



# Mind the gap

**Les Bright** worries about trends outlined in CSCI's latest report

**T**he Commission for Social Care Inspection's (CSCI) third annual report on the state of social care in England covers a broad range of issues (CSCI 2008). As the body responsible for regulating and inspecting all social care services for adults, and also for inspecting the local authorities that commission and purchase these services, it is extremely well placed to present a comprehensive account of what is going on, and the reasons behind any changes occurring. The Commission's remit also includes providing parliament with information on the state of the market. It is this part of the report that shows evidence of worrying trends that have been affecting older people as they or their families seek support.

## Tighter criteria

For some time now, local authorities have been faced with demand that exceeds the funds available to purchase or provide services, and they have continued to raise the eligibility criteria they use, in line with Fair Access to Care Services (FACS) guidelines. In practice, this means that in 106 of the 150 English councils responsible for care only those people deemed to have 'substantial' needs will gain access to a service. Four other councils only help those with 'critical' needs.

Fewer than 40 councils offer anything to those whose needs are considered to be 'moderate'. These are people who are unable to carry out several aspects of their personal care or domestic routines, and whose social support systems are under some strain and therefore likely to fail.

On its own this is worrying enough. However, given that councils continue to be encouraged to develop preventive services – intervening earlier to enable people to manage their lives with small amounts of regular help – strain is being put on other services. Crucially, family carers (frequently older people themselves) may be severely affected and incapable of filling the gaps. It does seem that older people

and their families are getting mixed messages, and this may lead some to lose faith in the system altogether.

This follows on from concerns highlighted last year about the way councils respond to 'self funders'. This group generally comprises people whose weekly income or accumulated assets are such that they are assessed to meet all the costs of their care, even though their needs fit the eligibility criteria. However, there may also be people who are not especially well off who, on being told that their needs are insufficiently serious, arrange and pay for care themselves.

There may be yet more people who, fearful of being rebuffed, decide not to approach the local authority for help – even though the law entitles them to an assessment of their care needs. An assessment would be invaluable to all of these people as they search for sources of help.

As a result of professional and public concern, the CSCI commissioned special studies to explore the impact of FACS, and the experiences of individuals making their own arrangements for care.

Many people who pay for their own care may be 'lost to the system', receiving little information or advice about the options for meeting their care needs. Perhaps they go to live in a care home when there may be other more appropriate and cheaper alternatives?

The CSCI report identifies three methods of rationing entry, or more accurately barring

people from services. These three methods of rationing – by directive, by discretion or by diversion – are discussed in the box below.

## Widespread signposting

Talk of a postcode lottery is inaccurate, because the discretionary approach could lead to very different responses to people with similar needs being served by the same or a different assessor within the same team. And, with signposting now more widespread as a way of dealing with many people in a growing number of councils, the real issue is whether or not the alternatives can provide answers – at the time of referral, or as an individual's situation worsens.

People affected in these ways will view government-funded Partnership for Older People Projects (POPPs) – piloting new approaches in various locations – as a long way from their experiences. The drive towards individualised budgets and personalised services promised in a series of ministerial announcements is also a long way from reality.

As well as this highly critical commentary, the report also provides clear information about established care services. Service quality continues to improve, although the rate of improvement has slowed for the second successive year.

Five years on from the introduction of National Minimum Standards (NMS) it is still a concern that care homes for older people on average meet only 80 per cent of those standards. More than one third are performing poorly in relation to care plans. Put bluntly, are the residents – paying customers – getting the service they deserve? ■

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## References

Commission for Social Care Inspection (2008) *The state of social care in England 2006-7*. London, CSCI

## Methods of rationing

■ **Rationing by directive:** the use of nationally agreed rules and procedures to determine who gets help (FACS).

■ **Rationing by discretion:** the use of professional judgement to interpret the extent to which people fit the criteria.

■ **Rationing by diversion:** restricting demand by 'signposting' to other agencies, especially voluntary organisations.