

WM ADASS Scenario Workshop: Online

Exploring the contextual environment- March 16th 2023

Workshop 1: Forays into the Future

Time	Activity
09:00	Welcome and introduction – Richard Harling Chair WM-ADASS
09:15	National Overview - Sarah McClinton, ADASS President
09:35	Introducing Futures Thinking – David Frith, The Strategy Unit
09:45	Exploring the evolving contextual environment – active engagement with Strategy Unit research based on the Delphi exercise
11:00	Break
11:15	Reflections from the social care perspective – presentation and discussion Richard Humphries, independent social care expert and author of Ending the Social Care Crisis
12:15	Reflections from the investor perspective – presentation and discussion Tom King, Director, Lodestone Communications - an award-winning political risk adviser to investor, corporate, charity and government clients on public policy and regulation, government affairs, M&A and strategic communications
13:00	Close

**The
Strategy
Unit.**

Welcome and Introduction.

Richard Harling Chair WM-ADASS

National Overview

Sarah McClinton, ADASS President

Reflections over the last year....

- Adult social care is **magnificent** and so are our ADASS regions
- ADASS continues to **influence** policy and practice across all of adult social care, we have made progress internally on co-production and EDI and working on the Covid 19 Inquiry
- **ADASS/LGA: Partners in Care and Health** development
- 2 White papers, 3 Care Ministers, 3 Health Secretaries, 4 **ADASS Member surveys** and 1 deeply disappointing DHSC implementation plan
- **Roadmap for change** – DASS leadership and structural system change required
- **Opportunities** of ICBs and work with allies eg Joint ADASS/LGA/Confed vision for health, care and support (January 23)
- Communications review and **shifting the conversation**

Joint vision for a high quality and sustainable health and care system - ADASS/LGA/NHS Confed

High quality, responsive, preventative and personalised health and care services contribute so much to our lives and society by:

- enabling people to live their best lives and be active in their local communities
- supporting unpaid carers to continue caring whilst working and living their own lives
- offering rewarding, skilled employment and long-term careers to over 3 million people
- bringing together the best of the NHS, local authorities, adult social care providers, public health and the community and voluntary sector to support people to live good lives, meet growing needs and expectations of those who draw on care and health services
- boosting local, regional and national economies by contributing to economic outputs as major employers and contracting with local businesses.
- **However, all of the evidence points to a stark truth:** our health and social care services are struggling to meet their statutory requirements to provide people with timely, safe, high quality and effective care and support. And despite the heroic efforts of all those working in social care and health, without immediate and long-term action from national Government, they will fail to improve, leading to worse health, wellbeing and economic outcomes for all of us.

Joint vision: invest in prevention and early intervention – shift ambition to reality

Focus on the long-term solutions required to make this shift a reality.

- maximising health and wellbeing and preventing or delaying people from developing health and social care needs
- redirecting resources so that when people need treatment, and short term support they are assisted to make as full a recovery as possible, restoring their health, wellbeing and independence
- maximising independence and wellbeing for people with ongoing health and/or social care needs by working with them to put in place the care and support that works for them.

Asks the Government to work with us and to put in place concrete measures to ensure that local leaders can achieve this culture shift, now and in the future. **3 key asks:**

- invest in **prevention and early intervention** – increase PH Grant, incentivise ICSs, invest in social care in its own right, invest in recovery/reablement/housing solutions
- create the **ability to plan for the long term**
- deliver a long-term, **fully funded workforce plan** that covers health and social care – including the public health workforce.

Futures Thinking and Social Care

David Frith, The Strategy Unit

Why futures thinking?

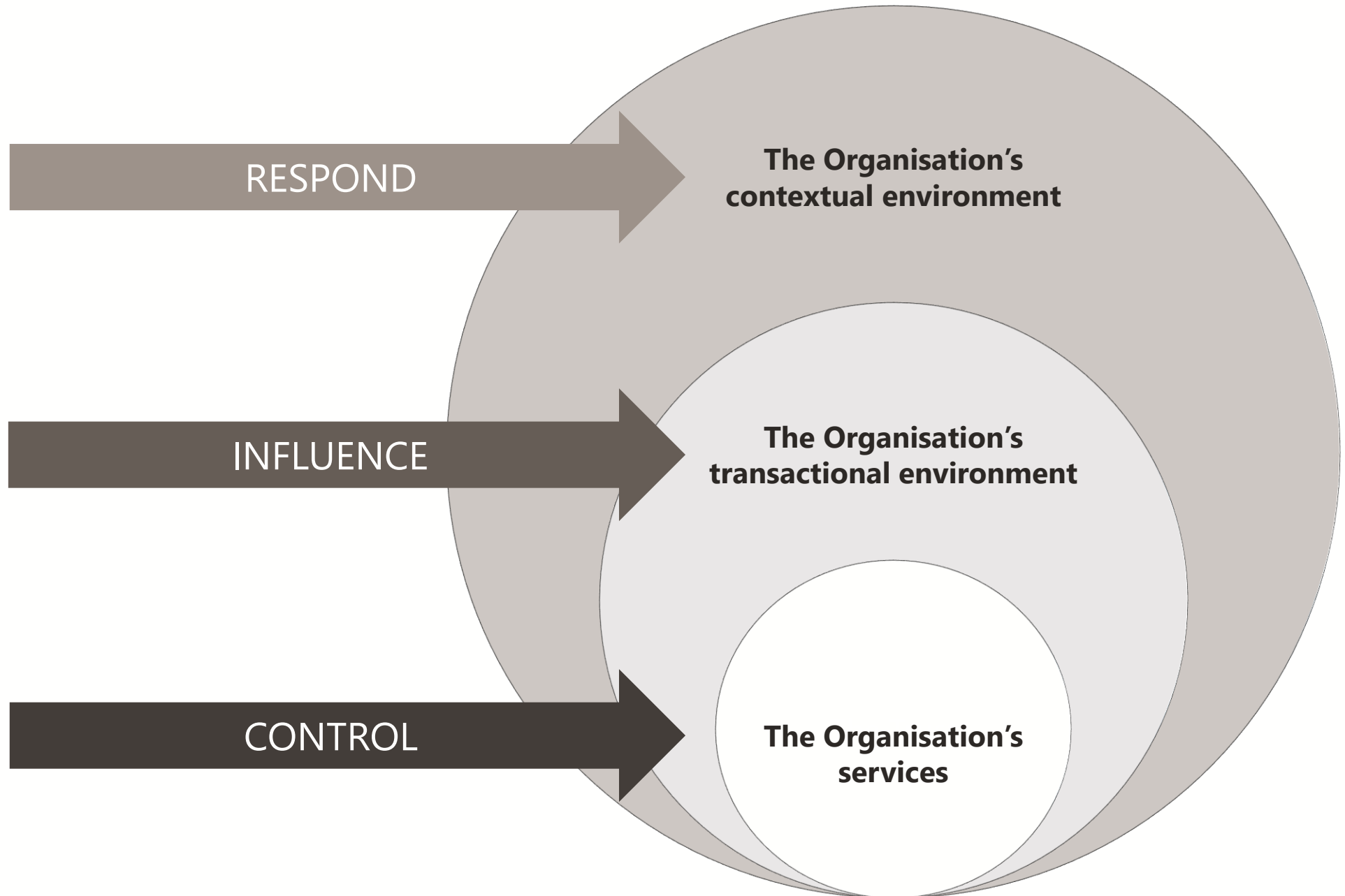
You only need to plan if you can't respond rapidly and effectively enough to events, but.....

For public sector organisations in particular, an important aspect of today's significant challenges and contemporary worries lies in the mismatch of fast moving, connected events and issues....and the slow pace of institutional responses..... Given this mismatch between faster feedback loops and the slow pace of institutional innovation, the anticipation of increasing TUNA disruptions does not seem outrageous.

Ramirez & Wilkinson, *Strategic Reframing*

Turbulent – Uncertain – Novel - Ambiguous

The Organisation and its Context

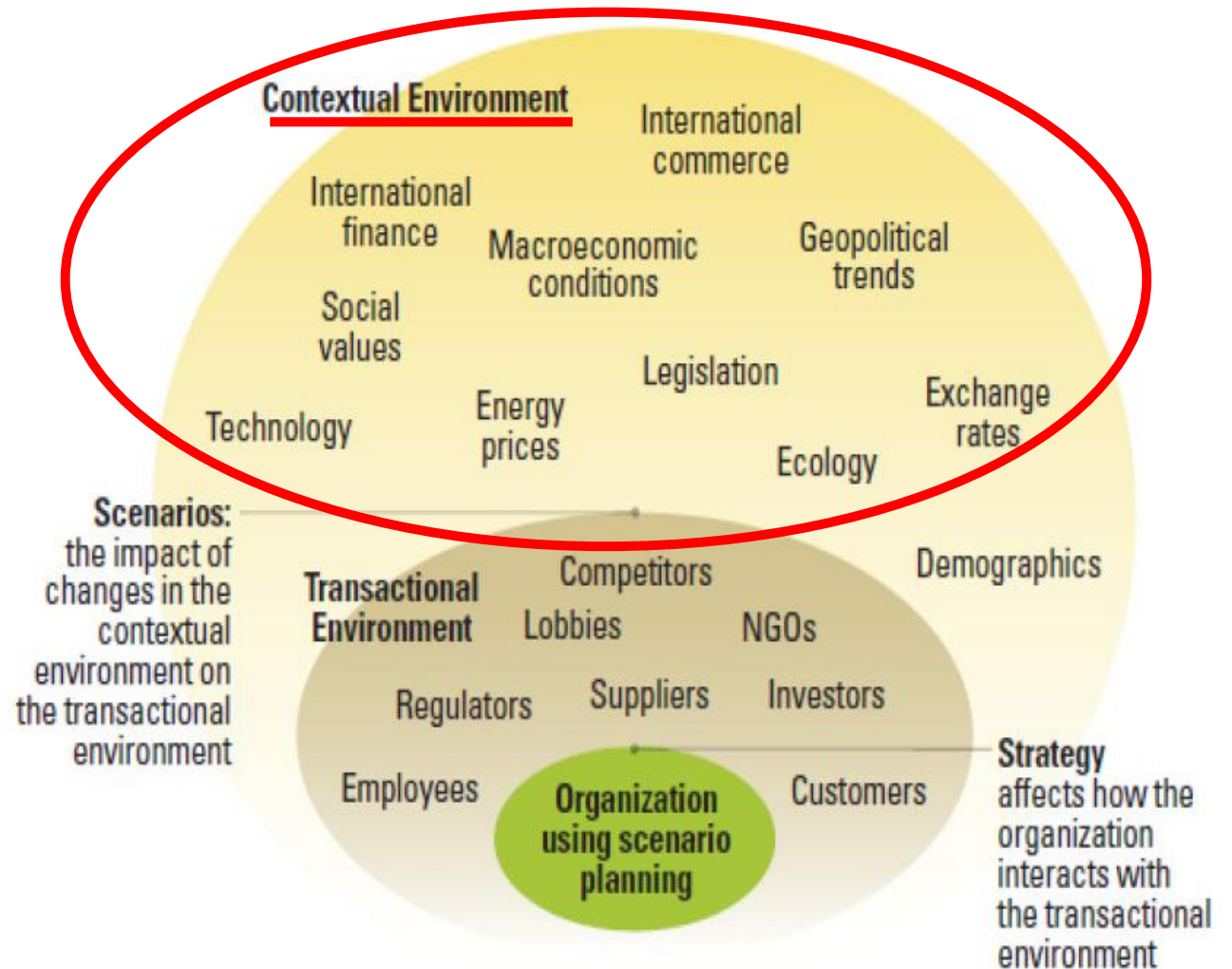


Scenarios are.....

..... imaginative but realistic descriptions of potential futures and how they were shaped by their contextual environment.

They provide worlds into which we can take our strategic issues and explore how they might evolve.

They allow us to shape plans that are more robust and more realistic.



Scenarios are.....

..... imaginative but realistic descriptions of potential futures and how they were shaped by their contextual dynamics.

Forecasts/
Predictions

Preferences /
Options

Best/ Worst
Case

Plausible

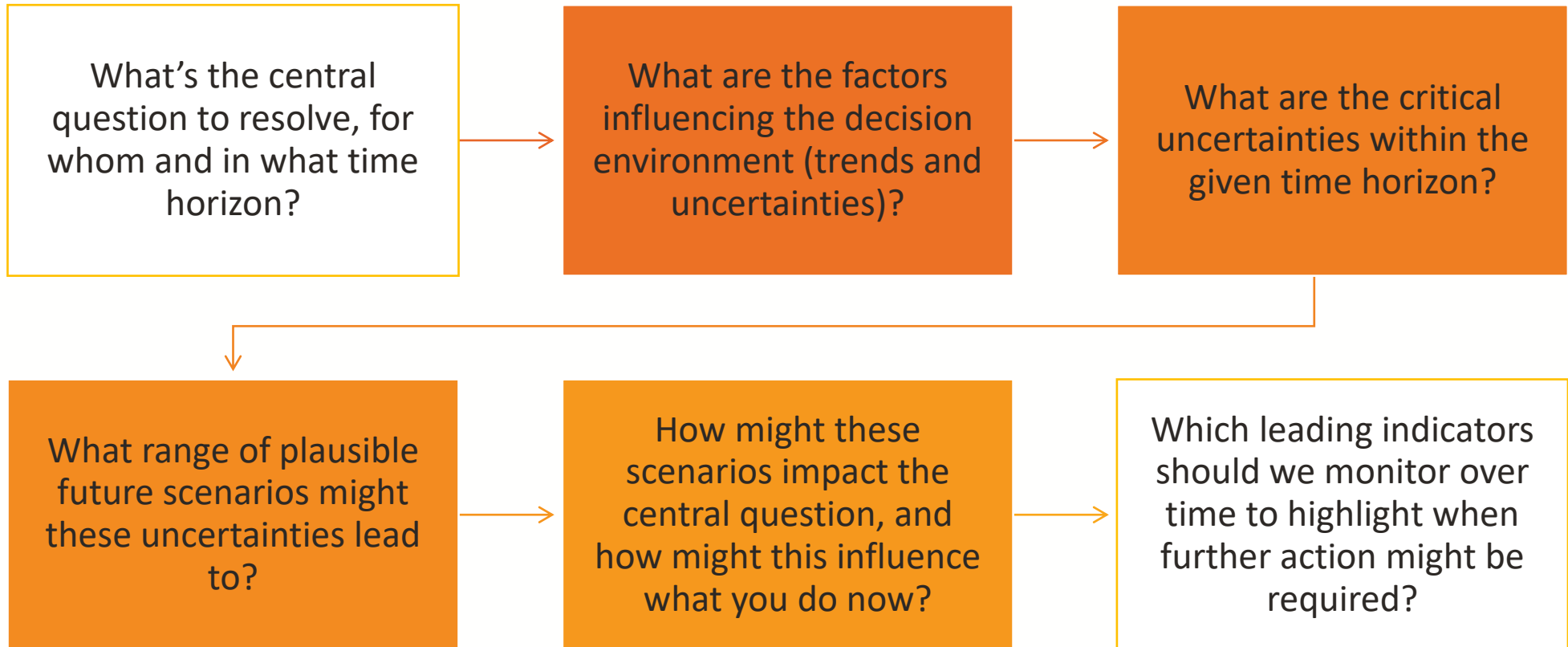
Distinct

Internally Coherent

Challenging

Contextual

Scenario Process



**What are the critical building blocks
for a resilient social care system in 2035?**

Exploring the Evolving Contextual Environment.

Active engagement with Strategy Unit research based on the Delphi exercise.

Delphi Method

- Identified 141 relevant trends and uncertainties
- Collated into 44 factors across 5 categories (political, economic, social, technological, environmental)
- Ranked for potential scale of impact and degree of uncertainty over 10+ years
- Grouped as 7 key forces/research themes

Ref.	Trend/Uncertainty	Ref.	Trend/Uncertainty
POLITICAL		ECONOMY	
P1	Immigration policy	Ec1	Affordability of staff
P2	Social care pay and benefits	Ec2	Workforce travel costs
P3	Focus of political attention	Ec3	Provider energy costs
P4	Retirement and pensions policy	Ec4	Innovation cost/benefit
P5	Funding timescales	Ec5	State of UK economy
P6	Social care funding	Ec6	Care market dynamics
P7	CQC regulation	Ec7	Affordability of independent living
P8	Changes to social care operating model	Ec8	Interest rates
P9	Changes to scope of social care provision	Ec9	The West Midlands economy
P10	Social care as a profession	ENVIRONMENT	
P11	NHS reform	En1	Food and water security
P12	Higher education policy	En2	Epidemic/pandemic
SOCIAL		En3	Extreme weather
S1	Population age profile	En4	Energy security
S2	Attitudes toward social care careers	En5	Air quality
S3	Population health & wellbeing	En6	Migration
S4	Extent of informal caring	En7	Environmental responsibility
S5	Loneliness	En8	Physical environment and crime
S6	Public expectations of social care	TECHNOLOGICAL	
S7	Family structures	T1	Digitalisation
S8	Openess to technology	T2	Intelligence-led care
S9	Work-life balance	T3	Medical advancements
S10	Local social capital	T4	Scientific breakthroughs
		T5	AI and robotics

Identifying
Factors

Analysis
Summary

Developing a
Matrix

Ref	Factor	Uncertainty		Impact	
		Range	Average	Range2	Average2
P1	Immigration policy	4.0	3.1	4.0	4.2
P2	Social care pay and benefits	6.0	3.9	4.0	5.9
P3	Focus of political attention	5.0	3.4	2.0	6.3
P4	Retirement and pensions policy	5.0	4.2	3.0	4.6
P5	Funding timescales	6.0	4.2	3.0	5.8
P6	Social care funding	5.0	3.9	4.0	6.0
P7	CQC regulation	5.0	2.9	3.0	5.6
P8	Changes to social care operating model	5.0	5.1	2.0	5.8
P9	Changes to scope of social care provision	6.0	4.7	3.0	5.4
P10	Social care as a profession	5.0	3.6	4.0	4.9
P11	NHS reform	5.0	4.4	3.0	6.0
P12	Higher education policy	4.0	4.2	3.0	3.9
T1	Digitalisation	4.0	3.2	4.0	5.2
T2	Intelligence-led care	4.0	3.3	5.0	4.8
T3	Medical advancements	4.0	4.2	5.0	4.8
T4	Scientific breakthroughs	5.0	4.7	5.0	5.2
T5	AI and robotics	6.0	4.6	5.0	5.4
S1	Population age profile	2.0	1.5	4.0	6.1
S2	Attitudes toward social care careers	6.0	3.8	4.0	5.3
S3	Population health & wellbeing	4.0	2.9	4.0	5.7
S4	Extent of informal caring	4.0	4.0	3.0	6.1
S5	Loneliness	4.0	2.7	5.0	5.0
S6	Public expectations of social care	4.0	4.0	5.0	5.4
S7	Family structures	4.0	3.0	4.0	5.3
S8	Openness to technology	3.0	4.3	4.0	5.4
S9	Work-life balance	5.0	4.2	4.0	4.3
S10	Local social capital	3.0	3.8	5.0	5.0

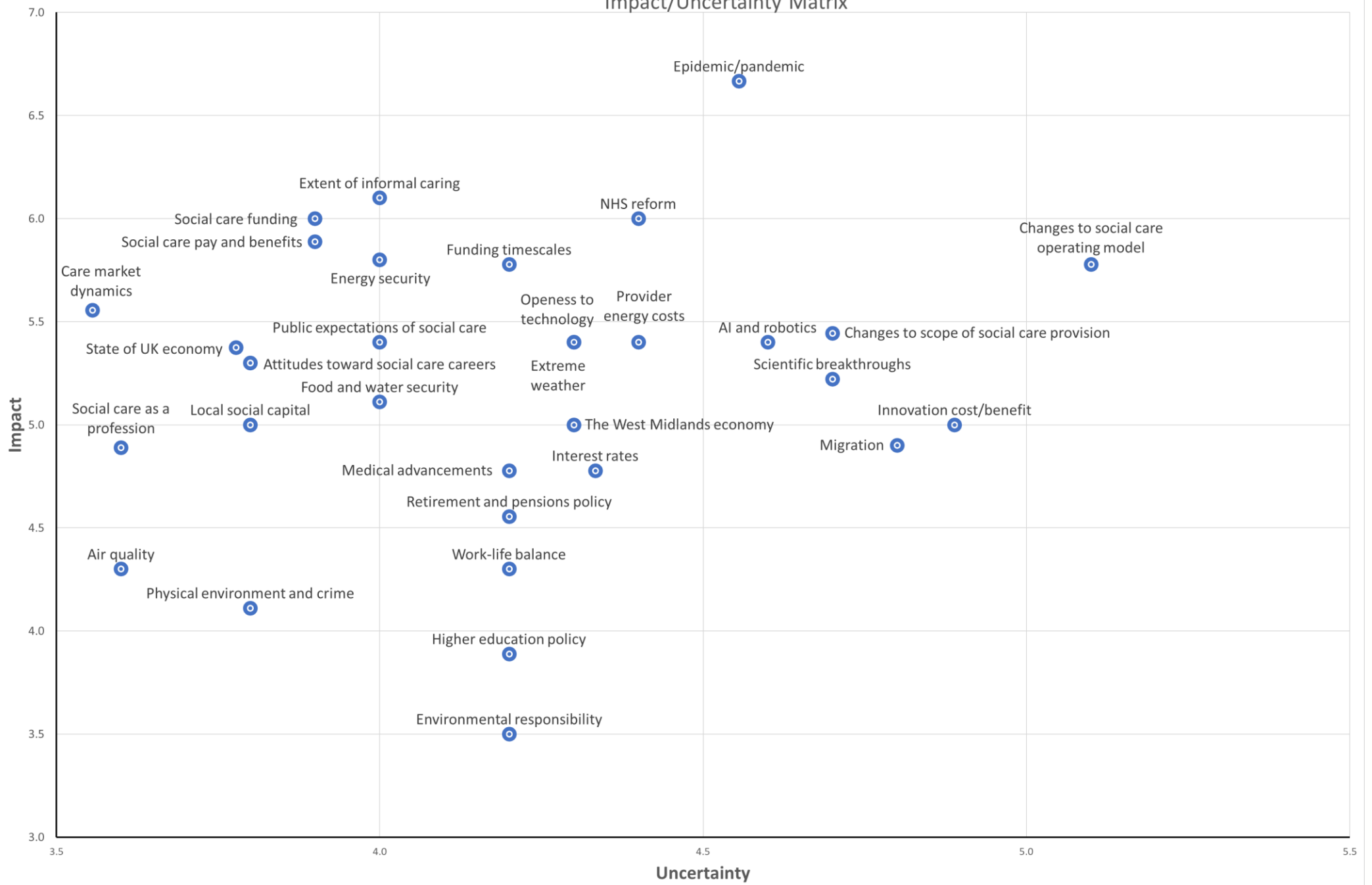
Ref	Factor	Uncertainty		Impact	
		Range	Average	Range2	Average2
En1	Food and water security	4.0	4.0	5.0	5.1
En2	Epidemic/pandemic	6.0	4.6	2.0	6.7
En3	Extreme weather	5.0	4.3	5.0	5.4
En4	Energy security	5.0	4.0	3.0	5.8
En5	Air quality	4.0	3.6	5.0	4.3
En6	Migration	5.0	4.8	3.0	4.9
En7	Environmental responsibility	5.0	4.2	5.0	3.5
En8	Physical environment and crime	4.0	3.8	2.0	4.1
Ec1	Affordability of staff	4.0	3.0	2.0	6.4
Ec2	Workforce travel costs	3.0	3.3	4.0	5.2
Ec3	Provider energy costs	5.0	4.4	3.0	5.4
Ec4	Innovation cost/benefit	2.0	4.9	4.0	5.0
Ec5	State of UK economy	5.0	3.8	4.0	5.4
Ec6	Care market dynamics	4.0	3.6	4.0	5.6
Ec7	Affordability of independent living	3.0	3.4	3.0	4.8
Ec8	Interest rates	5.0	4.3	4.0	4.8
Ec9	The West Midlands economy	4.0	4.3	4.0	5.0

Identifying
Factors

Analysis
Summary

Developing a
Matrix

Impact/Uncertainty Matrix

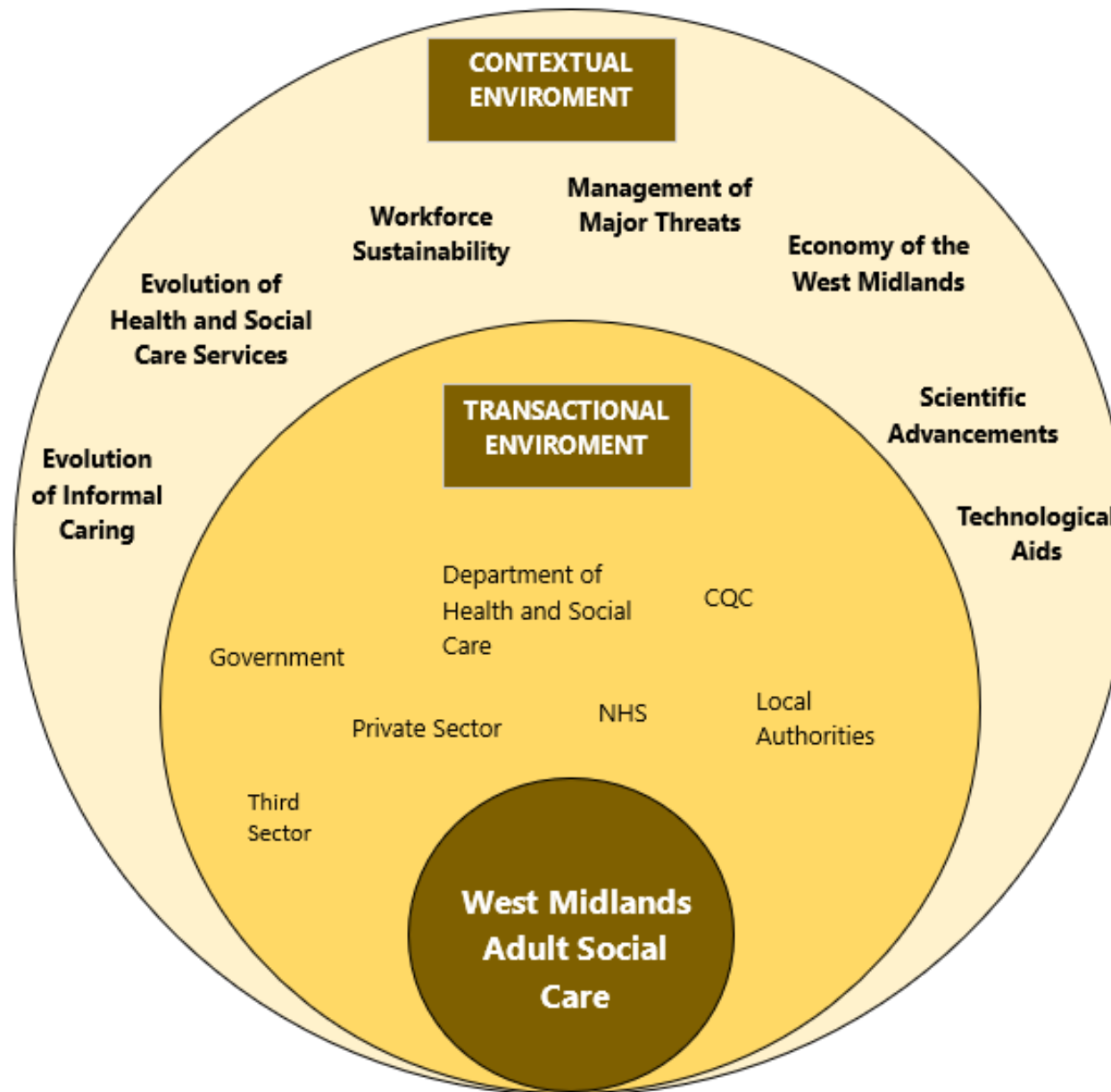


Identifying Factors

Analysis Summary

Developing a Matrix

Key Driving Forces



Uncertainties (cross-cutting)

1. How might the nature and size of the West Midlands economy change?
2. What is the potential for unexpected major threats to the functioning of health and care services?

How might the nature and size of the West Midlands economy change?

An illustration of a blue globe with a white car and several stylized buildings of varying heights and colors (blue, grey, white) emerging from the top. The globe is positioned on the left side of the slide.

Economic Growth

[,e-kə-'nä-mik 'grōth]

An increase in the production of economic goods and services, compared from one period of time to another.

 Investopedia

Economic
Productivity

Growth

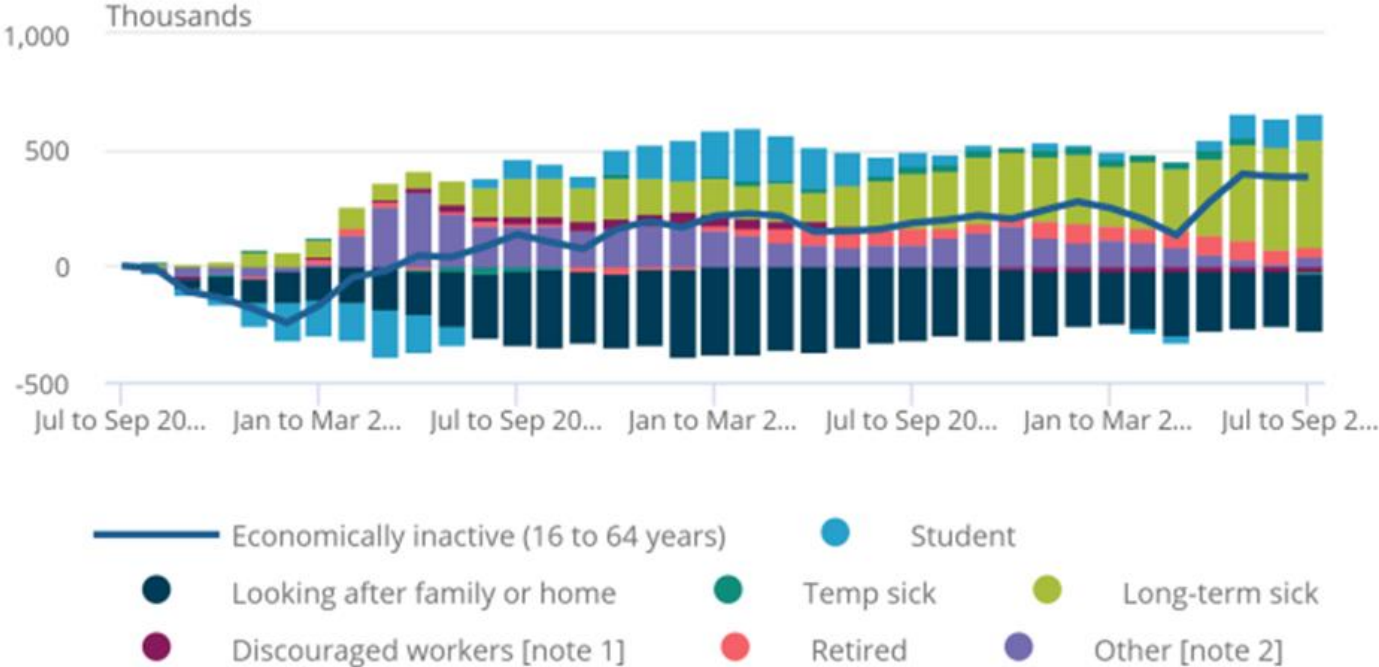
Cost of Living

Business

How might the nature and size of the West Midlands economy change?

Figure 8: The increase in economic inactivity during the latest three-month period was largely driven by those inactive because they are long-term sick

UK economic inactivity by reason, people aged 16 to 64 years, seasonally adjusted, cumulative change from July to September 2019, for each period up to July to September 2022

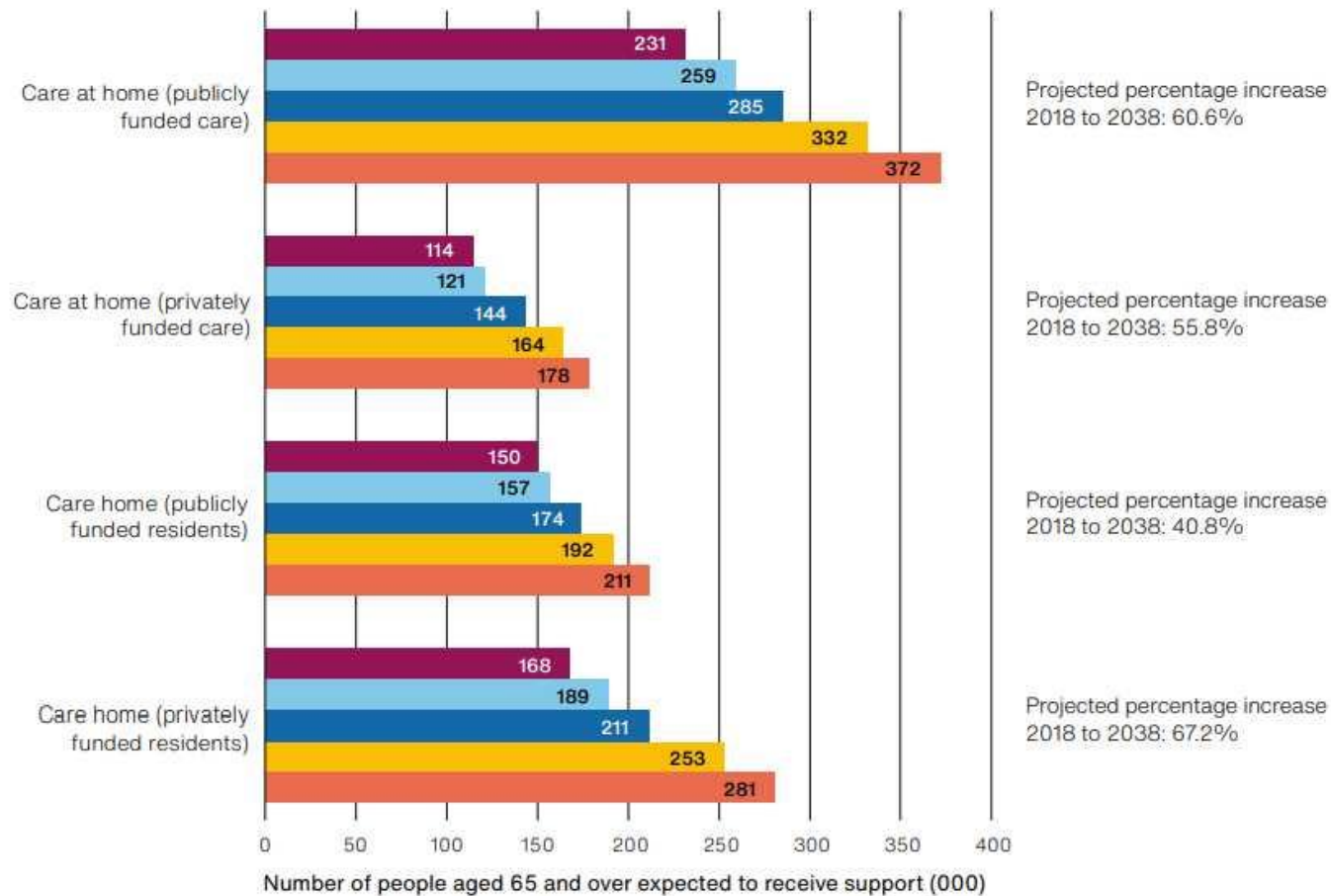


How might the nature and size of the West Midlands economy change?

Projected increases in demand for care for adults aged 65 and over in England, 2018–2038

The number of adults aged 65 and over requiring social care support is projected to increase, with the largest increases in publicly funded care at home (61%) and privately funded care homes (67%)

Service type



Economic
Productivity

Growth

Cost of Living

Business

How might the nature and size of the West Midlands economy change?

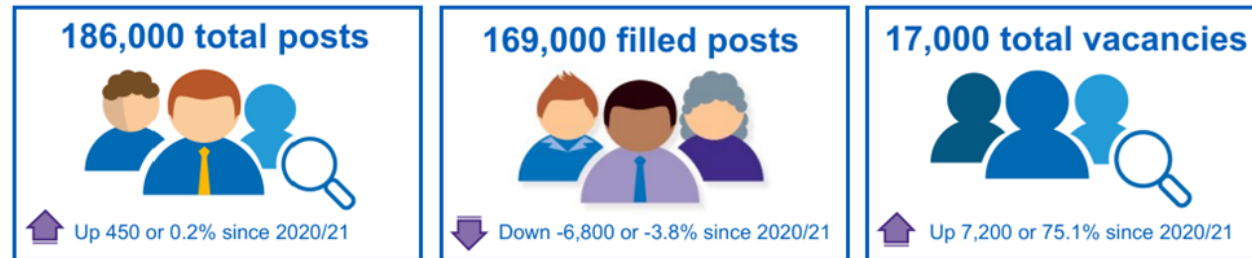
The adult social care sector and workforce - West Midlands

Recent trends - workforce supply and demand 

[Download PowerPoint](#)

In adult social care in West Midlands, as at 2021/22, there were:

[Press here to view more data from the report](#)

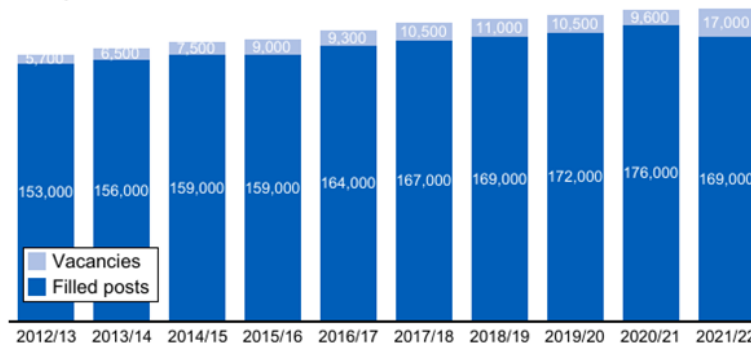


The total number of posts in the region has increased by 0.2% in 2021/22. However, fewer posts were filled, and more were vacant highlighting recruitment and retention difficulties and not a decrease in demand for social care staff.

Median care worker pay compared to other job roles 2021/22



Filled posts and vacancies between 2012/13 and 2021/22



The **starter rate** has fallen from



To view up to date monthly information on how the adult social care workforce has changed since March 2021, due to COVID-19 and other other reasons, press the button to go to our month tracking dashboards

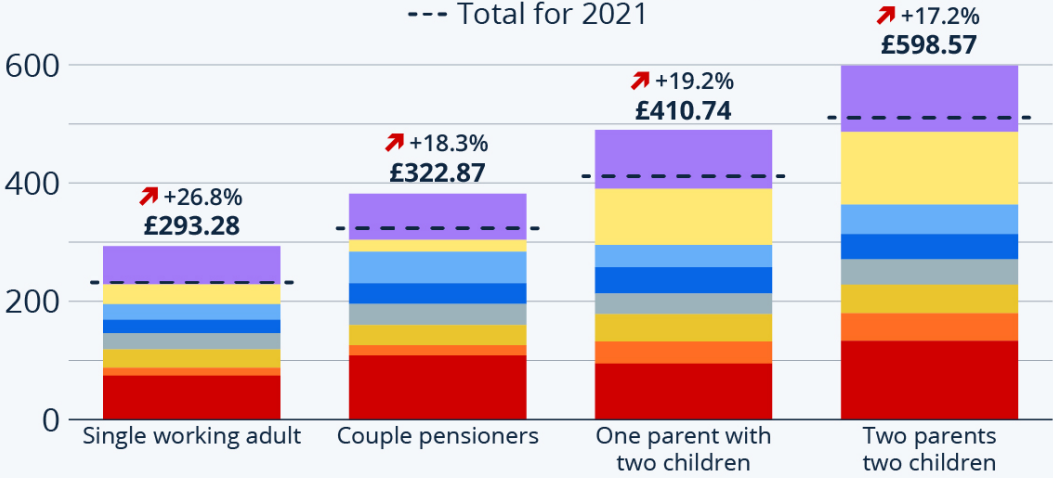
[Press here to go to Monthly Tracking](#)

How might the nature and size of the West Midlands economy change?

The Rising Cost of Living Is Hitting All Groups

Amount needed each week to reach minimum standard of living in the UK in 2022

- Food and drink
- Clothing
- Domestic fuel
- Other housing costs
- Household goods and services
- Personal goods and services
- Travel
- Social and cultural participation
- Total for 2021



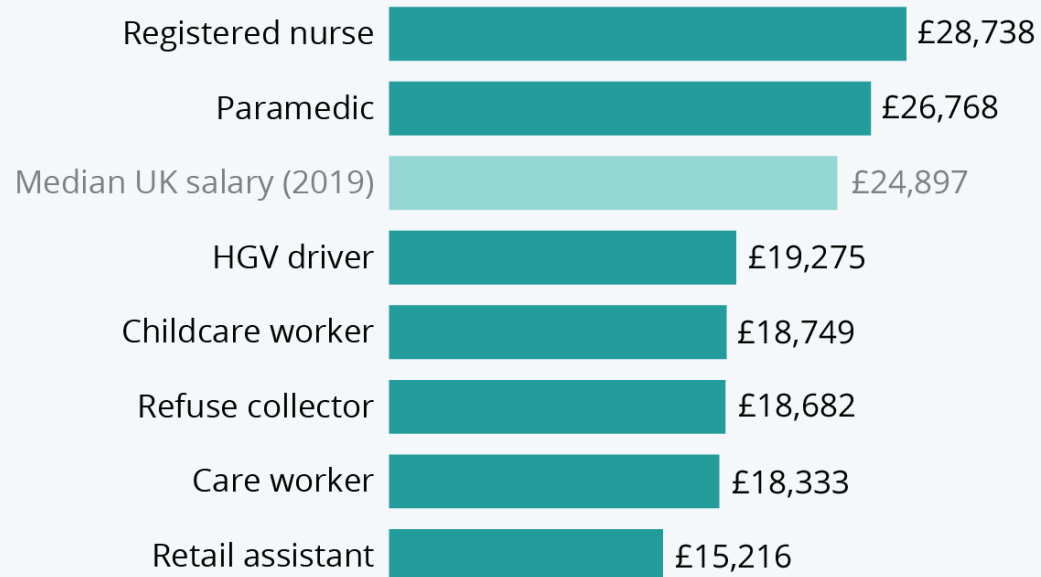
* Excluding rent and childcare
Source: Joseph Rowntree Foundation



How might the nature and size of the West Midlands economy change?

Key work, low pay

Average gross annual earnings of selected jobs in the UK*



* Based on jobs advertised online

Sources: Check-a-Salary, Office for National Statistics



statista

Economic
Productivity

Growth

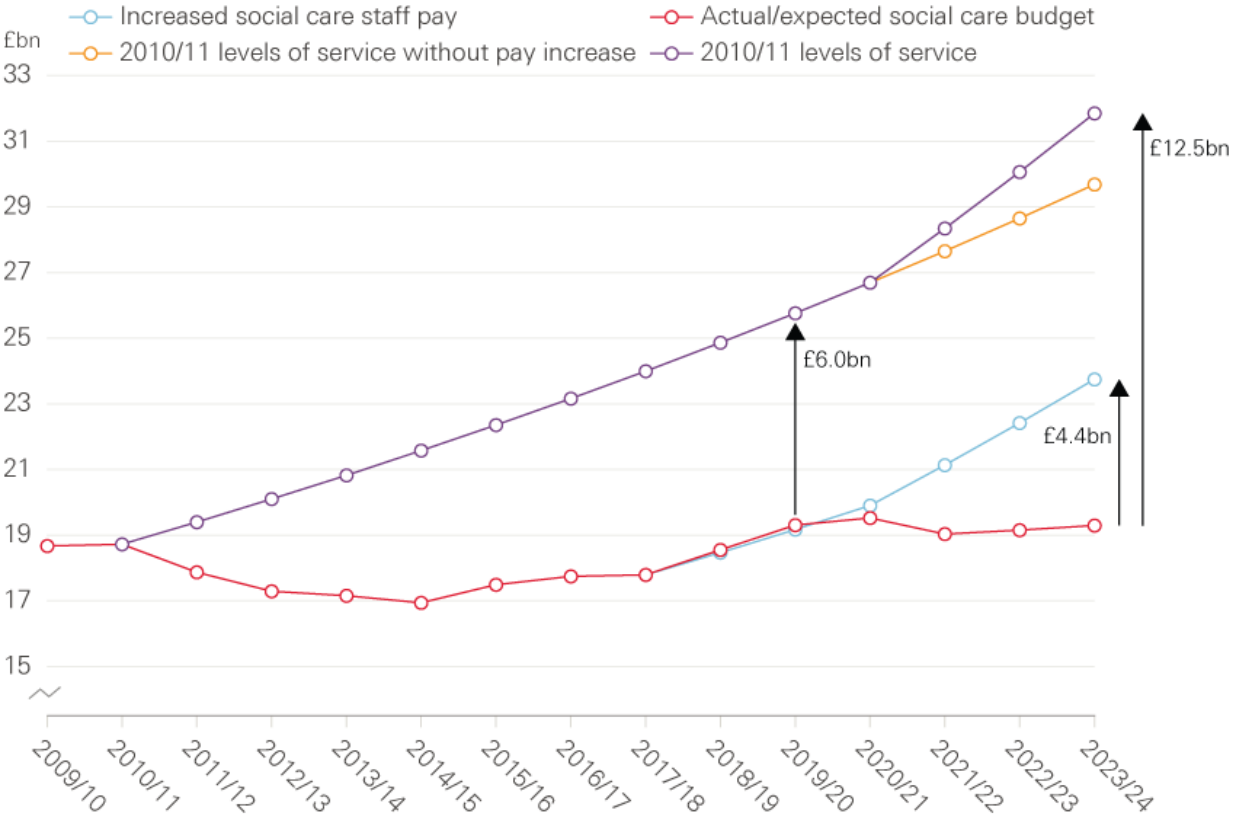
Cost of Living

Business

How might the nature and size of the West Midlands economy change?

Social care funding gap by 2023/24

Compared with additional spending to meet projected demand pressures, improve access and increase staff pay



Note: All figures used to produce this chart are in real terms at 2019/20 prices.

The Health Foundation © 2019

Source: Health Foundation analysis of *Adult social care activity and finance report*, NHS Digital (2017/18); *Provisional local government finance settlement; Projections of demand expenditure on adult social care 2015 to 2040*, Wittenberg et al, PSSRU (2018, <https://www.pssru.ac.uk/pub/5421.pdf>).

Economic
Productivity

Growth

Cost of Living

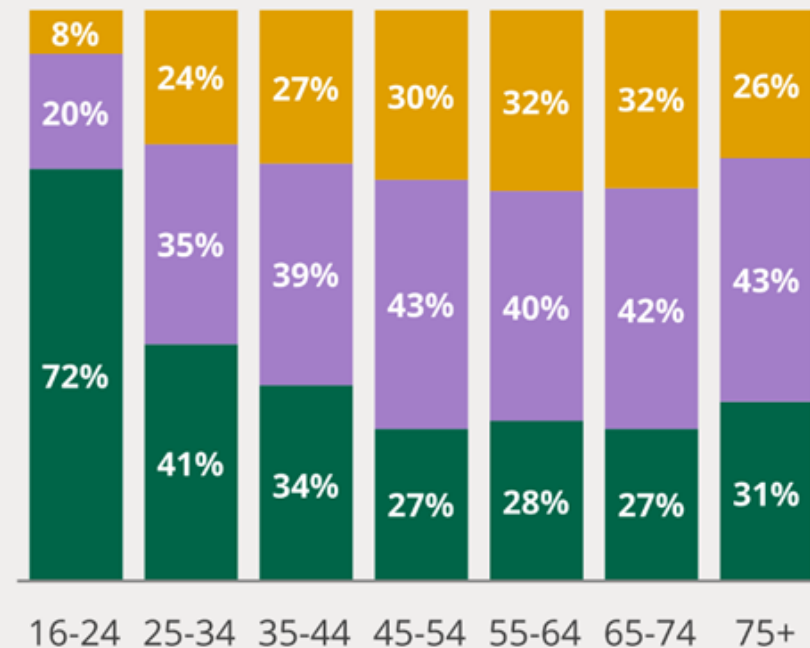
Business

What is the potential for unexpected major threats to the functioning of health and care services?

Almost three quarters of people aged 45-74 in England are overweight or obese

Data: NHS Digital
Chart: House of Commons Library

■ Obese
■ Overweight
■ Neither overweight or obese

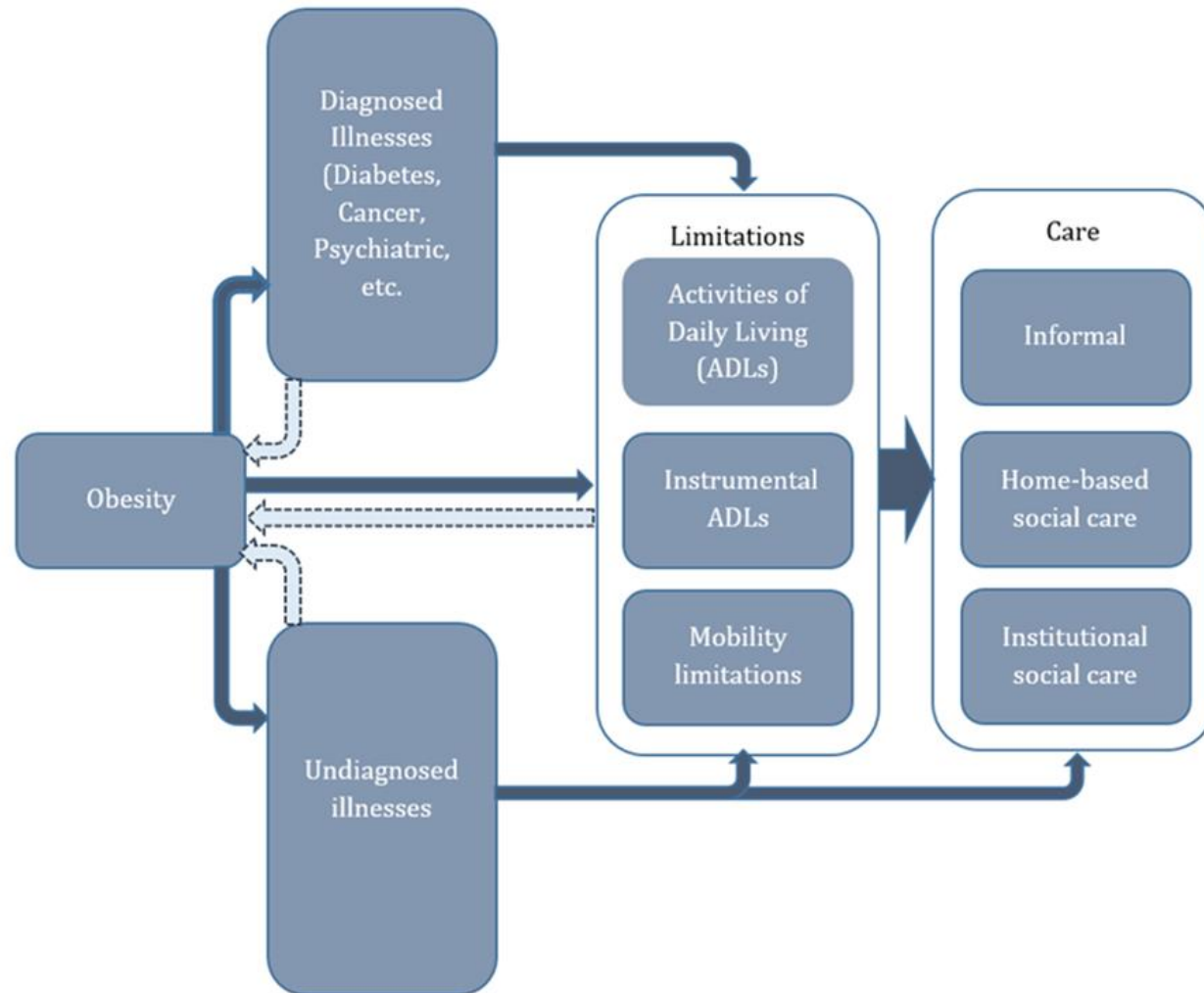


Epidemic

Pandemic

Environmental
Disasters

What is the potential for unexpected major threats to the functioning of health and care services?



Epidemic

Pandemic

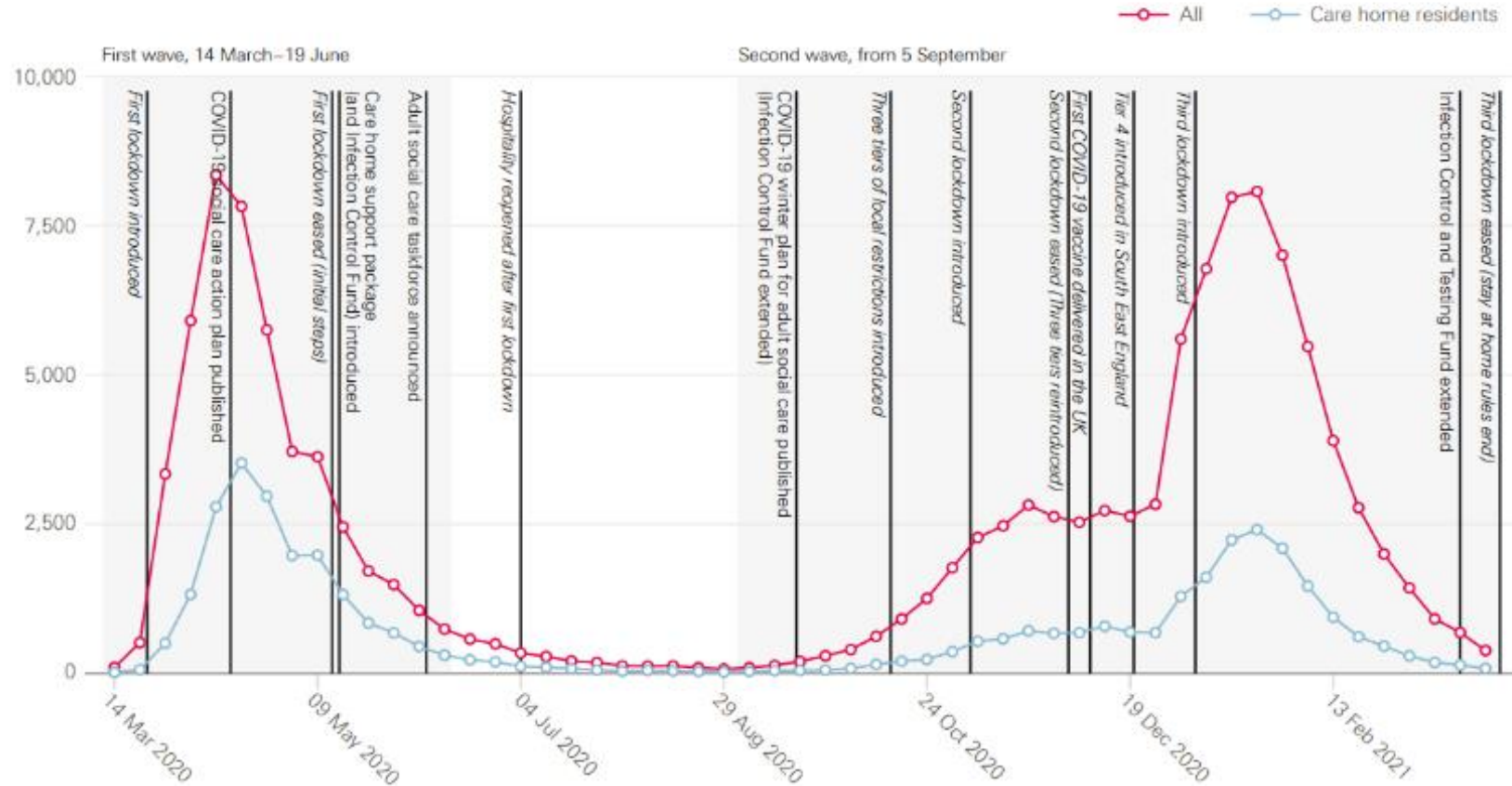
Environmental
Disasters

What is the potential for unexpected major threats to the functioning of health and care services?

6

Briefing: Adult social care and COVID-19 after the first wave

Figure 1: Deaths involving COVID-19 among the general population and care home residents in England, by week reported, with national and social care policy milestones



Note: Non-social care policies are in italics

Source: ONS Deaths involving COVID-19 in the care sector, England and Wales: deaths registered between week ending 20 March 2020 and week ending 2 April 2021; ONS Deaths registered weekly in England and Wales, provisional.

Epidemic

Pandemic

Environmental
Disasters

What is the potential for unexpected major threats to the functioning of health and care services?



Epidemic

Pandemic

Environmental
Disasters



What sort of major external event or crisis, on the disruptive scale of COVID-19 or greater, can you see occurring over the next 10 years? (select all that apply)



What type of major external event or crisis (on the disruptive scale of COVID-19 or greater) can you see occurring over the next 10 years? (select all that apply)

Global economic crisis

66%

Climate change – either environmental disaster and/or the impact of more drastic mitigation measures

56%

Major shift in UK political discourse or political/constitutional systems

50%

Dramatic change in drivers of UK immigration

28%

New pandemic

22%

Regional economic collapse

19%

New or significantly increased epidemic

19%

Join at
slido.com
#1192 185

Uncertainties (supply side)

1. How might the model of health and care provision evolve?
2. What technologies might influence how social care services are provided?
3. What might affect the sustainability of the social care workforce?

How might the model of health and care provision evolve?



Care Market
Dynamics

Social Care
Funding

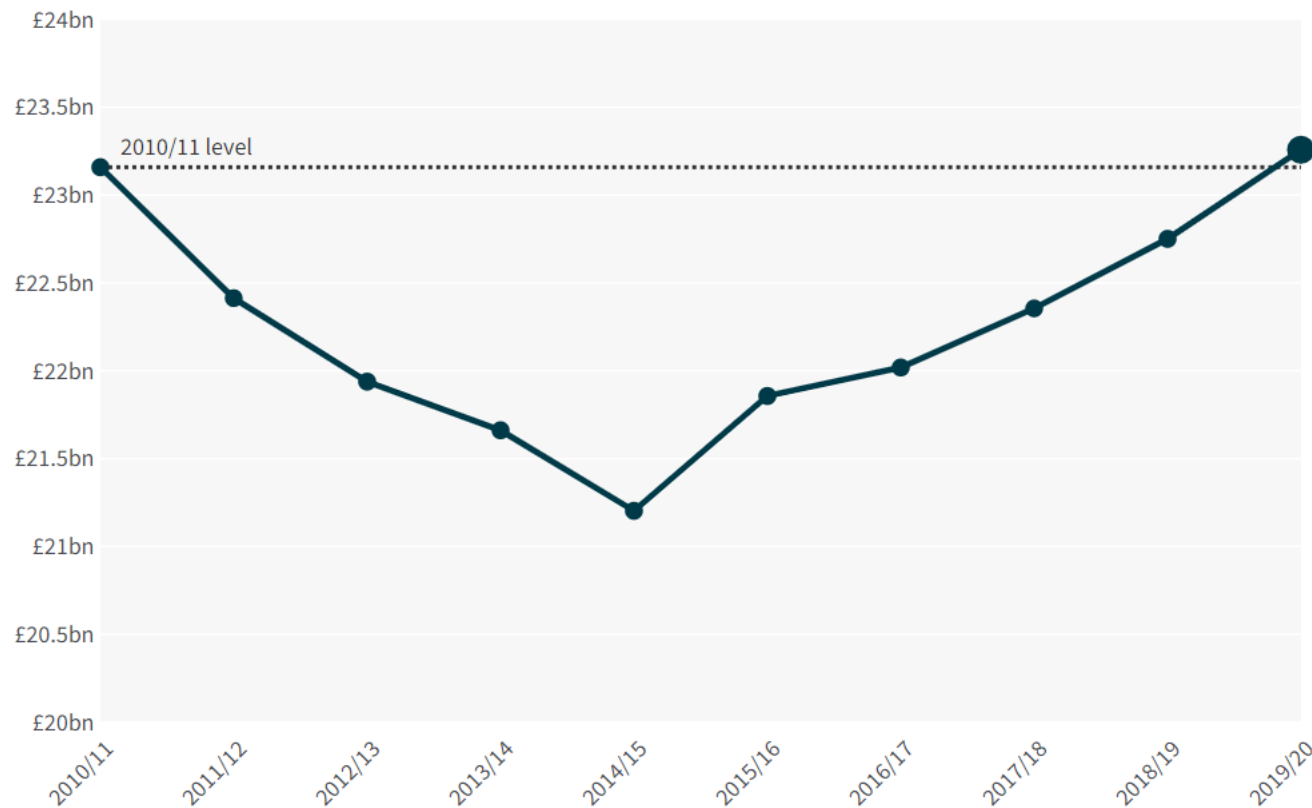
Public
Attitudes

Energy
Security

How might the model of health and care provision evolve?

In 2019/20 total expenditure on adult social care was only £99m more than in 2010/11, despite increasing demand for services

Annual total expenditure adjusted to 2019/20 prices



Care Market
Dynamics

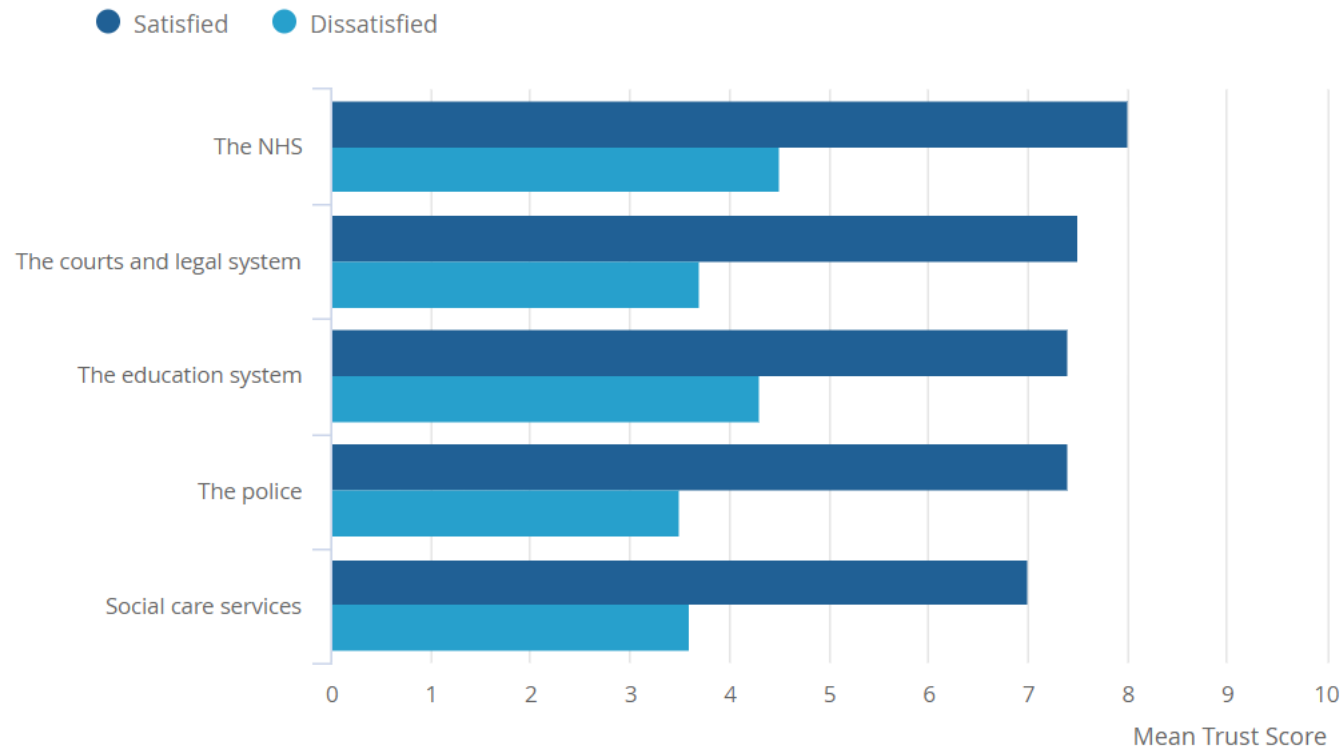
Social Care
Funding

Public
Attitudes

Energy
Security

How might the model of health and care provision evolve?

Trust scores for people satisfied and dissatisfied with public services, UK, March 2022



Care Market
Dynamics

Social Care
Funding

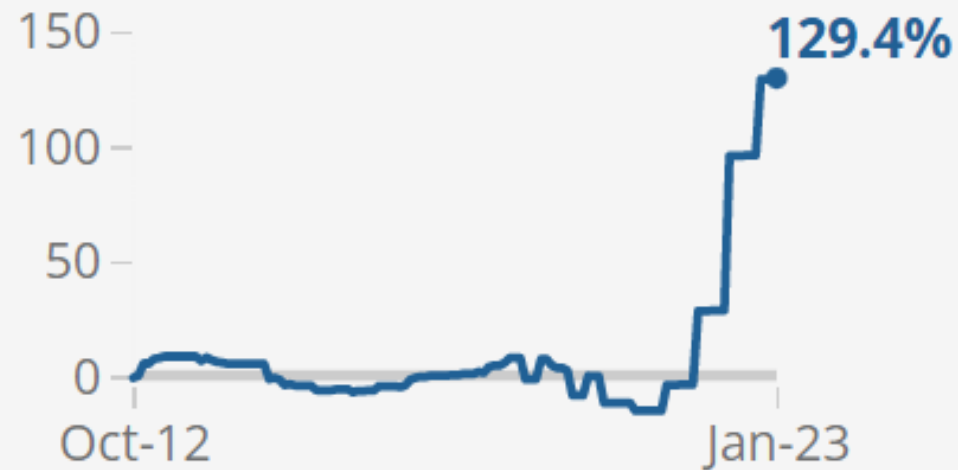
Public
Attitudes

Energy
Security

How might the model of health and care provision evolve?

Gas prices rose 129.4% in the year to January 2023

Gas annual CPIH inflation rates, UK



Office for National Statistics

Care Market
Dynamics

Social Care
Funding

Public
Attitudes

Energy
Security

What technologies might influence how social care services are provided?

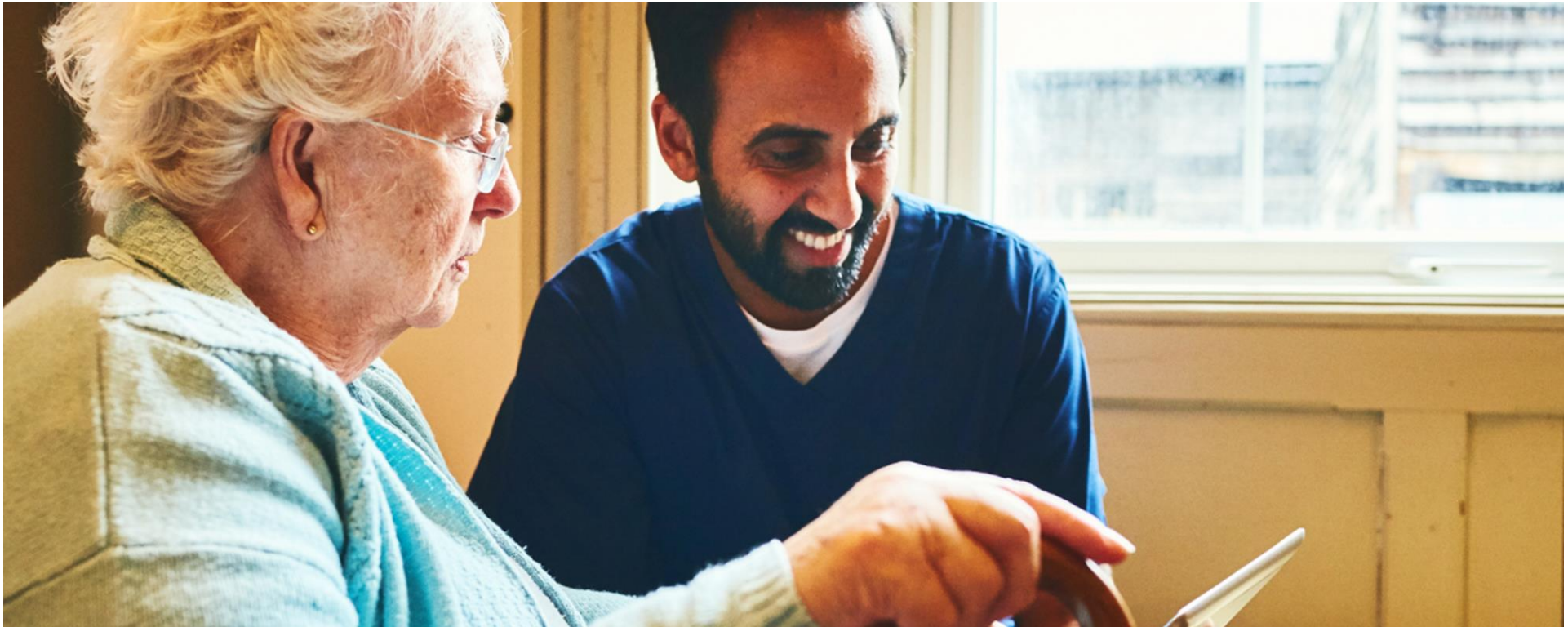


Technological
Advancements

Openness to
Technology

Innovation
Costs

What technologies might influence how social care services are provided?



Technological
Advancements

Openness to
Technology

Innovation
Costs

What technologies might influence how social care services are provided?



Technological
Advancements

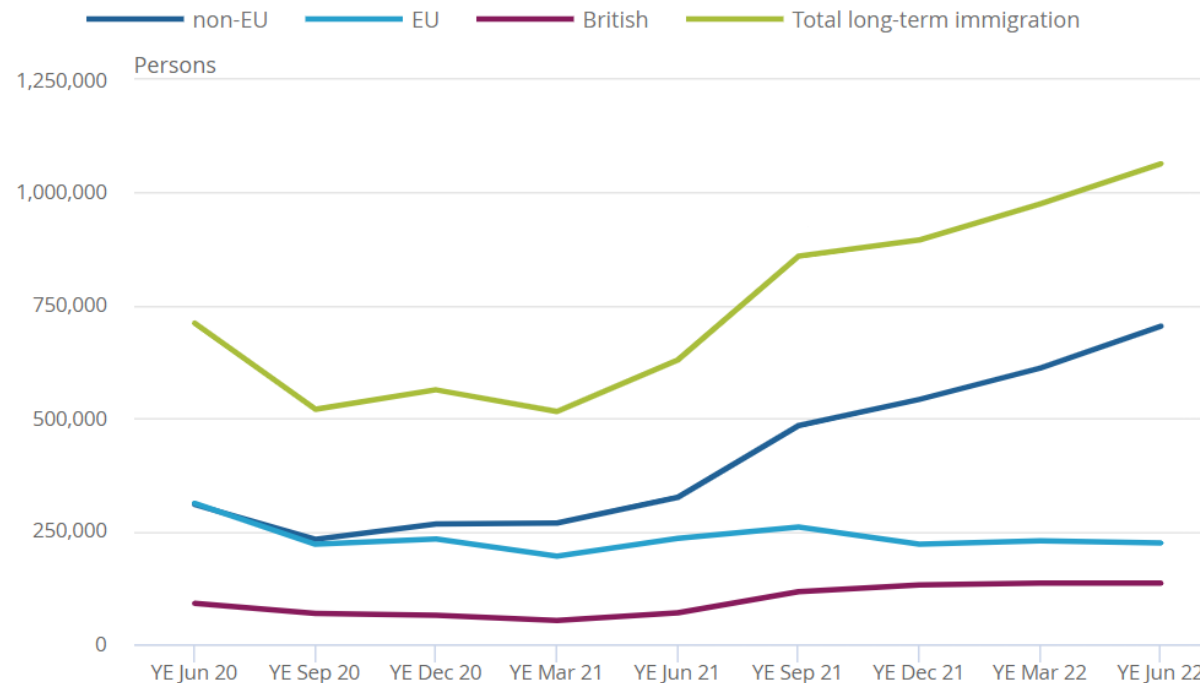
Openness to
Technology

Innovation
Costs

What might affect the sustainability of the social care workforce?

Figure 1: Long-term immigration in the year ending June 2022 was largely driven by non-EU nationals

Number of non-EU, EU and British nationals immigrating into the UK, between the year ending June 2020 and the year ending June 2022



Migration Trends

Hybrid-Working

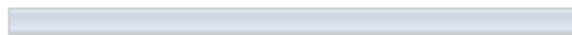
Retirement and Pensions Policy

Pay, Progression and Benefits

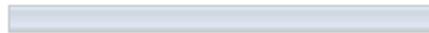
What might affect the sustainability of the social care workforce?

What impact has the shift towards home working post-Covid had on the quality of social work?

Significant improvement (32%, 352 Votes)



Significant deterioration (24%, 268 Votes)



Slight deterioration (18%, 194 Votes)



Slight improvement (15%, 161 Votes)



No change (11%, 122 Votes)

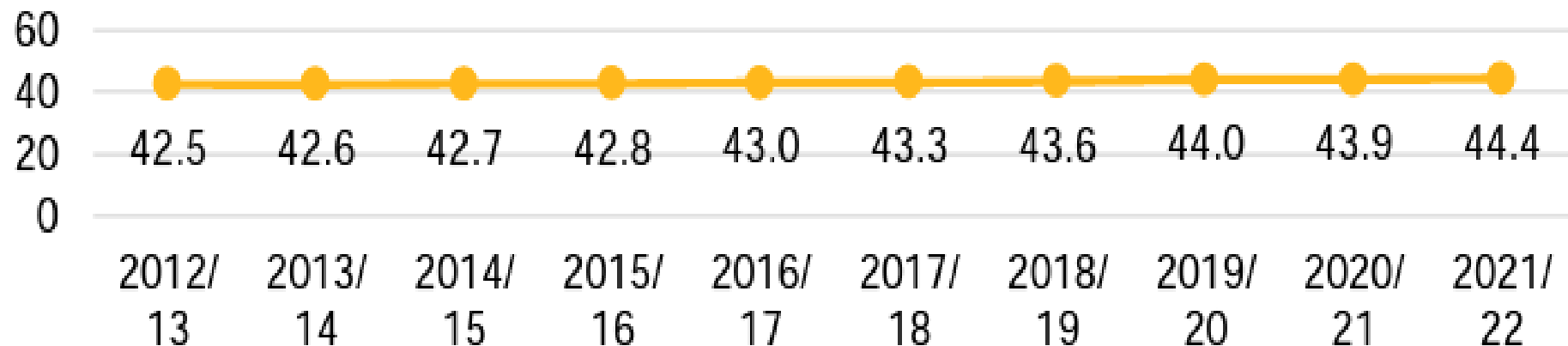


Total Voters: **1,097**

What might affect the sustainability of the social care workforce?

Chart 57. Average age trends of the adult social care workforce between 2012/13 and 2021/22 (independent and local authority sectors only)

Source: Skills for Care estimates



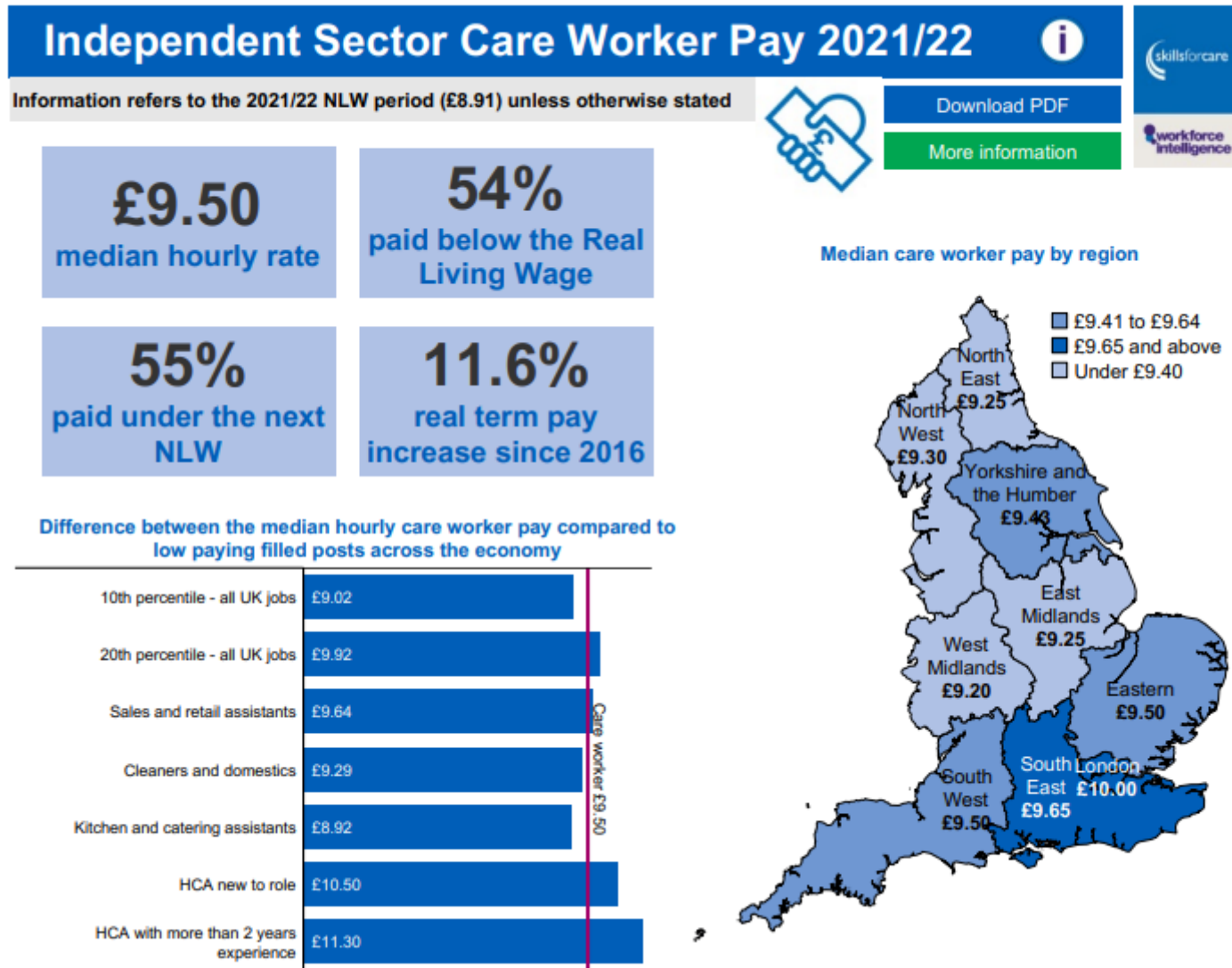
Migration Trends

Hybrid-Working

Retirement and Pensions Policy

Pay, Progression and Benefits

What might affect the sustainability of the social care workforce?



Migration Trends

Hybrid-Working

Retirement and Pensions Policy

Pay, Progression and Benefits

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What is the most radical and plausible change to how the health and care system operates that you can imagine happening between now and 2035?

① Start presenting to display the poll results on this slide.

What is the most radical and plausible change to how the health and care system operates that you can imagine happening between now and 2035?

Social care 9 Care 9 Health 8 Technology 5 Support 4 Nhs 4 Integration 3 Model 3 People 3

- Anonymous**
The NHS will become the NHCS and there will be more centralized care provision
- Anonymous**
Accepting we won't fill the workforce gap is important otherwise we'll focus on trying to do what we've always done - and failing!
- Anonymous**
An increase in congregational, institutional models of care and support for people needing care..driven by economics and perception of need.
- Anonymous**
A conflict between regulation and innovation
- Anonymous**
Increased role/utilisation of private care across both health and care - including more people turning to private health schemes
- Anonymous**
Much more self-care
- Anonymous**
Better integration at all levels with social care leading the way at each place
Long term investment!!!!

Keeping people at the heart of services to ensure services are right!
- Anonymous**
Take over of social care from health, more private health and social care plans
- Anonymous**
Shift away from traditional models of care and support... role of technology
- Sid Vicious**
Establishment of a National Minimum wage for care staff
- Anonymous**
Technology enabled living
- Anonymous**
End of the NHS as a centrally run service in favour of combination of insurance based model with local authority support for the poor (this is a good thing!)
- Anonymous**
Social care to be part of the national health system. A standardized pay rate the same as NHS banding to reduce competition.
- Anonymous**
No increase in workforce despite multiple initiatives targeting recruitment and retention, forcing a change in attitudes to technology.
- Anonymous**
We use AI to assess and support plan and all care is automated and interventions/living spaces are through technology
- Anonymous**
How care is funded
- Anonymous**
More delays, becoming normalised
Greater Integration
- Anonymous**
If a Labour government did get it, it would be interesting to see what changes they would make to the regulation / operation of large providers, particularly those run from outside the country
- Anonymous**
A social care system funded through personal insurance payments
- Anonymous**
Joint health and social care system (including budgets!)

Uncertainties (demand side)

1. What scientific advances might affect population care needs?
2. How might patterns of informal caring evolve?

What scientific advances might affect population care needs?



Medical
Advancements

Scientific
Breakthroughs

Food and
Water Security

What scientific advances might affect population care needs?

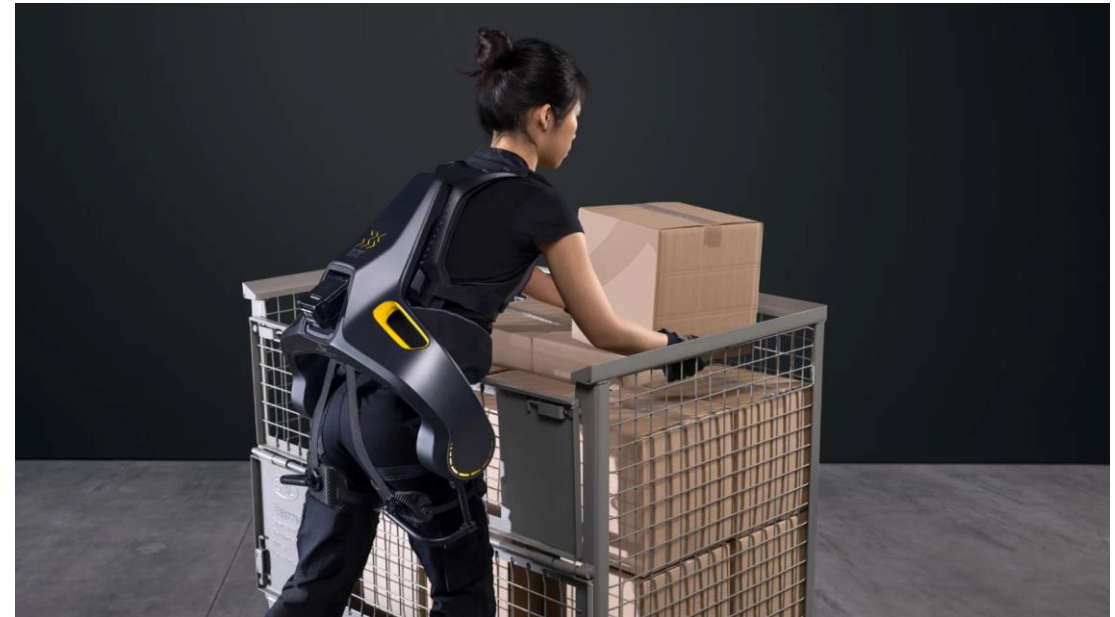


Medical
Advancements

Scientific
Breakthroughs

Food and
Water Security

What scientific advances might affect population care needs?

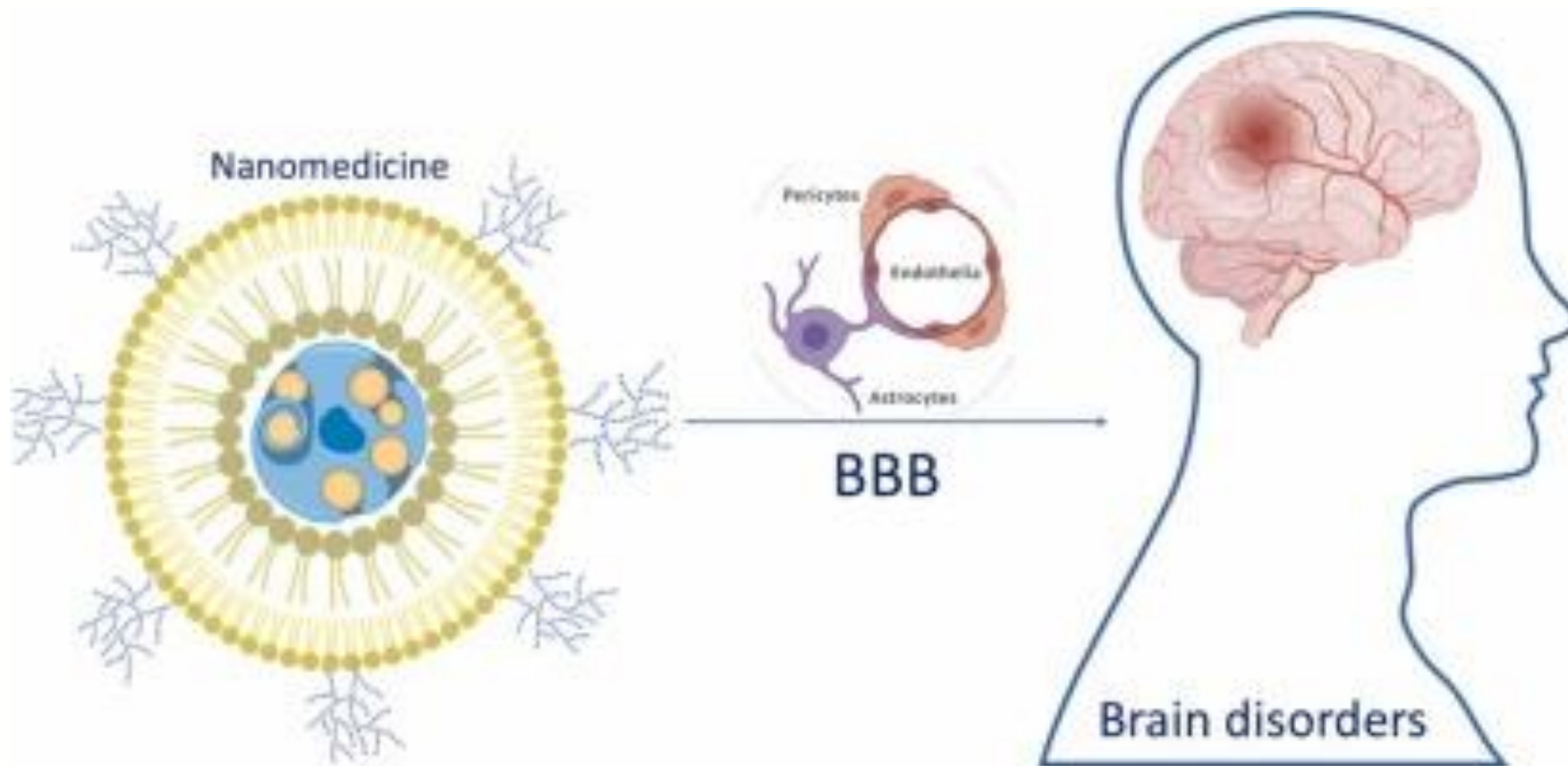


Medical
Advancements

Scientific
Breakthroughs

Food and
Water Security

What scientific advances might affect population care needs?



Medical
Advancements

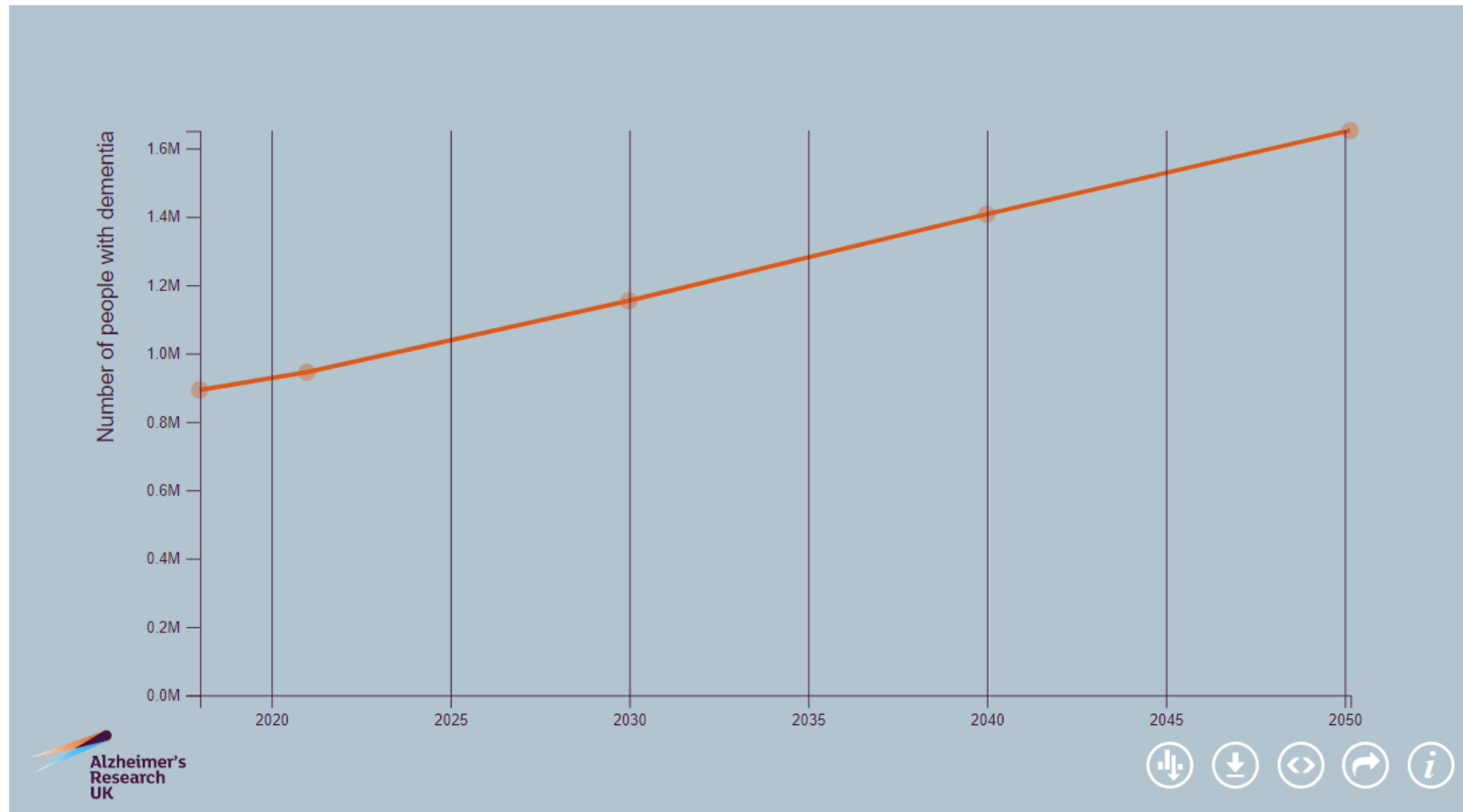
Scientific
Breakthroughs

Food and
Water Security

What scientific advances might affect population care needs?

Projections to 2050

This graph shows the projections of dementia prevalence in the UK up to the year 2050.

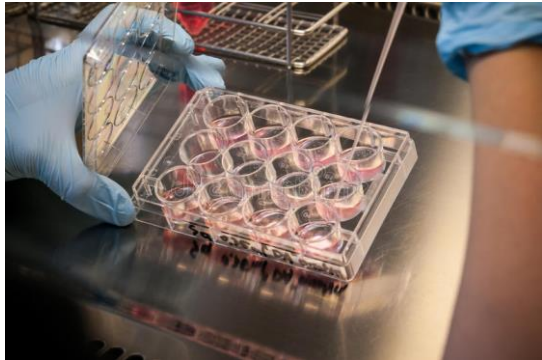


Medical
Advancements

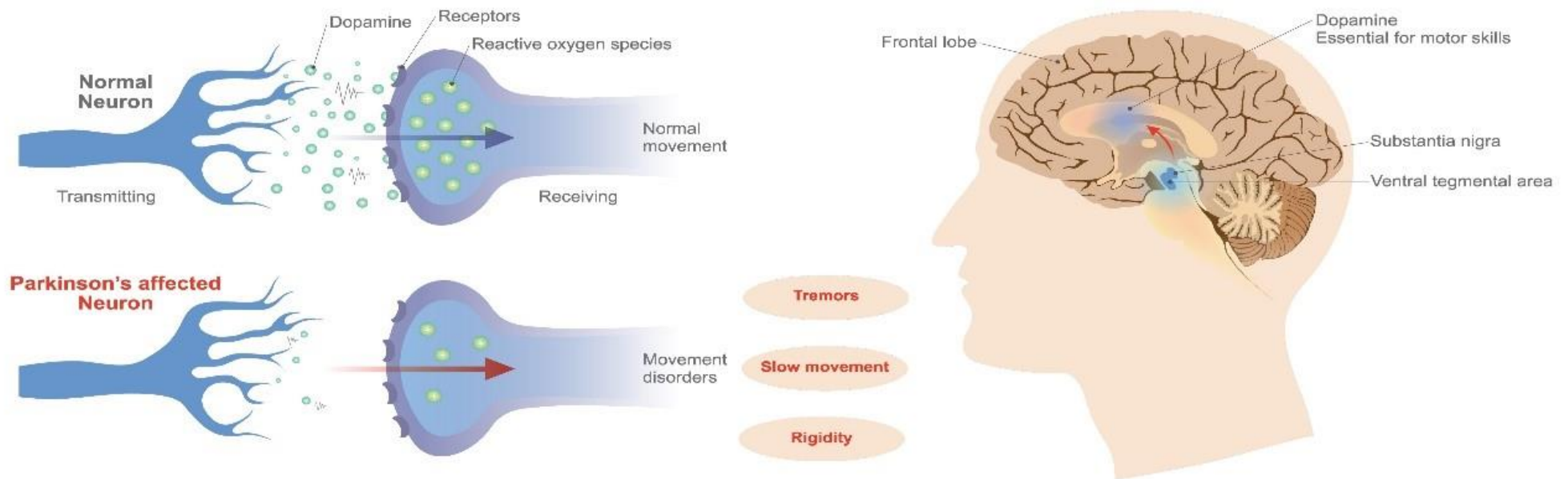
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What scientific advances might affect population care needs?



Parkinson's disease

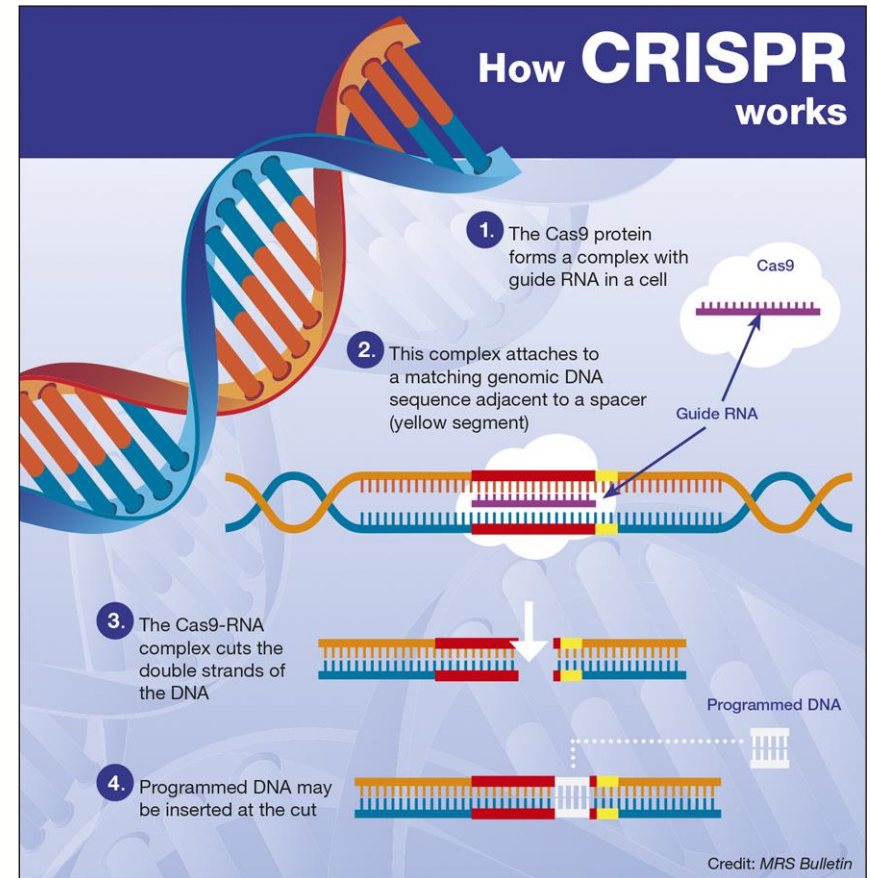
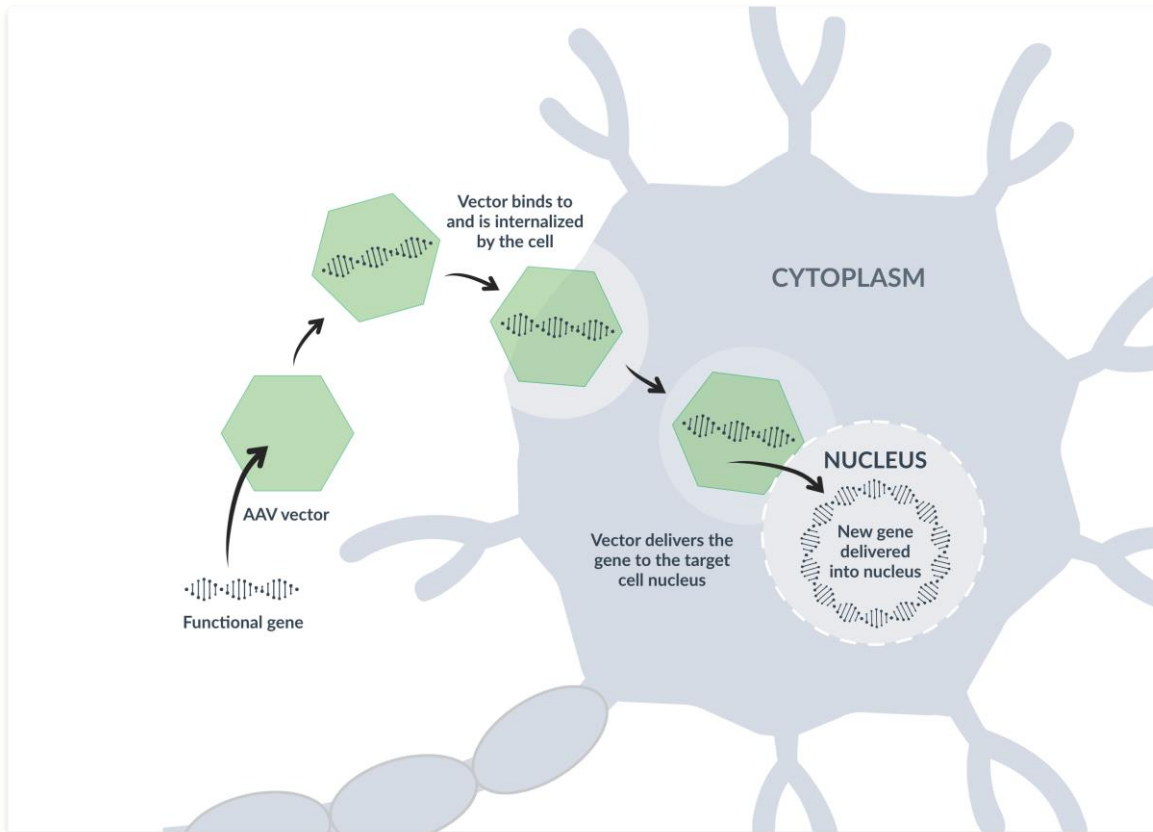


Medical
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What scientific advances might affect population care needs?



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Medical
Advancements

Scientific
Breakthroughs

Food and
Water Security

How might patterns of informal caring evolve?



THE NUMBER OF PEOPLE OVER 65 WITHOUT ADULT CHILDREN IS SET TO RISE FROM **1.2 MILLION** TO **2 MILLION** BY 2030

92% OF ALL UNPAID CARE IN THE UK IS PROVIDED BY FAMILY

Extent of
informal caring

How might patterns of informal caring evolve?



The number of **older carers** in England is set to increase to over **1.8 million** by 2030

More than **200,000** of these carers will be **aged 85** and over

How might patterns of informal caring evolve?



24% of unpaid carers live in poverty

27% of 'sandwich carers' report mental ill-health

Extent of informal caring

How might patterns of informal caring evolve?



Extent of
informal caring

slido

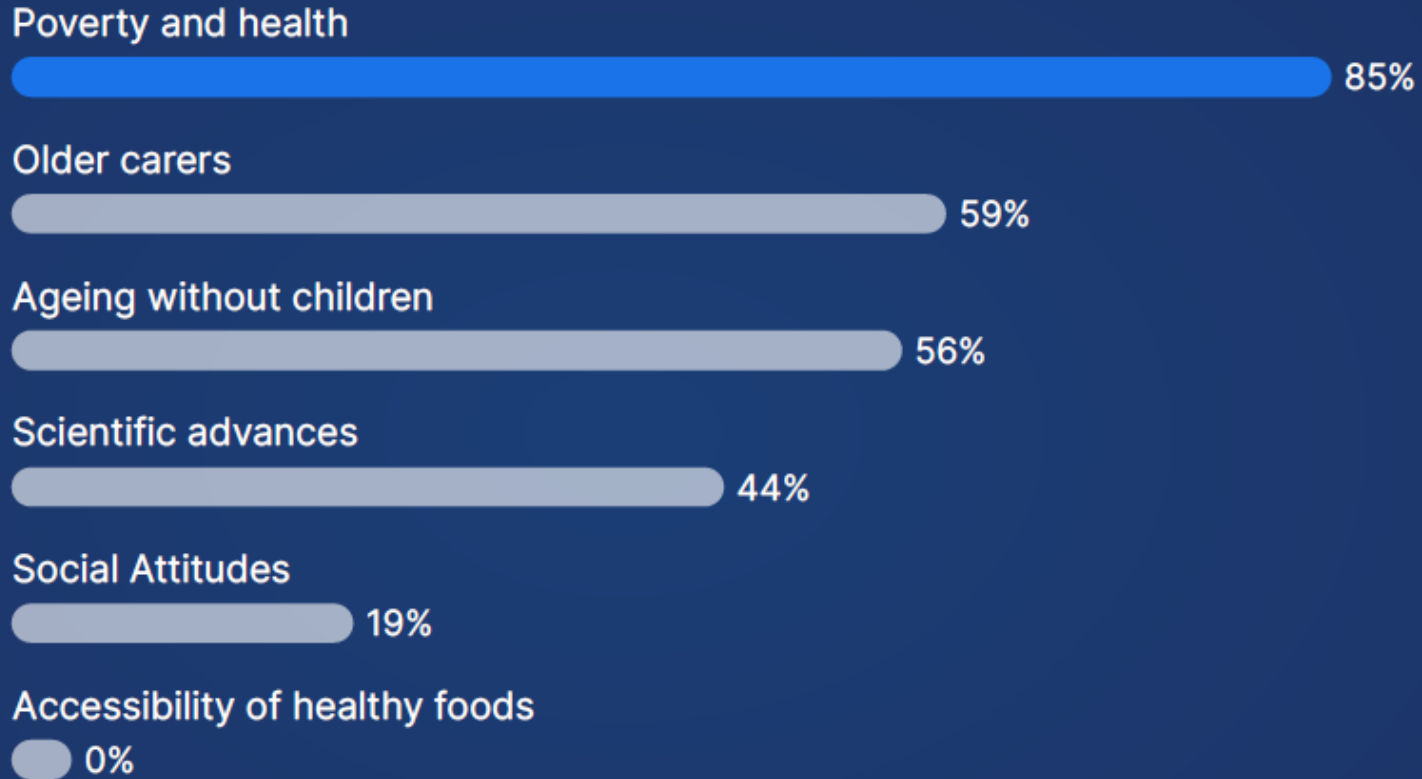


What could be the most significant drivers of demand for adult social care (up or down) over the next 10 years? (select 3)

① Start presenting to display the poll results on this slide.



What could be the most significant drivers of demand for adult social care (up or down) over the next 10 years? (select 3)



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Adult Social Care – past, present & future

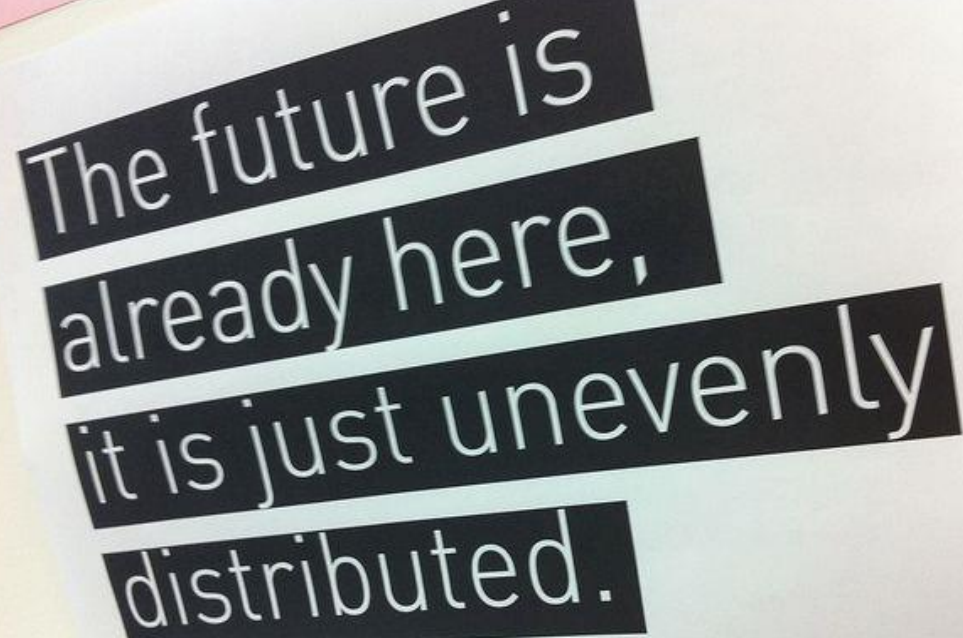
Richard Humphries

ADASS Trustee

A photograph of a car's side-view mirror. The mirror reflects a sunset scene over a road with palm trees. The sky is a mix of blue and orange, and the road leads towards a horizon with a few trees. The text is overlaid on the top left of the image.

Life

can only be understood
backwards
but it must be lived
forwards.....

A quote by William Gibson on a white background. The text is arranged in four black bars, each containing a line of the quote. The quote is: "The future is already here, it is just unevenly distributed." The author's name and a reference to his work are at the bottom right.

The future is
already here,
it is just unevenly
distributed.

William Gibson
author of Neuromancer

"Richard Humphries has been leading the debate on reforming English social care for almost twenty years. There's no one better placed to explain how to end our crisis in care."

Andrew Harrop, Fabian Society

"An indispensable tour de force on the nature and purpose of adult social care, the failure to develop an effective policy response and how to put this right."

Bob Hudson, University of Kent

"Richard Humphries offers a comprehensive assessment of long-term care issues through this English perspective on social care. This thoughtful, eminently practical book proposes powerful ideas that can lead to sustainable solutions in England and beyond."

Susan C. Reinhard, AARP Public Policy Institute

What lies behind England's crisis in adult social care, why has real change been so hard and what can be done?

Ensuring effective, sustainable and affordable care and support for people of all ages is an urgent public policy challenge. This vital book outlines a different vision of social care as an essential part of the country's economic and social infrastructure that enables people to live good lives.

Drawing on the history of social care, international comparisons and lived experience, it sets out a different road to reform that will secure political traction and public support for change.

Richard Humphries has worked in social care for forty-five years in various roles including as a social worker, Director of Social Services and for eleven years as Senior Fellow at The King's Fund. He is a Senior Policy Advisor to the Health Foundation and Visiting Professor at the University of Worcester.

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Ending the Social Care Crisis
Richard Humphries

Ending the Social Care Crisis

A New Road to Reform



RICHARD HUMPHRIES

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Key trends in adult social care – latest evidence summarised:

Long read

Social care 360

Our latest 360 review outlines and analyses 12 key trends in adult social care in England over recent years. Using a variety of publicly-available data, it provides a uniquely rounded – ‘360 degree’ – view of the sector.



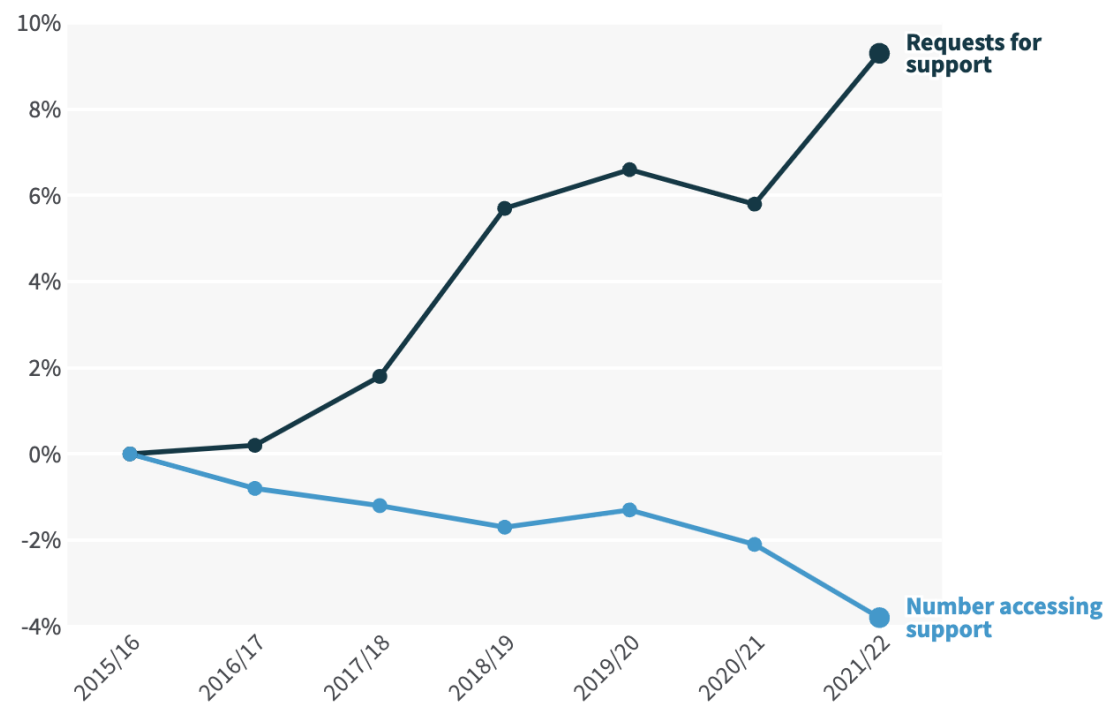
By Simon Bottery et al - 2
March 2023

Long read

<https://www.kingsfund.org.uk/publications/social-care-360>

Compared to 2015/16, more people in England are requesting social care support but fewer people are receiving it

Percentage change compared to 2015/16




Source: [NHS Digital](#)

TheKing'sFund

A Flourish chart

The shadows of 1948



THE NEW
**NATIONAL
HEALTH
SERVICE**

★

Your new National Health Service begins on 5th July. What is it? How do you get it?

It will provide you with all medical, dental, and nursing care. Everyone—rich or poor, man, woman or child—can use it or any part of it. There are no charges, except for a few special items. There are no insurance qualifications. But it is not a “charity”. You are all paying for it, mainly as taxpayers, and it will relieve your money worries in time of illness.



11 & 12 GEO. 6.

*National Assistance
Act, 1948.*

CH. 29.



CHAPTER 29.

An Act to terminate the existing poor law and to provide in lieu thereof for the assistance of persons in need by the National Assistance Board and by local authorities; to make further provision for the welfare of disabled, sick, aged and other persons and for regulating homes for disabled and aged persons and charities for disabled persons; to amend the law relating to non-contributory old age pensions; to make provision as to the burial or cremation of deceased persons; and for purposes connected with the matters aforesaid.

[13th May 1948.]



25 years of policy-making?



1998
White Paper

2000
Green Paper

2005
Green Paper

2006
White Paper

2008
Public consultation "The Big Care Debate"

2009
consultation



2010
White Paper

2010
Policy paper

2011
'engagement exercise'

2012
White Paper

2013
Consultation on funding reform

2021
Policy paper

2021
White Paper

And then there's the politics



TORIES' DEMENTIA TAX BOMBHELL

- ♥ No cap on the cost of care
- ♥ Your home and assets confiscated to pay bills after death
- ♥ Struggling families left to fend for themselves
- ♥ People receiving care at home now forced to pay

"The Tories' social care plan is a death tax by another name"

THE ECONOMIST, 18 MAY 2017

GET LEAN IN TIME FOR SUMMER WITH JOE WICKS
ONE BLANKET'S

The Mail

Pippa perfect (almost royal!) big day

GLORIOUS 12 PAGE SOUVENIR PULLOUT

THE DEMENTIA TAX BACKLASH

• 'Soviet' lord slips by 5% after pledge to make more elderly pay for care

• But they're still 18% ahead (and voters even prefer May to Farage!)



Now you want £20,000 when you die.

Don't vote for Labour's new death tax.

Trumped! The post-truth book boom • Kristen Stewart's directorial debut

the guardian

May's manifesto meltdown: U-turn on 'dementia tax' leaves PM on back foot



NATIONAL NEWSPAPER OF THE YEAR

The Daily Telegraph

Homes aren't an asset to give to your children, says minister

NEWS BRIEFING

May announces ban on energy prices 'rip-off'

Dementia tax row reignited after elderly told they should sell their homes to pay for care

Russian spies backed anti-virus software

My conclusion?.....

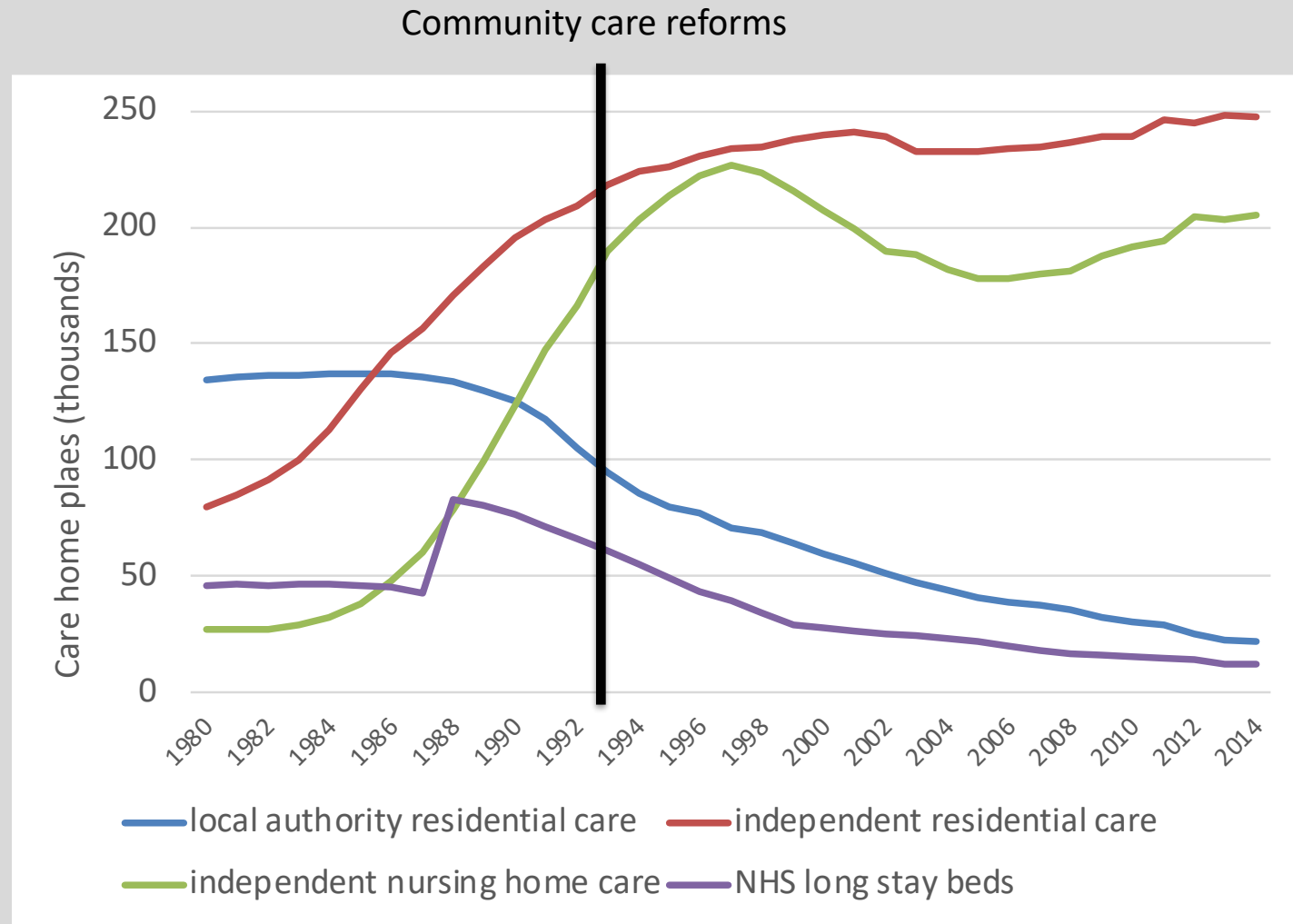
One obvious conclusion from these waves of reform is that we know what does *not* work: reorganisations, additional resources, new policy and legislation, assessing council performance, inspecting services. Each might be necessary, but none is sufficient on its own. Another conclusion is that the unintended consequences of policy decisions, not least on social security and the NHS, along with the winds of social and economic change, have trumped formal government policy-making in shaping what the system has become and how it operates.

**So what *has* shaped the nature of adult social
care today?**

The shifts from NHS to social care:

- Reduction in acute & general hospital beds
- Closure of long stay institutions
- Transfer of geriatric beds to private nursing homes
- Continuing healthcare boundary
- Reductions in district nursing
- Reduced length of stay
- Shift from inpatient to day case procedures
- Under-investment in intermediate care & rehabilitation

The shift from public to private care provision



Other key drivers

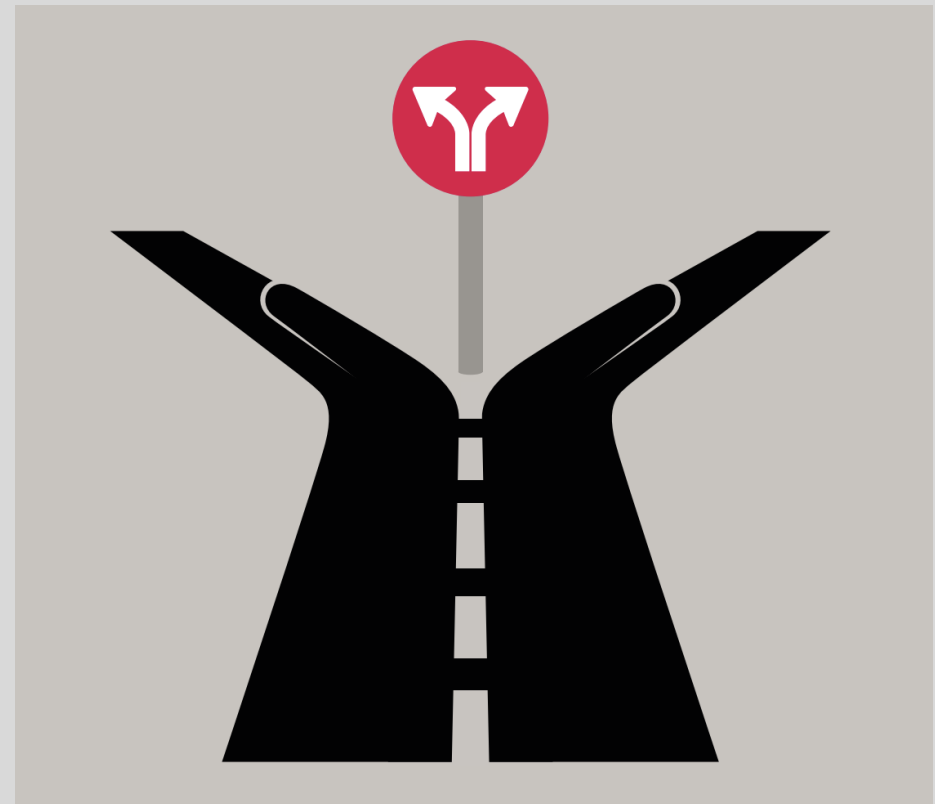
- Population growth
- Longer life expectancy – at all ages
- Changes in burden of disease
 - More working-age people with disabilities/LTCS
 - Higher acuity & complexity of needs
- Overall material prosperity (though massive inequalities)
- Changing family structures & lifestyles
- ✗ Technology?
- ✗ Consumer power of self-funders ?

If social care reform is the answer, what is the question?:

1. What does good care and support look like – what kind of help, how much and of what quality should we reasonably expect? - the question of ***values & entitlements***
2. How should good care and support be provided and by whom? Who should be accountable for how well social care works in meeting people's needs? –the question of ***organisation, governance and delivery.***
3. How much would good care and support cost, now and in the future? How should these costs be shared fairly between individuals, families and the state. How should the state raise the money to pay for publicly funded care? – the question of ***funding.***
4. *Who* provides care and support, both paid and unpaid, and what is the right balance between the responsibilities of families, communities and the state? – the question of ***workforce***

A different road to reform ?

- ✓ A new focus on building public support
- ✓ Using deliberative democracy & co-production (v. top-down policy making)
- ✓ Shifting from short-term fixes to long term planning – ‘cathedral thinking’
- A new social contract for care
- A redesigned delivery model based on self-directed support & enforceable rights
- A new funding settlement



Lessons for the future:

- Unintended consequences of policy decisions
- The NHS is massively influential
- The importance of time as a currency for change
- Influencing emerging policy ideas v reacting to current ones
- Encouraging locally driven & bottom-up developments

“Change comes from small initiatives which work, initiatives which, when imitated, become the fashion. We cannot wait for great visions from people, for they are in short supply at the end of history. It is up to us to light our own small fires in the darkness.”

Charles Handy, The Empty Raincoat

“What you leave behind is not what is engraved on stone monuments but what is woven into the hearts of others.”

Pericles

Thank you

associates@richardhumphries.co.uk

@richardnotatkf

Positive thinking

What does it take to invest in social care?

My background

I advise private investors, companies, state-funded organisations and charities on political and regulatory risk, helping them to think through the likely changes that could occur over a 5-10 year investment period.



Interviews with
senior policymakers
and commissioners

Documentary
research and
analysis

Narrative reports
focused on key risks
and opportunities

Strategic
recommendations
and actions

Investors I've worked with...

Bridgepoint

DUKE
STREET

OMERS

 **Graphite Capital**


AUGUST
equity

terra firma

Companies I've advised on...

 City & County
Healthcare Group

care UK 

lifeways
group



Four Seasons
HEALTH CARE


BARCHESTER
HEALTHCARE

PRIORY

voyagecare 

Three outline scenarios

Tiggerish

Careful, coherent integration

What changes can we control?



We can choose to build bridges

- ❑ Committed and coherent optimism is always expansive and outward-looking
- ❑ Aligned incentives do not have to rely on shared ideals or ideologies (though they help)
- ❑ People are contradictory – able to see social harms while overlooking their own responsibilities
- ❑ Contradictions and hypocrisies are the price we pay for caring



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