

Policy News from MHA: September 2015

Welcome to MHA's September monthly policy bulletin.

September has been a busy government policy month. Some key topics have dominated the headlines, with several key Bills being debated such as Assisted Dying. A number of Committee inquiries have also taken place covering housing and fundraising.

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Below are highlights of emerging research and policy in other areas of interest:

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Government



Parliament recess began again from 17 September for the Party conferences and resumes on 12 October.

Progress of legislation and inquiries:

End of Life

- The [Assisted Dying Bill \(No.2\)](#) received much media attention for its second reading debate, with 85 MPs who wished to speak on the subject. MPs voted by 330 to 118 against the Assisted Dying Bill and this Bill will progress no further. Lord Falconer's [Assisted Dying Bill](#) is still on the schedule but unlikely to progress.
- The Public Administration and Constitutional Affairs Committee launched the [Dying without dignity inquiry](#) with a single evidence session on the 15 September. It follows the Parliamentary and Health Service Ombudsman's (PHSO) report in May, which highlighted significant issues in end of life care. Evidence was heard from Care Quality Minister [Ben Gummer MP](#) who dismissed the need for legislation to improve end of life and palliative care, instead suggesting services based on 24 hour provision partnered with services outside the NHS offered solutions. The [Access to Palliative Care Bill](#), which would make provision for equitable access to palliative care services, is due to have its second reading on the 23 October. See also [Social Care – In brief](#)

MHA comments: Excellent end of life care matters to us. Our '[Final Lap](#)' approach has been recognised as good practice within the NHS End of Life Care Programme and the National Council for Palliative Care. This month we have submitted a response to the NICE

consultation on draft guidelines for [Care of the Dying Adult](#), where our response stated that advanced care planning needed greater promotion; better recognition should be given to the fact that for many people their last days of life will be in a care home; and greater support for family and friends also needed more emphasis.

Charities and Fundraising

- The [Charities \(Protection and Social Investment\) Bill](#) completed its journey through the House of Lords. Notable changes include: the introduction of a “disposal of assets” clause by Labour, to prevent charities being compelled to dispose of their assets in a way which is inconsistent with their charitable purposes. This would block the extension of Right to Buy to Housing Associations (in the unpublished Housing Bill); a new fundraising clause has been added by the Government to tighten rules on charity fundraising and follows media reports of aggressive charity fundraising. The date for the House of Commons second reading debate has not yet been announced. The Cabinet Office has published [explanatory notes](#) outlining some of the detail of the Bill.
- The Public Administration & Constitutional Affairs Committee’s inquiry into [Fundraising in the Charitable Sector](#), has focused on the practices adopted by fundraising call centres, the impact on vulnerable members of the public and how regulation might change. During a [Committee meeting](#) evidence was given by Oxfam, NSPCC, Save the Children and the RSPCA and covered the recent fundraising practices reported in the media including; use of agencies, use of funds raised, costs of telemarketing, employment practices (of agencies used), supporter databases and further regulation of the charitable sector. The Committee also heard from the Fundraising Standards Board, the Public Fundraising Regulatory Association and Institute of Fundraising.
- Christopher Graham, the [Information Commissioner](#), also launched an investigation into claims that an 87-year-old man's personal details were sold or passed on by charities up to 200 times, breaking Data Protection rules.
- A [government-commissioned review](#) led by Sir Stuart Etherington, of the National Council for Voluntary Organisations, recommended that:

- The Fundraising Standards Board (FRSB), be replaced by a new regulator, which would report to a parliamentary committee. The body would be funded by a levy on charities, particularly those that spend more than £100,000 a year on fundraising.
- Charities would be expected to register to show their support for the Code of Fundraising Practice.
- The Public Fundraising Association and the Institute of Fundraising (IoF) merge.
- A new "fundraising preference service" is created and overseen by the new regulator, enabling the public to limit contact from charities.
- Charities seriously or persistently breaching the rules would be named and shamed and could be forced to halt specific methods of fundraising until problems were resolved.

Prior to this report 17 well-known charities [wrote an open letter](#) of commitment to a strengthened Code of Fundraising Practice.

[The IoF](#) welcomed the report, "*We will consider Sir Stuart's recommendations in full over the next few days and look forward to playing a full and active role in supporting the new regulator to create the best possible environment for fundraising, and to continue to represent fundraisers and fundraising organisations within the proposed system.*"

[The FRSB](#) said "*We are very disappointed that the review calls for the closure of the FRSB and a new body to be established to regulate fundraising... We strongly believe that a revamped FRSB, properly resourced, would be the most viable and cost-effective way of moving forward in developing better regulation of charity fundraising.*"

- Meanwhile a recent report by [nfpSynergy](#), suggested that trust in charities had decreased in the past few years with a survey of 1,000 people stating they trust charities 'quite a lot' or 'a great deal', down 3% on last year and down 13% since 2013.

MHA comments: Recent examples of fundraising practice highlighted in the media are truly shocking and have no place in charity fundraising. Here at MHA, we want our fundraisers to be able to champion the cause of older people with belief, sincerity and credibility. Therefore, we do not outsource our fundraising work to

any third parties and we do not 'cold call' potential supporters. We have systems and processes in place to maintain clear up to date information about our supporters, including the ability to flag where no further contact is requested or where we are made aware of potential vulnerability. We were one of the first charities to join the Fundraising Standards Board and we have our own Ethical Policy Framework that covers all aspects of fundraising promotion, delivery and engagement. We want people to give to MHA because they feel inspired and encouraged by the good work we do. We are passionate about our work and will not compromise our principles and values for a greater fundraised income via unethical or inappropriate approaches.

Health and Social Care

- The Health Select Committee held an oral evidence session on [The Work of the Secretary of State for Health](#). It discussed key topics with [Jeremy Hunt MP](#) including adult social care. He stated that the care cap would still be introduced "*once the deficit had been eliminated.*" One of the factors he mentioned was that the financial services industry had not developed the products to make the cap work. He added that social care saving needed to be seen as something similar to pensions and he was working with the industry to help ensure this could be done.

The Chair highlighted the disquiet over the way the care cap delay had been announced. Mr Hunt said it was announced to ensure that it was public before the summer recess and before councils spent money for the implementation of the care cap.

On the issue of the gap in social care funding, the Chair asked about projections of the size of the gap. Mr Hunt stressed that this was a provision gap rather than a funding gap. He said that getting the right settlement in the Spending Review was important, along with the integration of health and social care.

MHA comments that much analysis does point to a clear funding gap for adult social care services and reiterates a need for government to find a sustainable long-term solution to the funding of social care and use the Comprehensive Spending Review to find a way to properly fund local authorities, to properly fund social care.

- The Public Accounts Committee has launched an inquiry into the [Care Act first-phase reforms](#), considering the costs of the reforms and the demands they place on local authorities, the timetable for implementation, and preparations for the second-phase.

MHA comments: We intend to contribute to this inquiry when more detail is available.

Comprehensive Spending Review

- The [Association of Directors of Adult Social Services](#) in partnership with the Care and Support Alliance, the Care Provider Alliance and the NHS Confederation warned that “the social care sector is in danger of a deepening crisis which is compromising the dignity, health and wellbeing of older and disabled people, their families and carers, the workforce as well as the economy.” It adds that “An efficient and effective NHS depends on a financially sustainable social care system.”
- The [King’s Fund](#) has also made a submission arguing that if the government is serious in its commitment to health and social care, it must ensure that adequate funds are available in this parliament and beyond. The [Nuffield Trust](#) has surveyed health and social care leaders, who have expressed the view that NHS and social care budgets should be viewed as being interdependent.
- The [Local Government Association](#) highlighted key pressures on Local Authorities for the next five years, including:
 - Extra Deprivation of Liberty Safeguards assessments will contribute to a £10bn increase in costs for councils by 2020.
 - Reducing rents paid by social housing tenants by 1% a year will cost councils £2.6bn and is the equivalent cost of building an average of 19,000 new homes.
 - Introducing the National Living Wage for council staff and care workers over the age of 25 will cost councils £834m a year by 2019/20.
 - Meeting the growing gap between what care self-funders and England's 37 County Councils' Network member councils pay care home providers is estimated to cost

£630m.

- A collective of [London Councils](#) has identified massive pressure on council budgets in London that will lead to a funding gap of over £3bn in the capital by 2020, with the adult social care as the area likely to create the most acute funding issues over the next five years.

See also [Social Care – Funding](#)

Labour Leadership

- [Jeremy Corbyn MP](#) was elected as Leader of the Labour Party with 60% of the vote and [Tom Watson MP](#) was elected as Deputy Leader. During Corbyn's campaign he pledged:

Housing: Decent homes for all in public and private sectors by 2025 through a big housebuilding programme and controlling rents; to stop the Housing Association Right to Buy; co-operative local management models for tenants; national minimum standards for longer tenancies and limits to rent increases.

Health and care: A fully-funded NHS, integrated with social care, with an end to privatisation in health; to reverse the cuts in local authority adult social care; to invest in a national carers strategy, under a combined National Health & Care Service.

Workplace: no zero hours contracts; a higher minimum wage; to scrap employment tribunal fees; to raise the rate of pay for apprentices to £10 per hour, as part of his pledge to introduce a £10 per hour living wage for all workers.

- Key Shadow ministers appointed include:

[Jon Trickett MP](#) - Shadow Secretary of State for Communities and Local Government.

[John Healey MP](#) - Shadow Housing Minister

[Heidi Alexander MP](#) - Shadow Secretary of State for Health

[Barbara Keeley MP](#) – Shadow Minister for Older People, Social Care and Carers

[Luciana Berger MP](#) – Shadow Minister for Mental Health

[Andrew Gwynne MP](#) – Shadow Minister for Public Health

Party Conferences

- The Liberal Democrat Conference ran from the 19-23 September. In his [leadership speech](#), [Tim Farron MP](#), focused on rebuilding the party following the election defeat. Key issues for the party include housing and health. [Norman Lamb MP](#) in his role as Shadow Health Spokesperson, [warned about the emerging crisis in health and care](#) *"We're looking at a shortfall of funding of up to £5bn by 2020... the problem is here and now... I have seen the books and I am deeply concerned. If we carry on regardless, the system will crash."*
- UKIP conference 24-26 September, where Nigel Farage outlined the focus of the party on the EU referendum. The Green Party also held their conference 25-28 September, with a focus on electoral reform and continued commitment to tackling climate change - [click here for an outline and reaction to the Party Leader's speeches](#).

Other Parliamentary and Government News

- The [Enterprise Bill](#) had its first reading on the 16 September. It will make changes to reduce regulation on businesses and modernise business rates. The second reading and debate will take place on the 12 October.
- The [EU Referendum Bill](#) progressed to the House of Lords with an amendment to the referendum question. The [Electoral Commission](#) recommended that the EU referendum question should change from a Yes/No question to "Should the United Kingdom remain a member of the European Union or leave the European Union?" The next debate of the Bill is on the 13 October.
- The [Immigration Bill](#) was introduced to Parliament on the 17 September. Amongst other things it would introduce new laws on immigration and asylum, access to public services dependent on immigration status, and will include the need for a consultation of a new visa levy on businesses that use foreign workers. The second reading debate takes place on the 13 October and may go forward to the Public Bill

Committee for closer scrutiny.

- The [Trade Union Bill](#) passed its second reading on 14 September and will next be considered by a Public Bill Committee for further scrutiny and amendments, which is due to conclude by the 27 October. A [summary of the clauses](#) has been published. Amongst others the [Royal College of Nursing](#) has expressed its opposition to the Bill.
- The [Welfare Reform and Work Bill](#) is currently being considered in a [Public Bill Committee](#) due to complete by the 15 October. They have received evidence from [David Orr of the National Housing Federation](#) and [The Abbeyfield Society](#), who raised the issue of the 1% reduction in rents for social housing. [Emily Thornberry MP](#) has proposed an amendment on the rent reduction, so it will not apply to the tenants of “specified accommodation” – which could include supported accommodation. The Government has also published an [Impact Assessment of Social Rent Reductions](#).

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Ageing

Living Standards

- The [Joseph Rowntree Foundation](#) and Institute for Fiscal Studies have undertaken a two-year study into the living standards of future pensioners. Key points include:
 - Improvements in average pensioner living standards are likely to continue into the start of the next decade. But prospects for future pensioners are mixed.
 - It will also be important to monitor the effect of auto-enrolment and the new greater flexibility in how funds held in defined contribution pensions can be used.
 - The retirement income of future pensioners is likely to be more heavily dependent on their parents’ circumstances than is the case for current pensioners.
 - Working lives are likely to continue getting longer. Policy-makers will need to continue to be aware that not everyone will

be equally able to work into older age and will need to ensure that appropriate policies are in place to support these people.

In brief:

- The [Office for National Statistics](#) (ONS) has published data exploring what has changed to extend life expectancy between 1841 and 2011. In 1841 a newborn boy was expected to live to 40 in 1841, compared to 79 in 2011, whereas a baby girl was expected to live to 42 in 1841 and 83 in 2011. ONS has also published [population estimates](#) of people aged 90 and over in 2014, where over half a million people aged 90 and over were living in the UK. For every 100 men aged 90 and over, there were 249 women.
- In the annual [Global AgeWatch Index](#), Britain was ranked 10th out of 96 countries in the 2015 results for the best places for older people to live, but only came 27th on the measure of health and well-being, partly as a result of its loneliness levels. The top country for older people to live in was Switzerland.
- The [Older People's Commissioner for Wales](#) has launched a survey as part of a 'Say NO to Ageism' campaign, aiming to challenge the myths and misconceptions about older people and change the way society thinks about growing older. The Commissioner will use the experiences collected in the survey to develop a collection of case studies, to highlight both the extent and nature of ageism in Wales.
- Researchers from [King's College London](#) have reportedly developed a way of testing how well, or badly, the human body is ageing, suggesting that it could help predict when a person will die and identify those at high-risk of dementia.

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Dementia

In brief:

- The [All Party Parliamentary Group on Dementia](#) hosted a debate on dementia care services, tabled by [Edward Argar](#)

[MP](#). The event was attended by [Jane Ellison MP](#), Public Health Minister and Government Lead on Dementia. Issues discussed included a call for the Government to commit to achieving a national average dementia diagnosis rate of 75% by 2017 and improved access to post-diagnosis support.

- People who will develop dementia may begin to lose awareness of their memory problems two to three years before the actual onset of the disease, according to a new study by Alzheimer's disease researchers at [Rush University Medical Center](#) in Chicago. "*This study underscores the importance of family members looking for help from doctors and doctors getting information from friends or family when making decisions about whether a person has dementia*" said author Dr Robert S. Wilson.

In September, MHA sponsored the first ever Music Therapy and Dementia Care conference, launched by Adrian Bagg. Lead Music Therapist Ming Hung-Hsu made a keynote presentation, based on his research study, about the therapeutic value of music therapy in helping to reduce agitation, enhance mood and improve the overall wellbeing of people with dementia. The wider Music Therapy Team also made a great contribution by running a range of workshops and roundtable discussions. The conference was organised in collaboration with Anglia Ruskin University and the British Association for Music Therapy. It's helped to raise the profile of MHA's specialist dementia care, which is enhanced by music therapy.

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Health

In brief:

- Jeremy Hunt MP has indicated that in 2016 all patients should be able to access their own [GP electronic record online](#) in full and that by 2018 this record will include information from all their health and care interactions.
- [Public Health England](#) has published the NHS Atlas of Variation in Healthcare, covering a wide range of health data showing variations in access and availability across the UK. In particular, it illustrates wide variations in emergency

hospital admissions for older people. In some areas, older people in nine times more likely than others to be admitted to hospital as emergency cases, as a result of lacking the right care in their local communities. People in Canterbury who are over 75 were most likely to be admitted to hospital as emergencies for a stay of under 24 hours (11,000 cases per 100,000 population). Emergency admissions relating to dementia were most likely in Bradford and least likely in Herefordshire.

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Housing

In brief:

- [Brandon Lewis MP](#) has launched an [expert panel](#) to help streamline the local plan-making process. The panel will aim to provide greater certainty to communities regarding plans for new homes and infrastructure in their area, while speeding up the planning process so developers can get on site quicker.

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Social Care - Funding

- Official figures from the [Health and Social Care Information Centre](#) (HSCIC) have shown a fall in investment in social care despite NHS funding transfers. Spending on adult social care

dropped 8% in real-terms under the coalition government. A total of £17.2bn was spent on adult social care on 2014-15, a reduction of 1% in real terms from the previous year and an 8% drop from 2009-10, the year before the coalition entered government. The figures include: local authority spending; income councils received from people that self-fund their social care; and funding transfers from the NHS. The amount of health service cash transferred to social care rose from £620m in 2011-12 to £1.1bn in 2014-15.

- A new research paper from Conservative think tank [Bow Group](#) on the delayed care cap concludes that the £75,000 cap on an individual's contribution to their own care is too high to provide the protection it intended. As the cap does not include living costs they argue that it is not a true reflection of the cost of long-term care. They suggest that older people's care should not be cost-capped on personal wealth, but on the intensity of care and the length of stay in assisted residential accommodation that each person needs.
- The [Department of Health](#) has announced a review of the rate paid by the NHS to private care providers (nursing homes) for nursing services. Registered nursing care for residents, who are assessed to be eligible, in nursing homes is funded by the NHS. The rate payable for this financial year is currently £112 a week per resident. This review will consider whether the rate paid is reflective of the costs of providing this important service and supports high quality out-of-hospital care. NHS-funded nursing care was introduced by the Health and Social Services Act 2001, which made care provided by registered nurses in nursing homes an NHS responsibility.
- The [Dunhill Medical Trust](#) has launched a new strand of funding to test a community-based approach to social care for older people. [Trustee John Ransford](#) says that there is not enough money in the system for social care, "*The long-term answer to this care crisis is surely to concentrate on health, rather than ill-health and disease, with medical and social care delivered in people's own homes, residential centres and other community settings.*"

Social Care - Workforce

National Living Wage

- Business Secretary [Sajid Javid MP](#) announced [measures](#) to ensure compliance with the NLW. A consultation of these measures will take place in the Autumn. The measures include doubling the penalties for non-payment of the National Minimum Wage/National Living Wage, increasing the enforcement budget, setting up a new team in HMRC to take forward criminal prosecutions and potentially disqualifying those found guilty from being a company director for up to 15 years.
- The think tank [Institute for Fiscal Studies](#) has rejected Government claims that the NLW would compensate for cuts to tax credits and welfare payments. Their report finds that the households losing the most from the tax and benefit reforms, are not the same households gaining from the new NLW.
- In the first of a series of reports on the NLW, the [Resolution Foundation](#) considers who specifically will gain from its introduction. Key findings include:
 - 4.5 million employees will see their hourly wage rise as a result of introduction of the NLW in 2016.
 - By 2020, a total of 6 million employees, 23% of all employees in Britain, are likely to have received some increase in their pay as a result.
 - The NLW is expected to boost the wages of 29% female employees by 2020, compared with 18% of men.
- The second report from [Resolution Foundation](#) considers how the added NLW cost will be distributed across employers, taking into account industry, occupation, sector and size. It suggests a picture develops of a divide in the labour market, with the NLW appearing to represent only a relatively small additional cost for some employers while looking more considerable for others. It speculates that least impact will be in the health and education sectors, with the greatest impact taking place in the residential care and food and drink sectors.
- Both [Dr Sarah Wollaston MP](#) and [Paul Flynn MP](#) asked Parliamentary questions about what assessment the Government will make on the social care sector. The

Government responded by stating it carried out an analysis of the impact of the NLW and will publish a full impact assessment for the introduction of the NLW alongside the implementing regulations.

MHA comments: We have provided a response to the Low Pay Commission's consultation on the NLW. MHA like much of the care sector are supportive of both the Living Wage and the introduction of the National Living Wage. But we have emphasised the need for Local Authorities to receive adequate funding from the Government to meet their social care duties and responsibilities, otherwise this policy will have serious consequences for the care market.

Nursing Shortages

- [NHS Employers](#) has written to Home Secretary [Theresa May MP](#) urging that nursing be put on the shortage occupation list for the next two years. They warned that immigration rules are compromising patient safety, and that clinical services will be compromised in the coming winter months. The letter references NHS organisations, independent health and social care providers as all experiencing recruitment difficulties. They will also be submitting evidence on behalf of the NHS to the review commissioned by the Migration Advisory Committee.
- The [Centre for Workforce Intelligence and Horizon 2035](#) have published interim analysis of the future challenges and opportunities for the health, public health and social care workforce. It projects that demand for health and care skills could grow more than twice as fast as overall population growth by 2035. Much of this growth is driven by increasing healthcare and support demands associated with long term conditions. They also suggest a growth in demand for lower levels of skill, such as those associated with unpaid care, support carers and NHS bands 1-4, outstripping growth in demand for higher skill levels associated with medical and dental professionals.

Home Care

- The [National Institute for Health and Care Excellence](#) (NICE), published new guidance on home care/domiciliary care, recommending that home care workers should make sure their support focuses on what people can or would like to do

rather than a “one size fits all” service. Following reports of visits lasting just 15 minutes, NICE advises that home care workers should be given enough time to do their job without being rushed or compromising the dignity of the person who uses services. This includes having enough time to talk to the person and their carer, and adequate travel time between appointments.

- The [European Court of Justice](#) has ruled that journeys made by workers without fixed or habitual place of work between their homes and the first and last customer of the day constitute working time. Excluding such journeys from working time would breach health and safety law. This has particular implications for employers of home care workers. [Association of Directors of Adult Social Services](#) Vice President Harold Bodmer said: *“Although we welcome the Courts ruling, ADASS is well aware that it may impose further costs onto a care sector already reeling from five years of financial cutbacks. Ministers and officials now conducting the current Spending Review really must ensure that these extra costs, along with many other incurred in the past, are responsibly factored in to the process.”*

In brief:

- A new framework for ensuring consistent end of life care in hospitals, care homes and in hospices has been published. The [Ambitions for Palliative and End of Life Care](#), is aimed at local services and outlines six principles so that people who use services have fair access to care, and that any care is based on individual needs.
- The [Local Government Ombudsman](#), who monitor both local government and social care complaints, has published a report to learn lessons from complaints. The report finds that in some cases councils have provided confusing or incorrect advice, not provided enough choice, have abdicated responsibility for top-up fees (although there were cases of provides charging top-up fees without the council’s knowledge) and assessed finances before assessing need.
- HSCIC have published findings from the [Personal Social Services Survey of Adult Carers in England, 2014-15](#), which found that almost 2 in 5 (38%) carers reported that they spend 100 hours or more per week caring for their loved one

and almost half (47%) of carers don't have enough social contact with people; and 15% have so little social contact with people that they feel socially isolated. [Carers UK](#) warns that society and public services have yet to grasp how challenging and isolating looking after a loved one can be.

In September, MHA has also responded to the government's Cutting Red Tape in Care Homes review. We were able to provide evidence of duplication and a lack of coordination between inspecting organisations. We have called for greater streamlining and standardisation of paperwork and sharing of information across and within departments of inspecting bodies.

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Look Ahead

- UK Older Persons Day: 1 October
- Conservative Party Conference: 4-7 October
- Parliament returns: 12 October

If you have any feedback that will help us improve our MHA Policy news, please tell us - liz.jones@mha.org.uk

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Some information sourced from [DeHavilland](#).

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MHA is a charity providing care, accommodation and support services for older people throughout Britain. Our mission is to improve the quality of life for older people, inspired by Christian concern.

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