

Functioning well in later life: policy priorities and policy challenges

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The pressures of an ageing population are already being felt in health and care services

- 72% of recipients of social care services are older people, accounting for 56% of expenditure on adult social care.
- The number of people dependent on social care for support is expected to increase by 53% by 2026.
- The number of people with dementia will double to 1.4 million by 2030
- Older people are the core users of acute hospital care - 60% of admissions, 65% of bed days and 70% of emergency readmissions.
- Older people falling in hospitals costs around £15m a year.
- Urinary incontinence affects 1 in 4 people over 65
- Around 200,000+ people are currently living in care homes with support from public funds.

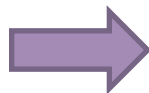
These pressures will only increase as demographic change presents a range of new challenges

- There are 670,000 people in England with dementia, and numbers are expected to double in the next thirty years.
- Compared with today, we expect 600,000 more older people to have potential care needs in the next 20 years.
- The number of people with three or more long term conditions is set to increase from 1.9 million in 2008 to 2.9 million in 2018.
- 1 in 3 people over 65, and half of the over 80s, will fall at least once in a year.
- The number of adults with learning disabilities who require some form of support will increase between 3.2% and 7.9% per year until 2026.

So health and social care services will need to adapt to meet increasing and changing demand, as well as rising expectations of quality and choice.

Changing needs of an ageing population:

- People live longer with one or more long-term conditions
- People live long enough to develop conditions of ageing such as dementia and osteoporosis
- Increasing need for long-term support, from formal, informal and often multiple services



New approach required to health and social care:

- Greater focus on prevention and early intervention to avoid or postpone health and care needs
- Joined up services focusing on the needs of the individual
- Supporting people to exercise more choice and control
- Using resources more efficiently and effectively



People are supported to live healthier, more active and fulfilled lives in their later years.

Our priorities for health and social care

1. Preventing people from dying prematurely by **improving mortality rates** for the big killer diseases to be the best in Europe, through improving prevention, diagnosis and treatment.

2. Improving the **standard of care** throughout the system so that quality of care is considered as important as quality of treatment, through more accountability, better training and more attention paid to what patients say.

3. Improving treatment and care of people with **dementia** and other **long term conditions**

4. Bringing the **technology revolution** to health and care

Across all of these areas we want to open every possible window in to performance. This means a transparency revolution so that there is accessible, comparable data, available to the public, professionals and commissioners to drive real improvements in performance and outcomes.

- Shifting emphasis toward prevention and away from crisis response demands a whole systems response with health, public health, housing, care and other services working together to help older people maintain their independence
- We have introduced an ambitious programme to improve public health through strengthening local action. From April 2013, local authorities will take the lead for improving health and coordinating local efforts to protect the public's health and wellbeing
- The public health functions transferred to local authorities will be funded by a new public health grant, separate from the budget for healthcare managed through the NHS Commissioning Board. The funding will be ring-fenced and will mitigate against public health money being cut when resources are stretched.

Promoting a positive experience of health and social care



Areas of focus include:

- Supporting workforce development and effective, joined-up leadership
- Improving transparency and addressing the **information gap** so that people have **simple, comparative information** about the quality of care at individual care homes and domiciliary care agencies . A key way we will do this is via the Provider Quality Profiles
- **Nuffield Trust ‘Ratings Review’**: on 28th November, the Secretary of State announced an independent review, led by the Nuffield Trust, of whether (and if so, how) aggregated ratings for providers of health and care should be introduced. The Nuffield Trust will report back by 31st March 2013

Caring for our future: reforming care and support is based on two fundamental principles for change:

The focus of care and support will be to **promote people's independence, connections and wellbeing** by enabling them to postpone or prevent the need for care and support, and to avoid people reaching a crisis point.

We will transform people's experience of care and support, **putting them in control and ensuring that services respond to what they want.**

Key White Paper announcements which will benefit older people

- Up to £300m **care and support housing fund** to support the development of new specialised housing.
- £32.5m to support councils to develop clear and reliable **online information**, and a new national information website about health, care and support.
- Introducing a **national minimum eligibility threshold** for care and support from 2015.
- Legislating to **extend the rights of carers** to a carer's assessment and providing a new entitlement to support to meet their needs for the first time.
- Making **information available on quality** of care providers, to help people make the right choices for them and their families.
- An ambition to **double the number of apprenticeships** in social care to 100,000.
- Introducing an **entitlement to a personal budget**.
- Investing a further £300m over two years in **joint funding** between the NHS and social care to support better integrated care.

Promoting new housing options



- The White Paper announced that the Government was making available up to £200m over five years to support the development of specialised housing specifically designed for older people and disabled adults.
- In September, the Government announced that this funding would be increased up to £300m, providing that there was demand.
- The Government has invited bids from affordable home providers who have worked closely with local authority and health colleagues to design schemes that meet tangible local demographic need, and which demonstrate the best value for money.
- We are also inviting informal expressions of interest from private specialised housing providers, ahead of a second phase of the fund – launching in summer 2013 - which will focus on stimulating the wider market.
- The Care and Support Housing Fund will be run in partnership with the Home and Communities Agency and the Greater London Authority.

Caring for our future:
progress report on
funding reform

The Government:

- agrees with the principles of the Dilnot Commission recommendations – financial protection through capped costs and an extended means-test
- intends to base a new funding model on these recommendations if a way to pay can be found
- will take a final view at the next Spending Review
- has committed to introduce Universal Deferred Payments from April 2015, so that people will not have to sell their home in their lifetime to pay for care

The draft Care and Support Bill – our aims

The publication of the draft Bill follows the Law Commission's recommendations in 2011.

We want a new statute for adult care and support that:

- **consolidates** all existing legislation into one, single statute, supported by new regulations and statutory guidance.
- is built around **people** – their needs and outcomes – rather than based on disability, setting or types of service.
- treats **carers** as equal to the person they care for – putting them in the centre of the law and on the same legal footing.
- is **clearer and easier to navigate** – a simple legal framework which people who need care, carers and those who manage and work in the system can understand.
- **modernises** the law to reflect the priorities and focus of care and support – shifting the balance away from institutional care and towards prevention and community capital.
- is **consistent** – removing anomalies where people can be treated differently without a clear reason.

Our vision for joined-up care

We expect integrated services to be person-centred, to improve outcomes and experience, and to reduce health inequalities.

Health and Social Care Act 2012

- NHS Commissioning Board, CCGs, Monitor and health and wellbeing boards all have duties to promote and enable integration.
- Creation of Healthwatch to provide a stronger voice for service users.

Draft Care and Support Bill

- Duty on local authorities to promote the integration, mirroring the duty on the local NHS contained in the 2012 Act.
- Further duties of co-operation between local partners to work together to improve the wellbeing of local people.

Joint funding

- The health system will transfer a further £100 million and £200 million in 2013/14 and 2014/15 over and above the funding set out at the SR.
- This will support local delivery of social care services that benefit health and wellbeing, by promoting joint working.

Working together

- Co-produced integration framework
- Refresh of the NHS Constitution
- Mandate to the Commissioning Board
- Refresh and alignment of outcomes frameworks
- Measuring user experience of integrated care