparity in costs will not necessarily deliver the level of funding needed to meet increased demands. Moreover the lack of provision in some areas, provided directly by the local authority, could impact upon the ability of the public sector to act as an effective market regulator on price.

APSE would advocate an approach whereby the debate about the provision of services to those in need of care and support should encompass the full range of services that councils provide. A starting point for which would be action plans from each department within an authority as to how they envisage service improvements can be made specifically targeted towards assisting the achievement of the vision for care and support services well into the future.

This would mean councils examining their own strategies towards trading and charging mechanisms (provided under Section 93 and 95 of the Local Government Act 2003) potentially offering charged for additional services or services offered at a discounted rate to those who would welcome the use of such services to enable independent living. For example building maintenance services to those outside of social housing at a discounted or supported rate, or assistance with local transport schemes to maximize accessibility to leisure provision.

It is hoped that the fact that a number of key Government departments have signed up to the consultation paper 'The case for change' will stimulate a broader debate about what councils can offer to older people and meet the challenges of future funding and support on an holistic basis, making councils genuinely a local place shaper in terms of support and care services.

Mo Baines

Principal Advisor, APSE