

Written evidence submitted by Centre for Mental Health (ASC0129)

Centre for Mental Health submission to the Health and Adult Social Care Select Committee's adult social care reform inquiry

Introduction

Successive governments have pledged to take action to resolve the long-running issue of the way adult social care is funded in England. There has long been recognition across all political parties that a sustainable and fair funding settlement for social care is vital for the future health of the nation, but no government has, as yet, managed to implement such a change.

A successful funding settlement for social care must begin with a recognition that a significant proportion of adult social care supports people of working age: it is not just for those in later life. Social services have specific responsibilities in relation to mental health, as they do for people with learning disabilities and other care needs, at all stages of life. In 2019, in response to the then government's white paper on social care funding reform Centre for Mental Health published this [policy briefing](#) which explores the principles that would need to underpin any sustainable social care settlement from the perspective of mental health support for working age adults much of which remains pertinent.

- *How much is inaction on adult social care reform costing the NHS and local authorities, and what impact does this have on patients and the public?*

At least one in every £12 of the adult social care budget spent by local authorities is used to support people with mental health conditions living in the community. This could grow as severe mental illness prevalence has increased by 11% in the last decade (OHID, 2024) - and more people are impoverished following Covid and the cost of living crisis increasing reliance on local authority funding.

Centre for Mental Health and the NHS Confederation recently calculated that the cost of mental ill health in England (Cardoso and Hayle, 2024):

- Was at least £300 billion in total
- Including £66 billion in costs to the NHS and social care services
- Of which £1.6 billion was costs in adult social care provided by local authorities to adults with mental health conditions.

There is no doubt that a significant proportion of all these costs could be saved by greater co-ordination, early intervention and prevention, including reformed adult social care funding and functionality. It is currently impossible to put a figure on that cost and saving without further investigation and research. But it is likely that under-funding of adult social care is creating additional costs to other sectors, including the NHS, social security, and criminal justice.

People racialised as Black and Asian have much poorer mental health outcomes as the result of structural discrimination (NHSRHO, 2022). It is essential that adult social care is a fundamental part of the Patient and Carer Race Equality Framework which is helping to deliver racial justice and better outcomes in NHS mental health services. A better financial footing and reform for social care should be used to facilitate these kinds of improvements.

Proposed reforms to the Mental Health Act (currently before Parliament) are likely to increase workloads in adult social care. This is very welcome, as it should mean more people are being better cared for in the community rather than being detained in hospitals, but will require planning and funding. Adult social services have essential statutory functions in relation to the Mental Health Act, including the provision of Approved Mental Health Professionals and the commissioning of Independent Mental Health Advocacy services. Both will have a bigger role once the Mental Health Bill is passed, and will require additional resources to deliver on promised improvement.

- *What NHS and local authority service reforms are not happening as a result of adult social care pressures, and what benefits are patients and the public missing out on?*

Social care is an essential element of mental health services. It provides support for people to live independently in their own community, it safeguards people's rights under the Mental Health Act, and it offers help to carers.

Investment is desperately needed in mental health social care. Many local authorities are struggling to meet statutory responsibilities under the Care Act and charities funded by social care have faced budget cuts as councils have had to reduce costs.

The constant budgetary pressures facing adult social care services worsened by lack of sustainable reform result in:

- People getting stuck in inpatient beds for longer than is clinically necessary. A significant proportion of mental health inpatients have inadequate housing making discharge into the community more difficult or impossible especially when combined with poorly resourced social care. Social care reform needs to be accompanied by more affordable and supported housing provision to maximise benefits.
- A fracturing of Section 75 provisions between NHS bodies and local authorities make arrangements to pool budgets. These can be complex and hinder more ambitious models of integration. The Government's [integration white paper](#), committed to reviewing the legislation covering pooled budgets to consider simplifying and updating the underlying regulations where necessary. In some areas, Section 75 provisions have been superseded by new arrangements between the NHS and local authorities for mental health care. These may provide alternative models for collaboration, rather than simply returning to a system that has not worked in many places.
- In some places, Like Lambeth and Somerset, where systems have used Alliance Contracts (despite the barriers) outcomes and efficiency have improved (LLWNA, 2024) – a reformed funding model could mandate, encourage or facilitate similar

- models. Our evaluation of five place-based alliance arrangements has shown that, in the right conditions, these can improve the quality and reach of mental health services, especially for groups that have poorer access to and experiences of statutory mental health provision (Treloar et al, 2024).
- *Where in the system is the cost of inaction on adult social care reform being borne the most?*

Local authorities have been devastated with austerity falling most heavily on councils and especially in the most deprived areas of the country at the same time as an increasingly elderly, frail and unwell population has also become more impoverished and more likely to rely on adult social care (King's Fund, 2024). Eight authorities have now issued Section 114 notices showing they cannot balance their budgets, with many others approaching that point. A large proportion of most councils' budgets is now spent on adult social care, meaning there is less resources for preventative wider, non-statutory services like early years and youth services, Health Visiting and school nursing, libraries, leisure centres, parks, community centres and advice services.

The NHS is also affected as patients are more likely to get stuck in inpatient services despite being medically fit for discharge – inadequate social care provision and housing are major causes of this.

Many voluntary and community sector partners are reliant on council and NHS commissions to provide social care related support. Problems caused and worsened by a lack of adult social care funding reform feed through into reduced investment in these organisations and the services they provide.

There is also evidence that shortages of adult social care in later life are affecting the mental health and wellbeing of the older population (Iskander-Reynolds, 2024). Long waits and high service thresholds for social care reduce people's independence, mobility and physical health, with knock-on effects on mental health from greater isolation, illness and loss of function. This has been largely overlooked due to systemic ageism in our health and care system.

**Please do not hesitate to contact us if you require further information:
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References

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December 2024