



**Independent
Age**

Free personal care:
Insights from Scotland

October 2020

Contents

1.	Introduction	3
2.	Scotland's social care system	6
3.	What people think of the system: positives	8
4.	What people think of the system: challenges	13
5.	Conclusions and recommendations	24

1. Introduction

Providing the care and support we all need to maintain our independence, dignity and ability to enjoy later life is what we expect from any just society. However, a lack of investment over many decades has led to a complex social care system that leaves too many older people unable to access the support they need, while others bear huge financial burdens. The COVID-19 pandemic has brought into sharp focus the challenges that people relying on the social care system face, resulting in increased pressure on government to fulfil the prime minister's promise in his first speech outside Downing Street to bring forward real reform.

Social care reform is something consecutive governments have promised to deliver – but they have struggled to achieve consensus about what this should look like or how to fund it. The inability to find consensus can, in part, be attributed to the complexity of the system. No single policy can tackle the varied issues facing social care. We need solutions that increase workforce capacity, expand eligibility so more people can get support, and address the catastrophic costs that many people face. Even for those accessing care and support, the types of reform needed might be very different. While many older people have built up assets and might predominantly need personal care in later life, working-age adults typically have not built up the same level of assets and may be more in need of other types of social care. This means there is no silver bullet for social care; instead, what is required is a tailored package of reforms to meet these very different needs.

Independent Age believes that one part of this reform must be the introduction of the principle of free-at-the-point-of-use social care, like the NHS. One way of delivering this is through the introduction of free personal care. Free personal care would make help and support for tasks such as getting in and out of bed, going to the toilet or preparing a meal free at the point of use. It is important to recognise that this would not cover other vital forms of support many people rely on, such as cleaning and access to community activities outside the home, but we do think free personal care is a reasonable first step towards a universal entitlement. It would significantly reduce the overall costs incurred by people in later life who need social care support, simplify an intimidating and overly complex social care system, and improve the pressure on informal carers. An entitlement to free personal care also sends a clear message that we, as a country, value the dignity and independence of people in later life.

The concept of free personal care has been widely discussed within the social care reform debate in England. Free personal care has received considerable support from key stakeholders, including Lord Darzi and the House of Lords Economic Affairs Committee;¹ the Labour party, which pledged to introduce free personal care in its 2019 manifesto;² and the Conservative party, which media reports³ suggest was also considering it, among several other options. It is also a policy that is popular among the public, with an Independent Age poll showing that 78% of adults in England supported the introduction of free personal care for all older people who needed it, with 74% willing to pay more to fund it.⁴

However, while the theory may well be established, the practicalities of delivering the policy and the challenges that come along with it are less clear. It has been more than two decades since the Royal Commission on Long Term Care recommended that the UK government introduce free personal care for all people aged 65 and over.⁵ During that time, while England's social care system has continued to struggle and lurch from one crisis to another, Scotland has not only made personal care free at the point of use for all older people, but also extended it to include those of working age.

This briefing seeks to build on existing information on free personal care by providing an insight into the experiences of some of those involved in, and receiving, social care north of the border. We hope these reflections on the Scottish experience prove useful as the government considers undertaking bold reform in England that similarly includes the principle of free at the point of use.

¹ "Social care funding: time to end a national scandal." House of Lords Economic Affairs Committee, Jun. 2019, publications.parliament.uk/pa/ld201719/ldselect/ldeconaf/392/39202.htm

² "It's time for real change: The Labour party manifesto 2019." The Labour Party, 2019, labour.org.uk/manifesto-2019/

³ "Ministers considered cap on care costs before coronavirus outbreak." *BBC News*, 21 May 2020, bbc.co.uk/news/uk-politics-52748652

⁴ "Why free personal care?" *Independent Age*, 2019, independentage.org/a-taxing-question-how-to-fund-free-personal-care/why-free-personal-care

⁵ "With Respect to Old Age: Long Term Care – Rights and Responsibilities." The Royal Commission on Long Term Care, Mar. 1999, webarchive.nationalarchives.gov.uk/20131205101144/http://www.archive.official-documents.co.uk/document/cm41/4192/4192.htm

Our evidence

We gathered insight from a range of people and sources to understand the breadth of experiences regarding social care delivery in Scotland.

This included:

- interviews with staff involved in the management of social care, such as directors of adult social care and finance personnel, as well as recipients of care and their families
- a survey of 397 people in Scotland who had had experience of interacting with the care system
- data from 2002 onwards that showed changes to social care delivery since Scotland introduced free personal care – this was taken from the Scottish government’s free personal and nursing care in Scotland statistical releases.

2. Scotland's social care system

Social care is a devolved area of public policy, which means that other UK nations are free to make their own policies. In 2002, following a recommendation from the Royal Commission on Long Term Care, Scotland introduced free personal care for all people aged 65 and over.⁶ This meant that help with activities such as washing, getting dressed, and getting in and out of bed would be provided free at the point of use. Charges were still levied for extra care activities, such as cleaning, shopping and 'hotel costs' (accommodation costs) for residential care.

In Scotland, the practical delivery of free personal care varies depending on the environment in which an individual receives personal care.

- For older people receiving personal care in their own home, they are not faced with any charges for personal care support.
- For older people receiving personal care in a care home, the local authority will pay a flat rate of £174 a week directly to the care provider. For individuals reassessed as needing nursing care, the local authority pays an additional £79 a week on top of the original £174.

Eligibility for personal care is based on an assessment that must take into account the preferences of the person in need of support. The services a person receives will be detailed in their individual care plan, which should be fully discussed between them and their assessor.

People living in their own home should have choices about how they receive their care, giving them control over what they receive and how it is paid for. Free personal care includes options for different levels of self-directed support, ranging from direct payments, where individuals arrange and pay for their own support, through to requesting that the local authority selects, arranges and pays for care on their behalf.⁷ In April 2019 the Scottish government officially extended free personal care to include all people under the age of 65.⁸

Integration between health and care

In 2016 the Scottish government made another substantial change to social care by combining it with healthcare to create one fully integrated system. As part of this change, the legislation created 31 integration authorities. These were created with the intention of improving the outcomes for people who use health and care services, by putting greater emphasis on joining up services and focusing on anticipatory and preventative care.

⁶ "With Respect to Old Age: Long Term Care – Rights and Responsibilities." The Royal Commission on Long Term Care, Mar. 1999, [webarchive.nationalarchives.gov.uk/20131205101144/http://www.archive.official-documents.co.uk/document/cm41/4192/4192.htm](http://www.archive.official-documents.co.uk/document/cm41/4192/4192.htm)

⁷ "Free personal and nursing care: questions and answers." Scottish Government, 28 Mar. 2019, gov.scot/publications/free-personal-nursing-care-qa/. Accessed Aug. 2020.

⁸ "The History of the Extension of free personal care for adults aged under 65." Scottish Government, webarchive.org.uk/wayback/archive/20190703142133/https://www2.gov.scot/Topics/Health/Support-Social-Care/Support/Adult-Social-Care/Free-Personal-Nursing-Care/Implementation-free-personal-care-under65. Accessed Aug. 2020.

Under the new system, local authorities and health boards are required to jointly prepare an integration scheme. Each integration scheme sets out the key arrangements for how services are planned, delivered and monitored within their local area.

What has changed since free personal care was introduced?

Statistics show that since free personal care was introduced, the landscape of social care in Scotland has changed significantly.⁹ It is unclear to what degree the changing landscape in care can be attributed to a single policy, especially given the variety of changes Scotland has made in the past few decades – but, it is a fair assumption that free personal care has played a part in this transformation.

One of the most notable changes in social care has been that the number of people receiving free personal care in their own home has increased by 72% since 2002. During the same period, the number of people receiving care in care homes has reduced by almost 6%. This is surprising given that the number of older people in Scotland – and therefore the expected number in need of care – has increased by 26%.¹⁰ Together, these statistics appear to show that provision of personal care has partly moved from being delivered in care homes to people's own homes, a trend that is often seen as one of the key advantages of free personal care.

In truth, however, the picture is more complex. This is because, despite the increase in personal care provision in the home, the overall number of people receiving any wider care in their home has decreased by 11%. This suggests that the increase in individuals receiving free personal care may have resulted in a squeeze on overall numbers accessing social care support. This issue is discussed later in this briefing.

⁹ "Free personal and nursing care in Scotland 2017–2018: figures." Scottish Government, 6 Aug. 2019, gov.scot/publications/free-personal-nursing-care-scotland-2017-18/

¹⁰ "Population estimates for the UK, England and Wales, Scotland and Northern Ireland: mid-2019." Office for National Statistics, 24 Jun. 2020, ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/bulletins/annualmidyearpopulationestimates/mid2019estimates

3. What people think of the system: positives

In many of our conversations with older people and their families in Scotland, individuals were quick to praise the policy of free personal care. This section details people's thoughts on the policy and the benefits they associated with it.

Sending a positive message about society and older age

Many of the people we spoke to felt that free personal care sent a positive message about how Scotland, as a society, values people in older age. People spoke of being proud of it, because it demonstrated a commitment to supporting the most vulnerable in society regardless of wealth.

"My goodness, who wouldn't want the basics covered? Yes, I'm probably proud that it's something we have in place in Scotland. Yes, I'm proud." Anonymous

This was a theme that emerged in discussions with recipients of care and their families, as well as local authority personnel.

"I think it's a very positive message for a society, that it's going to care for its frailer population, isn't it? And that's a good thing." Director of adult social care

A few people we spoke to drew comparisons to England's social care system based on friends' and relatives' experiences. In these conversations, people felt that Scotland's system was fairer and less complicated.

"I'm fortunate that I get to see both sides of it from Scotland and hearing, co-listening in England... I am amazed and grateful that I have [free personal care]... It's not perfect but, my goodness, it would be astonishing not to see the goodness in it, when you compare like for like." Anonymous

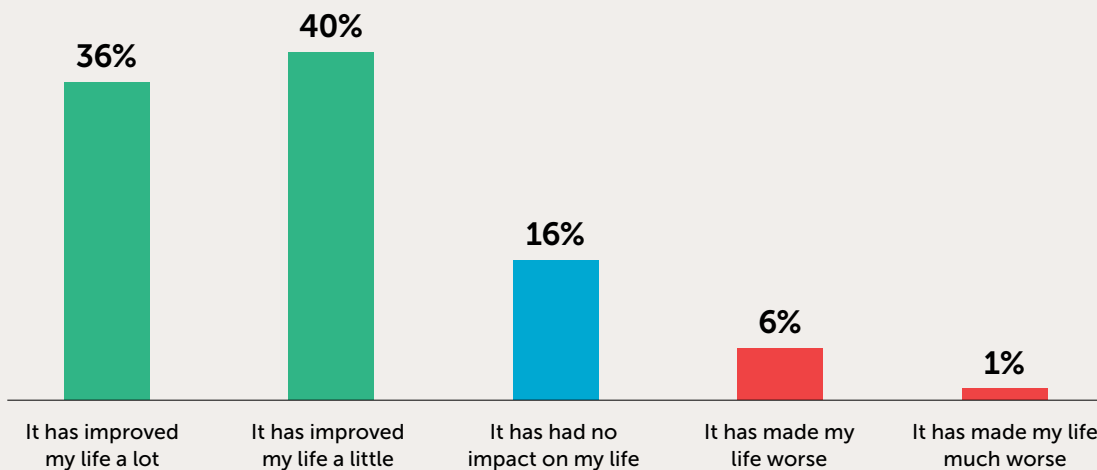
"I think we in Scotland have a more egalitarian approach...about what is an essential service, whereas I think in England there is slightly more resistance to that idea and access. Maybe just the two countries are a wee bit apart." Hugh, 68

Figure 1: Describing free personal care



These words are taken from a survey where people were asked to describe free personal care. The size of the words reflects how commonly these were used.

Figure 2: What impact has free personal care had on your life?



This data (rounded) is taken from a survey we conducted with people based in Scotland (22 January to 2 March 2020).

Base: 148

Removing financial stress

When asked about their experiences of free personal care, some recipients and their families told us that it alleviated financial stress at what was an already difficult and emotional time.

"We massively valued the financial contribution, because I don't know how we could have done it otherwise." Anonymous

"People give up their lives. A huge part of my life in the last three years has gone into making sure my parents are okay, but nothing like what I would have done if the care hadn't been free... It's allowed me to keep my life going." Dorothy, 58

Some local authority professionals noted that this removal of financial anxiety had encouraged some people to come forward and request care who wouldn't have done so prior to the introduction of free personal care. The same professionals told us that, before free personal care was introduced, they were concerned that individuals who were eligible and in need of care were not requesting help. This was because of a fear of the high cost of care and being pulled into a system that would take most, if not all, of their savings.

"There were a lot of people at the time [before free personal care] who met the eligibility criteria but didn't come forward because of the financial aspect." Director of adult social care

"What it did for the public was it took that issue of personal care away altogether. It took away the choices of 'do I get care because of my finances?' – that's gone." Director of adult social care

Freeing up money to spend on other forms of care

Some people mentioned that, with personal care being free, they were able to use their income and funds like Attendance Allowance to purchase other forms of support.

"In Scotland we get Attendance Allowance as well... It's not a huge amount of money but it's enough to pay for some of this other care. Like in Dad's case – we used it to pay for his cleaner. So, he had cleaners in every week... Other people would use it maybe to pay for shopping or for whatever it was they needed. He had me to do his shopping, and so he used his money for a cleaner." Dorothy, 58

Interestingly, the people we spoke to did not feel aggrieved that they were having to fund this additional type of care themselves, because they felt that the government providing a universal basic entitlement was a fair line to draw between the responsibility of the state and the individual.

Easing the burden for informal carers

Some people felt that free personal care had improved the quality of time they were spending with their family member. They felt that without free personal care, they may have ended up having to provide regular intimate care themselves. Instead, the provision of free personal care had meant that they were able to see their family member and focus on quality time.

"My mum never wanted to rely on anyone...she hated that, she felt like she was taking me away from my children... So, the last thing she wanted to do was put me in a position where she was needing me. She had no choice, so the free personal care allowed for that, those basics, just for the red line to be taken care of." Anonymous

Several individuals told us that, had personal care not been free, the responsibility would have fallen to a family member to provide care, rather than trying to fund this privately. This, then, would have had knock-on implications for the time they could spend with their own younger family members, too.

"Well there's probably a whole load of nebulous emotional and extended benefits that reach beyond maybe even the person who's in receipt, their immediate family... It affected my kids – they didn't see me most evenings. I was able then to take the odd night off, because I knew there was a carer going in. I could spend that with my kids and I could give them a bit better time as a dad, rather than being emotionally shattered by what was happening to my mum." Anonymous

"Everyone has an opinion on the subject, but I think, until you're living it, you don't realise the impact that it can have for a family to care for the person. So, having carers come in is absolutely crucial." Doreen, 55

A simple process

Some individuals highlighted the process of accessing free personal care as a particularly positive experience. They felt it had, in some ways, reduced the amount of stress they were experiencing during their interaction with the social care system.

"We were running my house and we were running my mother's house...and so if you have to then find personal care on top of all that, it would have been just incredibly stressful and, in our case, it wouldn't have been possible. So just having that stress taken away was...you know, a godsend, an absolute godsend." Allan, 55

For many, free personal care had been implemented after the individual or a family member had been in hospital. People highlighted the positive way in which the health system and social care system worked together to put a care package in place quickly.

"It was amazing, because it was something we didn't have to worry about – we were already worried 24/7 about my mum. And we didn't have to think how we were going to...how do you approach this to make sure we're getting the right help? Who should we go with, who's the best and all the rest of it... The hospital basically sets up the carers before the patient leaves the hospital, so it was already in place for mum... There wasn't any question of us having to fight for it, or in any way put ourselves under pressure to have to arrange all this. It's done for you." Doreen, 55

4. What people think of the system: challenges

Despite the positivity around free personal care, it was clear that many people still faced significant challenges with the social care system in Scotland. This section outlines some of the problems faced, as well as some suggestions for how these issues could be avoided if a similar system were to be adopted in England.

Insufficient funding

The funding challenges many local authorities are facing in Scotland have clearly had an impact on their ability to deliver free personal care. This was an issue identified by recipients of care and local authority personnel alike.

"In 2002 we had huge funding issues." Local authority finance manager

"Free personal care has to be included in the wider aspects of funding social care." Director of adult social care

"The local authorities are under so much pressure financially they can barely meet the requirements under the policy, never mind having to specially fund [extra care]." Anonymous

Even with the increased spend that national government has put into funding free personal care – a 196% increase between 2004 and 2018¹¹ – a number of local authorities have found it difficult to balance the legal need to provide free personal care and maintain financial sustainability. One director of adult social services told us that they knew various other local authorities had been forced to cut other non-statutory forms of care to accommodate the new costs incurred by delivering personal care for free.

One director of adult social care in a rural area also highlighted the difference in pressures across different parts of Scotland. He shared that quite rural areas can experience very high levels of care needs because, once retired, many older people are keen to live in these locations.

A number of interviewees acknowledged that funding was the root cause of many of the problems facing social care, but felt that free personal care needed to be prioritised within that.

"Local authorities don't have the money to do lots of things. Free personal care should be a priority for what they do, it should be one of the first things on the list that they say, aye, non-negotiable." Anonymous

As noted earlier, there are indications from the data in Scotland that the need to provide free personal care in a context of constrained budgets has seen a squeeze both on total numbers of people receiving care packages and on forms of non-personal care and support.

¹¹ "Free personal and nursing care in Scotland 2017–2018: figures." Scottish Government, 6 Aug. 2019, gov.scot/publications/free-personal-nursing-care-scotland-2017-18/

Key lessons

Free personal care will only deliver benefits if it is introduced in a context where sufficient funding has been secured so that all local authorities have the resources to fully implement free personal care in addition to their wider social care responsibilities. Free personal care must not be introduced at the expense of providing wider forms of care and support, because these are equally vital to the health and wellbeing of many people, including working-age disabled adults.

It is also important that future funding does not just reform care for those currently eligible, but seeks to expand eligibility and ensures all those in need of care and support get it. The Association of Directors of Adult Social Services (ADASS) reports* that almost £8 billion has been cut from adult social care since the beginning of the decade – and Age UK figures show** that unmet need among older people has risen during this same period. Any new funding settlement must seek to address these cuts and return the system to at least 2010–11 levels of investment (the peak year of social care spending per capita, according to the Health Foundation).

In England, it is also clear that this lack of funding has undermined the Care Act, a crucial piece of legislation in terms of its clear focus on promoting wellbeing and maximising choice and control. If the ideals that shaped the Act are to be reflected in reality, any reform to social care must start with a sustainable funding settlement. This means a clear funding plan, which brings to an end the cycles of crisis and last-minute injections of cash that have characterised the sector in recent years.

A funding solution could include any, or a combination, of the following:

- raising Income Tax
- raising National Insurance contributions
- introducing an age-related levy
- extending National Insurance contributions to include older people.

*"ADASS Budget Survey: Human Cost of Failing to Address the Crisis in Adult Social Care." Association of Directors of Adult Social Services, Jun. 2019, adass.org.uk/adass-budget-survey-human-cost-of-failing-to-address-the-crisis-in-adult-social-care

**"The number of older people with some unmet need for care now stands at 1.5 million." *Age UK*, 9 Nov. 2019, ageuk.org.uk/latest-press/articles/2019/november/the-number-of-older-people-with-some-unmet-need-for-care-now-stands-at-1.5-million/

Inadequate levels of personal care provision

One of the ways in which this lack of funding manifested, according to recipients of care and their families, was that the hours of personal care being provided were inadequate to meet the needs of the older person. There were occasions when families, while grateful for the personal care being free, felt the package their relative had been given was a standard package that did not take into account their individual needs.

43% of survey respondents did not feel that the amount of care they or their family member received was enough for their needs.

"The main thing that I would really stress is that on [carers'] visits they don't have enough time. Perhaps for people where it's purely making lunches that's been enough, but, for my mum, it was dementia and she needed the conversation part, she needed the presence of somebody there. So 15–20 minutes isn't really enough."
Doreen, 55

"I think the duration of the visits was a big issue... Within the local authority I think they reduced. The original could be as long as half an hour, and I think they were reduced to 15 minutes. For some people that's just a little bit, they need more time to be dressed or whatever, they need more time to eat their lunch." Bill, 72

For some, the package of care was increased after professional carers noted that the individual needed more support; but, in other cases, family members ended up paying for extra personal care provision to top up the existing package.

"We were happy to pay the care provider for the four hours a couple of times a week, so that we could actually go out and do shopping and relax a bit." Allan, 55

However, this will only be an option for those with sufficient income to pay for additional care.

Key lessons

A sustainable funding solution must be in place to effectively deliver a policy of free personal care. Without this, there is a risk that local authorities will only be able to fund care packages that comprise insufficient hours and are not tailored to the needs of the supported person.

In addition, there need to be clear and sufficient mechanisms to challenge decisions relating to care packages. In England, we are calling* on the government to introduce a statutory appeals process for adult social care, which ensures that all adults are able to challenge decisions about the care and support they receive in an accessible, open and fair way.

*For more information, read our report *Reviewing the case: The right to appeal in adult social care*, independentage.org/reviewing-case-right-to-appeal-adult-social-care

Lack of clarity around what help is included in free personal care

One of the key challenges that was evident during the implementation of free personal care in Scotland was the lack of clarity among the public about which tasks were and were not included. Many had thought that free personal care would mean all care costs were free when, in reality, the offer is actually a lot more restricted. This caused confusion and concern.

"I think there's a lot to manage expectations... In 2002 folks thought 'That's it, you don't have to pay', however...you would still pay for your non-personal support."
Local authority finance manager

One local authority set up a helpline that was inundated with calls from people who were angry that the care tasks they needed help with were not being provided free of charge.

"I found it was a challenge for the finance team. We seconded people to work in the free personal care team...we had a helpline number and a lot of the calls were about that. A lot of the people we spoke to thought the help would be totally free. That is probably more difficult than removing the charge completely." Local authority finance manager

"The difference between what is personal care and what isn't personal care... it's confusing for the individual. Difficult for finance staff and for sign-up staff."
Local authority finance manager

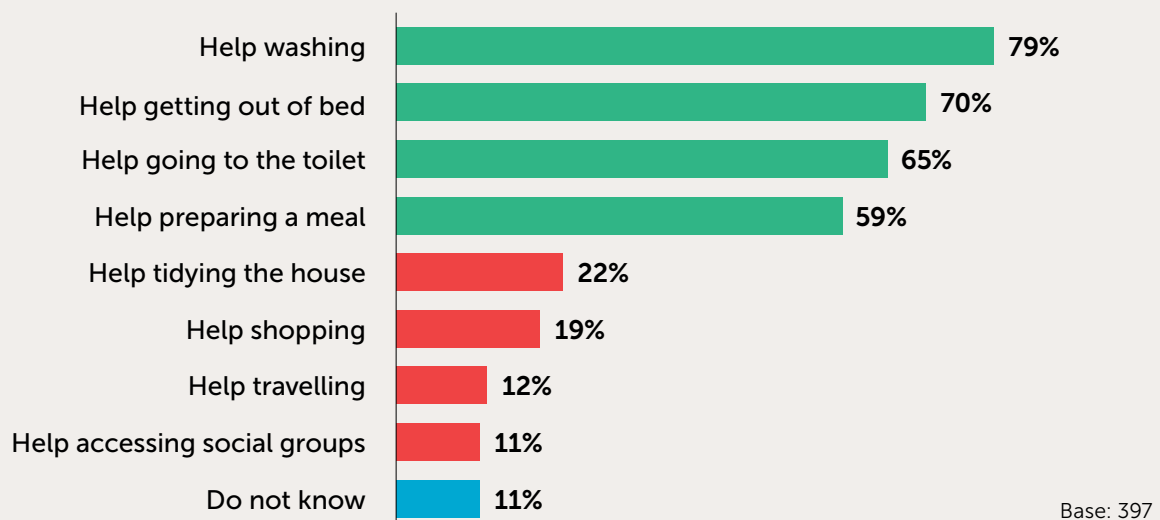
"If I was to be speaking to folk in England I'd be saying, make sure that you are actually communicating an accurate message... There's a very big education issue that needs to happen." Director of adult social care

Confusion was not limited to people using social care, either. Some of the local authorities we spoke to were initially unclear about the specific tasks covered by free personal care, so transitioning to the new social care policy was a difficult process to navigate.

“A lot of those conversations are still happening 20 years later. These conversations were happening in 2002.” Local authority finance manager

In a recent survey that Independent Age conducted of people in Scotland, there was a fairly good understanding of what free personal care included – for example, 79% of respondents correctly identified that help with washing would be provided. Confusion was mostly centred on a belief that help tidying the house and help with shopping would be included within the free personal care policy, with one in five survey respondents identifying these.

Figure 3: Tasks people identified as being part of free personal care



While it is essential that there is clarity around the different tasks included within the free provision, it is also vital that care tasks that fall outside ‘personal care’ are not somehow seen as unimportant. Some of the individuals we spoke to were clear about the value of these other forms of care, such as help tidying the house or help with going outside. All these aspects of care and support are important to the overall health and wellbeing of an individual. However, the people we spoke to tended not to be critical that this type of care was not included within the free provision. Instead, they felt that it was fair to make a basic level of care free, while charges were incurred for other forms. Their frustration was rather that these other forms of care were not as readily available as personal care and they faced difficulty securing this provision, even without any financial limitations.

Key lessons

If the government pursues the introduction of a universal entitlement like personal care, it is essential that the definition of what will be included is clear to everyone involved. Steps must also be taken to ensure people fully understand the detail of the policy change.

Making personal care a free entitlement does not mean other forms of care are not important – these services must not be sidelined or squeezed as a result of the policy. The government has a duty to ensure people are able to access all forms of social care that improve wellbeing and independence. This is by no means limited to personal care.

In addition to making personal care free, social care reform must encompass a renewed effort to ensure that all people in later life have access to activities such as support to leave the house and help with cleaning and shopping, which, as the Care Act recognises, are vital for wellbeing.

Lack of clarity over who is entitled to free personal care

Another area that appeared to create confusion was that free personal care was initially only available to those aged 65 and over. Many working-age individuals in need of care had thought the free personal care policy would include them and were confused why they were not able to benefit.

“There were [challenges with working-age people expecting to get it] right up until they made it free the other year.” Local authority finance manager

One local authority we spoke to felt that the confusion and practical challenges the age distinction created made it preferable not to distinguish between age, either in Scotland or England, in any future policy change.

*“From my perspective, if you’re doing [free personal care], you do it for all... I think if you’re going to decide what is free – I wouldn’t put an age barrier on that.”
Director of adult social care*

However, since the extension of the policy to all ages, there has been debate about how much it has actually benefited people under 65 with care needs. Far fewer people of working age with disabilities are self-funders and may have already received their personal care at minimal cost, meaning there is little financial benefit. The experience in Scotland underscores the importance of looking at the specific needs of different groups of people when thinking about social care reform.

Key lessons

Social care reform must help people of all ages by taking into account the specific needs of different age groups.

Free personal care would significantly help many people aged 65 and over where they primarily require personal care support and have built up a high level of assets, which means they currently don't qualify for state-funded help. However, for working-age disabled adults, the context is often very different, with many needing other forms of care and support and not having large savings.

This means that free personal care must be introduced in tandem with reform tailored to help working-age people in need of care and support. This may involve a focus on different care provision to personal care. The government should consult extensively with working-age disability charities about the reform that best meets the needs of these groups.

Free personal care in a care home operating like a subsidy

It was clear that people had different experiences of free personal care depending on where they had received it. Compared to those who received care at home, residents in a care home expressed more frustrations that the policy did not really live up to their expectations of 'free' personal care. Individuals highlighted that the £174 figure that is paid by local authorities to care homes was not nearly enough to cover the personal care costs, and more closely resembled a subsidy rather than free personal care.

"So, [my mother-in-law] got free personal care, which is £174 out of £1,600 a week. That is not free personal care." Anonymous

"It's not free personal care, it's a personal care allowance to pay a small amount." Anonymous

In addition to this concern, there was also a common feeling that there was a lack of transparency about the delivery of free personal care in care homes. Some had received bills that did not include a breakdown of costs to show how much was charged for personal care, residential costs and so on. Individuals felt having this detail and clear information was important to fully understand the free personal care policy and its benefits. In this respect, one person said that when his mother received care at home, he had an accurate understanding of what free personal care was and how it was helping; when she was in a care home, however, he didn't even know if she was getting it.

"There was an awful lot of wooliness about that, and I should have maybe made it more of my business. I've got other friends who've been through this...and they are all of the same opinion that it's not crystal clear what can be covered by the free personal care... Once [my mother] went into a nursing home, in fact, it was decidedly unclear what level of – here we're just talking money, we're not talking services – support and all the rest of it." Hugh, 68

Key lessons

A universal entitlement such as free personal care must benefit people regardless of whether the care setting is their own home, sheltered accommodation or a residential care home. This means that the flat rate paid by local authorities to care homes for personal care must be set at a level that is fair to providers and genuinely covers the costs of delivering personal care. This should be made transparent on care home bills, so it is clear what costs are being covered.

It is also important that people in later life do not face catastrophic care costs in the form of 'hotel costs'. In England, the average weekly cost of residential care is £615 and hotel costs make up two thirds of the total fees. The government must introduce a safeguard to protect those people who would still be vulnerable to catastrophic hotel costs. Proposals for this vary and have included setting a cap or safeguard as a total spending figure over a lifetime or setting it at a level of spending a year. Independent Age would support any option that would ensure a protection against catastrophic costs that is fair and comprehensive.

Gaps in the social care workforce

A common theme that emerged throughout this research is that the current social care workforce is insufficient to deliver the amount of free personal care required.

*"Probably one of the biggest issues that I think I would flag up at the moment... I just can't get the folk recruited and neither can the independent sector. So, actually, the idea of top-ups and building packages etc, is actually very tricky because in the end it's 'who's going to do it?'... There's a number of caveats that need to be taken into account by describing what free personal care looks like. I certainly would be concerned – you could end up with people seeing this very bright new tomorrow in which they get free personal care up to a given level and we can't recruit it."
Director of adult social care*

The challenges local authorities mentioned fall into two main categories: one was having sufficient budget to fund more social care worker roles; the second was convincing people that pursuing a career in social care was worthwhile.

"The only way we will have sustainable services will be if young people think these are good jobs valued by the community. If you pay people a pittance for a valuable job, then they don't get that message." Director of adult social care

Some individuals with a background in health or social care were quick to point out that the wages many carers are paid are insufficient when considering the stress and demand that is placed on them.

"So, to me, having been in the health service, it's a very unfair wage that they get. They don't get the time to travel between clients, nor are they kept within the one area." Elaine, 78

Care recipients and their families were also very aware of the workforce crisis in their local communities. Despite being concerned about the amount of care they or their family member received, no interviewee criticised the professional carers who delivered the care. Instead, they tended to express a lot of concern for the carer's wellbeing. They noted that many carers were having to rush through traffic and even skip meals to get to their next appointment.

These poor conditions, such as low pay and heavy workload, have led to a high turnover rate in the social care sector in Scotland, with many carers choosing to leave the sector altogether. More than four fifths (85%) of social care employers have faced retention difficulties with support-worker care staff in the past two years.¹²

Some individuals echoed this, sharing concern that their family member often received visits from different carers, which made it difficult to develop a trusting relationship.

"If there was one criticism it would be a lack of continuity in the people providing care. So, you'd have maybe somebody coming in a couple of times and then it would be somebody different, so there wasn't any continuity in that system... It's possibly easier for somebody to have that caring relationship where they know the person and they are used to working with that person." Bill, 72

40% of our survey respondents or their family members did not usually have the same professional carers providing their care.

¹² "Implications of labour markets for the social care workforce: report." Scottish Government, 11 Mar. 2020, gov.scot/publications/implications-national-local-labour-markets-social-care-workforce-report-scottish-government-cosla/pages/6/. Accessed Aug. 2020.

Key lessons

Social care reform must go hand in hand with improvements to workforce conditions to ensure there is an adequate social care workforce available to deliver the care packages people need.

Action is needed to tackle both the vacancy rate and turnover rates that are disproportionately high within the social care sector in England. Key steps for the government include:

- addressing workforce planning. The Department of Health and Social Care must lead on the development of a comprehensive workforce strategy that brings together health and social care intelligence to better coordinate and collaborate
- bringing pay into line with NHS roles. Initiatives such as the current recruitment campaign targeted at young people are bound to fail unless poor pay is tackled. The Health Foundation estimates that another £4.4 billion would be needed by 2023–24 to boost staff pay to grow in line with the NHS, while meeting increased demand. This investment should be made as a matter of urgency*
- improving training and career prospects. Government and care providers need to work together to develop clear career pathways in social care, including a system of portable accredited training.

*"The real cost of a fair adult social care system." *The Health Foundation*, 29 May 2019, health.org.uk/news-and-comment/blogs/the-real-cost-of-a-fair-adult-social-care-system

Practical challenges in implementing a new policy

Two local authority employees highlighted the practical difficulties of transitioning to a new social care system. Initially, when free personal care was introduced, challenges such as confusion over who benefited and what tasks were included were unforeseen, and meant local authorities had to quickly adapt, investing in new teams and structures to deal with the confusion. These individuals also highlighted the important role the National Implementation Group played in transitioning to the reformed social care system when free personal care was expanded to include working-age adults.

“The National Implementation Group played a big role – that was going for 18 months prior to the implementation date.” Local authority finance manager

This group was put together by the Scottish government and consisted of members from the Scottish government, local authorities, integration authorities and service providers. The group was brought together to help manage the transition, and drafted statutory guidance to local authorities. The wide variety of expertise within the group was able to predict potential problems related to the transition and issue guidance on some of these.

Key lessons

The government must take steps to ensure that transitions following social care reform have been well-prepared for, through extensive research and collaboration with all relevant stakeholders. One way to achieve this is through the creation of an implementation advisory group model, as used in Scotland.

If an advisory group is set up, it is imperative that the clarity they provide is articulated to people in England in a clear and robust way. An information campaign spearheaded by the government must be used to ensure individuals are prepared for, and clear on, the details of social care reform.

5. Conclusions and recommendations

Arguably, one of the reasons social care reform has failed to move forward is the tendency to dismiss proposals because of their perceived limitations. But no policy option is perfect – all involve significant trade-offs and challenges. If we are to shift from lamenting the state of the system to seeing real change, it is essential to fully examine and debate the positives and challenges of any proposed reform.

Our conversations in Scotland offer important insights into the implementation of social care reform in England. It is clear that many older people in Scotland feel they have benefited from the introduction of free personal care and continue to do so decades later. But, it is equally clear that any government wishing to implement a similar policy in England has much to learn from some of the challenges in Scotland. Of particular importance is the need to be absolutely clear over the definition of personal care and who will benefit, as well as the need to situate any such reform within the context of a long-term stable funding settlement.

In addition, our evidence from Scotland shows that while, as an individual policy, free personal care will benefit many older people, it will not provide all that everyone needs, and so must sit within a package of wider reform. Without a combination of these wider reforms, free personal care will be unable to deliver significant benefits for older people and their families.

Recommendations in relation to the delivery of free personal care

The government should:

- clarify who will be eligible for free personal care
- ensure that free personal care is fair across different care settings, including individuals' own homes, sheltered accommodation and residential care homes. This means that the personal care flat rate paid by local authorities to care homes must be set at a level that is fair to providers and genuinely covers the costs of delivering personal care. This should be made transparent on care home bills, so it is clear which costs are being covered
- utilise the knowledge and expertise of key stakeholders by setting up an implementation advisory group that consists of local authority personnel, charity representatives and recipients of care and their families
- provide funding to local authorities to ensure they can set up robust internal systems to manage the transition to a reformed social care system
- in conjunction with the implementation advisory group, produce comprehensive guidance on the scope of free personal care and the activities it includes. This must also feature within a public-facing awareness campaign on the reform of social care.

Recommendations in relation to the wider context of social care reform in England

The government must:

- implement a long-term funding solution so that local authorities can introduce a free personal care system without reducing the number of non-personal care activities they offer, or having to reduce the numbers who are eligible for state-funded care. This must be a funding settlement that extends eligibility to care and enables local authorities to finally shift the Care Act's focus on wellbeing, choice and control from aspiration to reality. This funding must also be sufficient to sustain other key reforms to the system outlined below
- take steps to address the workforce-capacity issues facing local authorities and providers, which should include:
 - developing a comprehensive workforce strategy that brings together health and social care intelligence to better coordinate and collaborate
 - bringing pay into line with similar roles in the NHS
 - improving training and career prospects
- introduce a safeguard/cap to protect those people who would still be vulnerable to catastrophic costs. Independent Age would support any option that would ensure protection against catastrophic costs that is fair and comprehensive
- introduce a statutory appeals process for social care that ensures all adults are able to challenge decisions about the care and support they receive in an accessible, open and fair way.*

*For more information, read our report *Reviewing the case: The right to appeal in adult social care*, independentage.org/reviewing-case-right-to-appeal-adult-social-care




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