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Social Care in Crisis

Strictly embargoed:

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Please note this pack and accompanying dataset may be subject to edit

What's the Story

At least 1,300 people died waiting for a care package to start during the last financial year.

That is according to a new study by the Shared Data and BBC Wales looking into the extent of the social care crisis in the UK.

More than a decade after a crucial report found the sector had become a "postcode lottery" of provision, the study finds large disparities still exist.

We found that, while patients can be assessed on the same day as referral in some local authorities, the average wait is over a month in a third of the UK.

The Department for Health and Social Care said it was investing £7.5billion into social care over the next two years.

At one council in Wales, the average person waited more than 100 days just to be assessed as being eligible for support last year - then a further 10 weeks for that support to start.

As part of a wide-ranging study, we also found evidence of a domiciliary care system - where people receive help in their own home - in trouble.

More than 13,000 home-care packages were handed back to councils over the past two years - largely because companies lacked the staffing capacity to fulfil them.

Age UK said this was leaving "substantial numbers of older people" experiencing disrupted care, which it said was "distressing".

The result of delays across the system, it said, was leaving older people dying "before ever receiving the help they need."

But the National Care Association (NCA) and the Local Government Association (LGA) said the system was struggling through years of under-investment.

What this pack contains

This pack and accompanying <u>dataset</u> is the first of two looking into the care system over the coming months.

The accompanying data shows the delays and contract hand-backs experienced by people referred to care services across the UK over the past two years - broken down by upper-tier council.

This includes

- The median wait times experienced by care patients both to be assessed and for their care packages to start.
- The longest individual waits experienced by people to be assessed and for their care packages to start.
- The number of people who have died waiting for care packages to start.
- The number of home care contracts in your area that have been handed back to the council because they could no longer be provided.
- The number of weekly hours of care contained in those home care contracts.

The pack also includes

 Expert comment from the Local Government Association, the National Care Association and Age UK and a detailed analysis of our findings. A full background, details on how to use the pack and a methodology are also below.

How to use this pack

The data was gathered through hundreds of Freedom of Information (FOI) requests meaning that full data is not available for all areas. However, the spreadsheet contains an at-a-glance guide on the first page showing whether there is data available.

The spreadsheet provided contains three tabs: (at the bottom of the page)

They are:

- Is there data for my area?
- Wait times
- Contracts handed back

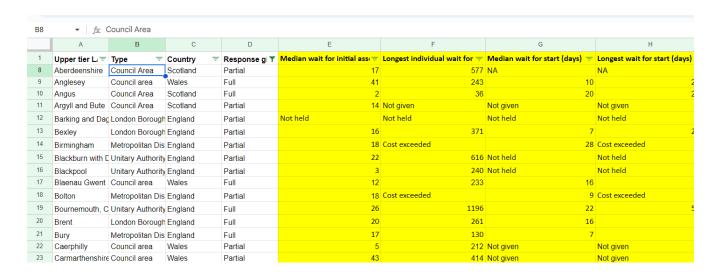
The "Is there data for my area" tab is an at-a-glance guide showing, for each district authority area in the UK (council areas in Scotland, Wales and health boards in Northern Ireland) whether there is data available for either the "Wait times" or "Contracts handed back".



Here we can see - Darlington for example, does not have data for the amount of contracts handed back - but does have data concerning the wait times experienced by those referred to adult social services.

The "Wait times" tab is simple to use. Just find your local authority (you can use Ctrl F to do this) and read along the row to find the figures for your area. The area shaded yellow relates to data from 21-22 and the orange area relates to 22-23.

For example see Anglesey below: in the 21-22 year there was a median waiting time of 41 days for an initial assessment - though the longest a person had to wait was 243 days. The median time a person waited for a care package to start once they had been assessed was 10 days and the longest time 255 days.



The "Contracts handed back" tab is also simple to use.

Again find your local authority by scrolling down or using Ctrl-F. The 21-22 year is also in yellow and the 22-23 year in light orange. Using Angus as an example: we can see that in 21-22, 15 home care contracts were handed back to the authority. These totalled 83 hours worth of care a week.

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1	Upper tier L₁ =	Type =	Country =	Type of resp ▼	Contracts handed ba =	Hours/week handed ba =
4	Anglesey	Council Area	Wales	Full	0	0
5	Angus	Council Area	Scotland	Full	15	83
9	Barnsley	Metropolitan Dis	England	Full	54	884.5
11	Bedford	Unitary Authority	England	Full	1	15
12	Belfast Health ar	NHS Trust	Northern Ireland	Full	0	0
14	Birmingham	Metropolitan Dis	England	Partial	3	NA
16	Blackpool	Unitary Authority	England	Full	0	0
17	Blaenau Gwent	Council Area	Wales	Full	1	66
18	Bolton	Metropolitan Dis	England	Full	0	0
20	Bracknell Forest	Unitary Authority	England	Full	40	767.25
21	Bradford	Metropolitan Dis	England	Full	80	1154.25
22	Brent	London Borough	England	Full	0	0
25	Bristol, City of	Unitary Authority	England	Full	74	777.25
29	Caerphilly	Council Area	Wales	Full	75	682
32	Cambridgeshire	County	England	Full	108	1657.8
33	Camden	London Borough	England	Partial	0	0
34	Cardiff	Council Area	Wales	Full	260	4240
35	Central Bedfords	Unitary Authority	England	Full	5	53
36	Ceredigion	Council Area	Wales	Full	41	527
37	Cheshire East	Unitary Authority	England	Full	1	181.25
20	Chashira Mast a	I Initano Austranit	Faaland	FII	4.4	NIA

Background

Councils are responsible for providing social care in England, Scotland and Wales, while health and social care boards look after care in Northern Ireland.

It is now 12 years since the Dilnot commission put forward proposals to end the "postcode lottery" of care provision in the UK.

Since then, there have been various reforms to the system in England including the 2014 Care Act and the 2022 Health and Care Act, the latter of which will give the Care Quality Commision (CQC) formal powers to audit council care services in England, starting in September this year.

But campaign groups say the issue of understaffing across the system has never been properly addressed.

Last year, the House of Commons Health and Social Care Committee found the sector was facing the biggest workforce "crisis" in its history - and would need to find <u>some</u> 490,000 more employees by the early part of the 2030s.

What are care assessments?

In order to receive funding for a care package in the UK, individuals need to be assessed for eligibility by their council (or health and social care board in Northern Ireland). Once they have been deemed as eligible, a placement - whether that be a bed in a residential care home, or care in their own home, can be found for them depending on their needs. The council will pay for all, part or none of that care depending on a means assessment of that individual. This guide by Age UK explains the process.

People can refer themselves or others for a needs assessment. Clinicians can also make referrals.

<u>This guide</u> by the King's Fund is also a good starting point for explaining who is eligible for care and how the care funding system works.

Our study looks at how long people wait for an initial care assessment once they have been referred to their local council and shows how those wait times differ depending on where people live in the UK. We have also looked at how long people then wait for a care package to start after assessment.

What are domiciliary care contracts?

Domiciliary care is a range of services put in place to support someone in their own home.

Domiciliary carers, also known as home carers or private carers, are professionals who help people live independently in their own homes, sometimes by helping with household tasks, medication, and other activities.

Councils employ home carers directly but do not have enough in-house staff to meet the demand for care in their area. Instead they also tender individual home care 'contracts' which private companies or sole traders can bid for. The contracts detail the type of care required, the hours required to deliver it and the hourly rate. A company might successfully bid for a care contract to look after an elderly individual. The contract could involve getting the individual out of bed and preparing lunch and might be worth £18 an hour for 15 hours a week.

But for a number of years, companies have argued councils offer too little for those contracts, particularly when it becomes apparent the needs of an individual are far greater than the amount tendered. In some circumstances, a private provider will hand the contract back to the council for re-tendering if it can no longer fulfil the obligations of the contract. In 2021 the Homecare Association found the average value of a homecare contract was £18.45 an hour at councils in the UK, even though the minimum viable cost for a provider was £21.43.

What is the government doing?

In 2021, the government set out a 10-year policy paper aimed at reforming care in England - pledging £1.7 billion of improvement plans up until 2025.

But in <u>April 2023 the plans were scaled back</u> with £600m held back until after the next scheduled general election in 2025 and a fund to invest in staff training and development halved from £500m to £250m.

The Associated Directors of Adult Social Services (ADASS) said the amended plans would "make it harder to turn around the social care staffing crisis, where vacancies are at a record high, pay and conditions poor and morale very low."

What did we do?

We sent Freedom of Information requests to every local authority in the UK asking two sets of questions. In Northern Ireland, health and social care trusts handle care.

The first set asked authorities how many individual domiciliary care contracts had been handed back to the authority in 2021-22 and in 2022-23. We also asked for the reasons behind those hand-backs, though these were not handed over in a form that could be easily shared.

The second set of questions asked councils to provide the median wait times for an initial care assessment and for a care package to start. We also asked them to provide the longest individual waits they had on record for both and whether any individuals had died waiting for a package to start.

What did we find?

Home care contracts

We asked 206 upper-tier councils in the UK and the five health and social care trusts in Northern Ireland whether any care contracts the authority had awarded for individual domiciliary care had been handed back to them because the private provider could no longer fulfil the obligations of its contract.

A total of 122 responded with at least partial data between the 2021-22 and 2022-23 financial years.

In our data, each 'contract' refers to the care provided to an individual at their home. So one contract = one person.

- In 21-22, 68% of the councils had handed back at least one contract that year.
- In total there were 7,077 occasions where a person saw their care contract handed back to the council, equating to 79,934 hours of care per week.
- In that year alone Essex County Council had to find new providers for 705 individual contracts worth 9,126 hours a week, while Cornwall Council lost 5,134 hours of care a week after 386 contracts were handed back. Kent was handed back the most contracts (740) but did not provide an hourly figure.
- In 2021-22, of those councils who provided the number of contracts handed back, 68 also provided their reasons for doing so. Of those: 52 (76%) cited staffing as the issue, or one of the issues for contracts being handed back

In the 22-23 financial year, 118 councils provided us with figures relating to contract hand-backs.

- In 22-23, 72% of councils had handed back at least one contract
- There were a total of 5,936 occasions where people saw their care contracts handed back, equating to 73,327 hours of care per week.
- In that year alone Essex County Council had to find new providers for 496 individual contracts worth 6,357 hours a week, while Cornwall Council lost 4,110 hours of care a week after 309 contracts were handed back. Kent was again handed back the most contracts (778) but did not provide an hourly figure.
- in 2022-23, of those councils who provided the number of contracts handed back, 80 also provided their reasons for doing so. Of those: 59 (75%) cited staffing as the issue, or one of the issues for contracts being handed back.

Waiting times

We also asked those same councils (and health boards in Northern Ireland) how long people waited on average for an initial care assessment over the past two financial years and how long they waited for a care package to start following the assessment.

Only 83 out of the 211 authorities (39%) collected the data in a way that could be retrieved under the Freedom of Information Act. Most (59%) of replying authorities did not answer the questions fully but provided at least partial responses.

We found that at least 1,399 people died waiting for their local authority to arrange a package of care for them in 22-23 alone.

Our study also found people faced a wide range of assessment times depending on where they lived in the country.

- In 21/22 the median wait time for an assessment ranged between 0 days at Northern Health and Social Care Trust in Northern Ireland and Dundee City - to 68 days at Midlothian and 221 days - more than seven months - in the Vale of Glamorgan.
- In 22/23 that ranged from 0 days at four authorities to 84 days in the London Borough of Southwark and 102 days at Vale of Glamorgan.

Councils also returned the longest times an individual had waited for an initial assessment.

- In 21/22 a person had been waiting for 1,419 days at Oldham Council
- In 22/23 Bournemouth Christchurch and Poole also had an individual who had also waited for exactly 1,419 days - although some local authorities said extreme waits could be explained by the fact children in care can often be referred to adult social services years in advance of their 18th birthday, even though they cannot be formally assessed until they turn 18.

Finally we asked councils how long individuals waited for a care package to start once an assessment had taken place.

- The longest median wait times in 21/22 were at Vale of Glamorgan (190 days) and in North Somerset (45 days)
- In 22/23 the longest wait times were 79 days at Vale of Glamorgan and 51 days in Inverclyde.

What do the experts say?

Caroline Abrahams

Charity director at Age UK.

Statement:

"It's valuable to see all this data pulled together and it tells a pretty consistent story: that of a care system struggling to meet growing levels of need overall, but one which is doing better in some parts of the country compared to others. The extent of the postcode lottery the data reveals is unacceptably large, because it means your chances of getting a timely care assessment, for example, vary enormously according to where you live, and that's just not fair on all those losing out, some of whom are sadly dying before ever receiving the help they need.

"Some of the most significant information presented here relates to the frighteningly big number of contracts being handed back by care providers to the councils which commissioned them, generally because they just can't get enough staff to care for older people in their own homes. This equates to substantial numbers of older people experiencing very disrupted care arrangements, which is distressing for them as they have to get to know new care workers. It is also a recipe for poor quality care, since continuity is crucial in sustaining the good, trusting relationships which are at the heart of any good service. We fear these returned contracts are translating into some older people experiencing times when the care on offer to them is insufficient or even missing entirely. This is a risk to their health as well as their wellbeing, because when care staff know their clients well they can spot if they are off colour and help them to seek medical attention, nipping small health problems in the bud. Another likely consequence is that if it is impossible for an older person to source home care, they may have no choice but to go into a care home. The choice of living at home is one that many older people hold dear, and it is a tragedy for them if they are deprived of it and forced to take up more expensive residential care instead, when they are really fit enough to go on living independently, provided they have additional support.

"None of these findings are surprising to us at Age UK and they echo what we hear from older people all the time. Too many are finding it impossible to secure the good, reliable social care they need and the root causes are insufficient money and staff in the care system. These are problems only Government can solve and until they take decisive action to reform and invest in social care it's hard

to see these figures improving. Indeed, in the face of an ageing population they are likely to get worse."

Councillor David Fothergill

Chairman of the Local Government Association's Community Wellbeing Board.

Statement:

"These figures show in the most concerning terms the human impact of the level of pressures facing our adult social care system. At its best, care and support helps people to live the lives they want to lead. But over a decade of underfunding has unquestionably weakened social care's capacity to be the best it can be.

"Councils have their hands tied with many aspects of meeting people's needs with not enough funding or support from Government to meet the needs of their communities.

"The social care backlog is compounded by a record NHS backlog, and increasing referrals of people with mental health issues, and safeguarding needs from domestic abuse and rough sleeping. The overall picture is one of rising demand and sustained pressure on vital social care services."

"While fewer people are now waiting for an assessment of their needs, for their care and support or direct payment to begin, or for a review of their care plan, that number remains worryingly and stubbornly high at more than 430,000."

"These figures show the impact of a chronically underfunded system and the pressures councils continue to face. We urge the Government to implement a fully costed, long-term, sustainable plan to fund social care."

Nadra Ahmed CBE

Executive co-chair of the National Carers' Association, which represents small and medium-sized care providers in England.

Q&A

Q: Our figures show that at least 12,000 contracts were handed back to providers over the last two financial years with staffing issues as the main cited reason - does that surprise you?

A: "I don't think I'm that surprised. We certainly saw in that Covid period, contracts handed back because people couldn't get the staff - it was probably the hardest workforce period we've had.

"The contract prices being offered were such that companies just couldn't afford to keep running them - you were also having to pay for the time people had off because of Covid. It was a bit chaotic in many workforces.

"What we can see since then is based on the funding providers are still being offered by local authorities. The Homecare Association did a <u>study</u> two years ago that showed in order to make a viable operation you need to be charging an average of around £21 an hour - but authorities were only offering £15 an hour in some cases. For us to retain staff is really challenging. People are just taking jobs elsewhere.

"With the cost of living crisis people are looking for more hours and more pay and that becomes more challenging when local authorities squeeze the contract price.

"We need to decide as a society what is the right cost of care? Social care is not a cream tea society - where people just go round a person's house, have a cup of tea and lend some support - it's end of life care, it's people with Parkinson's, people with complex needs."

But some would say that a company should not bid for a council care contract if it doesn't have the capacity to provide it - what would you say to that?

"If you are a care provider that is where the majority of the work is - and often what you expect to deliver for that price is not what comes your way. It is a last resort to hand a contract back.

"As a person deteriorates, their needs get greater and the more time you need to spend with them. So for example you might have a contract which is £18 an hour and that involves preparing a person something to eat, getting them changed and washed and leaving them something for lunch - and that all needs to be done within an hour. But you might find that during that hour, a person has soiled themselves and you need to deal with that. That adds another hour and you are now only being paid for half of your time.

"So often what you are told is not the condition of the patient - and you realise that £18 is not going to cover it.

"The main worry I have is about consistent miscommunication. I don't think that's deliberate, but often the people giving out the contract just don't have enough information about the patient, particularly if they are coming out of hospital.

"One provider told me 'I don't know what happens in the ambulance - because the hospital told me they could walk, but by the time they got home they were bed-ridden'.

"What we really need is for there to be a better flow of information between hospital discharge teams, the council and the care provider."

Rights of response

A Department of Health and Social Care spokesperson said:

"Overall, waiting lists for care have reduced and there are more people working in social care. But there is more to do, which is why we're providing up to an additional £7.5 billion for social care over the next two years – including £1.4 billion to help reduce adult social care waiting times, increase workforce capacity and retention as well as increase fee rates paid to adult social care providers.

"The workforce is at the centre of our 'Next Steps to Put People at the Heart of Care' plan and we're investing up to £250 million for the development the skills of the workforce. This is on top of our Made with Care domestic recruitment campaign and a £15 million boost for recruitment of overseas care workers."

BACKGROUND:

- The £1.4bn Market Sustainability and Improvement Fund (MSIF) gives local authorities
 flexibility to drive improvements across a range of target areas, to best address local sustainability
 and improvement needs. These are reducing adult social care waiting times, increasing adult
 social care workforce capacity and retention, increasing fee rates paid to adult social care
 providers.
- We've committed up to £7.5 billion for social care over the next two years to put the system on a stronger financial footing and help local authorities address waiting lists, low fee rates and workforce pressures.
- The People at the Heart of Care White Paper was published in 2021 and followed by publication of the Next Steps to Put People at the Heart of Care plan in April 2023 backed by up to £700 million.
- The Next Steps plan also confirmed that we will soon set how we will use up to £600 million on measures that will have the most impact.
- As part of this plan we have allocated £250 million for the social care workforce to develop their skills and careers and fund new training schemes.

- We have made good progress on reform by increasing sector digitisation, introducing new CQC assessments of local authorities' delivery of their adult social care duties, and enhancing the collection and use of data investing over £100m last year.
- International recruitment has a valuable role in helping grow the adult social care workforce and we are investing £15 million to help local areas establish support arrangements for international recruitment and bolster workforce in adult social care. In February 2022, we made care workers eligible for the Health and Care Visa and added them to the Shortage Occupation list. This means overseas candidate can now apply to work in the UK under the health and care visa. There have been over 57,600 entry clearance visas granted for care workers and senior care workers in the year ending March 2023.
- The latest adult social care recruitment campaign launched in November 2022, running until March 2023, the campaign highlighted the amazing work staff across the adult social care sector do, motivating suitable candidates to apply.
- As part of the reforms we are funding sector partners, such as Skills for Care, to provide support to employers and commissioners to improve recruitment and retention, including through L&D and employer toolkits and we are working with DWP to promote adult social care careers to jobseekers.

A Scottish government spokesperson said:

"We are committed to working with all partners to improve social care services and ensure a career in social care is attractive and rewarding. However, the sector faces many staffing challenges that are exacerbated by Brexit, funding challenges and cost-of-living crisis.

"We are continuing to work towards our commitment to increase spend in social care by 25% by the end of this Parliament, an increase of over £840 million. This is underpinned by our commitment to a National Care Service that ensures consistent, high quality social care support and community healthcare that meets peoples' needs across the country.

"We will continue to engage with local government, trade unions, health and social care workforce and people with lived experience on designing the new care service."

Background

The 2023-24 Scottish Government Health & Social Care budget provides investment of over £1.7 billion for social care and integration – an increase of over £800 million compared to 2021-22, and well-ahead of our trajectory to increase funding by 25%, £840 million, over the life of the Parliament.

The latest monthly figures published by Public Health Scotland show that, on 5 June, there were 6,295 people waiting for a social care support assessment, 4% less than 4 weeks previously on 8 May - 6,529.

- There were 3,929 people who had been assessed and were awaiting a package of social care support on 5 June down 2% from 4,018 waiting from 8 May.
- The total number of hours of social care support yet to be provided, for assessed individuals, was 36,319 on 5 June – down 2% from 37,049 hours yet to be provided on 8 May.

A Vale of Glamorgan Council spokesperson said:

"Unfortunately, cases like this are not unique to the Vale. This was the result of a national crisis in domiciliary care, compounded by the coronavirus pandemic, with Local Authorities across the UK severely affected by an acute staff shortage.

"At the outbreak of Covid-19, a large number of people decided to leave roles in domiciliary care, while there were also high levels of sickness absence as staff could not risk putting the individuals they look after, many of whom are vulnerable, in danger.

"This was an unprecedented situation, one that presented a huge challenge to the entire social care sector. Thankfully, the picture has now greatly improved.

"Our efforts to recruit staff for the sector, including the staging of jobs fairs, fast-track training, and an increase in pay, have help address staffing issues for care providers in the Vale. Importantly, social care staff now receive at least the national living wage, whether they work directly for the Council or are employed by a private agency.

"This means the waiting list for domiciliary care has reduced to only a handful of cases and appropriate packages are being delivered far more quickly."

Morag Barrow, Director of Health and Social Care at Midlothian Health and Social Care Partnership said:

In response to your request, the data is for completion of assessment for all categories of care provision across our adult social care services and not commencement of assessment.

In 2021/22, the median figure was 68 days for completion of assessment and not commencement of assessment.

The following year this reduced to 48 days, and we except to see a further decrease in figures going forward this year

In 2021 to 2022 there was an increase demand in referrals across our adult social care services by 11% which is significant for a small partnership.

Please note too we risk assess all referrals made to us, and any urgent referrals assessments are commenced within a few days.