



Social Care Research Working Party - Terms of Reference

Background

The Social Care Working Party was originally set up to respond to the Green Paper on social care, promised by the Theresa May Government in 2017. This Green Paper was never published. The Government under Boris Johnson has published a Policy Paper, 'Build Back Better: Our Plan for Health and Social Care' updated on 19 November 2021. It states,

'This Government is committed to the delivery of world leading health and social care across the whole of the UK...and creating a sustainable adult social care system that is fit for the future.

'In England, the Government will work with leaders in Local Government and the social care sector, service users and carers, as well as the NHS Chief Executive and the NHS, to develop and publish a White Paper for reforming adult social care, which will commence a once in a generation transformation to adult social care. The Government will ensure Local Authorities have access to sustainable funding for core budgets at the Spending Review. We expect demographic and unit cost pressures will be met through Council Tax, social care precept, and long-term efficiencies. We will invest £5.4 billion in adult social care over the next three years to deliver the funding and system reform commitments set out in this document.

'To begin this transformation in adult social care, the Government will:

- introduce a cap on personal care costs (of £86,000);
- provide financial assistance to those without substantial assets;
- deliver wider support for the social care system, particularly our brilliant social care staff; and
- improve the integration of health and social care systems.'

The Working Party has revised its Terms of Reference to reflect these new commitments.

Purpose

The purpose of the working party is to contribute to the public debate around adult social care to help turn the Government's first step into a long-term sustainable solution to the funding of adult care.

Specific goals and areas to be investigated

1. Analyze the Financial Impact of the proposals on individuals and the scope for the creation of new Insurance Solutions

- a. We will analyze the financial impact of the anticipated new care cap and the means test social care system on individuals.
- b. We will use financial analysis to identify the unmet needs of individuals from the new system.
- c. We will use the unmet needs analysis to identify potential insured solutions (including equity release and investment bonds) and/or public/private social insurance schemes (both pay as you go and funded) that could meet these needs.
- d. In the first instance we will consider the needs of individuals progressing through the care system. In addition, we will consider what are the unmet needs of informal carers, who support the care system.

The research will need to set out what level of care need the insurance applies to and what level of unmet care cost there will be for a given severity criterion. 2

For the pay as you go solutions, the research will need to consider how to mitigate the impact that an ageing population will have on the stability of the scheme, e.g. reducing benefits, increasing contributions, promoting wellness.

Additionally, the research should provide an example of what proportion of the benefits fall to the public vs the private purse, especially as only those with a minimum level of earning can reasonably be expected to contribute to the scheme.

The research needs to consider if a private market can operate successfully alongside a public system. What needs to change in the environment to encourage private providers to enter this market?

2. Entitlement to and Eligibility for Care

In order to create any insurance backed solutions for the implementation of social care and to implement a Care Cap equally and fairly across the nation, Dilnot recommended a uniform and objective method for calculating care. The working party will endeavour to:

- a. Determine if any uniform and objective methodology for calculating care needs has been implemented across the care sector
- b. The working party will assess whether it can assist with the development of such standardisation and quantitative assessment of care for multiple degrees of need
- c. Consider the advantages and challenges of care needs being objectively measured and applied nationally.
- d. Review the benefits and disadvantages of defining the care cap as the number of hours of required care rather than the cost of care.
- e. Research potential behavioural impacts of the introduction of the cap. This may include:
 - How the introduction of the cap will impact on the decision to seek care at home or in a residential/care home?
 - Whether the Care Cap will influence one's decision regarding the level of care sought and where it is delivered, at home or in a residential establishment?
- f. Review whether people who obtain care informally from their family rather than paying for care should be given some credit for this in the calculation of the cap (as proposed under Dilnot)

3. Update the analysis of Global Funding solutions

We will update the research into how care is funded in other countries. What is meant by world-leading social care? The research will concentrate on a small number of countries where lessons may be learned of benefit to the UK. The list of countries may include Japan, Germany, USA and Scotland.

Potential future topic of investigation

Create Predictive tool

We will create a tool that predicts the chance of needing care and length of care need in the future (based upon age, gender, etc.) to be made available to the public.

Research methods

The research will build on previous analysis done by the Social Care Working Party on the impact of the Care Act 2014 and funding solutions in place in other countries.

Composition of working party

The Working Party will be made up of original members of the Social Care Green Paper Working Party and additional volunteers.

The research will be split into three sub-Groups to cover the areas listed above, working in parallel. Each sub-Group will have its own leader and team, research report and other outputs objectives. The teams will liaise on a regular basis.

Output

The Working Party will disseminate the research through regular short papers and respond to issues as they arise, for example, consultations and White Papers on adult social care.

Timetable

Each sub-Group will set its own timetable, with an interim update (an article or event presentation) by the end of the year.

Reporting

The sub-Group team leaders will report on a regular basis to the Health and Care Research Sub-Committee.

Funding

There is no expectation of external funding.