

HM Government

**Care Support Independence**

## Shaping the Future of Care Together



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## Why we need to change

- **Impact of demographic changes:**
  - **Increased life expectancy:** 77 for men and 82 for women – 11 years more than in 1948. There are now more people over 65 than under 18.
  - **People are living longer with disabilities:** life expectancy for people with Down's Syndrome has almost doubled in recent years
  - **More people with care needs:** we anticipate 1.7 million more by 2026.
  - **Economic impact:** There are currently around four people of working age for every person retired. By 2059, this ratio will almost halve.
- **Social change:** Our expectations of services are increasing

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## A National Care Service

The Green Paper sets out a vision to build a **National Care Service** which is **fair, simple and affordable** for all adults in England.

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## What people should be able to expect




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## How the system needs to change



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## 5 ways to fund the National Care Service

1. Pay For Yourself - ruled out
2. Partnership
3. Insurance
4. Comprehensive
5. Tax Funded – ruled out

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### The current system

High  
Wealth ↑  
Low

Free

What people pay for themselves

Care funding →

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### So we are left with 3 options:

#### 1) Partnership

High  
Wealth ↑  
Low

Free

Partnership

What people pay for themselves

Care funding →

People will be supported by the Government for around a quarter to a third of the cost of their care, or more if they have a low income.

This system would work for adults of all ages.

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### 2) Insurance

As well as receiving a quarter to a third of the cost of their care, the Government would also make it easier for people to take out insurance to cover their remaining costs.

This system would work for people over retirement age.

High  
Wealth ↑  
Low

Free

Partnership

What people pay for themselves

Care funding →

**Insurance**  
Free for people who choose to buy insurance at around £25,000  
People with no insurance pay for themselves

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### 3) Comprehensive

Everyone over retirement age who can afford it would pay into a state insurance scheme, so that everyone who needs care and support will receive it free.

We would look at having a free care system for people of working age alongside this.

High  
Wealth ↑  
Low

Free

Partnership

What people pay for themselves

Care funding →

**Comprehensive**  
Over 65's pay around £17,000 - £20,000 or a set proportion of their assets, for free care

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### The choice:

The options in the Green Paper

High  
Wealth ↑  
Low

Free

Partnership

What people pay for themselves

Care funding →

**Insurance**  
Free for people who choose to buy insurance at around £25,000  
People with no insurance pay for themselves

**Comprehensive**  
Over 65's pay around £17,000 - £20,000 or a set proportion of their assets, for free care

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### There are different ways to contribute:

#### In the short term:

- Lump sum on retirement
- Defer state pension
- Instalments throughout retirement
- Pay out of estate (defer until death)
- Or a mixture of the options

#### In the longer term:

- Regular contributions throughout working life

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### The Cost of Care

- **Accommodation costs** are not included
- Should **disability benefits** be included?

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### Whichever funding model we choose, Local Authorities will remain key to the delivery of services

Local Authorities will:

- Be the channel for state funding
- Undertake assessments
- Provide information, advice, advocacy and care management
- Provide and commission services and develop the market
- Foster innovation to decide how services are to be delivered

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### “Everyone who needs care can get it regardless of where they live”

Through:

- A national and portable assessment
- National eligibility criteria
- A set proportion of the funding of your care package met e.g. 100% → 25% depending on the funding option chosen

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### But there are options about who decides how much funding people will receive

- Part national/part local
  - Local Authority decide how much to be spent on care
- Fully national system
  - Government would decide how much to be spent on care
  - Implications for local government finance

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### Consultation Question 1

We want to build a National Care Service that is **fair, simple** and **affordable**. We think that in this new system there are six things you should be able to expect:

- **Prevention services**
- **Information and advice**
- **National assessment**
- **Personalised care and support**
- **A joined-up service**
- **Fair funding**

- Is there anything missing from this approach?
- How should this work?

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### Consultation Question 2

We think that, in order to make the National Care Service work, we will need services that are **joined up**, give you **choice** around the **kind of care and support** you get, and are **high quality**.

- Do you agree?
- What would this look like in practice?
- What are the barriers to make this happen?

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### Consultation Question 3

The Government is suggesting three ways in which the National Care Service could be funded in the future:

- Partnership
- Insurance
- Comprehensive

a) Which of these options do you prefer, and why?

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

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