

# Vulnerable left without help in care system 'close to collapse'

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Half of elderly people who need care are not getting enough to meet their needs  
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Thousands of bed-bound older people have been abandoned with no help at all by a system facing “a real risk of total collapse”, a report concludes today.

The number let down by social care has surged and half of vulnerable older people are not getting the help they need in daily life, Age UK found.

Elderly people will increasingly be left with nowhere to go as more care homes close, with half of areas already experiencing problems, the charity warns. As councils cut the rates they pay for care, some companies are evicting local-authority funded residents and reopening as luxury homes catering to those who can afford to pay.

The analysis of the failure of the elderly care system will increase pressure on ministers to take emergency action, as well as for long-term reform.

There are 1.2 million people over 65 who do not get the help they need with everyday living, a rise of 48 per cent since 2010, the charity's analysis of official data and academic studies found.

Half those who need help are not getting enough to meet their needs and some of the most vulnerable receive no help at all. One in five of those who need help with tasks such as washing and dressing is on their own.

Caroline Abrahams, charity director of Age UK, said: "Unless something changes the crisis will certainly deepen this year and next, and we think there is now a real risk of complete collapse in social care in the worst affected areas."

The research found that there are 4,900 people who cannot wash, dress, eat, get out of bed, walk across the room or use the lavatory who receive no help at all. "How they are managing I can't imagine," Ms Abrahams said, warning that such people end up in hospital after falling over or becoming malnourished.

Councils have cut social care spending by £160 million in real terms in five years. Billions of pounds of NHS transfers also mean that the health service is funding about 16 per cent of social care, up from 2 per cent a decade ago.

As rates paid by councils to homes and agencies have fallen, fewer are willing to offer services. "Councils pay much less for care home places than older people who fund their own care, which is leading a growing number of providers to focus on private payers," Ms Abrahams said. "This is leading to a deeply worrying trend whereby homes close and reopen their doors only to these better-off, self-funding residents."

With pensioners now better off on average than working-age people, Simon Stevens, head of NHS England, has said that benefits such as

triple-locked pensions and free bus passes should be scrapped to offer care guarantees.

Ms Abrahams resisted that but said the charity was “open to a broader conversation about how the money that is spent on older people is spent”.

Andrea Sutcliffe, chief inspector of social care at the Care Quality Commission, said: “The issues highlighted by Age UK are real . . . We have got to make adult social care the priority that it deserves to be.”

A spokeswoman for the government said: “We are giving local authorities access to £7.6 billion of new money for adult social care.”

## **RISING NUMBERS**

- **1.2m** Elderly people not getting the help they need
- **400,000** More people lacking help since 2010
- **£1.65bn** Amount needed by 2020 to stop things getting any worse
- **18%** Of people provide unpaid care to relatives
- **11.4%** Vacancy rate for home care staff

*Source: Age UK*

● Britain’s sickness-related benefits bill will rise by £2.4 billion to £16.9 billion by 2020, according to the IPPR think tank. It said that half of those making claims were doing so because of mental health conditions, an increase of a third from 20 years ago. Sickness absence costs the state and employers £23.5 billion a year, according to the IPPR, which is calling on ministers to allow employees with mental health conditions to reduce their hours rather than turn to benefits.

## Comments

DamienT

There is our huge net input into the EU budget and a very poorly managed international aid budget. Redirecting these would more than meet the extra needed for elderly care.

Centerish

'As councils cut the rates they pay for care, some companies are evicting local-authority funded residents and reopening as luxury homes catering to those who can afford to pay.'

Councils really do have to allow their contractors to make a profit on those whom the councils send to them. The hidden cross subsidy between private users and those paid for by the state has gone on long enough. It's totally unjust for those who have relatively minor assets to have to pay for themselves and for others too.

I also doubt that all of the homes that re-open with private only users are 'luxury' places, they are merely a bit better than the standard that prevails with a proportion of loss making users from the council.

It looks as if a big bulge in care home requirement is coming. We had better sort out these funding matters before we find ourselves with disasters on the care front. One possible route would be for the state to build nursing homes for those who are bed blocking in the NHS. That will be expensive but so is every solution. Just don't use PFI please!

Richard Leszczynski

Care in the community isn't working. The recent move by the government encouraging pensioners to downsize their properties as they get older is a start, but that still will leave an awful lot of people living on their own in slightly smaller houses and increasingly unable

to cope with day to day tasks as they get older. Often, they may not even realise just how badly they are coping and just how hard it has become to complete even trivial tasks, with or without the added complication of any health problems they might have.

A fully equipped care home is far too expensive and indeed unnecessary for a great many people who are struggling and lonely in their own homes, while 15 or 30 minute daily visits from a carer can rarely provide all the support that's needed.

In my opinion, we need to undertake a large expansion in the amount of "assisted living", or "sheltered housing" complexes that are provided - apartments where old people can have a normal set of rooms; bedroom, bathroom, sitting room, kitchen/diner where they can live privately if they wish but also have access to on-site facilities such as; communal lounge, dining room, bar, gardens, laundry service, handyman, cleaner and carers if they want to maintain a social life, or need assistance with daily tasks.

To me, this is the best of both worlds. People moving into a facility like this would be much less lonely and could receive assistance where and when it becomes necessary. Staff can keep an eye on the residents, offering help and potentially spotting medical problems before they become too serious. For staff - carers, district nurses, podiatrists, doctors etc it also means that they can spend more time treating their patients instead of spending half their working day just driving between appointments.

The trouble is that facilities like this are too few and far between at present. When looking for such a facility for my own grandparents, it was very difficult. Ones with spaces were so expensive that we couldn't consider them. With admissions from age 50, complimentary 4 week cruises upon purchase, weekly aromatherapy sessions, whale song relaxation suites, gyms, saunas, cinemas, massage rooms and a multitude of other frivolous "free" facilities that my 80 year old grandparents would neither understand nor use, they seemed aimed more at the young and lazy than the old and frail.

The most suitable ones were ALL full, with waiting lists that stretched out for YEARS. I got the impression that you had to put yourself on the waiting list years in advance, and if you reached the top of the list and were offered a place, you had to instantly drop your life as you knew it and move in immediately, ready or not, for fear of losing the place for an unknown amount of time until the next resident either died or chose to move on!

Centerish

@Richard Leszczynski Yes, excellent idea (though I fear the running costs would be very high with all those services). But who is going to put up the capital funding? Each place will cost £hundreds of thousands. Any ideas? Private organisations will want a return on their capital that matches or exceeds other ways they could use the funds. Public ones have to compete with other state activities.

JRS

Welcome to Brexit Britain!

I suppose the elderly voted for it....now they will suffer the lack of funding consequences.

fredsausage

I am optimistic that Theresa May and Philip Hammond will tackle care of the elderly - just as soon as she sorts that other problem. Mind you, by the time Brexit is sorted, they both will be old enough to qualify for such help.

Kendal Fruitcake

I honestly don't think this government gives a damn. They have known of the problem for long enough. The ideological commitment to cut local authority budgets regardless of outcomes plus the convenient stereotyping of "shroud wavers" has brutalised the Tories. They have deliberately sabotaged social care and consequently the NHS. The least they can do now is legalise euthanasia. It's a cost saving exercise so look out for the green paper

yorkist

@Kendal Fruitcake I, for one, hope that they do legalise euthanasia. I'm over 65 (just), have no family in the UK, and I'm truly frightened of what will happen to me when I need help with my care. Who will give a damn whether I'm OK? Not the government, I fear.

F

DamienT

The government has indeed cut its funding to local authorities but is still collecting the tax that it used for such funding from normal taxpayers. Sadly government cuts did not seem to apply to its own departments.

Centerish

@Kendal Fruitcake You may be right, but before you finally confirm your opinion, may I suggest that you look at the Treasury and OBR reports that clearly set out our country's financial position. Oh, dear. I would not like to have to hold the balance between multiple vociferous demands for funds and the reality of the state's income and borrowing needs.

But one thing is clear. If we want a welfare state as exemplified by Scandinavia, we will have to pay Scandinavian taxes and attitudes towards funding the state via taxation will have to change.

Look forward to 25% VAT, very costly alcohol, income tax averaging a 50% take (not the rates, the average actually taken) and a big shift in living standards from the young and fit to the old and sick.

Or we can improve our productivity, which is dire. Or, ideally, both.

Kendal Fruitcake

Many of the young and fit are living precarious lives with insecure part time jobs on minimum wages. Some elderly are well off, but that soon changes when social care charges kick in. We have gone too far to emulate Scandinavia. We are now a 2nd world country with deregulation and short term limited vision cost cutting the drivers taking us there.

I think taxes should be raised. I think priorities should change Trident is a very expensive sick joke. Nuclear power continues to Hoover up billions regardless of the financial, environmental or security consequences. Bailing out the deregulated financial sector nearly bankrupted us. They are just a few big spend areas where different policies over time could have so changed our fortunes. Years of Tory policies, including New Labour, have got us to this place. It'll be tough to claw things back. I'm in a minority, albeit a large one. Income tax is the fairest way ahead, but the case has to be made and I can't see who will do that and get a hearing.