

Towards a consensus for the future of adult social care

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5th July 2017



Background

- Social care provides care support and safeguards when we are in our most vulnerable circumstances.
- Social care touches the lives of millions of people – almost one fifth of the adult population of England has experience of social care
- Social care relies heavily on over 5.5 million unpaid carers
- Social care is a vital ‘connector’ to other public services, especially the NHS but also local housing and community services.



Resources

- Councils have prioritised social care in the past few years (it accounts for 36.9% of all their spending compared to 30% in 2010).
- Funding didn't keep pace with demographic change and increased complexity. At least 400,000 fewer people are getting publicly funded help.
- Most care providers are small businesses that form a sizeable chunk of the local economy in many places - £43billion to the national economy and supports 1.5 million full time equivalent jobs. Significant multiplier effect to stimulate economic growth.
- The gap between disabled people's employment rate and the rest of the population is about 30% (about 2 million people). Strong economic case for trying to close this gap. By helping one million more disabled people into work would boost the economy by £13 billion.

Budget Survey - savings

- Adult Social Care overspends in 2016/17 amounted to £366m. Pressure will roll forward.
- Planned savings for 2017/18 are £824m (5% of the net Adult Social Care budget and 27% of total council savings).
- Directors' confidence in making these savings is falling: in 2015 45% of directors were fully confident planned savings would be met. Last year it was 31%. This year it remains at 31% despite the additional funding and reduces further to 8% for 2018/19.

Budget Survey - key messages

- Demand and costs are increasing and despite the welcome additional funding and recognition, and despite council protection, adult social care continues to have to make significant cuts
- Real concerns about the sustainability of the care market
- Support for and pressures from the NHS are increasing and the Better Care Fund is not providing the additional resources social care needs
- The increasing care needs of working age adults are having an increasing financial impact
- Prevention is recognised as a major way of making savings, but it is impossible to prioritise
- There is still an urgent need to find a long term sustainable solution for funding adult social care

Care market in crisis

- Provider fee increases continued but the average rate per hour of home care was £15.39 (the desired UKHCA benchmark was £16.70)
- 79% of Directors report that providers in their area are facing financial difficulties now.
- Providers are continuing to sell up, close homes or hand back the contract for the care they deliver affecting thousands of people.

	Closed or ceased trading within the last 6 months		“Handed back” contracts within the last 6 months	
	Number of councils (123 responses)	Predicted number of people affected (117 responses)	Number of councils (117 responses)	Predicted number of people affected (117 responses)
Home care	48 (39%)	5,670	43 (36.8%)	3,135
Residential/Nursing care	54 (43.9%)	1,793	11 (9.3%)	331

Context

- The Government's Spending Review in 2015 announced new money for the BCF of £105m for 2017-18, £825m for 2018-19 and £1.5bn for 2019-20.
- 2017 Budget announced an additional £2 billion over 3 years as a grant from CLG to councils to be included in local BCF pooled funding.



Grant conditions for £2b SC funding

Use of grant

- Spend/pressures on adult social care
- Used for the purposes of meeting adult social care needs – stabilising the care market
- Reducing pressures on the NHS - including supporting more people to be discharged from hospital when they are ready - and stabilising the social care provider market.



Performance

- S151 officer sign off
- Quarterly reports on spend and activity (CLG monitoring)
- Developing basket of metrics (ADASS and LGA involved) about 'patient flow'
- Sector led support and some targeted system reviews by CQC – will consult on the methodology.

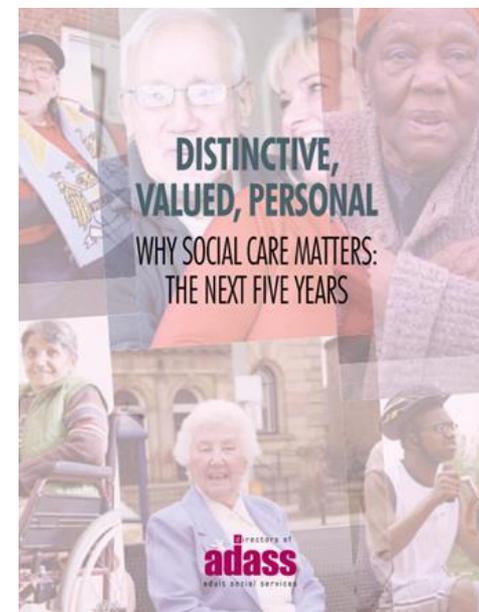


Distinctive Valued and Personal

We want to see a system that is protected, aligned, and re-designed

To achieve this there are five immediate priorities:

- To ensure that social care funding is protected and aligned with the NHS
- Ensuring that the level of quality is sufficient
- To ensure that new social and health care delivery models prioritise the need for:
 - Good information and advice
 - The recognition that we are all interdependent
 - Services that help us get back on track after illness
- Build a sustainable workforce.
- To strengthen local accountability and innovation by developing local Health and Wellbeing Boards



Models of care

- We need adequately funded models of care that align – and re-design - care and health services effectively.
- There has been good progress in developing different models of care that enable people to live as independently as possible. For example, through rehabilitation and reablement that avoids dependency on long term care and traditional services
- A proper transformation fund is needed to meet the double-running costs of developing community alternatives to hospital and long term care and making faster progress in developing the model of care and support we propose.

