

Written evidence submitted by Local Government Association (ASC0137)

LGA submission to the Health and Social Care Committee call for evidence: Adult Social Care Reform: The Cost of Inaction

1. About the Local Government Association (LGA)

- The LGA is the National Voice of Local Government. We're on the side of councils: promoting their work, supporting them to improve and helping them make a difference to people, places and the planet.
- We aim to be the best membership organisation we can be. As the national membership body for local authorities, we provide the bridge between central and local government and we help councils deliver the best services to their local communities.

2. Key messages

- Disappointment around inaction on adult social care reform is a feeling shared across the sector. At its best, adult social care helps ensure that everyone can pursue the things that matter most to them, irrespective of their age or conditions. Yet this core purpose of adult social care, and its intrinsic value to us all, is not well enough understood. Changing this could help unlock more public support, making it possible to spread the very best practice that exists across the country.
- The LGA supports the National Audit Office's recommendation that the Department of Health and Social Care (DHSC) must assess the impact of its current and planned reform interventions on local authorities and consult with stakeholders to ensure its plans are manageable. The report, [Reforming adult social care in England](#), provides helpful insight into the current situation and framing of adult social care reforms.
- The Care Act 2014 is a landmark piece of legislation which continues to command widespread support due to the way in which it was developed through meaningful consultation and engagement, including with people who draw on social care. There has undoubtedly been a gap between the legislation's ambition and its practical implementation, but it remains valid as a guiding framework for care and support. The LGA has consistently called for framing all adult social care reform around the Care Act 2014, placing its principle of wellbeing at the heart. Change must be centred around what best supports people to live the lives they want to lead. The LGA's May 2024 publication on [The Care Act 2014: Ten years on from Royal Assent](#) provides a number of expert articles that delves deeper into this.
- There must be joint work with the Government to reform – in coproduction with people drawing on care and support – the approach to adult social care, and better joint working between the NHS and local government to support people. In particular, a focus on prevention and recovery services is needed. Investment in primary and community services and intermediate care that is multidisciplinary and can resolve crises in health and care would mean avoiding hospital admission and helping people convalesce. More therapeutic-led reablement – intensive short-term interventions with follow-up support – will support

recovery after time spent in hospital.

- Reform must embed realism and coproduction throughout the process. The reforms that are needed to ensure people of all ages are able to live an equal life require a long-term approach. Work on the reform agenda must be based on ongoing and meaningful engagement with all partners, particularly people with lived experience of care and support. Realism is needed so that lessons are learnt from the past and plans and public commitments reflect the reality of the immense pressures facing social care. We need to be collectively ambitious and jointly agree what is achievable.
- The LGA's [White Paper](#) revealed that councils in England now face a funding gap of £6.2 billion over the next two years. Adult social care must be funded adequately, sustainably and with trust in councils as democratically accountable bodies. The exact funding requirement should be identified through a collaborative process, but we broadly support the [Health Foundation's analysis](#) of the uplifts that would be required to tackle some of the most pressing issues facing people and the sector, such as access/unmet need, meeting future demand, and covering the full cost of care. While the recent Budget provided welcome additional funding for local government, its announced changes to employer National Insurance contributions (ENICs) have created significant new cost pressures, which exacerbate the risk of adult social care not being the best it can be. The LGA estimates that ENICs changes create £1.77 billion in additional costs for councils; £637 million for directly employed staff and £1.13 billion through indirect costs via commissioned providers, including £628 million for adult social care alone. This pressure is not the only one bearing down on councils and their partners. In adult social care, increases to the National Living Wage, inflation and demography creates a further pressure of well over another £1 billion.
- There must be support for the voluntary sector, which can mobilise quickly and provide access to an additional workforce. Services such as 'sitting services' (which provides reassurance for people who may not need care but are concerned at being alone after discharge), unpaid carer support, handyman services, and home from hospital services can all play a key role in meeting low-level needs after discharge, as well contributing to preventing possible readmission.
- Support for and recognition of unpaid carers – who are the backbone of care – is crucial. Too many of these people are suffering 'burnout' and the labour market is losing too many people, especially those in their 50s, who are having to give up work to care. The adult social care system could not survive without the enormous contribution of unpaid carers who provide vital support for thousands of people every day.
- Increased care worker pay – including one-off increases and/or retention bonuses – will help tackle the serious recruitment and retention issues facing the sector. The costs for any such increases must be met in full by genuinely new funding from central government and we look forward to working with the Government on its Fair Pay Agreement and Employment Rights Bill. If a Fair Pay Agreement is negotiated, the subsequent costs must be met in full by genuinely new funding from the Government.
- Robust commissioning arrangements must be put in place to ensure that the commissioning system does not create two tier systems and lead to disagreements between councils, the NHS and the care sector.

3. Background

- Ahead of the 2023 Autumn Statement, the LGA called on the Government to:
 - Provide funding to enable improvement in pay (parity with comparable roles in the NHS), conditions and career development opportunities for the frontline care workforce not directly employed by councils.
 - Introduce an independent review of care worker pay for those not directly employed by councils.
 - Provide substantial new investment to help tackle unmet and under-met need through an expansion of provision, including preventative services, and in new models of care, including housing, and funding for the voluntary and community sector.
- It was therefore disappointing and concerning that the 2023 Autumn Statement provided no new investment for adult social care. People who draw on care and support will be understandably worried about the continuing impact of significant pressures on the service. Waiting lists for care assessment or the provision of support remain high; serious recruitment and retention challenges continue to beset the workforce; unmet and under-met need remains; instability continues to characterise the provider sector; and directors of adult social services remain worried that their budgets are insufficient to meet all of their statutory duties.
- The absence of new funding, and the near total absence of any commentary on adult social care, might suggest the Government considers that pressures are resolved, and the sector has what it needs. This is patently not the case. In December 2023, [almost one in five council leaders and chief executives in England](#) surveyed by the LGA thought it was very or fairly likely that their chief finance officer will need to issue a Section 114 notice due to a lack of funding to keep key services running. It is also disappointing that the Government continues to rely on council tax and the social care precept to fund adult social care. The LGA has consistently stated that council tax is not the solution for meeting long-term pressures facing high-demand national services such as adult social care.
- It was a similar story with the 2024 Spring Budget. The lack of additional financial support for local authorities to develop productivity plans was contrasted by the sector with the additional £3.4 billion to support the NHS productivity plan to support a range of productivity initiatives in the NHS.
- At the 2024 Autumn Budget, we noted that we had to see further detail on the £600 million for social care, as well as on council tax increases and the council tax precept. We asked the Government that the £600 million will be an increase to the Social Care Grant, which councils have freedom to allocate between children's social care and adult social care. In recent years, councils have allocated around 60 per cent of the grant to adult services. The recent [Local Government Finance Policy Statement](#) gave an extra £80 million for the grant, but this is still [nowhere near enough](#).
- While the additional funding was welcome, it must be seen in the context of the announced increases to the National Living Wage and employers' National Insurance contributions. With no separate funding for these announcements, care providers will likely expect to see their increased costs reflected in their fees paid by councils. This will almost certainly absorb all of

the grant increase for many councils even if it is spent wholly on adult social care, leaving little or nothing to address immediate challenges in adult social care, such as long waiting times for an assessment of a person's care needs or the commencement of care packages.

- The additional funding for social care must also be seen in the context of the extra £22.6 billion investment announced for the NHS. This is crucial and much-needed investment for our health service and will help lay the foundations for the 10 Year Plan. But the challenges facing the NHS, and how to address them, are inextricably linked to the fortunes of adult social care and support and other local government services. As it stands, the NHS has a process in place for developing a plan for the future, backed up by significant increased investment; adult social care does not yet have either.
- Given the Government's emphasis on shifting from treatment to prevention, it is disappointing not to see specific funding to take forward activity aimed at preventing, reducing or delaying the onset of more acute and costly needs for care and support.
- People drawing on adult social care, and the wider sector which supports them, continue to call for proper reform of care and support so that everyone is able to live their best life. It is therefore disappointing that adult social care is not listed as a priority area for reforming the public sector under Phase 2 of the Spending Review.

4. 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?

- Adult social care has suffered historically from a low public profile which has arguably made it 'invisible' to the wider public. The LGA believes that this could be because many people do not know what adult social care is and how it operates. Additionally, much of the national portrayal of social care, and those who access it, is negative, with the service framed as being in 'crisis', or 'broken', or facing a 'tsunami of need' of 'vulnerable' people. The care workforce is often similarly framed in negative terms, for example, 'unskilled', 'poorly paid' and 'suffering from burn out'.
- Shifting the narrative around social care to something far more positive and aspirational is essential to reducing the invisibility of the sector and helping the public to think of the service as a benefit to society and a priority for investment in all of us. The central hypothesis shared by many in the sector is that political action on care and support will not be affected until the public understand the real value of adult social care – at its best – in supporting people to live the lives they want to lead.
- Meaningful engagement throughout the design and delivery of services is crucial. Central to the LGA's – and councils' – approach is the principle that people with lived experience are an equal source of expertise and insight as other colleagues working in the system. Failing to follow through in this way runs the risk of lip service engagement, which will deter people from offering their time and expertise in the future. We need to think of co-production not just in terms of the two-way relationship between the person who draws on care and their social worker, but also the role of co-production at service level in terms of designing and evaluating services.
- Over the past few years, the Government has produced a [white paper](#) on the future of adult social care (December 2021), a [follow-up plan](#) to the white paper (April 2023), and made

additional funding available, most notably £7.5 billion across 2023/24 and 2024/25 as announced at the [2022 Autumn Statement](#). However, much of the Government's attention in recent times has been on older people, hospital discharge and winter. As important as these issues are, adult social care is about so much more, including services for working-age people with a learning disability or mental health problem, unpaid carers, and the dedicated care workforce which delivers services to thousands of people every day.

- The financial position of adult social care remains seriously challenging. [Surveys by ADASS](#) show that the level of overspending on adult social care budgets in England increased substantially from 2022/23 to 2023/24. Nearly three-quarters (72 per cent) of councils in England overspent on their adult social care budgets in 2023/24, compared to 63 per cent in 2022/23. The overspend nationally for 2023/24 totalled £586 million (based on 145 responses), up significantly from £74 million in 2022/23.
- One-off funding to service recurrent spending is unsustainable. This has very real consequences. [Over 418,00 people](#) are waiting for an assessment, a package of care or direct payment to start, or a care plan review.
- [Care markets remain unstable](#), with many providers struggling. In the past six months 65 per cent of Directors of Adult Social Services reported that providers in their area had closed, ceased trading or handed back council contracts. Investment in prevention also fell from £1,549 million in 2023/24 to £1,428 million in 2024/25. [ADASS' survey](#) revealed that half of Directors (51 per cent) are less than confident that their budgets are adequate to meet their legal duties relating to prevention and wellbeing. The proportion of councils taking a positive investment strategy for preventative social care services has also dropped significantly from 44 per cent in 2023/24 to 29 per cent in 2024/25. All of these issues have a profound impact on people and NHS objectives.
- [It is a similar story with the care workforce](#). Vacancy rates have decreased, but the number of filled posts is still below pre-pandemic levels, and the vacancy rate remains stubbornly high. [Our own research](#) shows that there is a growing reliance on agency staff to plug gaps. This can often be more expensive, does little to properly stabilise the sector, and can impact on the continuity of care which people drawing on it rightly feel is important.
- Stabilising and supporting the care workforce must be an immediate priority. One-off increases in pay and/or retention bonuses would help, but [we need a long-term plan for the care workforce](#), which includes measures to improve pay for the long-term. This needs to be positioned not just as crucial for people drawing on social care, but also crucial in terms of social care's contribution to the economy. [Skills for Care](#) estimate that the sector contributes £55.7 billion gross value added per annum to the economy in England. Local government, and the wider care sector, needs to be appropriately engaged in the Government's work on a Fair Pay Agreement.
- [The Resolution Foundation](#) have calculated that if a living wage for care workers was publicly funded, just under half (47 per cent) of public costs would be returned to the Exchequer through higher personal tax receipts and lower benefit payments. [The Living Wage Foundation](#) has also published interesting research on the real living wage in social care which should be noted.
- The strain on unpaid carers is also a real issue. [Carers UK survey work](#) shows that more carers are cutting back on hobbies and leisure activities, and more unpaid carers are struggling to

make ends meet. Better support to unpaid family carers is important for people's wellbeing, including their ability to access and remain in employment.

- [Demography is a key driver of pressures, but this is not just about growing numbers of older people](#). From 2015/16 to 2021/22, the number of working-age adults receiving long-term care rose by 1.4 per cent, while the corresponding number of older people fell by 10 per cent. In 2021/22, councils spent roughly the same amount of money (£8.3 billion) on long-term support for both working-age adults and older people, despite many more thousands of older people being supported (529,000 older people, compared to 289,000 people of working age).

5. 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?

- We believe that it is not the case that reforms are not happening because of adult social care pressures. Rather, reforms are not happening because the Government isn't prioritising them. We understand that the Government faces a challenging task of building a strong economy and sustainable and inclusive growth in the current fiscal environment. The challenge will be considerably harder if adult social care is not prioritised and funded adequately. In this context, the additional funding of up to £1.3 billion for local government including adult social care in the recent Budget was welcome.
- When properly resourced and organised, adult social care is an important way in which adults of all ages, with different reasons for drawing on care, are able to live their best life. It is critical to a well-functioning NHS, which is more important than ever as we head into winter, and the delivery of the Government's ambitions for the NHS. This includes the health milestone of tackling hospital backlogs to deliver the NHS standard that 92 per cent of people should wait no longer than 18 weeks from referral to start consultant-led treatment of non-urgent health conditions.
- While the recent Budget provided welcome additional funding for local government, its announced changes to employer National Insurance contributions (ENICs) have created significant new cost pressures, which exacerbate the risk of adult social care not being the best it can be. The LGA estimates that ENICs changes create £1.77 billion in additional costs for councils; £637 million for directly employed staff and £1.13 billion through indirect costs via commissioned providers, including £628 million for adult social care alone. This pressure is not the only one bearing down on councils and their partners. In adult social care, increases to the National Living Wage, inflation and demography creates a further pressure of well over another £1 billion.
- The scope for savings and efficiencies is now extremely limited and current funding is insufficient to cover the above pressures, let alone make progress with some of the serious challenges the social care sector is grappling with.
- The Care Provider Alliance estimates that: 73 per cent of social care providers will need to refuse to accept new packages of care from councils or the NHS; 64 per cent will need to let staff go; 76 per cent will need to make cuts to training and resources for staff; and 22 per cent will close down their businesses. The charity sector will likely be hit hard, too, both through the ENICs costs they face and the inevitable reduction in funding from local government as councils do what they have to do to deliver, by law, a balanced budget. Some of these consequences, such as closures, will leave a permanent scar, even if funding increases in the

future. People – those drawing on care and support, those delivering it, and those overseeing its provision – will bear the brunt of these pressures.

- If the Government gets fully behind adult social care, recognises its inherent value to us all, and sees funding for it as an investment rather than a cost, we can avoid the level of risk described above. It is an opportunity that people across the country cannot afford to see missed. We therefore call on the Treasury to work with the care and support sector to either find a way to mitigate the pressures on councils, providers and charities as described above, or use this month's Provisional Local Government Finance Settlement to inject significant new funding into local government so that councils can meet them.
- Looking further ahead, we stand ready to work with the Government, and on a cross-party basis, as equal partners, to bring about the longer-term changes that are needed to build a care and support system that enables everyone to live the life they want to lead. By working together and supporting one another, we can build a system that not only meets the needs of today but also lays a strong foundation for future generations. Teamwork and shared commitment are the keys to success in this vital endeavour.

National Care Service

- Our current system of adult social care already marries national and local inputs. For instance, we have a national framework for eligibility and now a national system of CQC-led regulation of councils' performance against their Care Act duties. This exists alongside delivery of care and support which is overseen locally by local government, whether that be through direct provision or commissioned services.
- Councils work extremely closely with numerous local partners to build an ecology of care and support and wellbeing that plays to the strengths of each area's unique circumstances.
- A National Care Service (NCS) must not be seen purely in terms of what it could deliver for the NHS. Though obviously linked, we would want a NCS to take, as its starting point, full recognition of the huge value of great adult social care to people and communities. A NCS is also an opportunity to rethink how we support and improve people's wellbeing in the wider sense. In this way, we would want to see a real emphasis on prevention and early action at the heart of plans for a NCS.
- Local government is a willing partner on all aspects of reform and stands ready to share its expertise and discuss options with the Government. Central to developing a NCS will be identifying priorities for immediate-, short-, medium- and longer-term action. Councils' perspectives on this crucial part of the debate will be invaluable in shaping a NCS that makes the most progress most quickly. The LGA and councils should therefore be an essential partner in the design of a NCS from its outset.

6. What is the cost of inaction to individuals and how might people's lives change with action on adult social care reform?

- The adult social care system could not survive without the enormous contribution of unpaid carers who provide vital support for thousands of people every day. It is concerning that so many unpaid carers are struggling with their finances and worrying about the future when the economic value of the support they provide is a staggering [£162 billion a year](#). Many councils

rely on, and fund, local carers organisations in the voluntary and community sector to communicate to carers. Funding pressures impact on that commissioned support for carers. GPs also have an important role to play in linking carers to their local council.

- Caring can place a real strain on individuals – emotionally, physically and financially. Carers are more likely to suffer depression, anxiety and stress and nearly two-thirds of carers have a long-standing health condition. The impact is often exacerbated by carers being unable to find the time for medical check-ups or treatment. Personal relationships can also suffer and carers are more likely to be socially excluded.
- Enabling councils to better support the increasing numbers of unpaid carers should be a crucial part of a long-term and sustainable funding solution for social care. As revealed in [ADASS' Spring Survey 2024](#), 88 per cent of Directors of Adult Social Services either strongly agreed or agreed that unpaid carers have come forward with increased levels of need in their local area over the past 12 months.
- Additional funding will allow councils to support the increasing number of carers with a range of services including to help address specific needs, such as supporting carers of people with dementia, carers from Black and ethnic minority communities and young carers. Without adequate funding, more unpaid carers will have to take on more unpaid caring.

7. Where in the system is the cost of inaction on adult social care reform being borne the most?

- Inaction is being felt by both people (waiting lists, strained workers and unpaid carers) and businesses (providers and their contribution to the local, regional and national economy). There have been a number of inquiries and commissions that have pointed towards a brighter future for social care, using the vision put forward by [Social Care Future](#) as a starting point, 'We all want to live in the place we call home with the people and things that we love in communities where we look out for one another doing the things that matter to us'. The Government must work with the sector, and crucially people who use social care services, to expand on their ambition and bring about the changes needed.
- We need a major push on prevention. An incoming government should be ambitious in looking at the case for a prevention grant with spend determined by councils to enable them to properly meet their [Care Act prevention duty](#). This would help expand the provision of short-term care, particularly reablement which is well evidenced. It would widen the remit to include others coming into contact with adult social care who could benefit, beyond the current narrow focus on supporting hospital discharge. It would provide additional supported housing services, given the significant positive impact this has on residents' health, wellbeing and social connections, as well as the role it plays in reducing homelessness and relieving pressures on the care, health, criminal justice and housing sectors.
- The Labour Manifesto rightly identified adult social care as being vital to ensuring that everyone can live an independent and prosperous life. Immediate investment to stabilise the here and now, and pave the way for longer-term reform, is needed. But investing in care and support must also be seen as a key enabler of delivering the Government's mission to build an NHS that is fit for the future, particularly the move to a more preventative model of health and care. More broadly, given its scale and size, adult social care can play an important part in helping to deliver the Government's mission on economic growth.

Social care funding

- The Government should provide an immediate injection of funding to continue tackling the issues facing the care and support sector. This would be a downpayment on a future multi-year settlement for adult social care and would help improve current challenges, including: waiting times for assessments, commencement of care packages, and care plan reviews; unmet and under-met need; provider instability; workforce recruitment and retention pressures; and growing and unsustainable strain on unpaid carers. Such funding would also be a much-needed boost to the voluntary and community sector, bolstering local community capacity.
- The exact funding requirement for adult social care in the longer-term should be identified through a collaborative process, but we broadly support the [Health Foundation's analysis](#) of the uplifts that would be required under the following different scenarios:
 - Meet future demand: £0.6 billion by 2024/25 and £8.3 billion by 2032/33 (a 3.4 per cent a year real-terms increase).
 - Meet future demand and make some improvements to access to care: £3.1 billion by 2024/25 and £11.6 billion by 2032/33 (a 4.3 per cent a year real-terms increase).
 - Meet future demand and cover the full cost of care: £5.4 billion by 2024/25 and £14.6 billion by 2032/33 (a 5.1 per cent a year real-terms increase).
 - Meet future demand and improve access to care and cover the full cost of care: £8.4 billion by 2024/25 and £18.4 billion by 2032/33 (a 6 per cent a year real-terms increase).
- All options for raising revenue and the approach to allocations should be on the table. In our [Autumn Budget and Spending Review Submission 2024](#), we have recommended the following:
 - All disparate funding streams for adult social care to be brought together into a single pot, allocated directly to councils and with no (or only limited) conditions, and put into the funding base to provide certainty and the ability to plan for the long-term.
 - Funding to be more much more outcomes-focussed, linking back to the duties, intent and ambition of the Care Act.
 - End the reliance on council tax and the social care precept as a key means for funding adult social care and instead look to national taxation. Formalise national funding for adult social care but with delivery remaining local and frame this positively (for instance fulfilling the ambitions of the legislation) rather than negatively (for instance 'bailing out councils').
 - Explore the potential for better alignment between adult social care and the benefits system, including for instance Attendance Allowance.
 - Commit to a review of NHS Continuing Healthcare.
 - Consider a different funding model for younger adults and older people to reflect the different life situations faced by people aged 18-64 and those aged 65 and over.

Workforce

- With a workforce of 1.52 million, adult social care is a bigger employer than the NHS (1.43 million). As the NHS and adult social care workforces are in many senses two sides of the same coin – depending on each other to deliver person-centred care and wellbeing – it is essential that any modelling of NHS workforce supply and demand aligns with, or takes account of, projected demand for the adult social care workforce. Skills for Care have estimated that if the number of adult social care posts grows proportionally to the projected number of people aged 65+ between 2022/23 and 2035, an increase of 25 per cent (440,000 extra new posts) would be required by 2035.
- Training and recruiting additional doctors and nurses is important, but so too is ensuring that local health and care systems have a sufficient – and sufficiently mixed and skilled – care workforce including social workers and domiciliary and residential care workers, and other crucial roles which support people who need support to live independently in their own homes or in their communities.
- We welcome commitments to cutting waiting lists in, and transforming the long-term workforce of, the NHS. Adult social care continues to play an important part in mitigating demand pressures on acute hospitals through effective discharge and preventative work to keep people out of hospital in the first place. However, adult social care faces its own significant waiting lists for needs assessments, care plan reviews, and the commencement of care packages. With no comparable government-commissioned plan for adult social care, Skills for Care are leading valuable work to develop a long-term plan for the care workforce. This has the potential to be a crucial foundation for engagement with government on the issues that need to be addressed.
- Whilst the [People at the Heart of Care white paper](#) (December 2021) and the [Next Steps update report](#) (April 2023) contained important initiatives for the care workforce, the latter was widely considered across the sector as a major disappointment and a watering down of ambition of the former. This includes the former's pledge of £500 million for measures to support the care workforce being halved to £250 million in the latter.
- Past governments have acknowledged that the adult social care workforce is bigger than that for the NHS, yet it has nothing comparable to the NHS Workforce Plan. This creates a problem of presentational parity. The future requirements of and for the social care workforce should be a far more prominent consideration for government, both as a standalone priority and in respect of its links with NHS workforce planning. We need a new deal for the care workforce and [Skills for Care's development of a workforce strategy](#) will be key to this.
- [Clear priorities which must be included in a national workforce strategy for adult social care](#) are: staff recognition, value and reward; investment in training, qualification and support; career pathways and development; building and enhancing equality, diversity and inclusion in the workforce; effective workforce planning across the whole social care workforce; and expansion of the workforce in roles which are designed in coproduction with people who draw on care and support, and in roles which enable prevention and support the growth of innovative models of support.
- Improving the pay, conditions and development opportunities of the care workforce is crucial for addressing long-standing recruitment and retention challenges for the benefit of people who draw on care and support, workers and our health service. The LGA notes that whilst the National Living Wage (NLW) increase announced in the Autumn Statement is of course great

for care workers, it is challenging for councils' adult social care budgets given that providers will understandably expect to see their fees increase to absorb the NLW increase.

- While not part of the paid workforce, we also recognise the invaluable role that unpaid carers and volunteers play in supporting people to live the lives that they want to live in their own homes and communities. [There is ample evidence of the growing strain on unpaid carers](#), with many suffering 'carer burnout'. This is troubling in itself but also risks compounding pressures on the paid workforce.
- We owe an enormous debt of gratitude to our frontline care workforce who give so much in supporting people of all ages who have cause to draw on social care. We want to see social care presented as being about 'all of us', not 'them and us'. It needs to invoke shared values, such as caring about each other, rather than, for instance, 'looking after our most vulnerable'. Similarly, we need all voices in the debate to frame social care as an investment and an opportunity, rather than a cost and a problem to be fixed.
- The LGA's May 2024 publication on [The Care Act 2014: Ten years on from Royal Assent](#) provides a number of [articles](#) including from Skills for Care and, crucially, the social care workforce and organisations which represent them. The workforce is fundamentally important to the delivery of the Care Act's aims yet faces serious challenges such as on recruitment and retention, skill gaps, and morale. The articles helpfully identify what is needed to develop, build and support the social care workforce of the future.
- One of the LGA's recommendations in the publication is that there must be recognition of there being no such thing as a 'standard care worker' and develop a comprehensive long-term plan for the care workforce, building on the important work that Skills for Care are leading on and which we know will be an invaluable contribution to the debate. A long-term plan must include a thorough review of care worker pay and conditions, with corresponding increases and improvements respectively. In the short-term, explore the case for one-off increases in pay, and/or retention bonuses, particularly as we head into winter.

8. What contribution does adult social care make to the economy and HM Treasury and how might this change with action on reform?

- Investing in earlier preventative support in social care would improve people's lives and save £3.17 for every pound spent. The LGA's [joint publication](#) with ADASS, Social Care Institute for Excellence, Mencap, Skills for Care, Think Local Act Personal, The Care Provider Alliance and Social Care Future makes the case for a shift towards taking action and offering support earlier, so that more people can live the lives they want.
- Skills for Care's [The value of adult social care in England](#) report shows the adult social care sector and its skilled workforce contributes £50.3 billion to the English economy. The indirect effect of the adult social care sector (resulting from the purchase of intermediate goods and services by the adult social care sector in delivering its services) was estimated to contribute a further 603,500 jobs (424,800 FTEs) and £10.8 billion of gross value added (GVA) to the UK economy.
- Adult social care is often seen primarily as a service for older people, but many who draw on services are younger, working-age adults with disabilities. While their aspirations—fulfilling independent lives, relationships and employment—may align with those of older generations,

supporting them effectively requires a distinct approach. The recently published Country Council Network research – [The Forgotten Story of Social Care](#) – brings to life the scale of the challenge ahead. 40 per cent of people receiving adult social care support in England are working age individuals aged 18–64 with a disabled condition (a learning disability, a physical disability or a mental health condition) who make up the working age adult population, or individuals aged 65+ with a lifelong disabled condition (a learning disability or long-term mental health condition). National expenditure on social care support for working age and lifelong disabled adults has risen by over a third between 2020 and 2023 in England, with forecasts for the 2024 financial year even higher, despite the total volume of individuals in this population supported not having risen over this period. Whole system changes for working age and lifelong disabled adults based on their specific needs, not based on an older adults’ model, is needed.

9. To what extent are the costs of inaction on adult social care reform considered by the Government when evaluating policies, including within the Budget and Spending Reviews? How should these costs be assessed and evaluated?

Royal Commission

- The LGA wants to work closely in partnership with Government on plans to stabilise, strengthen and reform adult social care and support for the long-term. A Royal Commission could be a way to achieve this. But the pace of the Commission’s work will be crucial; time should not be spent diagnosing the problems and identifying solutions given so much work on these two components has already been done. Challenges and their consequences are gripping the service, people drawing on care, and the workforce, now.
- We therefore urge the Government to set a rapid timetable for the work (akin to the Hewitt Review), with clear milestones and early engagement with local government to draw on councils’ expertise and experience.
- Action is needed now, particularly if the full value of adult social care and support (and local government more generally) is to play into the immediate mission of building an NHS fit for the future. Any delay to proceedings risks further negative impacts on people drawing on care and support or people needing to do so and the workforce.

NHS 10-Year Plan

- It is essential that action on adult social care forms a core part of the [NHS 10-year plan](#) – without this, real change and improvement to people’s lives and outcomes will not be possible. It is vital that adult social care is not left behind again and that a long term properly funded plan for social care reform to create a National Care Service is developed and the interconnections with the 10-year plan for health understood. The absence of any announcements on reform, alongside severe escalating financial pressures, and increases in the volume and complexity of demand is becoming more and more of a concern across local government and the wider care sector.
- It is only by fully integrating adult social care into the wider health and care system, councils can ensure that prevention, community-based care, and digital transformation are successful, helping to improve lives and outcomes for people across the country.

December 2024