



DEPARTMENT OF HEALTH

LONG TERM CARE

**THE GOVERNMENT'S RESPONSE TO THE HEALTH
COMMITTEE'S REPORT ON LONG TERM CARE**

Presented to Parliament by the Secretary of State for Health
by Command of Her Majesty
July 1999

THE GOVERNMENT'S RESPONSE TO THE HEALTH COMMITTEE'S REPORT ON LONG TERM CARE

The Government welcomes the Committee's report and its consideration of this important area.

The Government endorses the Committee's praise of the Royal Commission for the consultation and research which were packed into a tight timetable.

The Government endorses the Committee's view of the importance of long term care issues. Having established the Royal Commission and promptly published its findings, the Government is now considering the Royal Commission's report including the divergences of view within the Royal Commission. We are also considering the comments on the Royal Commission's proposals that have been made by various groups since the publication of their report. After detailed consideration the Government will discharge its own responsibility by announcing how it intends to tackle the issues raised in a way which will be fair to both the taxpayer and the individual, which will stand the test of time and will place services on a better footing for the future.

The Government is committed to improving the lives of older people, promoting their independence and giving them more control over the services they receive.

The Government is actively supporting the United Nations international year of the older person and has made a grant of £200,000 towards the campaign. We are working, through the Better Government for Older People initiative, to improve public services for older people by better meeting their needs, listening to their views and encouraging and recognising their contribution.

The White Paper "Modernising Social Services", and the national priorities guidance for 1999-2002, have made it a priority for Health and Local Authorities to put promotion of independence at the heart of their adult services. The discussion document "Partnership in Action" has set out the Government's proposals to address the barriers that prevent health and social services from working more closely together. Health and Local Authorities were asked to produce joint investment plans from April this year. The first covers services for older people. Health Improvement Programmes, required under the new Health Act 1999, bring together all local organisations to work together to improve quality of life and tackle the range of factors that can cause ill health. The White Paper "Saving Lives: Our Healthier Nation", was published on 6th July, setting out the Government's aims to support everyone in improving their health and extending their years of healthy and active life.

The Government's strategy for meeting the needs of vulnerable people, including older people who need long term care, is set out in the "Better Services for Vulnerable People" initiative. We are consulting widely on a charter for long term care, "You and Your Services". This will provide a framework for setting local standards to enable users and carers to see what they can expect from health, housing and social care services. The Government's national strategy for carers is giving Local Authorities an extra £140 million over three years to provide a wider range of support services to carers. We have already announced our intention to extend direct payments to people over 65.

The National Service Framework for older people will set national standards and define service models for NHS care of older people; put in place strategies to support implementation of those models; and establish performance measures against which progress within an agreed time scale will be measured. It is being developed with the assistance of an external reference group and a number of task groups which bring together health professionals, service users and carers, health service managers, partner agencies and other advocates.

All these initiatives comprise a massive Government programme of work to improve the lives of older people.

We recommend that the Government accepts the idea of a National Care Commission and that its remit should include the requirement to pay proper attention to preventative care and to advocate the benefits, both in cost and social terms, of encouraging qualitative improvement in the lives of older people through exercise, constructive leisure pursuits and education.

(paragraph 3)

The Government is considering the proposal made by the Royal Commission to establish a National Care Commission, along with the other proposals.

The Government is working to improve the quality of life of older people and prevent or delay the onset of dependence through various initiatives. These include specific grants to Local Authorities to promote independence and a Department of Health contract with the Health Education Authority to promote older people's health through healthier and better quality living.

We recognise that there are significant problems with introducing major structural change, yet we remain unconvinced that, in the long term, a sensible, efficient and seamless service to patients is possible without an integrated health and social care system. We therefore take the opportunity once again to urge the Government to give the matter further consideration.

(paragraph 7)

The Government is committed to effective partnership working. As we made clear in our response to the First Report of the Health Committee in 1998 / 1999, we do not intend to integrate health and social services. We are making significant changes to the NHS in the interests of patients and to overload the service with further change at this time would be counter-productive. The Royal Commission also wished to avoid the upheaval and disruption of a wholesale change. The partnership provisions in the Health Act require Health and Local Authorities (not just social services) to work together and make it easier for them to do so. This will bring about the closer co-operation that the Committee wish to see without the need for extensive and expensive restructuring.

There needs to be an immediate improvement in the availability of reliable, consistent and universally accepted data to inform debate within the field of health and social policy. (paragraph 9)

The Government agrees that data must improve and recognises the importance of good quality information to inform health and social services planning. We are also committed to making statistical information available in a convenient form. Detailed information is increasingly being put into the public domain through electronic media including the Internet, to supplement traditional printed publications.

The new Performance Assessment Frameworks for the NHS and social services will provide comparative information. This will promote the accurate collection of data. A wide range of information developments were set out in “Information for Health”, published in 1998. The Department of Health is taking forward the development of health information that will be of use to clinicians, improvements in data quality, and specific recommendations on reviewing the information used locally in the NHS and collected centrally on community health services.

Future information needs are being considered along with the Royal Commission’s other proposals. Specific information needs in relation to older people are also being considered through the development of the National Service Framework for older people. Information about total expenditure on long-term care requires the collection of information relating to spending by a range of public bodies, by the independent sector and by individual citizens. The greatest difficulty, in terms of the lack of information, in considering options for funding long term care, is uncertainty about the future.

As part of the Public Expenditure Inquiry, the Department of Health has already provided the Committee with information about developments to social services statistics such as the work on Local Authorities’ Referrals, Assessments and Packages of Care.

We believe that care in the home so far as that is feasible should be available for as long as possible. We see the development of multi-skilled teams of support workers, similar to those employed in Denmark, as assisting this process. (paragraph 13)

We believe it would be well worthwhile for ministers to look closely at Danish models of care for older people with a view to extracting ideas relevant to our own sustainable progress and development in this area. (paragraph 14)

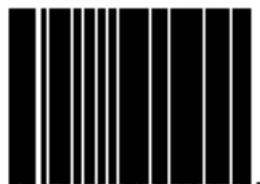
The Government agrees that care in the home should be available for as long as possible and is committed to ensuring provision of support to enable older people to stay at home for as long as that is possible and appropriate. The Government set out in the White Paper “Modernising Social Services” its objective to make the promotion of greater independence a key focus of social services for adults. To help promote independence and support people at home, the Government has made a new grant of £100m over three years to Local Authorities to enable them to develop preventative strategies for adult services, in partnership with other agencies including Housing and Health Authorities.

The Government recognises the importance of housing in helping support people with long term care needs within the community. As the Committee notes, new technologies can play an important part in helping older people to live at home or in supported accommodation and the Government welcomes initiatives using these. The extension of Part M of the Building Regulations (access and facilities for disabled people) to new housing comes into force on 25 October. Before any further changes can be considered, the Government needs to allow time for the new regulations to take effect and to assess their impact. However, we will consider the Committee’s suggestion that there should be further regulations to provide for cabling to enable houses to become more easily adaptable for the needs of older people, and disabled people, by preparing them for use of up to date technology, with a view to possible inclusion in future revisions of the regulations. Any changes to the Building Regulations are subject to public consultation and a Regulatory Impact Assessment, demonstrating that the costs of any proposed new regulations can be justified by their benefits.

The partnership provisions in the Health Act 1999 provide for much more integrated working between Health and Local Authorities. We expect these to give rise to more integrated teams of health and social care staff. We will watch developments with interest and draw on good practice to inform future developments through the National Service Framework.

Like the Royal Commission, the Government recognises that there is much to be gained by the international exchange of information and we shall continue to share experiences with other countries, including Denmark.

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