



The Nuffield Trust is an independent health charity which aims to provide evidence-based research on the quality of health care in the UK. It has issued a briefing to explore specifically the scale of the workforce challenge facing social care which it argues has so far been underestimated.

The Nuffield Trust suggests that:-

- New calculations show that just providing a basic package of care of one hour per day to older people with high needs would require approximately 50,000 additional home care workers now.
- To provide up to two hours would need around 90,000 extra workers
- Recruitment and retention issues are highlighted with a finding of 24% of the care workforce on zero hours contracts

## 1. Introduction

A new Nuffield Trust briefing suggests that whilst all three major political parties (in England) have pledged changes to the system of social care the growth in older people, with a consequential growth in people with more complex needs, means that the current social care system is failing. Whilst there are differentiations in the UK the briefing considers the position within English local government though draws upon the experiences within Scotland.

The paper argues that reform of social care is well overdue with two decades of reviews, green papers and white papers, commissioning strategies and legislation, all failing to bring about the sustained changes needed to make social care fit for purpose. The briefing highlights that a substantial part of the problem is that social care is not well understood by the public with many assuming social care falls under the NHS. Wider reforms have also been stymied by the issue of reform linked to funding, which is of itself often linked to the debate about older people having to sell their homes in order to fund care. This context is therefore thought to prevent cross-political party consensus on meaningful reform of social care. These cumulative issues are inevitably bearing down upon the social care workforce.

## 2. Current and ongoing issues in delivering social care

The Nuffield Trust, supported by analysis on existing data suggests that there are number of current and ongoing issues that are impacting on social care. First of all the impact of austerity on local councils in England has led to councils to restrict the eligibility criteria for care services.

It is reported that 20,000 fewer older people received long-term social care services in 2017/18 than in 2015/16. However some estimates of unmet need suggest that this could be as high as 1.5 million. This is due to the means test, which has not been adjusted since 2010, which, when applied, means that assets of £23,250 (which includes property, savings and income) in excess of that amount must meet the entirety of the care costs. This criteria has, according to **the Nuffield Trust been a determining factor in the system increasingly becoming a 'safety net for those with the very highest needs and the very lowest means'**. The intentions behind the Care Act (2014) to provide a national criteria for eligibility has been frustrated and exacerbated by the funding issues at a local authority level meaning that there are also huge variations in the criteria (or the way in which that is interpreted locally) leaving differences and uncertainty as to what people can expect by way of care. Furthermore the often unfair distinctions between **'health care' and 'social care' creates uncertainty and iniquitous outcomes; this is particularly prevalent in dementia cases where the lack of any 'medical' requirements means care is subject to a means test.**

Furthermore the fees paid by councils to providers have been repeatedly reduced to cope with budget pressures meaning that care provider organisations are closing off, or handing back, contracts to councils with some 75% reporting that they have taken such action. This lack of continuity in care providers is disruptive to both the client side council and of course the people and their families in receipt of care from these changing providers. Similarly there are pressures on residential care with increasing reliance on privately funded beds to cross-subsidise the lower rates paid by local councils for publicly funded beds; this contributes to **the creation of 'care deserts' with providers finding some areas are no longer viable.**

### 3. The Social Care Workforce

The Nuffield Trust points out that social care has some significant challenges when it comes to its workforce. The sector is marked by high staff turnover and high vacancy rates. In addition compared to other sectors it also suffers from low pay, with often poor working conditions, **requiring 'out of hours' working** and unstable contracts. There are a reported 24% of the workforce on zero-hours contracts, and a perception issue within the jobs market with the work of carers considered as a 'low status' in spite of its critical role in the health and care economy.

These workforce factors compound the problems of delivering care work and will continue to be problematic if the availability of care is to be expanded in the future.

### 4. **What's the solution?**

The Nuffield Trust argues that it is crucial that any reform to social care must involve a fundamentally overhaul of the entire care system. Whilst any new money placed into the system will be welcome this must, they suggest, go hand in hand with realistic and sustainable proposals for the future of the service.

One area in which the charity suggests the systems have so far failed people is that for it to be successful it must work seamlessly around other public services, promoting wellbeing and enabling people to live independently and in a fulfilling way. This would include greater clarity around the boundaries of responsibility between people and the state.

Comparisons have been made to the system of free personal care to the over 65s available in Scotland; this includes within Scotland personal hygiene, continence management, food and diet management, assistance with mobility, counselling and support, simple treatments, and

personal assistance. However it excludes other services that fall within the wider **understanding of 'social care'** such as help with cleaning and general supervision. Therefore any new system would need to offer a similarly consistent assessment criteria at a national level rather than the very fluid local interpretations currently in place within England.

## 5. Fair and transparent funding

The Nuffield Trust suggests that any future reform must include a reformed funding system. This, they argue, must deal with current situation whereby often catastrophic care costs fall upon individuals who have no way of anticipating, or protecting themselves against, these sudden financial demands. Some of the ideas discussed in the paper include:-

- The private insurance market for individual long-term care insurance – however this was not found to be a particularly effective approach in Germany
- General taxation – this is a well-established and well-understood mechanism for raising funding for public services in England that has the potential to meet need
- A compulsory national/social insurance scheme - extending contributions beyond the state pension age also has the potential to reduce the short-term funding gap while protecting most of the population

The four tests suggested for a future funding mechanism are as follows:-

- Does the funding mechanism raise extra money now and in the future?
- Is it fair?
- Is it understandable?
- Does it pool risk?

This approach therefore suggests that voluntary, optional or individual-based funding models proposed on its own and not in conjunction with other revenue-raising mechanisms would fall short.

## 6. Addressing the workforce pressures

The Nuffield Trust suggests that what is now needed urgently is a realistic strategy for the workforce to underpin any future reforms given that community based care is set to rise by 16% and working age adults with disabilities, in need of support, is expected to rise by 12%. Existing job vacancies are estimated to be 122,000 with 48,500 in the home care workforce. This is set against demand increases with estimates suggesting that 163,000 people (aged 65 or over) with high level needs are currently not in receipt of support from friends, family or professionals. If those people were to receive a care package of just 7 hours per week this would need approximately 50,000 extra care workers. However, if this is equated to the average local authority care package, of 13 hours per week, then the workforce shortfall is around 90,000 home care workers would be needed to meet demand.

The situation is potentially much more serious if consideration is given to Age UK who estimate up to 1.5 million older people who currently have some level of unmet or under-met need.

Specifically, alongside the issue of funding the care workforce at significantly increased numbers, the following matters are identified as further key components in addressing workforce matters:-

- ✓ A workforce strategy that must boost levels of recruitment and retention of staff to fill current roles
- ✓ Care work must be a more attractive profession, but that also offer scope to extend the level and breadth of care services.
- ✓ The workforce strategy must be realistic and coordinated with other areas of government policy, in particular immigration, employment and support for the huge numbers of friends and family providing care.
- ✓ Low pay in the sector, alongside poor terms and conditions and the perception that care work has low status must be addressed.
- ✓ Professionalisation of care workers, including mandatory registration and regulation, is possibly a longer term part of the solution needed to address the workforce issues.
- ✓ There should be a concerted effort to improve pay and effective enforcement of the national minimum wage or consideration of the national living wage
- ✓ Employment security for the many direct care staff on zero-hours contracts must be addressed
- ✓ There should be access to continuing professional development and progression opportunities
- ✓ Adherence to agreed shared standards and values, both in the quality of care and care workers, but careful attention is needed to prevent minimum qualifications from acting as an obstacle to recruitment.
- ✓ Immigration systems should avoid exacerbating the care workers crisis with two in five London care jobs being filled by international migration

#### APSE comment

The data used to support the arguments for urgent action on the social care workforce is compelling evidence for change. Whilst funding is critical to local authorities, and the called for reviews of what would make for a fair system of social care is of course very important, many of the immediate actions on workforce changes would provide at least some immediate ways to address the crisis-point conditions impacting on social care delivery.

APSE has long called for a consistent and holistic approach to social care to ensure that it is not a system delivered in isolation to other public services. We would add to the Nuffield Trust findings that all front-facing council services will see a further expansion of work and responsibilities with an ageing population. This will involve not only the recruitment and retention of the care workforce but ensuring all frontline services are skilled and responsive to older people. From ensuring a growth in issues such as assisted bin collections, to ensuring parks, public realm and leisure services meet new and emerging needs for older people this can only be achieved by recognising and supporting a well-rewarded, well-trained and competent workforce in local government.

The full Nuffield Trust briefing can be accessed [using this link](#).

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