

## Social Care Bill - Many Unanswered Questions

### Personal View

Lloyd D Hughes (4<sup>th</sup> year MBChB; BSc) Outgoing SUMJ Dundee Editor

Correspondence to: Lloyd Hughes : [L.D.Hughes@dundee.ac.uk](mailto:L.D.Hughes@dundee.ac.uk)

The implications of an ageing society are all around us. In Westminster there have been major political discussions surrounding pensions, inheritance tax and NHS healthcare reforms. However, there is one issue that successive governments have struggled to manage, how to pay for the rapidly increasing costs of caring for older people in the community. This includes people being supported in sheltered housing, as well as those receiving support in care or nursing homes. With the annual costs of care ranging between £30,000 and £50,000 per person (£600 - £1000 per week) it is clear that neither the state nor individuals have this kind of money. The coalition government have made an attempt at addressing this costly area of social care by promoting the Department of Health publication "*Caring for our future: reforming care and support*" and introducing a Social Care Bill.

For years' community care has been a postcode lottery. This regional lottery relates to the extent of support that patients receive and the amount of financial capital a person must put into the system before the government pays care costs. For example, one person may have access to free personal care if they have savings of under £50,000 while another person may only have access to free personal care when their savings are under £20,000. Such variations may be the difference between a person having to sell their home or not.

The fundamental purpose of the Social Care Bill is to provide a coherent national strategy to provide older people with the care and support they need without profound regional variations. The Bill has agreed to a £35,000 cap on money that people will put towards their care. The cap was proposed by the economist Andrew Dilnot, who was commissioned to write a report on the subject. However, although the cap is a step in the right direction it is limited in terms of how comprehensive it is for reducing the financial burden of care costs. This is because there are two different charges to community care: nursing care costs and hotel 'running' costs that the care institutions receive. Crucially, the £35,000 cap only refers to nursing care costs meaning that people could still be paying thousands of pounds towards their care. Another concern with the Bill is that the government omitted any information as to how they will pay for this financial cap and whether there would be a cap placed on the other part of the community care payment.

It is clear that the current system of community care is unworkable. Therefore, community care requires a clear strategy of development that must include how any changes will be funded. The governments' delay in providing information about how the changes will be paid for means the Bill provides an unfounded impression that the state will pay a considerable chunk of community care fees. This may well falsely reassure older people and their families that they will be able to have financial support from the state for much of their support needs. Therefore, it is vital the government provides details that enable people to plan for their futures. Without information about how the cap on community care will be funded, people will be left in with many unanswered questions.