

Centre for Policy on Ageing and Local Government Association
A call for evidence on Local Government's Response to an Ageing Society – Scope response

Background

A call for evidence of strategic approaches adopted by local authorities and their partners, to address both the immediate and longer-term transition towards an ageing population and society.

The Centre for Policy on Ageing, acting on behalf of the Local Government Association, is seeking evidence of how local authorities and their partners are adopting a strategic approach to the immediate and longer-term ageing of their local population and how they are seeking to address the future needs and aspirations of older people.

The call for evidence will feed into the work of a Local Government Association Task and Finish Group on local government's response to an ageing society.

1. Demographic changes

Both Parliament and Government have sought to understand the impact that the significant increase in the numbers of older people will have on public services. For example, the Department of Work and Pensions has a policy priority around improving opportunities for older people¹ and a recent report from the House of Lords Committee on Public Service and Demographic Change outlined concerns that the Government is currently underprepared for the impact of an aging society².

However, less work has been done to quantify the impact of the significant expected increase in the numbers of working age disabled people, particularly people with congenital conditions whose life expectancy has risen significantly. For example, the average life expectancy for those born with a learning disability has risen from less than 20 in the 1930's to be 74, 67 and 58 for those with mild, moderate and severe learning disabilities respectively. The number of working-age adults with learning disabilities is projected to increase by 14% between 2001 and 2021, resulting in more than a million more people with learning disabilities by 2021.³

2. Demand for social care services

One area in which this demographic change will have a significant impact is in the demand for adult social care services. Currently one third of social care users (419,480) are working age disabled people⁴ and the numbers who will require social care is set to rise. Furthermore, the latest HSCIC figures indicate that social care services for working age disabled people account for 47% of total expenditure.⁵ The Local Government Association (LGA) has estimated that spending on social care will pass 45% of council budgets by 2019/20.⁶

The then President of the Association of Directors of Adult Social Services (ADASS), Sandie Keene, gave oral evidence to the Public Accounts Committee Inquiry into adult social care funding on the March 26th 2014. During her evidence session, she drew attention to the impact that the increase in the numbers of working age disabled people will have on the social care system, stating that 'we also

¹ <https://www.gov.uk/government/policies/improving-opportunities-for-older-people>

² <http://www.parliament.uk/business/committees/committees-a-z/lords-select/public-services-committee/report-ready-for-ageing/>

³ Emerson, E. and Hatton, C. (2008), *People with learning disabilities in England*, CeDR:

<http://www.lancaster.ac.uk/cedr/publications/CeDR%202008-1%20People%20with%20Learning%20Disabilities%20in%20England.pdf>

⁴ Scope (2012), *The Other Care Crisis*

⁵ Source: Community Care Statistics 2012/13, HSCIC (Health and Social Care Information Centre) website.

⁶ http://www.local.gov.uk/web/guest/media-releases/-/journal_content/56/10171/3624637/NEWS-TEMPLATE

have serious concerns about the number of under-65 people who are in need of care and support, particularly very disabled young people who are living longer with more serious disabilities...there are some really serious demographic problems.⁷

2.1. Funding pressures and eligibility

At the same time, the number of working age disabled people receiving formal social care has fallen. Statistics from the Personal Social Services Research Unit at the London School of Economics has demonstrated that local authorities tightening social care eligibility thresholds to only those with substantial support needs has already resulted in 69,000 disabled people falling out of the care system, with a further 36,000 people set to lose their existing support.⁸ In addition, there are at least 800,000 people with care needs are not receiving any support at all.⁹

There are also significant funding pressures facing local authorities charged with the provision of care services. This situation has been exacerbated by a £3.5bn reduction in local authority spending on adult social care over the last four years. ADASS is concerned that social care services are unsustainable in the long term without investment into the system.¹⁰

This trend is set to continue: an Audit Commission report highlights that reductions in adult care accounted for 14% of council cuts from 2010-11 to 2011-12, but will account for 52% of cuts in 2013-14.¹¹ Recent research by the Personal Social Services Research Unit at the LSE has shown a reduction in the numbers of people receiving community care support as a result of these budgetary cuts:

- Since 2008, the number of people receiving social care has fallen by a total of 347,000.
- Taking into account demographic change during this period, almost half a million older and disabled people who would have received social care five years ago, now receive no support.¹²

Social care is vital in enabling disabled people to live independently, find work and play an active part in their community. Four in ten disabled people who receive social care support already say that it does not meet their basic needs including eating, washing, dressing and getting out the house¹³ and one third of working aged disabled people said that cuts to their social care have prevented them from working or volunteering.¹⁴

Ensuring that the care system is preventative for working age disabled people means that the national eligibility threshold must be set at a level that means that all disabled people who need formal care support are able to get it.

Economic modelling by Deloitte¹⁵ has shown that investing in social care would lead to significant financial savings for the NHS, central Government and Local Authorities. For example, a £1.2 billion investment in lower level social care support for working-age disabled people would result in:

⁷ <http://data.parliament.uk/writtenevidence/WrittenEvidence.svc/EvidenceHtml/8047>

⁸ Scope (2013) Ending the Other Care Crisis

⁹ Forder and Fernandez (2012), Analysing the costs and benefits of social care funding arrangements in England: 2nd Edition: PSSRU Discussion Paper 2644/2

¹⁰ ADASS (2014), <http://www.adass.org.uk/social-care-services-unsustainable-adass/>

¹¹ Audit Commission, Tough Times 2013

¹² [Personal Social Services Research Unit \(2013\) Changes in the patterns of social care provision in England: 2005/6 to 2012/13, London: London School of Economics.](http://www.lse.ac.uk/PersonalSocialServicesResearchUnit/2013/06/Changes_in_the_patterns_of_social_care_provision_in_England_2005/6_to_2012/13_London_London_School_of_Economics.pdf)

¹³ http://www.scope.org.uk/sites/default/files/The_Other_Care_Crisis.pdf

¹⁴ Ibid.

¹⁵ http://www.scope.org.uk/sites/default/files/Ending_the_other_care_crisis.pdf

A £570 million saving to the NHS and local government:

- £480 million would be saved by local government by avoiding disabled people entering expensive residential and crisis care.
- £90 million in savings to the NHS as disabled people would not need expensive medical attention.

A £700 million saving to Central Government:

- £370 million in increased tax revenue to the Treasury
- A reduction of £330 million in welfare spending as a result of disabled people and informal carers entering the workplace.

As such, Scope recommends that the national eligibility threshold, as introduced by the Care Act, is set at a level equivalent to 'Moderate' under the current FACs system, and provides sufficient funding for local councils to implement it properly.

Without addressing the issues of eligibility and sustainable future funding for the formal social care system, there is a serious risk that the welcome ambitions of the well-being principle at the heart of the Care Act legislation will not be realised.

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