

**Progressive Economics Group (PEG)**  
**Policy Brief #9**

**A National Care Service**

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**Policy issue**

The adequate provision of social care is a major issue facing the UK. A near crisis has been triggered by the failures of privatised provision, aggravated by the austerity inflicted upon the NHS. However, it is not just a question of providing enough care but also about developing new and different forms of care. People's expectations of living longer lives affects how they want care to be delivered. Increasingly people want care delivered at home or locally in the community in a personalised way.

**What policy would provide adequate social care for Britain?**

**Analysis**

Although life expectancy has been increasing, with women expected to live for 82.9 years and men for 79.2 years, these extra years will not necessarily be spent in good health because people develop long-term conditions which affect their mobility and ability to live independently. Men can be expected to live 79.7% of their lives in good health while for women the percentage is 77.1%, experiencing high levels of limiting long term conditions than men. The consequences of the differences between life expectancy and healthy life expectancy are seen in the growing demand for care support services for older people and people with limiting long-term conditions. For people in low income groups, life expectancy and healthy life expectancy are even lower.

Over the coming 20 years the population aged 65-84 will rise by 39 per cent and those over 85 by 106 per cent. With a larger older population, the demand for services to provide care when people are not in good health will increase.

Informal carers provide a large amount of care both unpaid and unsupported. In 2010 there were 5.3 million informal carers in UK. By 2037 this is estimated to grow to 9 million. As the number of older people with some form of ill-health increases, the burden of informal and unpaid care will grow. Carers need support in order to continue do their work. They need professional support for increasingly complex caring activities, most obviously when dealing with dementia. By 2032 over eleven million people are expected to be living on their own, which will be more than 40 per cent of all households.

Recent political debates on care provision have floundered on whether a new form of social insurance should be introduced to pay for care, or whether property-owning households should have to sell their assets to pay for care. Alternatively, the growing budget for the provision of adequate care could come from taxation and/or savings on other expenditures, Trident being an example.

Existing provision: Care services, residential and home care, have been systematically privatised since 1991 with the result that the system is in crisis. Private providers demand more funding in order to satisfy their investors and shareholders. Almost everyone will need care at some time in the same way that everyone requires NHS services. Yet, there is no National Care Service.

## **Policy framework**

Care needs can be met in many ways, residential care being only one of many options. The appropriate system would maximize the extent to which people have control over their lives. This principle implies designing care services that meet our local and individual needs. These services should not be delivered through the profit-seeking business models that private providers use. Care services should be publicly owned, publicly funded and publicly delivered. A National Care Service would be centrally funded but locally delivered and work in partnership with the NHS.

### **1. Delivery**

Local authorities are best placed to deliver care services, using local democratic, participatory structures to involve local people and in-house services to design and deliver community-based services.

### **2. Funding:**

A National Care Service should deliver care free at the point of access and be funded through taxation. Any use of household assets to pay for care services should be organised through changes to inheritance taxes and paid through the taxation system.

### **3. Care workforce:**

Care workers should be well trained, well-paid and supported in their work. In order to train more care workers and to make it a more high status profession, a new system of vocational education would be introduced which will encourage younger people to consider care service as a career. Older people who want to become formal, paid carers would receive re-training. There will be continuous professional development for existing paid care workers.

### **4. Attitudes to care**

Currently society does not sufficiently recognize the importance of care work. In order to build a National Care Service, attitudes towards older people and people with disabilities will need to change and become more positive so that sensitive, appropriate and well-funded care services are seen as central to a progressive society.

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