CIH member briefing

Summary of Department of Health’s 2012 publications:

‘Caring for our Future: reforming care and support’

And

‘Caring for our Future: progress of funding reform’

July 2012
Summary

This member briefing highlights key aspects of two recently published government documents, *Caring for our future: reforming care and support*; and the *Progress report on funding reform* which is the government’s response to *Fairer Care Funding (July 2011)*.

Government has also published its draft Care and Support Bill and invites comments (closing date for which is 19th October). The Bill will streamline the legal framework for care and support, following on from the Law Commission’s review of existing legislation and recommendations for simplification and there is a specific consultation around new measures to support safeguarding of vulnerable adults. CIH will be producing a separate paper inviting members’ comments on the Bill soon.

This briefing gives more detail on aspects of these two publications alongside CIH perspectives. We have also highlighted sections (in italics) where your comments and observations would be most welcome.

- Summary of the Caring for our future: reforming care and support white paper and CIH responses
- Summary of the progress report on taking forward the recommendations of Fairer care funding

Caring for our future: reforming care and support - the government’s white paper

*Caring for our future: reforming care and support*, the Government’s long awaited care and support white paper was published on 11th July. It sets out the government’s vision for social care and support, in particular affecting older and disabled people and those with long term conditions, building on the results of its earlier *Caring for our future* consultation (CIH response December 2011).

The white paper sets out the principles on which care and support are to be established, notably:

i) A renewed and greater focus on prevention of or delaying the need for more intensive care interventions

- The focus on preventing and delaying the need for formal care and support, includes greater recognition of the role of housing through a new care and support housing fund of £200m to provide 6,000 new supported homes.

- It sets out a commitment to work with Foundations, the umbrella body for home improvement agencies, to extend the reach of adaptations and handypersons services more widely. In particular Government is keen that more self funders are aware of and able to access these services. No further funding has been committed (the services are funded through DCLG).
Further explicit commitment to people being in control of their own care and support.

- The white paper acknowledges the vital role of information and advice in enabling people to exercise control and choice over their care and support. It proposes to integrate national information systems on care and health services, and has committed £32.5 million to support local authorities to establish local online services.

- Government reiterates its commitment to extending the use of personal budgets so people are aware of what they are entitled to, and increasing the numbers of people who take these as direct payments, to enable more creative use of the funding tailored to the individual.

The government’s vision for what care and support for older and disabled people and those with long term conditions is set out in a series of statements from a recipient’s perspective and the anticipated actions across government and the care and support sector to achieve these outcomes:

a) I am supported to maintain my independence as long as possible
b) I understand how care and support works, and what my entitlements and responsibilities are
c) I am happy with the quality of my care and support
d) I know that the person giving me care and support will treat me with dignity and respect
e) I am in control of my care and support.

**a) Maintaining independence**

*Prevention:*

Housing and community services have been explicitly recognised as contributing to helping people to maintain their independence and prevent the need for higher cost interventions.

The government will require local authorities to commission preventative services, and this duty is set out in the draft Bill.

- The new duty may provide new opportunities for housing related support for people in communities as it contributes significantly to prevention of higher cost interventions. Housing and support providers should collate robust national and local evidence of the value of their services to demonstrate the benefit of investment in these services locally.

*Isolation and wellbeing*

The impact of a growing older population and the increase of single person households raise significant concerns about the impact of social isolation for health and wellbeing (a definition of which is set out in the draft bill).
In developing the outcomes frameworks for 2013/14 for both public health and adult social care, the government has committed to including a shared measure for ‘wellbeing’ that has a particular focus on social isolation. Community skills and networks are to be considered and included in the scope of Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies, as mechanisms to tackle isolation.

Time banks, voluntary and community activity, connecting care homes (and supported housing) to wider local community activity are all part of the bigger ambition to stimulate supportive communities. The Department of Health will also identify expert bodies to bring together a library of evidence to support commissioning decisions (to be held by NICE).

- The role of communal assets within supported and sheltered housing and local estates in supporting community based activities should be explicitly included in this.
- CIH will work to ensure that housing examples are included within the library of evidence.

**Housing**

The Department of Health aims to stimulate more housing options for older and disabled people, particularly for those who are older home owners, through a care and support housing fund of £200million over 5 years from 2013/14. NHS bodies are currently working with local authorities to identify land no longer required for health facilities to make it available for other use, as directed in *Laying the Foundations: a housing strategy for England*. These bodies will be expected to work with local authorities to consider the potential for developing housing for older and disabled people on that land, although the white paper is clear that decisions on the use of that land are to be taken locally.

- DH previously invested £227million in extra care housing. 19 schemes provided through this investment were evaluated by the [Personal Social Services Research Unit](#) (University of Kent), and demonstrate better outcomes for residents at similar or lower costs than care homes.
- Notably these schemes can provide opportunities for more and better facilities that can also be accessed by local communities, for example provision of GP surgeries or community based nursing services etc. The additional funding will enable more creative solutions for older people that can also address local community needs.
- Aids and adaptations and handypersons services are crucial elements of preventing falls and accidents, and maintaining mobility and independence. CIH therefore welcomes the Department of Health’s commitment to working to extend the reach of home improvement agencies and handypersons services to those who fund their own adaptations and the timeliness of intervention.

The Department of Health’s existing ambition to extend the use of assistive technology (telecare and telehealth) through the [3 million lives](#) initiative is also emphasised. This is a government and industry led initiative to extend the use of assistive technology amongst the 3 million with long term conditions and/ or social care needs.
• **CIH will continue to work to improve investment and systems to support aids and adaptations, through its practice and policy work, and its involvement in the Home Adaptation Consortium.**

• **CIH is developing a short ‘How to’ guide looking at raising awareness and making effective use of assisted technology within the housing sector.**

### b) Understanding how care and support works, rights and entitlements

National and local information and advice is to be provided by the Department of Health and local authorities respectively to enable more effective future planning and to help to address the current tendency to crisis management which is inherent in most care systems.

From April 2013 a national source of information about health, care and support will be provided by government. It will legislate in the draft bill to ensure local authorities provide comprehensive information and advice services, available for all whether or not they are entitled to state support with care costs. Funding of £32.5million will be available in 2014-15 to help local authorities improve online information.

- **Accessible and independent advice and information is increasingly vital to help people to navigate the options available to them, including housing and preventative services such as adaptations.**

- **CIH would encourage these initiatives to connect with the valuable existing services of FirstStop.**

From 2015, the government will bring in, through the draft bill, a minimum eligibility threshold to address the current uncertainty and variations over what can be received across local areas. In the white paper government commits to further investment of £300million from the government and NHS. From government’s perspective this funding will enable local authorities to manage demand without further restrictions on eligibility.

- **CIH welcomes the minimum threshold and the increased certainty it will bring to people requiring care. We would not want to see local authorities who currently set more generous thresholds to limit what customers can receive only to the minimum. However, we also acknowledge that increasing demand and constrained funding will mean a very pressurised environment for local authorities and people in receipt of care. In the long term this will make the shift to prevention and early targeted intervention, including housing and related support, increasingly important as part of the solution.**

A new assessment system for people requiring care will be considered, and people will be able to move to different local authority areas in the assurance that care needs will be met in the new locality until a new assessment has been undertaken, and any difference in the new assessment explained. Government is keen that new providers become involved in providing assessment services.
Carers will also be entitled to an assessment, with a minimum threshold of eligibility for support, and the NHS Commissioning board and clinical commissioning groups will be expected to work with local partners to identify and support carers.

- **In spite of the further investment in care, demand is increasing and therefore the focus on preventative services and those that provide quick and effective re-ablement will become more important in addressing growing needs and stretching constrained resources.**

- **There is a potential role for housing and related services in assessment, and we would encourage the single assessment process to embed housing and support options within this. Local authorities, clinical commissioning groups and health and wellbeing boards should consider how to connect with housing partners to support their identification of local needs for individuals and carers, drawing on their local community networks.**

- **CIH consultancy has been funded by DCLG to work with local authorities to ensure that, where efficiencies are necessary across housing and support, then the reduction and decommissioning of low level preventative services are minimised.**

c) **Quality of care and support**

Age discrimination in delivery of NHS and care services will be banned from October 2012. To improve quality across care services, every registered residential or home care provider will be profiled on the NHS and social care information website ([www.nhs.uk](http://www.nhs.uk)) and these profiles will be expanded over the following year with details about the effectiveness and quality of care, how many complaints are made about the service etc.

Additional information will be available from the Local Government Ombudsman Service, which will publish data on the nature of complaints about care services, and how these have been addressed, from 2013. The government will also encourage comparison websites to help people to choose services. It will look to pool information from these sites to use in the profiles on the national site at [www.nhs.uk](http://www.nhs.uk). Government will also make the data on the national site available for organisations that can develop independent and easy to use quality ratings tools. All of which is intended to help people to understand what is available and to judge what services they want. Government will enable open access to data on the provider quality profile, to support the production of independent quality ratings.

Local Healthwatch will be supported to fulfil their responsibilities in being the local consumer champion for health and care services.

The National Institute for Health and Clinical Excellence (NICE) will have an expanded role to develop better understanding of what quality looks like in adults’ care, including development of a quality standard for home care, and it will hold the library of evidence to support commissioning decisions.
The capacity of the housing related support sector to develop frameworks to support quality and delivery of personalised outcomes is one that can contribute significantly to the development of structures in health and care. CIH will work with NICE and other bodies to ensure that this is understood and lessons transferred. CIH’s development of the Service Quality Tool is one that we will be sharing with appropriate bodies as part of this.

Safeguarding
Multi agency and multi-disciplinary partnerships exist locally to safeguard vulnerable adults. Government will put these on a statutory basis (in the draft bill) to ensure agencies work together locally to prevent abuse through Safeguarding Adults Boards. Core agencies will include the police and NHS organisations. The Safeguarding Adults Board will be expected to work with local Healthwatch to publish a strategy stating: priorities; mechanisms for effective joint working, and required outcomes against which they will be judged.

Local authorities will have the power to undertake safeguarding enquiries and the Boards will have responsibility to carry out safeguarding adults’ reviews, identifying lessons and preventing recurrence of problems.

- CIH will encourage local Healthwatch and safeguarding boards to connect with the housing organisations in their locality most effectively, through existing providers’ local groupings or other appropriate mechanisms.
- Local housing providers should consider how they can collectively support easier engagement between themselves and the new health structures, safeguarding boards etc.

Local markets
Local authorities will have a duty to promote diversity and quality in the provision of care services. Government will work with commissioners, providers and leaders in the sector to end poor practices that undermine effective care, such as commissioning in terms of narrow timescales.

d) Being treated with dignity and respect

A new code of conduct and national minimum training standards will be introduced; increased training and skills will be connected to the Care Quality Commission’s registration requirements. Increased numbers of apprenticeships and a care sector specific compact will be used to drive up quality. The compact will involve clear statements of standards required and a skills pledge specifying the minimum skills expected of care workers, to which employers will sign up. A Leadership Forum will be launched by March 2013 to ensure high quality leadership in the sector supports the delivery of the white paper’s proposals.

e) Being in control of care and support

Personal budgets will be an entitlement for all who require non-residential care, and local authorities will be expected to offer the option of a full or partial direct payment of the personal budget, as part of the government’s commitment to increasing
personal choice and control over care. There will also be pilots to explore the use of personal budgets within residential care.

Local authorities will be expected to assist everyone to develop a care and support plan (even when the individual is not eligible for any state help in funding) possibly subject to a small charge, where the person could afford it.

Within residential care, from April 2013, the income people earn from employment will be exempt from residential care charges, to support more disabled people into employment.

Local authorities will have a duty to promote the integration of services, and health bodies, including clinical commissioning groups and health and wellbeing boards will have similar expectations. The additional funding of £300million from the government and NHS (see above page 5) is intended to support this drive for integrated services – and its use will be determined by the groups working together on the health and wellbeing boards. This will be expected to include further integration of services that help early interventions and re-ablement at transition points, for example, on discharge from hospital.

- **Collectively housing providers locally need to consider how to make it easy for health and wellbeing boards to engage with and involve them in their strategic assessments and strategies, and the solutions they identify to meet local needs.**
- **CIH will continue to work with the sector to develop these important local links, to ensure that housing and related services are part of the integrated approaches.**

**CIH initial response to the white paper**

- The white paper demonstrates an understanding of the significant role of decent housing, neighbourhoods and related support to the prevention and/ or delay of increased dependency and ill health that leads to more costly health and social care interventions. This is something CIH has long since advocated, so the explicit recognition of this and the funding is very welcome.

- Aids and adaptations and small repairs and maintenance provided through handypersons services provide critical services to maintain independence in the home. Although no further funding has been invested in these services, the commitment by Department of Health to work with the sector in extending the reach of these services is important. It will hopefully influence action at the local level to connect and invest in these services through local authorities (both social care and public health) and the newly emerging health bodies.

- Information and advice that is locally appropriate and accessible is increasingly vital to enable people to make plans for their future. The
national housing and care advice delivered through FirstStop needs to be linked to the wider health and care advice systems identified in the White Paper. (FirstStop is a free helpline for older people, their carers, families and friends, to access information and advice about housing and care options in later life. It is currently funded by DCLG). In addition the examples of local services linked to FirstStop could provide useful examples for the development of more local services.

- The government’s acceptance of the principle of shared responsibility for funding long term care, as set out in the recommendations from Fairer Care Funding are welcome. But to make progress, the details of actual resources, and the explicit balance of that shared responsibility to meet costs between the individual and the state are needed. Until that is done, this will remain an area of risk, uncertainty and anxiety for people who need care, and their carers. The longer these issues are left unresolved the longer the current patterns of lack of planning for future contingencies will continue. This will also hinder the development of more effective and innovative services due to concerns by providers over long term investment.

You may be interested to read our press release on the white paper
Caring for our future: progress report on funding reform – the government’s update on taking forward recommendations from Fairer Care Funding

Alongside the white paper and the draft Bill, the government has also produced a progress report on funding reform in response to Fairer Care Funding (July 2011), the report of the long term care funding commission led by Andrew Dilnot. The Fairer Care Funding report was fundamentally concerned with developing a system to ensure shared responsibility for meeting care costs between the individual and the state, and to provide a greater sense of certainty over these matters, that will enable people to plan for how best to meet their own obligations (in particular in relation to residential care).

Both the white paper and the progress report make clear that the government accepts in principle the main recommendations made in Fairer Care Funding to underpin any new funding system. However, at the same time the government is clear that this is dependent on being able to afford such a system, and has postponed further discussion around key elements until the next spending review, including:

- The level of cap on an individual’s own contribution to their care
- The extension to the level of assets an individual is allowed in means testing for state contributions
- More detail on the mechanisms to develop the approach of shared financial responsibility for care funding.

The table below summarises both recommendations and progress to date identified in the progress report.

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<thead>
<tr>
<th>Main recommendations from Fairer care funding report (July 2011)</th>
<th>Action and timeframe from Government’s progress report (July 2012)</th>
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<tbody>
<tr>
<td>There should be a clear national eligibility criteria to bring consistency and fairness to the system</td>
<td>A National eligibility threshold has been agreed in the white paper and will be brought in through provisions of the draft care and support bill. To be introduced April 2015</td>
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<td>Government should run an awareness campaign to ensure that people understand what they need to fund and their responsibilities in relation to their care</td>
<td>A clear universal source of information will be made available nationally, including how the care system works, who is eligible and how much care costs. The draft care and support bill includes provisions to require local authorities to ensure local information is available and funding (£32.5 million) to support local online services has been set out in the white paper</td>
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<td>Develop a new information and advice strategy</td>
<td>Included in above</td>
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<td>Carers should have an improved assessment alongside the person they are caring for</td>
<td>The draft legislation will bring in a carer’s right to an assessment and eligibility for support</td>
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<td>The government should work to integrate care services more effectively with the wider care and support system</td>
<td>The white paper and the draft bill include action to drive better integration across health, care, support and housing services, including a duty to cooperate with relevant bodies and across the social care and housing departments of local authorities</td>
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<td>Cap to contribution an individual needs to pay towards their care over their lifetime</td>
<td>The government agrees in principle with this as part of a new funding system but decisions on how it is to be paid for, what the amount should be is to be considered as part of the spending review. Matters to consider include what costs should be included in the cap, how it should be raised over time</td>
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<td>The commission recommended a range between £25,000-£50,000, with their suggested level suggested £35,000</td>
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<tr>
<td>Extended eligibility threshold for means tested help – suggested level to increase to £100,000 from current £23,250.</td>
<td>As above. Matters to consider include what the level should be and how it should be raised over time</td>
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<td>Reduced cap for people with early care needs in working age (40-65) and non for those entering adulthood with care needs</td>
<td>As above.</td>
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<tr>
<td>People should continue to make contribution to living costs when in residential care suggested range between £7,000-£10,000</td>
<td>As above</td>
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**Additional measures identified in the progress report**
The white paper sets out a clear direction of travel that focuses more on prevention and maintaining wellbeing, with the inclusion of housing based services:

- Aids and adaptations/handypersons services
- Greater use of assistive technology
- Increasing housing options including the £200 million care and support housing fund

Introducing a universal system of deferred payment for residential care (from sale of property after the individual’s/spouse’s death, with the possibility to levy interest charges, to extend availability and sustainability of system)

Supporting greater choice and control for people over care and support services by enabling them to know what good services look like and to help to assess what is available through:

- Work by NICE on a library of good practice (to support commissioners)
- Referring home care to NICE for a quality standard
- Supporting comparison website
- Developing a national provider profile website

Setting up a working group to develop better financial options and tools, and support people to plan more for later life and care needs.

**Next steps:**

Government has also published its draft Care and Support Bill and invites comments (closing date for which is 19th October). The Bill will streamline the legal framework for care and support, following on from the Law Commission’s review of existing legislation and recommendations for simplification and there is a specific consultation around new measures to support safeguarding of vulnerable adults.

CIH will be producing a separate paper inviting members’ comments on the draft Bill soon. Any member with views on the contents or implementation of the Bill, funding and its implications for housing providers are urged to get in contact with Sarah.davis@cih.org or call 024 7685 1793 to help shape our response to the Bill and the future direction of care and support in England.

**Contact:**
For any comments or questions on this paper please contact: Sarah.davis@cih.org Senior Policy and Practice Officer
024 7685 1793