

SCRUTINY REPORT



MEETING: Health Scrutiny Committee
DATE: 9th November 2022
SUBJECT: People at the Heart of Care: Adult Social Care Reform White Paper
REPORT FROM: Director of Adult Social Care
CONTACT OFFICER: Adrian Crook

1.0 BACKGROUND

- 1.1 On 1st December 2021, a White Paper on the future of adult social care was published. The policy components of the reform reflect the transformation currently underway in Bury: improved housing options, assistive technology, a commitment to the workforce, sustainability of the care sector and greater choice and control for our residents.
- 1.2 To implement this, the treasury announced £5.4 billion over 3 years solely for adult social care reform and at the Spending Review in October, it was announced that this investment will be used for the following areas:
- £3.6 billion to pay for the cap on care costs, the extension to means test, and support progress towards local authorities paying a fair cost of care, which together will remove unpredictable care costs
 - £1.7 billion to improve social care in England, including at least £500 million investment in the workforce.
- 1.3 The Care Act 2014 – particularly its focus on wellbeing – provides a strong foundation for the vision in this White Paper and will strengthen how care and support is delivered.

2.0 PEOPLE AT THE HEART OF CARE: THE WHITE PAPER

- 2.1 The White Paper sets out an ambitious 10-year vision for how support and care will be transformed in England. The vision puts people at its heart and revolves around three objectives:
- People have choice, control and support to live independent lives.
 - People can access outstanding quality and tailored care and support.
 - People find adult social care fair and accessible.
- 2.2 The document describes a range of transformational workstreams to support this vision, as well as the funding to implement. This will include:

- A Workforce Strategy enabling dedicated investment in knowledge, skills, health and wellbeing, and recruitment policies to improve social care as a long-term career choice.
- Driving the supply of supported housing and embedding the strategic commitment in all local places to connect housing with health and care.
- Further financial commitment to the Disabled Facilities Grant.
- Continued investment in the Care and Support Specialised Housing Fund to incentivise the supply of specialised housing for older people and people with a physical disability, learning disability, autism or mental ill-health.
- Investment to drive digitisation across the sector and unlock the potential of caretech innovation that enables preventative care and independent living.
- Launch an Innovative Models of Care programme to support local systems to build the culture and capability to embed into the mainstream innovative models of care.
- A focus on prevention and health promotion to support people to live healthier lives for longer.
- Empowering those who draw on care, unpaid carers and families by investing in new ways to help people navigate local adult social care systems.

3.0 THE CARE CAP

- 3.1 From October 2023, the government will introduce a new £86,000 cap on the amount anyone in England will need to spend on their personal care over their lifetime. In addition to this, changes to the Lower Capital Limit and Upper Capital Limit mean that this is a more generous offer than a previous proposal in 2015.
- 3.2 From October 2023, anyone assessed by a local authority as having eligible care and support needs, either new entrants or existing social care users, will begin to progress towards the cap. Costs accrued before October 2023 will not count towards the cap.
- 3.3 Before the cap comes into effect, local authorities need to identify self-funders to ensure that they begin progressing towards the cap from the point it comes into effect.
- 3.4 For each person with eligible needs, the local authority must provide either a personal budget, where the local authority is going to meet the person's needs, or an independent personal budget (IPB), where the individual arranges their own care. For individuals who receive financial support for their care costs from their local authority, it is the amount that the individual contributes towards these costs that will count towards the cap.
- 3.5 Once the cap has been reached, the person will continue to remain responsible for meeting or contributing to their daily living costs and any top-up payments they have chosen to make. It will be the responsibility of the local authority to inform the person that they have reached the cap.

4.0 FAIR COST OF CARE

- 4.1 To deliver the objectives of the cap on personal care costs, self-funders need to have the option to pay the same price as the local authority would pay to meet their needs. This will be the rate which is used on their behalf to meter them towards the cap.

- 4.2 Allowing self-funders - who represent 50% of the market and pay more on average than the LA rate - to pay currently unsustainable local authority rates would seriously destabilise the already fragile care provider market. A sustainable care market is fundamental to underpinning the ambition of the White Paper and charging reforms.
- 4.3 Uncertainty over future funding, combined with low fees by some local authorities, has resulted in under-investment in local care markets, buildings and innovation. This is leading to poorer quality outcomes and therefore needs to be addressed to enable local authorities to successfully deliver the system reform ambitions.
- 4.4 To ensure that local authorities are able to move towards paying a fair cost of care, the government will provide an additional £1.4 billion over the next 3 years. This forms part of the £3.6 billion confirmed at Spending Review 2021, to implement Charging Reform. £162 million will be allocated in 2022 to 2023 to support local authorities as they prepare their markets for reform. A further £600 million will be made available in both 2023 to 2024 and 2024 to 2025.
- 4.5 To prepare the market, the government expect local authorities will:
- Carry out a cost of care exercise to determine the sustainable rates and identify how close they are to it.
 - Strengthen capacity to plan for, and execute, greater market oversight to ensure markets are well positioned to deliver on our reform ambitions.
 - Use this additional funding to genuinely increase fee rates, as appropriate to local circumstances.
- 4.6 As a condition of receiving further grant funding in the two following years, all local authorities were required to submit a cost of care exercise, a provisional Market Sustainability Plan and a Spend Report to the Department of Health and Social Care (DHSC) by the 14th October 2022. A final Market Sustainability Plan will be submitted in February 2023.

5.0 CARE QUALITY COMMISSION (CQC) ASSESSMENT

- 5.1 The White Paper also outlines plans for Adult Social Care to be inspected by the CQC. The ambition is for CQC to use its powers and duties to help improve outcomes for people who draw on care and support by assessing how local authorities are meeting individual's needs.
- 5.2 Although the detail of this assessment is yet to be confirmed, it is expected that the following themes will be assessed:
- Working with people - assessing needs (including unpaid carers), supporting people to live healthier lives, prevention, well-being, information and advice.
 - Providing support - market shaping, commissioning, workforce equality, integration and partnership working.
 - Ensuring safety - safeguarding, safe systems and continuity of care.
 - Leadership - capable and compassionate leaders, learning, improvement, innovation and governance.
- 5.3 It is expected that these assessment will take place from April 2023.

6.0 ASSOCIATED RISKS

- 6.1 Funding Allocations – Bury does not receive a funding allocation from the Government which ensures we can deliver adult social care reform.
- 6.2 Workforce expertise within the system – adult social reform introduces many changes that staff will require training on. This is essential to ensure we offer the right support to our residents and commissioned providers.
- 6.3 Workforce capacity – it is expected that changes introduced with adult social care reform will impact on staff capacity as the number of people contacting the Council for support is likely to increase significantly.
- 6.4 A programme risk and issue log will be monitored by the Adult Social Care Reform Programme Board.

7.0 RECOMMENDATIONS

- 7.1 The Committee is asked to:
- Note the contents of the report.
 - Recognise the potential financial challenges particularly with the fair cost of care and implementation of the cap.
 - Note the emerging CQC assessment framework.

List of Background Papers:-

None.

Contact Details:-

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Executive Director sign off Date: _____

JET Meeting Date: _____