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Bailiffs knocking on the doors of disabled people demanding social care charging costs they cannot pay.

Thousands of people of all ages denied care and support. Unpaid carers looking after profoundly disabled relatives with no help.

Older and disabled people are hit by dramatic rises in the cost of living. Households with at least one older or disabled person are losing £1 in every £3 of income. The effect is a drastic increase in already unacceptable levels of poverty and exclusion.

People face isolation, indignity, maltreatment, neglect and barriers to inclusion and independent living which breach the UN Convention on the Rights of People with Disabilities. Most care and support is marketised, privatised and unstable.

Care and support doesn't reflect users' needs, wishes and diversity. It gives them little say in designing, planning and running services and side-lines their collective expertise

Staff wages, training and conditions are at rock bottom – annual staff turnover is over 30%. Workers get paid more in Aldi.

This is our broken social care system. It is a disgrace to us all.

End Social Care Disgrace is a non party political alliance calling for radical change to social care. We are a broad campaign of carers, disabled people, trades unions, health workers.

We want the market out of social care and make support free at the point of use.

Disabled and older people, families and communities must shape what is needed to ensure everyone is enabled to have choice, dignity, and control over their lives. We must end discrimination and dismantle barriers to access. We also want care and support work and the contribution made by informal carers properly valued and supported.

There is talk of merging the NHS and social care.

We see this as dangerous. Looking at disability through a medical lens encourages a view of people as bundles of largely physical needs eg. for food, toileting etc. which can be timed and ticked off on a task sheet.

It also reinforces the notion that medical and managerial “experts” know what is best for people and should provide for them, rather than seeing people who use support, as well as families and local neighbourhoods, as not just experts in what is needed but also as potential providers.

Merger would mean Social Care and Support being absorbed into largely unaccountable, Integrated (Health) Care Systems which will hasten hospital cuts and closures.

We call for a new National Care, Support and Independent Living Service (NaCSILS) which is:

- Publicly funded, free at the point of use
- Publicly provided, not for profit
- Nationally mandated but designed and delivered locally
- Co-produced with service users and democratically accountable
- Underpinned by staff whose pay and conditions reflect true value and skills
- Designed to meet the needs of informal carers

- Informed by a task force on independent living led by user controlled groups from diverse backgrounds

The costs are manageable.

- **End means-testing for Social Care and Support.** This might cost about £10 billion (current cost of privately purchased care) and a further £1 billion (income from charging).
- **Increase the overall level of support.** Returning to the support available in 2009 (a 44% increase) will cost approximately £7 billion.
- **Increase the salary levels of support staff,** say by 25%, a cost of about £5 billion.
- **Reduce pay inequalities,** aiming for a salary ratio of 1:3 between direct staff and top management (this will also radically improve efficiency by making more direct support available).
- **A focus on independent living and democratic involvement** is unlikely to cost anything and may reduce costs as disabled people will understand and want the most efficient system

This is an increase, after 5 years, of £22 billion, bringing the total cost of Adult Social Care in England to about £40 billion or 2% of GDP. This does not include savings from cutting administration such as needs testing or savings for other public services such as the NHS. This amount may not be totally sufficient, but it is an entirely viable level of increase.

An increase in progressive taxation and/or wealth tax to pay for the introduction of a NaCSILS. Many reports show how these improvements could be funded¹. While the better-off will be paying more tax, if they or those they love acquire a disability at any stage of life, they will in effect be insuring themselves by contributing to an efficient universal system.

There may be further costs if eligibility is expanded and more preventative services are provided.

Such extra costs are likely to lead to savings if stronger families and communities provide support which reduces unplanned admissions and re-admissions to hospital, the use of institutional care or other crises in the community.

Join End Social Care Disgrace campaign here www.nacsils.co.uk

¹ Social care funding: Debate on the Economic Affairs Committee report - House of Lords Library (parliament.uk)