Social care for older people
Home truths

Holly Holder
Fellow in health policy
Nuffield Trust

Joint project with The King’s Fund

Co-authors: Richard Humphries, Ruth Thorlby, Patrick Hall and Anna Charles
Methodology

- England only analysis – some important differences
- National level data analysis
- Four case study LA areas
  - Interviews with individuals from LAs (n=17), CCGs (5), NHS providers (6), independent sector social care providers (25), voluntary organisations (8), Healthwatch and other advocacy-type services (4)
- User interviews
  - 7 experiences shared by people who use services and/or carer
Local authority expenditure on social care 2009/10 - 2014/15

Figure 4 Percentage change in gross total expenditure on older people’s social care (per 100k population aged 65+) between 2009/10 and 2014/15, by local authority

Source: Health and Social Care Information Centre 2015e
Guiding approach to savings: a “new vision”, an “asset-based approach” or “promoting independence”

• Unlike previous “gift-giving” or “paternalistic” approaches

• Gradual erosion of preventative services despite acknowledgement of its importance

• Scale of budget reductions have been bad… and will get worse
“We ask individuals first of all what they can do for themselves, and then we turn to the family and say ‘What can they do?’, then to the local community and say ‘What can you do?’, then only after that do we think about what the council should do.”

“… we probably do find ourselves in greater debate, at times, with families about their views about whether their relative can go home with support or not.”

“We’ve pulled out anything that is, what we would almost say now is the nice stuff, the wrap-around stuff… we haven’t got many places to go”
Impact on social care providers

• Fee levels making it difficult to maintain quality standards
• Lack of career path for care workers and competition with retail
  • Intensification of the needs of social care users
• VCS providers budget cuts alongside increasing demand
• VCS providers seeking to diversify their income streams
  • Difficulties contracting with the NHS
  • Increasing fees for users
• Providers are leaving the market
“I think ultimately quality has to suffer”

“It is now proving almost impossible to find staff willing to work for the low pay which is made available by the councils”

“If all I could take was local authority we’d be bankrupt”

“A lot of good charities have been lost and will continue to be lost. And once you lose those, they never come back.”
Impact on the NHS – delayed transfers of care

Figure 9: Who is responsible for delayed transfers of care? Delayed days by responsible organisation, 2010 to 2016

Source: NHS England 2016a
Social care cuts alongside reduced capacity in the NHS - falling numbers of district nurses and GPs per person aged 85+.
Impact on older people, their families and carers

- Local authorities: emphasis that savings had been designed to avoid harming service users or carers
  - But unmet need is rising
  - More complaints to Ombudsman and poorer inspections
- Voluntary sector provider: without a solution to the funding pressures “people will be dying in the homes… alone. Or suffer.”
- Increasing pressure on carers
Robert’s story: the experience of an unstable home care market

I had different care workers nearly everyday … [the provider] changed their name four times while I was with them

The new firm were just impossible to deal with. The management changed every three, six months… [the supervisors] couldn’t care less, that was their attitude, because their jobs were on the line

Then they moved me to [another] firm… the manageress was a very nice person… but she was having difficulty getting staff, so she sold her business.

The area manager [of another new firm] stood in the bedroom and he said to me “Mr […], you’re not cost effective.”
Sue’s story: a daughter’s experience of organising carers through direct payments

*We get all the admin to do… we then have to employ enough carers to cover the hours and then do a rota*

*And they’re all on holiday because they’re all then entitled to holidays… we’re not experienced employers… I’m not experienced in employment law*

*There’s not a lot of back-up for you*

*We’ve fallen lucky with our girls but it’s a bit difficult to know whether these carers are trained to do what they’re doing*
Ongoing concerns…

• No one has a full picture of what has happened to older people and their carers

• Widening gap in experience between those who pay for their own care and those who rely on public funding

• LAs’ vision of an ‘asset-based approach’ requires:
  • Dialogue with the public
  • A vibrant voluntary and community sector
  • Availability and willingness of families
  • Health and care services able to support people to live at home
Achieving more with less
  • Organisations achieving better outcomes within current resource

A different offer
  • Make it clear to the public that they will have to fund their care or that families will have to fill the gap
  • Create products or financial incentives to save
  • Widen existing inequities in access and experience?

Long-term reform of funding
  • Dilnot (2011), Barker Commission (2014), integration of budgets