



## Local Government Association – Social Care Green Paper Consultation Questions

### Executive Summary

- 1.1 Later Life Ambitions brings together the voices of over 250,000 pensioners through three organisations – the National Federation of Occupational Pensioners, the Civil Service Pensioners' Alliance, and the National Association of Retired Police Officers. We campaign nationally, regionally and locally on a wide range of issues to improve the lives of our members, and older people more generally.
- 1.2 We are disappointed by the government's decision to delay the long-awaited Social Care Green Paper and we welcome the LGA's consultation on the future of adult social care. We have previously surveyed our members to better understand their views on social care and have used these responses to inform our submission, quoting them throughout.
- 1.3 We believe that resolving the crisis in social care is an issue that affects every generation and must be met with a sustainable long-term solution that offers everyone confidence that they will have access to a reasonable standard of care in later life.
- 1.4 This is a response to questions 2, 4, 6, 7, 10, 17 and 24 of the LGA's consultation.

### Consultation Questions

#### 2. *In what ways is adult social care and support important?*

- 2.1 Adult social care is fundamental to vulnerable individuals' wellbeing. Ensuring it is accessible is a necessity. The demand for social care is increasing in the UK and so its provision is increasingly important.
- 2.2 Appropriate, patient centred care affords people dignity, compassion and respect to the most vulnerable in society. The absence of social care makes normal tasks, such as getting dressed or using the toilet, incredibly challenging. This exacerbates the effects of ageing, increased the prevalence of loneliness, and has serious impacts on the physical and mental well-being of older patients and their families.
- 2.3 The demand for social care is also becoming more acute. Life expectancy is increasing, and the population aged over 65 is expected to grow from 8.5 million in 2010 to nearly 13 million by 2030. With this there will be a growing number of

people spending their later lives unwell and the need for effective social care provision will continue to grow.

4. *What evidence, or examples, can you provide that demonstrate the funding challenges in adult social care and support in recent years?*

3.1 LLA's members have clearly indicated to us that urgent reform is required to ensure adult social care is properly funded.

3.2 In an August 2018 survey of over 500 of our members, we asked for their views on the social care system. The results were discouraging with only 23% describing it as 'good' or 'very good'. In contrast 40% said it was poor or very poor, and 36% described it as mediocre. When asked to explain their experience of the social care system further, some members described it as overly complex and *"daunting"*, others focused on funding concerns, stating that dementia care required more investment. A number also expressed anxiety about their future, and the care they will receive.

3.3 Due to funding pressures, there is concern that the standard of social care received has worsened in recent years. Our members identified a clear trend that the responsiveness of care homes is becoming slower and that social care workers are *"increasingly pushed for time"*. Inadequate skills, potentially stemming from a lack of training, was also highlighted. Many members also outlined concern about the complexity of the social care system, stating that it is *"very time consuming and was a long, long process."* Others said that *"if I want a comfortable life at 80, then I will have to fund it myself."*

6. *What has been the impact of funding challenges on local government's efforts to improve adult social care?*

4.1 Continued reductions to local government budgets has had a detrimental impact on the delivery of vital social care services.

4.2 The inadequacy of social care funding is clear. Between 2009-10 and 2016-17 average spend on social care per adult decreased by 13%. Consequently, 400,000 fewer older people have received social care as eligibility criteria has tightened to deal with the rise in demand.<sup>1</sup> This clearly demonstrates the impact budget reductions are having on older people's ability to access the care they need.

4.3 The government's decision to delay the second phase of the Care Act – a cap on care costs until April 2020 – reveals that we cannot reform the way people pay for adult social care while the system itself is on such an unstable foundation.

4.4 A report by the National Audit Office (NAO) showed that despite resources being transferred from other areas to social care, the total council spend on social care

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<sup>1</sup> <https://www.ageuk.org.uk/latest-news/articles/2018/june/the-true-size-of-the-social-care-problem/>

provision decreased by 3% between 2009-10 and 2016-17,<sup>2</sup> indicating that many older people are being denied the care they need.

7. *What are you most concerned about if adult social care and support continues to be underfunded?*

5.1 We are concerned that sustained underfunding will result in further reductions in quality of care and will exacerbate staff shortages. A consistent lack of investment in the sector makes it increasingly difficult to reverse the decline in the quality of services.

5.2 Providing effective, responsive social care is both physically and emotionally demanding. Staff are overstretched and under-supported, and unsurprisingly retention rates are low. A recent report on the adult social care sector and workforce estimated that just under 340,000 social care employees leave their jobs each year.<sup>3</sup> On average, in care homes there are about 2,800 unfilled manager jobs at any one time. Despite concerted recruitment drives, vacancy rates for social workers have increase from 7.3% in 2012 to 11% in 2016, and turnover rates continue to climb. This inevitably results in a reduced standard of care for patients.

5.3 Efforts to improve staff retention are also limited by persistent underfunding. The sector suffers from a high turnover of staff, caused primarily by low wages and challenging work. New funding is required to deliver competitive wages, defined career paths and appropriate employment support.

5.4 We are also concerned that the full impact of funding reductions in adult social care is not always immediately apparent. Rather, structural problems can develop. This is because preventative services and new initiatives are often first to be reduced to protect frontline service users. Without a reversal in budget reductions, the radical change required in the sector will not be given the opportunity to progress.

5.5 It is more important than ever that adequate funding is allocated to the sector, so that a sustainable, solution can be found. Ensuring that older people and their families can rely on care services when they need them most.

10. *Beyond the issue of funding what, are the other key issues which must be resolved to improve the adult social care and support system?*

6.1 Improved training, support and monitoring of social care staff is needed to improve adult social care. Incorporating human rights into health care is also an effective way to ensure that standards of care rise.

6.2 Greater consistency of training for staff, and improved support given to carers improve social care provision. A motivated, well trained and well

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<sup>2</sup> <https://www.nao.org.uk/wp-content/uploads/2018/03/Financial-sustainability-of-local-authorities-2018.pdf>

<sup>3</sup> <https://www.skillsforcare.org.uk/NMDS-SC-intelligence/Workforce-intelligence/publications/The-state-of-the-adult-social-care-sector-and-workforce-in-England.aspx>

supported workforce in local authorities, service providers and the wider social care sector is critical for maintaining a high standard. Diligent monitoring and support is also critical to ensuring that excellent social care standards are delivered across the country. We believe there should be an increase in the number of well-qualified care inspectors alongside greater levels of monitoring and regulation of care homes and other social care services. We welcome the oversight of the Care Quality Commission (CQC) in this regard, and believe that its powers should be further strengthened. By increasing the level and frequency of scrutiny of care homes and other social care services, confidence and trust in the system can begin to be restored.

6.3 Incorporating human rights in social care should not be considered as a challenge for a stretched health and social care sector, but rather a means for improving the experience for providers and recipients alike. The values that inform social care work and human rights share considerable similarities. Both are efforts to respect diversity, promote equality and ensure dignity. Embracing this understanding can provide added importance and renewed vigour to the role of care workers.

*17 Aside from the options given for raising additional funding for the adult social care and support system in local areas, do you have any other suggestions to add?*

7.1 Government expenditure on adult social care should rise as a proportion of total public expenditure, with assurance that any revenue raised to fund social care will be ring-fenced. Our members have expressed clear support for this option.

7.2 Additionally, there should be guarantees that the burden for generating new funding does not fall unfairly on pensioners through the introduction of a tax based upon National Insurance. The full burden of social care costs cannot be managed only by those who require care, as many older people are also among the poorest. Research by Age UK has found that there is considerable variation in how people experience later life, with one in six pensioners or 1.9 million people, currently living in poverty in the UK, an increase of approximately 300,000 pensioners since 2012/13<sup>4</sup>.

*20 To achieve a long-term funding solution for adult social care and support, to what extent is cross-party co-operation and/or cross-party consensus needed?*

8.1 Later Life Ambitions has consistently identified the need for a cross-party solution to the social care crisis. Considering the significant challenges, the development and implementation of appropriate social care policy should not be hindered by party politics. Without this approach, we are concerned that the care system is at risk of being used for political point-scoring.

8.2 Our members agree with this approach, with 60% stating that a cross-party working group should be established to take the politics out of social care and agree a consistent way forward. This group should agree a timeline to set out a strategy for

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<sup>4</sup> <https://www.ageuk.org.uk/latest-news/articles/2017/december/300000-more-pensioners-living-in-poverty/>

funding social care and report any findings to the Minister of State for Care, Caroline Dinenage MP.

8.3 We firmly believe that this process would be preferable to a Royal Commission, which has been raised by some commentators as a possible way forward. While a Royal Commission offers a chance to cut through party political lines, the process is lengthy, with the most recent Royal Commission on the NHS taking four years to complete. If a Royal Commission was established this year, it would likely report within months of the 2022 general election, meaning that legislation would be delayed until the first Queen's Speech of the next Parliament. Such delay would be unacceptable and would mean nearly 6 years of policy paralysis with the social care system under increasing strain.

*24. What principles do you believe should underpin the way the adult social care and support service and the NHS work together?*

9.1 Strong, collective leadership is a key principle behind joined up working and integration. However, this alone will not enable effective cooperation between adult social care services and the NHS. Shared values and objectives are also required.

9.2 The primary barrier to better joined up working is resolving and underlying structural barriers to integration. Local managers and leaders have a central role to play in doing this, by agreeing joint goals and co-developing strategy. However, this also requires long-term stability and funding agreements from central government departments, and sustainable funding reform that addresses social care and the NHS together. Central government should also change performance management to a single joint outcomes framework. Without this the difficulties faced by the care sector will be exacerbated by the gaps between health and social care.

9.3 Effective, efficient social care services will help to reduce the current financial pressures on the NHS by minimising the length of a person's stay in hospital. Keeping older people in hospital longer than necessary increases bed shortages and diverts resources from patients requiring acute care. Longer stays in hospital can also have a negative impact on older patients' health as they quickly lose mobility and become at risk of social isolation. Overall, securing a good patient experience should be the guiding principle of health or social care provision, rather than making saving or integrating systems.