

## **A freestanding National Care, Support, Independent Living Service which is:**

### **Independent from the NHS.**

Social Care needs to be separate from the NHS. It has different functions, ideology and funding. It aims to increase wellbeing and independence, while the NHS works to fix illness. If they were merged, social care would be swamped by the NHS demands and ideology.

### **Free to all at the point of use**

Social care is expensive for users. The NHS is free to all – social care should be too.

Disabled people are 6% more likely to live in poverty than non-disabled people, (1) struggling to pay care charges which have risen by £500. (2) More than 60,000 adults with disabilities and long-term illnesses in England are being chased for debts. (3)

Free social care will save money overall because:

- no means testing
- more disabled people and family carers will be able to do paid work
- 1.6 million workers paid decent wages will contribute more to the economy through taxes and more income
- investment in community based solutions rather than high cost, segregated institutions will provide savings in the long run
- ensuring excellent care and support in the community will save billions for the NHS

### **Publicly provided and accountable**

The privatisation of social care has left us with fragmented, unstable provision with 5,000 separate providers of care homes with no accountability to local people. If profits drop, they walk away. Private providers generally pay staff less with poorer conditions to increase profit margins. It also contributed to increasing risk during the pandemic.

Their complex company structures enable them to drain £13 out of every £100 into profit away from provision. (5) [ref – from](#).

### **Nationally mandated, locally provided and co-produced with service users, offering choice and control, dignity and independence**

A national framework will ensure universal and fair access to support. Services need to involve local people in all stages of planning, developing and managing provision. This **genuine co-production** should implement the demand of disabled people that there must be “nothing about us without us”. Disabled and older people carers, sector workers and local communities need to have active involvement in decision making and Scrutiny processes.

We don't want more of the same. We need a strong focus on de-institutionalisation and independent living, where independence means having real choices, access and control not necessarily living on one's own. We want more scope for cooperatives and peer support services, alongside Local Authority provision, with fully inclusive housing, workplaces, transport, libraries, leisure facilities etc. i.e. all twelve pillars of independent living (6)

Article 19 of the United Nations Convention on the Rights of Persons with Disabilities needs to be enshrined in law [ref](#)

A task force on independent living comprising people from organisations of service users should guide development and ensure that the right to independent living as outlined in and becomes a reality.

### **Providing proper recognition and flexible support to family carers**

(9) The number of unpaid carers has risen by nearly 50% to 13.6 million. (7) 40% of carers are 'struggling to make ends meet' and 30% of the 800,000 child carers have mental health problems with 27% missing or having problems at school. (8)

It is estimated that family carers save the treasury 132bn a year (10), keeping social care going. Little financial, emotional, or other support is provided. **A recent research paper? (on the Burrows programme ) suggests that only 1 in 142 carers get any form of respite care.??** Many if not most carers feel their knowledge and experience is undervalued, their views ignored or discounted and a worrying number feel harassed, even bullied.

### **Enhanced pay, conditions and status for care and support workers**

The gross undervaluing of support staff is the other side of the coin from the undervaluing of older and disabled people in society. 83% of care and support workers are women and 18% of workers are from overseas. Overseas workers can be exploited with criminally low wages and excessive visa charges.

Care and Support Workers should be paid at least £15 per hour – including sleep-in shifts, travel time etc. Raising pay for care workers to £15ph would cost £5.9bill – and boost England's economy by £7.7bn. (11) **Ref – Brian's piece?** They should have sick pay and holiday pay, union recognition and full bargaining rights, training and a career structure. Investment in social care stimulates employment, reduces the gender employment gap and generates green jobs. (12)

1. (<https://www.health.org.uk/evidence-hub/money-and-resources/poverty/inequalities-in-who-is-in-poverty>)
2. <https://www.bbc.co.uk/news/uk-58259678>
3. <https://www.bbc.co.uk/news/uk-64668729>
4. <https://endsocialcaredisgrace.org/wp-content/uploads/2023/10/Adult-Social-Care-and-its-funding-ESCaD-draft-for-comment.pdf>
5. ref – from Brian's social media plan
6. <https://breakthrough-uk.co.uk/principles-of-independent-living/>
7. <https://www.carersuk.org/news-and-campaigns>
8. <https://www.childrenssociety.org.uk/what-we-do/our-work/supporting-young-carers/facts-about-young-carers>
9. <https://www.carersweek.org/media-and-updates/item/493439-covid-19-pandemic-4-5-million-become-unpaid-carers-in-a-matter-of-weeks>
10. <https://publications.parliament.uk/pa/ld201719/ldselect/ldconaf/392/392.pdf>
11. figs from Brian re care workers pay
12. <https://wbg.org.uk/wp-content/uploads/2020/06/Care-led-recovery-final.pdf>