Home care (social care in England

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What is social care?

◆In England usually talk about 'social care' but is vague term, definition hard to find and no legal definition

Nearest to definition

◆ It is focused on providing assistance with activities of daily living, maintaining independence, social interaction, enabling the individual to play a fuller part in society, protecting them in vulnerable situations, helping them to manage complex relationships and (in some circumstances) accessing a care home or other supported accommodation (NHS, 2012).

Who provides social care?

152 local authorities (councils) are responsible for social care In England



Duties of local authorities

Local authorities have a duty to carry out an assessment of needs where someone appears to be in need of social care, and to meet eligible assessed needs.

Local authorities cannot lawfully commission services that are clearly the responsibility of the NHS (with some exceptions)

Funding of social care

- Funding from government
- Council tax (payable by people who own or rent a home)
- Contributions from social care users
- Business tax
- Contribution from NHS



Average spending on long-term care as percentage of GDP, 2006–10

Netherlands	2.3
Denmark	2.2
France	1.1
Germany	0.9
United Kingdom	0.9
OECD average	0.8
Sweden	0.7
Spain	0.5

No more recent figures available for UK or England

Assessment of need

- Purpose to identify needs person has, how these impact on well-being and outcomes person wants to achieve in day-to-day life
- Must be person-centred, involve carer if there is one, and any other person they want to be involved
- Care provided by carer must not influence eligibility, but local authority not required to meet needs the carer is willing to provide

Forms of assessment

- Can take a number of forms
 - > Face-to-face with appropriately trained assessor
 - Supported self assessment, using similar assessment material to above, with accuracy assured by local authority
 - ➤Online or phone assessment- for less complex needs
 - ➤ Joint assessment with other agencies

National eligibility (since 2014 Care Act)

- (1) An adult's needs meet the eligibility criteria if—
- (a) adult's needs arise from or are related to a physical or mental impairment or illness;
- (b) as a result of the adult's needs the adult is unable to achieve two or more of the outcomes specified in paragraph (2); and
- (c) as a consequence there is, or is likely to be, a significant impact on the adult's well-being.

Specified outcomes to be achieved

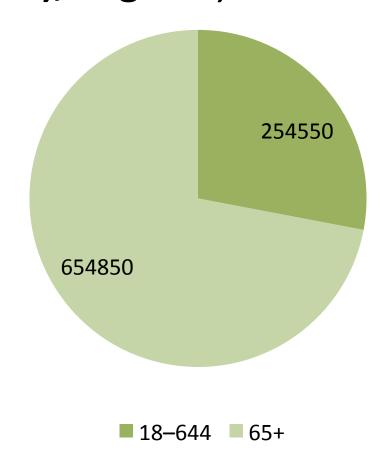
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- (a) managing and maintaining nutrition;
- (b) maintaining personal hygiene;
- (c) managing toilet needs;
- (d) being appropriately clothed;
- (e) being able to make use of the adult's home safely;
- (f) maintaining a habitable home environment;

- (g) developing and maintaining family or other personal relationships;
- (h) accessing and engaging in work, training, education or volunteering;
- (i) making use of necessary facilities or services in the local community including public transport, and recreational facilities or services; and
- (j) carrying out any caring responsibilities the adult has for a child.

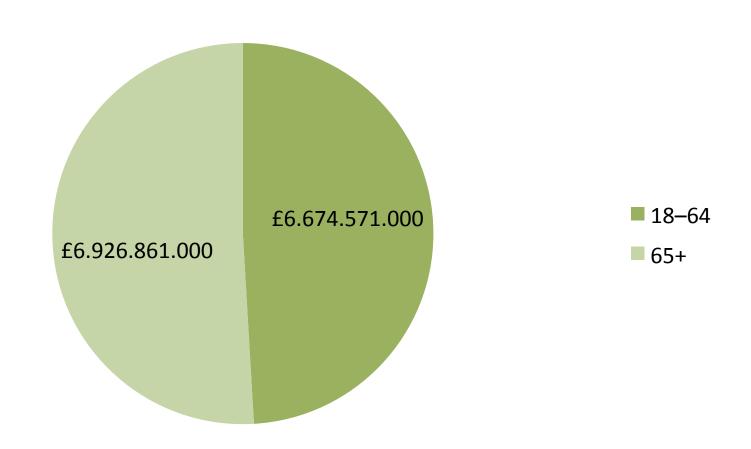
Financial assessment

- Social care is means-tested. Income and capital taken into account (but not house for non-residential care). Capital above £23,250 not eligible for local authority funding.
- Since Care Act 2014 people not financially eligible can ask council to arrange care to meet their needs (may be charged arrangement fee)

Total number of local authority funded longterm care recipients (residential and home care), England, 2016–17



Gross local authority expenditure on long-term care, England, 2016–17



Numbers receiving and expenditure on long-term care 2016–7(residential and home and community care)

- 909,000 receiving funded long-term care in England 2016/17
- 72% are aged 65+
- 65+ receive 51% of gross expenditure on longterm care
- 5.5% of people aged 65+ receive long-term care

Numbers receiving and expenditure on home and community care

- 210, 925 people aged 18–64 and 246,230 aged 65+ were receiving local authority funded home care and support 2016/17
- Expenditure was 4.23 billion on 18-64s and 2.48 on 65+ 37%
 on 65+
- Some evidence that older people more likely to receive only 'traditional care', with activities of daily living, not recreational or community
- Figures on older people paying for own home care very uncertain – perhaps 20-25% of total 2006–8 and likely to be increasing

Personal budgets

- Since Care Act every person with funded care has a personal budget – this enables them to know how much money is available to meet their care needs, and how much money (if any) they have to contribute. This is meant to allow them greater choice and control over how their needs are met
- Three types of personal budget
 - managed personal budget managed by local authority in line with person's wishes
 - direct payments (cash-for-care)
 - managed by third party (often provider) may be called individual service fund

Direct payments

- Local authorities are encouraged to promote direct payments
- ❖ Direct payments are monetary payments made to people who request this to meet some or all of their support needs – they allow people to commission their own care and support – but can only be used for eligible needs in the care and support plan
- If the person doesn't have capacity an authorized person may request direct payments for them
- They can't at present be used for long-term residential care
- There is evidence from various studies that outcomes are better for people using direct payments rather than managed personal budgets

Use of direct payments

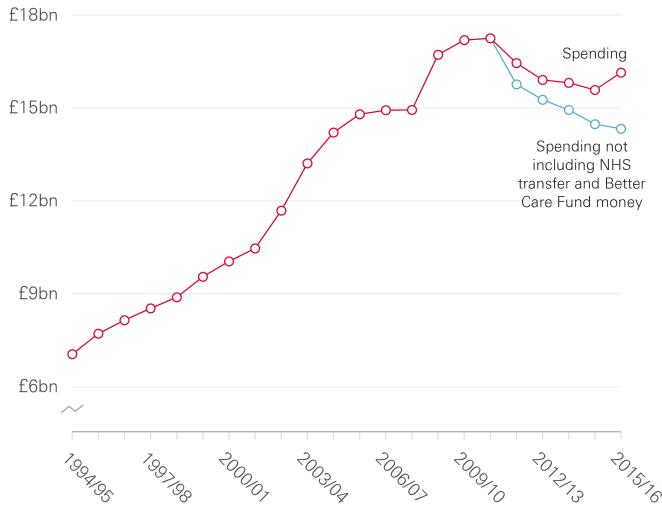
- □ In 2016 around 29% of direct payment recipients were employing their own staff (personal assistants). The number seems to be decreasing according for Skills for Care, 2017.
- □ Direct payments cannot be used to pay a close relative living in the same house for care and support but they can be paid for administration/management
- Many local authorities contract with voluntary or user-led organizations to support people employing their own staff
- □ In 2016/17 41% of people aged 18–64 funded for home and community care received direct payments compared to 17.6% of those aged 65+

Provision of home care

- Local authorities purchased about 2% of home care from independent providers in 1992 and 89% in 2011–12
- Main role of local authorities to facilitate a market of diverse providers
- There were around 8,500 Care Quality (CQC) Commission regulated services providing home care in 2016 (Skills for Care, 2017)
- Services providing certain activities, including personal care, have to register with the CQC.
- Care workers joining a regulated provider are expected to obtain a Care Certificate since April 2015.

Spending on personal adult social services

Change in net spending in England, 1994/95-2015/16





NHS Continuing Healthcare

- NHS funds both health and social care if a person has a 'primary health need' i.e. a need beyond that which a local authority has a lawful power to meet.
- Often contentious between health and local authority

District nursing – the home health service

- Funded by NHS
- A higher proportion of independent providers than in acute hospital and mental health sectors
- Services usually reserved for people who have difficulty in leaving home – often people with complex and multiple health needs
- Demand for service increasing but some evidence that workforce declining