

**Response to the Social Care Green Paper from:
Bromsgrove Big Care Debate (14th October 2009)
At Bromsgrove District Council, hosted by Worcestershire County Council**

The debate was attended by over 80 people from a range of backgrounds including older people, services users with a physical disability, older people forum representatives, voluntary sector and health and social care staff, local providers and local and county councillors. Each question proposed by the Department of Health was discussed in groups and facilitators collected all the views to make up the response below.

Question 1 - The vision for the future

The Department of Health has suggested six key things that everyone should expect from a National Care Service: prevention services, national assessment, a joined-up service, information and advice, personalised care and support, fair funding.

1a) Is there anything missing from this list?

There was general agreement with the proposals, although some concern about how it could be made a reality.

There was concern as to whether the under 65s are fully included in the proposals as the Green Paper focuses principally on the issues affecting older people.

There is no discussion of Transport issues which are crucial for maintaining people's independence and wellbeing.

There is not enough consideration of the needs of black and ethnic minority groups who have particular social care needs depending on their culture.

Some felt that there is not enough focus on funding and services to support informal carers who are crucial to the keeping the country going.

b) How should this work?

There needs to be more attention to workforce development and how to improve the image of the care sector to enable further recruitment. Care as a career should be promoted in schools.

There needs to be a higher profile for social care – equal to health service partners.

Local social care and health services need to be provided jointly.

Question 2 - Making the Vision a Reality

The Green Paper proposes more joined-up working, a wider range of care and support services, and better quality and innovation.

2a) Do you agree?

Yes – although some people felt that these items had been promised before and not delivered (for instance single assessment).

2b) What would this look like in practice?

Preventative services were highlighted as being particularly important. However there was concern as to how they would be prioritised and how enough money could be found to fund them in the current financial climate. It was felt by some that there is not enough focus on social activities which are important for wellbeing and health. Not all these can be provided by the State and expectations should not be raised.

There is concern about the growth in of people with dementia and how we will meet their needs. It was felt there must be investment in developing people's knowledge of their own health care issues.

It was felt by some that there needed to be a monitor of how decisions are made and how care assessments are carried out to ensure these are fair.

It was felt that information about your care and support needs should only be shared on a need to know basis. There should be one place to go to get all the information and advice you need.

2c) What are the barriers to making this happen?

There was concern that there will not be enough informal carers in the future and that those that are available will not be properly supported to carry out their role.

There is concern that access to services will continue to vary from area to area. For instance there is currently a big problem if you fall ill in a hospital in one area and need to receive community services from another area.

There is concern that social care services are not and will not be geared up to deal with emergency care needs. It is not clear that additional funding or expertise will come into the system to support this.

Social care needs may be lost under the demands for healthcare. There is no clear definition of what would be covered by a social care service, compared to healthcare. There was little discussion in the Green Paper of the fact that Social Care is charged for and healthcare is not.

Question 3 - Funding options

3a) Which of the three funding options do you prefer? Partnership, Insurance or Comprehensive?

In this debate 39 people participated in the vote on the funding options. 49% voted for the comprehensive model. The other two models were close behind - Partnership (28%), Insurance (23%).

In the discussion some people felt that the comprehensive model would give access to free care and support and put social care on the same footing as the NHS. However people were concerned that there would not be enough money in the system to cover all the needs.

Some people did not think it was right that the Income Tax option had been discounted by the government. There was also concern that accommodation costs would not be covered in any of the schemes as these are expensive when you have health needs.

There were concerns about how the insurance scheme would work, especially if your care needs became more acute and not covered by the policy.

Many people felt there needed to be more information on how each of the options would work in practice and how they would affect their benefits in order to make an informed choice.

3b) Should local government say how much money people get depending on the situation in their area, or should national government decide?

There was a slight preference for a national model (54%), compared to 46% for part national - part local in the voting session. People felt that a national model would give more consistency, although concern was raised about this being unwieldy and expensive. There was also concern that the actual costs of delivering care vary from area to area. Costs in rural areas can be high because of transport issues – how would this be reflected by a national system.