

Social Care Green Paper.

Dear Colleagues,

You will recall that at the Retired Members Conference this year the RMAC submitted a Motion the subject of the publication of a Green Paper on Social Care, calling for the RMAC to work with other organisations to monitor the progress of the green paper which was due to be published this summer.

In the March 2017 budget the Conservative Government said it would publish a Green Paper on social care, in order to allow a public consultation to be held. During the 2017 general election campaign made a manifesto commitment to introduce the Green Paper.

The Green paper has been delayed several times from the original publication date of summer 2017, then it was the end of 2017 and then finally before the recess Parliamentary recess 2018. In June 2018 the Health and Social Care Secretary announced a further delay in the publication of the Green Paper to the autumn of 2018.

You can download details of the green Paper from the internet which is quiet a lengthy document so it is not possible reproduce the document in full. I have included several extracts which I feel may be have interest.

As the then Minister responsible for the Green Paper, Damian Green, told the House in November 2017, "reform of this vital sector [of care and support for older people] has been a controversial issue for many years, but the realities of an ageing society mean that we must reach a sustainable settlement for the long-term".

During the 2017 General Election campaign, the Conservative Party made a number of pledges regarding how individuals pay for social care, and said that they would honour the commitment they had made in the March 2017 Budget to publish a Green Paper.

An efficient elderly care system which provides dignity is not merely a function of money. So our forthcoming green paper will also address system-wide issues to improve the quality of care and reduce variation in practice. This will ensure the care system works better with the NHS to reduce unnecessary and unhealthy hospital stays and delayed transfers of care, and provide better quality assurance within the care sector. The first Queen's Speech of the new Parliament stated that: "My Ministers will work to improve social care and will bring forward proposals for consultation".

The Government has said that the Green Paper will "focus on care for older people, but many of the issues and questions about the sustainability of the care system will be relevant to adults of all ages".

Therefore: To ensure that issues specific to working-age adults with care needs are considered in their own right, the Government will take forward a parallel programme of work which is being led jointly by the Department of Health [now the Department of Health and Social Care] and the Department for Communities and Local Government [now the Ministry of Housing, Communities and Local Government], which will focus on this group.

The seven principles to guide the Governments thinking were given by Jeremy Hunt in a speech in March 2018, these were:-

- That quality and safety are embedded in service provision.
- A whole-person, integrated care with the NHS and social care systems operating as one.
- That the highest possible control is given to those receiving support.
- A valued workforce.
- Better practical support for families and carers.
- a sustainable funding model for social care supported by a diverse, vibrant and stable market
- greater security for all – for those born or developing a care need early in life and for those entering old age who do not know what their future care needs

Mr Hunt added that “innovation is going to be central to all of these principles: we will not succeed unless the changes we establish embrace the changes in technology and medicine that are profoundly reshaping our world”. By reforming the system in line with these principles everyone – whatever their age – can be confident in our care and support system. Confident that they will have control, confident that they will have quality care and confident that they will get the support they need from wider society.

In June 2018, the Housing, Communities and Local Government, and the Health and Social Care select committees published their joint report, “Long-term funding of adult social care”. Describing the social care system as “not fit to respond to current needs, let alone predicted future needs”, the report called for the Green Paper to be the “catalyst for achieving a fair, long-term and sustainable settlement”

The committees said that they “support the provision of social care free at the point of delivery as a long-term aspiration. In principle, we believe that the personal care element of social care should be delivered free to everyone who has the need for it, but that accommodation costs [for care home residents] should continue to be paid on a means tested basis” The report set out six principles “which we recommend should underpin future decisions about funding social care”, namely:

- “good quality care” – “Funding should be sufficient to achieve the aims of social care ... This will require universal provision of high quality, personalised care delivered by a stable well-paid and well-trained workforce alongside well supported carers to a wider group of people than currently receives care, all within a navigable and accessible system. It should also aim to address the current levels of unmet and under-met need”

- “considering working age adults as well as older people” – “The Green Paper will focus solely on social care for older adults ... At the very least, the Green Paper should be closely linked with the parallel programme for working age adults, clearly setting out how its proposals impact on funding for that age group. The Green Paper should consider both”. [The Government has stated that the Green Paper will “inevitably cover a range of issues that are common to all adults with care and support needs”].

- “Ensuring fairness between the generations”, Contributions towards the cost of care should be fairly distributed between generations. Older people could be expected to continue while taking into account the fact that they have contributed throughout their working lives via taxation. However, over the longer term, the distribution of wealth between the different ages may change with corresponding implications for fairness, suggesting that a flexible solution is required”.
- Aspiring over time towards universal access to personal care free at the point of delivery” – “Currently, the burden of the cost falls on individuals in an unfair distribution depending on diagnoses ... The balance needs to be redressed, aspiring over time and moving towards, as funding permits, universal access to sustainably funded social care, free at the point of delivery”
- Risk pooling—protecting people from catastrophic costs, and protecting a greater portion of their savings and assets” – “A cap on the amount of care costs a person paid would pool the risk, distributing the costs of very high care needs across the society. The level of protection (and therefore the costs of this policy) would depend on the level at which the cap is set, and determining this figure requires financial modelling and extensive consultation. Raising the means test threshold (the ‘floor’) is another way of enabling people to keep a greater proportion of their assets; again, the costs would be shared across society. Providing free at point of delivery care for those assessed as having critical or substantial care needs would be another way of protecting people from this risk”.
- “‘Earmarked’ payments” – “people are generally willing to contribute more to pay for social care if they can be assured that the money will be spent on this purpose. ‘Earmarking’ taxation¹⁰⁰ can help to give confidence and accountability over spending”.

In summary, the committees recommended:

- an additional earmarked contribution, described as a ‘Social Care Premium’, should be introduced” payable by those over 40 years of age (although possibly with a minimum income threshold);
- the possibility of extending this approach to the funding of the NHS, and “in the long term, we believe there is a strong case for reimagining this as ‘National Health and Care Insurance’”;
- a specified additional amount of Inheritance Tax should be levied on all estates above a certain threshold and capped at a percentage of the total value”;
- further integration of health and social care which “has the potential to improve
- further integration of health and social care which “has the potential to improve outcomes and we recommend that local attempts to better integrate services continue apace”;
- the establishment of a “cross-party parliamentary commission” which “offers the best way to make desperately needed progress on this issue”

I hope that this has been useful to you all, and we must keep pushing all interested parties to monitor the progress of the Green Paper .

Rod Downing

RMAC .