

Adult Social Care APPG Parliamentary Briefing: Discussion Summary

<u>Securing the Future of Social Care Roundtable: The Kings Fund, The Health Foundation, and The Nuffield Trust</u>

Last week, the Adult Social Care APPG welcomed Sally Warren (Director of Policy, The Kings Fund), Hugh Alderwick (Head of Policy, The Health Foundation) and Natasha Curry (Head of Social Care, The Nuffield Trust) to discuss the future of social care. For more information, please see these think tanks joint briefing The Value of Investing in Social Care. I have attached a short summary of our discussion below.

- 1. Focus on my weaknesses not my strengths: the call heard from Chelsea Lovell from Dimensions UK who has been in supported living for the last six years. She described how often social care support is focussed on the basics: cooking, cleaning etc but falls short of empowering those who use care to fulfil their potential and their ambitions. The support that is offered should be as diverse as the people who use it. The voice of those who use care needs to be involved at local, regional, and national levels.
- **2**. **Social Care is much more than care homes:** a third of those who receive local support are under 64 and the vast majority of care is delivered outside care homes. Small and medium sized care providers supply 70% of the social care market and the official care workforce of 1.5 million people is joined by millions more unpaid carers.
- **3.** There is a massive workforce challenge in social care: There is concern that the vast majority of funding currently allocated through the health and social care levy and other announcements will largely go towards paying for the social care cap, rather than the wider transformation of the sector. There were 105,000 vacancies in social care at the end of last year with many employed on zero-hour contracts. There is also often a small gap (12p) in pay scales between starters and senior staff making career progression unappealing to many.
- **4.** The current social care market is characterised by uncertainty: The challenge is how to encourage reform and innovation in the absence of an environment in which long term investment is guaranteed. Currently investors see a market which is characterised by a lack of capacity to deal with increased need in the sector and Government investment being largely focused on the NHS. There is also anxiety around the reality of the fair cost of care and how a race to the bottom to provide the cheapest care possible can be avoided.
- **5.** Amendments to the Social Care Cap currently being debated in the Lords are key: recent changes to the Government's care cap proposals now mean that existing Government support towards care doesn't count towards the cap. This pushes the cap further out of reach for many working age and older adults, particularly in the Northeast of England.
- **6. Free personal care proposals require further examination:** The difficulty, as shown in the case of Scotland, is in defining what services are seen as free. If this definition is narrow, then it can result in working age adults being penalised. Germany and Japan have stayed away from standard packages and instead have allocated personal care budgets which allows a degree of freedom.

For more information

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