

# Social Care Green Paper ~ Shaping the Future of Care Together

July 2009

## **PURPOSE OF PAPER**

This latest in a series of briefings from the Integrated Living Network gives an overview of the Social Care Green Paper – ‘Shaping the Future of Care Together’ published on 13 July 2009 - which sets out the potential future shape of adult social care and support in England, and a vision for a new National Care Service.

The term ‘care and support’ describes the activities, services and relationships that help people to stay as independent, active, safe and well as possible, and to participate in and contribute to society throughout the different stages of their lives. People rely on a whole range of support, from their families, friends and communities, as well as from state-funded support such as care in their own home or a care home, financial support from the benefits system and help with housing. All of these services combine to help people live active lives, whatever their priorities and needs may be. Local authorities not only provide these services in many cases, but also play a key part by commissioning these services from other providers.

This briefing highlights considerations for local authorities, housing providers and housing related support providers on their role in this agenda with commentary from the Northern Housing Consortium.

## **GREEN PAPER - KEY MESSAGES**

### **Need for Radical Reform**

At 61 years old (designed in 1948), the current system is no longer sustainable or fit for purpose for today’s demography. Life expectancy has extended by 12 years from an average of 66 years back then to 78 years now. The separate systems of social care, disability benefits and housing support need to come together in a more joined up way to deliver the most effective outcomes.

Putting People First created a great first stage to this agenda, and now it is the time for longer term solutions by working towards a National Care Service on a level with the NHS to serve the care and support needs of our society.

Resources are increasingly used to alleviate the pressures on the system by providing care to only those in the highest need. A more effective use of resources in the reform of this system is recommended through investment in better joined up services between health, housing and social care, and a preventative focus to keep people ‘well for longer’, including rehabilitation services. This form of early intervention is the key to longer term efficiency savings, and opens up more opportunity for creative and more effective use of resources. Past successes are not to be forgotten, but instead built upon for maximum benefit, for example advice and support services on benefits, housing, care, health and family support.

### **Affects us All!**

A prominent message within the Paper is that this agenda impacts on the lives of just about our entire nation. All of us at some point in our lives will require a level of support and/or provide a level of support to others close to us, whether this is as a result of very low level needs associated with common complaints, or more complex requirements, for example relating to dementia care.

### **Demography**

The demand on care and support services is ever increasing as a result of our society’s increasing life expectancy, the growing number of disabled people and increased survival rate of illnesses such as cancer which often leave a need for practical, emotional and financial support. There is therefore a clear need for additional funding to support these increasing demands and this has been highlighted in the Paper for discussion.

### **Health and Social Care Inequalities**

The Paper aims to address the perceptions of unfairness in levels of service across the country - the 'postcode lottery'. It seeks to provide consistency in quality with a service underpinned by national rights and entitlements and personalised to individual needs. The Paper outlines that users receiving services will be treated with respect, dignity and kindness – no longer will it be perceived that they have to 'fight for services'. This, in addition to the high quality of advice and support that should be expected, means a requirement for a well trained and knowledgeable workforce. There are resources being made available to ensure that this is achievable.

### **The Cost of Care**

Inefficiencies of the existing system result in high support costs in the region of £30,000 for a person aged over 65 during their retirement. The paper acknowledges that this is unaffordable to most, with many finding that they have to use up their assets and sell their home to pay for the care and support they need. This must be addressed to drive down care and support costs to an affordable level and ensure that no-one misses out on their right to high quality assistance. There have been many considerations made by Government on this point, which are outlined below under 'Funding'.

### **Partnerships and Efficiencies**

The current system consists of various cross sector bodies – public, private and charitable. Inconsistencies or even complete lack of communications complicate the system and only serves to confuse its users. Building better partnerships and thus avoiding duplication will lead to greater efficiency gains, and a much more open and transparent system that is more easily understandable.

There is no single answer about how to help health, housing and social care to work together. Changing mindsets and understanding, and not necessarily changing external structures, is key to joined-up working. The most crucial factors can often be local leadership and the willingness of staff to work together – and the support they have to do so.

### **Role of Local Authorities**

Under either system, local authorities would continue to play the key role in delivering care and support. They would continue to:

- be the channel for state funding and support
- undertake assessments
- provide information, advocacy and care management for individuals
- provide and commission services, and manage the market of care and support providers
- foster innovation in care and support, using their freedom

### **Housing Plays a Key Part**

Housing has been identified as playing a key role in this radical reform as it is acknowledged that housing and housing related support services can have a significant impact on the health and social care arena and it is now widely acknowledged that housing is a key determinant on people's health.

"It is crucial not to see housing and neighbourhoods in isolation from other services. There is, as research has shown over and over again, a close relationship between housing and health. Good-quality housing leads to good health. That is absolutely nailed down and proven. Conversely, exactly the opposite is true: poor housing leads to poor health."

**Professor Alan Walker, All Party Parliamentary Local Government Group inquiry into services for older people, July 2008**

The role of housing includes Supporting People funded housing-related support services for older and disabled people, as well as adaptations that help people get around at home safely, such as handrails and walk-in showers, often funded through the Disabled Facilities Grant.

Local Authorities need to continue to ensure that our housing and housing related support services are promoted widely and contribute to health targets. This can be achieved for example through the Joint Strategic Needs Assessment (JSNA) by feeding local needs into the Local Area Agreement (LAA) targets to ensure that they are a priority within your locality.

### **Making the Aspirational 'Dream' Come True**

So what needs to change to make the vision a reality and transform the current system into a new National Care System?

Three key changes are identified as needed:

- More joined-up working between health, housing and social care services and between care and benefits services
- A wider range of care and support services
- Better-quality, more innovative services, based on the best evidence about what works

Under a new system, organisations will continue to have the same responsibilities set out for them in Putting People First, but there will be implications for the way in which local authorities and other partners work together and with people who need services.

The Government has hinged the Paper around six things that it thinks that everyone in the country should be able to expect, and that would be at the heart of building a National Care Service:

#### **1. PREVENTION SERVICES**

- Free support to stay well and as independent as possible
- Re-ablement help at home post-hospital discharge (e.g. for 6 weeks) which can have significant savings on the support system/NHS
- The government will continue to encourage a range of housing support options including supported living (care in a person's own home), extra care housing (accommodation with design features and support to help people live independently), changes to homes or workplaces that make it easier for people to move about, and designing new homes. Housing-related support can also help to keep people safe. These measures will help to delay the need for care and support later on.

#### **2. NATIONAL ASSESSMENT**

- The Paper proposes a national care and support needs assessment system which are portable and which will prevent the need for re-assessment when a person moves to a new area. This may also encourage greater national mobility.
- Proposes a single eligibility threshold which would provide more consistency than the existing FACS criteria that are often interpreted differently by different authorities, and can be used to 'filter' services to only those with critical or substantial needs
- Consistency of the proportionality of care paid across England eliminating the inequalities of the 'postcode lottery'. Further consideration is needed on this principle around the differing costs of care across England meaning that some people will be able to purchase more care than others.

#### **3. JOINED-UP SERVICES**

- The Paper specifically notes better links between health, housing and social care services. This can dramatically impact on reduction in costs and improved outcomes.
- Services to work together more smoothly and be centred around individual needs (including social care services, benefit system, NHS and housing services, as well as the services provided by many different private and third sector organisations)
- Assessment only needs to be done once as can move with the person assessed anywhere in the country
- NHS and the new National Care Service will be fully joined up

#### 4. INFORMATION AND ADVICE

- Easy navigation of the care and support system
- Access to information on who can help, where, how and how soon making the system more effective and easier to understand

#### 5. PERSONALISED CARE AND SUPPORT

- The ever more prevalent government themes around choice and control, with the tailoring of services to the individual continue to focus strongly in this Paper
- Encourages the possibility of users controlling their own budgets wherever possible

#### 6. FAIR FUNDING

- An element of financial assistance will be provided to all qualifying for care and support from the state to meet the cost of needs
- Assurance that service users' own money is spent wisely

### **Evidence Base – What Works?**

An important part of improving quality is knowing which services will be most effective based on the best evidence on what actually works.

There has historically been a shortage of robust evidence about what works in care and support. For example, while there are many ideas about what might work, and anecdotes about success, there is little solid evidence about what prevention methods work best and are most cost-effective. As we provide care to more and more people, and value for money becomes ever more important, it will be vital for us to know that the changes we are making are the right ones.

It is not a straight forward task to gather this evidence as care and support covers such a wide range of services that there are as many different needs and ways of providing support as there are people who need it. There has however been good progress in recent years on areas such as falls prevention which has improved understanding of what works and what does not.

The Green Paper suggests that an independent body (either new or existing e.g. SCIE) should provide advice on what works best in care and support and that this will help to make sure that, in future, services are as cost-effective as possible and that they are based on evidence.

### **Workforce**

A whole scale cultural shift will take place in the organisations and workforces involved in the care and support system. It is all about a broader range of innovative and high quality services which of course requires an innovative and high quality, fully trained and skilled workforce to deliver. This may mean more staffing is required as demand increases, as numbers of people with complex conditions such as dementia increases, and to provide a broader remit of advice in wider areas such as financial guidance and support.

The Department of Health Workforce Strategy (April 2009) sets out key priorities for workforce reform, and a further Action Plan for the medium/long term is expected for release in a few months.

### **Funding**

The Social Care Reform Grant has committed an extra £520 million over 2008-2011 to support councils to radically transform services and improve choice and control.

What is needed in the main is a fairer system with consistency over who gets state care and support funding to combat the exiting 'postcode lottery'. Decisions are needed on the responsibility for paying for care between the individual, the State and family, as well as ensuring effective use of taxpayer's money.

Balance of responsibility is needed between local and national government, with acknowledgement that local government will continue to play a vital role for example, national government deciding on levels of need while local government decides how much funding provided to each category.

The Paper acknowledges a need to 'spend to save' to meet demands and expectations and a decision is required on the fairest way to bring in extra funding. Of the various options that Government considered for a new National Care Service, the Paper suggests the following three:

1. PARTNERSHIP MODEL

Government support for people of all ages with around a quarter to a third of the cost of care, or more if on a low income. Average costs for those aged 65 and over are estimated at £20,000 – £22,000, though those with more complex care needs associated for example with Alzheimers or dementia could face costs of around £100,000 or more.

2. INSURANCE MODEL

Government support for people over retirement age with around a quarter to a third of the cost of care, *and* make it easier to take out state-backed insurance to cover remaining costs in full (either run by the State or private insurers). Estimated that people may need to pay £20,000 - £25,000 into the scheme, helping those with higher needs to cover what could be a much higher care and support cost.

3. COMPREHENSIVE MODEL

A compulsory state insurance scheme for over 65s, whether or not in need of care, meaning everyone gets free care when they need it. This is estimated to mean a contribution of £17,000 - £20,000. Options are suggested around who would pay what into the scheme based on savings and assets. It is suggested that this helps people plan for their future care costs and also plan what savings and assets they will have to pass on to family. This model is expected to run alongside a free care and support system for those of working age.

The Paper rules out options for everyone to pay for their own care as would leave those less financially able without care, and also rules out a tax-funded model as placing too heavy a burden on those of working age.

### **THE BIG CARE DEBATE**

The development of any new system needs to involve its users at its heart, and as such the Big Care Debate will include consultation with the public, stakeholders and staff will take place over a 16 week period until 13 November 2009.

A series of national stakeholder events, public roadshows and webchats will provide an opportunity to discuss and debate the way forward and feed and steer the government direction on this agenda. An online forum is also available along with a range of other access options including mobile phone information via Directgov, leaflets, Facebook and Twitter.

NHC strongly encourage your organisation to participate in the consultation process by hosting your own event. A toolkit is available to assist with this on the [www.careandsupport.direct.gov.uk](http://www.careandsupport.direct.gov.uk) website. The complexities of the current care system may result in many members of the public not being fully informed on the current system and its true costs. It is important the any events held within your organisations ensure that a full picture on today's position is clearly shared to enable fully informed discussion and debate.

Further information on the Big Care Debate can be found at [www.careandsupport.direct.gov.uk](http://www.careandsupport.direct.gov.uk)

Following consultation, a White Paper on care and support will be published in 2010, with detailed proposals for implementing a new National Care Service.

## **NHC RESPONSE**

NHC are heavily involved in the health and social care agenda through our Integrated Living Network and its Action Learning Group, and very much welcome the Green Paper as a vehicle to start the debate around the development of a National Care System.

- It is very encouraging that the role of housing is repeated throughout this Paper as an acknowledged key-player in the care and support world. NHC have been heavily promoting and advocating the importance of housing in health and social care agendas for a number of years and will continue to do so with the added backing of this Paper through its policy work
- The emphasis on joined up working between and beyond health, housing and social care is also very welcomed, acknowledging the invaluable role that third sector and private sector companies also play
- Positive consideration of funding options and efficiency potential is valued, but we need to ensure that focus is also given to the positive 'human' outcomes that a National Care Service can provide around impact on people's physical and mental health and wellbeing.
- The importance placed on enabling and maintaining independence is extremely well received as housing and housing related support are important facilitators through provision suitable accommodation and the support required to safely remain at home for longer. This can also be strengthened by local authorities promoting and investing in assistive technology as a 'spend to save' based on the proven efficiencies achieved through prevention of incidents in the home and the impact on health, care and support costs.
- The focus on evidencing the value of care and support services is a valuable addition to this Paper in terms of ensuring that funding is effectively focussed on the right areas. A concrete evidence base enables local authorities to build a robust business case for 'spend to save' on areas requiring a funding injection, based on well measured impact of prevention, interventions and evidenced outcomes.
- The numerous references to the encouragement of innovation are very refreshing and welcomed by NHC. An example of how local authorities can embrace creativity can be seen with Supporting People to form part of local authorities' Area Based Grant from April 2010 which opens up opportunities for innovation in joint commissioning of care and support services.
- It should be noted that accommodation costs are proposed to be left out of any new system proposed, as Government feel that those in their own homes have to pay for accommodation and bills, and so residential care settings will follow suit.

## **ONGOING NHC ACTIVITY AROUND THE HEALTH, HOUSING AND SOCIAL CARE AGENDA**

- **Age friendly Communities in the North**  
NHC is undertaking a multi disciplinary research project to build a holistic picture of what an '*Age Friendly Community in the North*' might look like in the year 2020 and is based on the central theme of 'inclusive design' and informed by national policy, research, international innovation and extensive consultation with older and younger people across the north of England. The final report is due for publication in 2009 and will highlight how the home, the neighbourhood and services could be delivered to promote choice and quality of life in an inclusive age friendly way.
- **Joint Strategic Needs Assessment (JSNA) and the Local Area Agreement (LAA)**  
JSNA is about people and the places where they live, and brings local authorities, PCT's and local partners together to generate a shared view of local needs and service provision across the whole population, and jointly design interventions that will lead to better health and well-being with particular attention to the most excluded. A NHC briefing paper, published in April 2008, outlining the scope of JSNA and thoughts around the role and contribution of the housing sector can be found at <http://www.northern-consortium.org.uk/assets/iln/jsna%20briefing%20paper.pdf>

NHC are conducting a review of the links between strategic housing assessments and JSNA in the north. One year on from inception in April 2008 NHC are to investigate whether local authorities and PCTs engaged the right mix of partners and consider the contribution JSNA will make to area based assessment/funding, providing an opportunity to strengthen partnership working. JSNA can provide a tool to involve the housing sector, of particular importance given the inequalities in northern communities, and the very well known connections between poor housing and poor health and well-being.

A desk top review takes place May - July 2009 with a series of interviews with housing and health leads to follow and our final report due the autumn. We hope that this review will contribute to a national picture of housing sector engagement with JSNA and will raise the profile of the role of the housing sector as a key partner to the health and social care sector.

For further information or to take part contact Sarah Taylor at [Sarah.taylor@northern-consortium.org.uk](mailto:Sarah.taylor@northern-consortium.org.uk) or call 0191 566 1029.

- **Health Inequalities**

Government has commissioned Professor Sir Michael Marmot and his team to conduct a strategic review of health inequalities in England which aims to propose an evidenced based strategy for reducing health inequalities from 2010 and will include policies and interventions that address the social determinants of health inequalities.

NHC are engaged in this agenda through our policy focus on the links between housing, health and social care and we have Mike Grady of the Marmot Review Team delivering a plenary on the agenda at this year's Housing Support Conference (see details below).

Get involved in the health inequalities debate (consultation closes on 5<sup>th</sup> August 2009)  
<http://www.ucl.ac.uk/gheg/marmotreview/consultation>

- **Measuring and evidencing the impact of assistive technology/telecare interventions**

Interventions such as telecare, telehealth and telemedicine can provide essential support to help maintain independence in the home. NHC are developing a model to pilot with a small number of our members to evidence the impact of these services and build a business case in terms of not just financial impact and efficiency savings, but also around the broader health and wellbeing impact for the service user and carers.

For further information contact Rachel Collings at [Rachel.collings@northern-consortium.org.uk](mailto:Rachel.collings@northern-consortium.org.uk) or call 0191 5661039

- **Housing Support Conference**

The 7<sup>th</sup> annual Housing Support Conference (formerly known as 'Supporting People') is to take place on 22<sup>nd</sup> and 23<sup>rd</sup> September 2009 at the Hilton Hotel, Blackpool around the theme of 'Personalisation – from Inception to Inspection'. Sponsored by Capita and supported by the Integrated Living Network, CLG and the Department of Health, this year brings a host of prestigious and inspirational speakers and professional practice sessions including Nigel Walker of the Department of Health of World Class Commissioning, Domini Gunn of the Audit Commission on inspection, Lorraine Regan from CLG on Individual Budgets and Mike Grady from the Marmot Review Team on the Health Inequalities Strategic Review.

Book your place at this popular annual conference (formerly known as 'Supporting People') at <http://www.northern-consortium.org.uk/Page/Events/HousingSupportConference.aspx>

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