Dear Prime Minister,

We are a new coalition of health organisations which has been formed to support a long-term settlement for social care services in England. Finding a sustainable solution to how we fund and provide care and support in England is among the greatest challenges our country faces. The impact on the public has been profound, with record numbers of people now left to struggle each day without the care and support they need. Social care is on the brink of collapse and the sector has been waiting two years for the government to bring forward proposals in a green paper to address these problems. We believe it is the time to put this right.

Our 15 organisations – all working in the health sector – have joined forces to establish this coalition. Our aim is to raise awareness of the perilous state of social care services, to demonstrate current levels of unmet need, and to work with you to make sure we can create a sustainable social care system. A core element of this will be a long-term funding settlement, backed up with quality advice and support to help people plan for their future care.

We know you share many of our concerns and we would like to thank you for your commitment to solving the crisis in social care. Your leadership – and that of your colleagues – will be vital.

What are we calling for?

Our Health for Care coalition has developed a set of principles upon which we believe a sustainable social care system should be based. We hope they will be a useful contribution to the debate ahead of the publication of the adult social care Green Paper. Alongside the principles, we have three recommendations that we believe are critical to achieving a long-term settlement for social care:

1. Eligibility should be based on need and must be widened to make sure that those with unmet or under-met need have access to appropriate care and support. Around 2.1 million people in the UK were estimated to have received some level of informal care in 2014, but the number of family and friends providing unpaid care in England increased from 4.9 million in 2001 to 5.4 million in 2011. Moreover, Age UK has identified that at least 1.4 million people have unmet or under-met need.

2. Any new settlement should provide secure, long-term, funding at a level to enable the social care system to operate effectively and deliver the outcomes that people want and need. The settlement needs to address immediate needs from April 2020, as well as putting the social care sector on to a sustainable path for the longer term. That will require the right funding, workforce and a diverse and stable market of providers. This will need to be supported by good quality, trusted information and advice to help people navigate the care system.
effectively. The Spending Review presents an essential opportunity to invest in social care at the same scale as the Government is now investing in the NHS.

3. A recent report commissioned by the NHS Confederation, and undertaken by the Institute for Fiscal Studies and the Health Foundation, calculated that social care is facing high growth in demand pressures, which are projected to rise by around £18 billion by 2033–34. That means social care funding would need to increase by 3.9% a year to meet the needs of an ageing population and an increasing number of younger adults living with disabilities. We recognise that any significant additional funds must be accompanied by reform and improved service delivery. Social care services and the NHS are working together to transform and integrate local care services, but they can only go so far when services are being placed under so much strain.

The goal should be to deliver a settlement for social care in England that would last for generations.

Why is this needed?

The NHS was set up to make sure that everyone had access to good healthcare, regardless of their wealth. We believe that this should be no different for those needing social care.

Despite the importance of social care in enabling people’s independence and dignity, successive governments have failed to adequately support the sector. There are around 1.4 million older people who are not able to access the support they need. As things stand it is inevitable that this number will rise. There are 850,000 people with dementia in the UK, that figure will increase to more than 1 million by 2025. Already up to 58 per cent of people over 60 are living with at least one long-term condition such as diabetes, arthritis or hypertension, the numbers with co-morbidities has been rising by 8% a year. The task then is to support an ageing population, with increasingly complex needs. It is little wonder that this is not being achieved given that the funding of social services for home help and other care funding has fallen by 11 per cent in the last five years.

We are also conscious of the families who struggle to support themselves and their loved ones. There are at least 5.4 million unpaid carers, and half of all home owners are not confident of having enough money to fund their own care, even if they sell their home. The personal impact on individuals and families can be devastating.

Meanwhile the implications of failing to reform social care will continue to be felt by other public services, particularly the NHS. Indeed, we are clear that a failure to address the crisis in social care will undermine the ambitions of the NHS Long Term Plan. We already know that a lack of care and support packages in communities across some parts of the country has been a major reason why people are often delayed in hospital for longer than they need to be and we have now reached a point where we cannot go on like this. An effective and functional adult social care system is vital for the health, wellbeing and independence of so many and it is essential for our NHS to survive and thrive.

What needs to happen now?

We appreciate the scale of the challenge, but we also recognise the human cost of inaction. Given your record of investment and commitment to the NHS, we very much hope that you will work towards delivering this sustainable social care system, backed by a new, long-term funding settlement.

We would welcome a meeting with you to discuss the issues raised in this letter further.

Yours sincerely,
Niall Dickson
Chief Executive, NHS Confederation

Julie Wood
Chief Executive, NHS Clinical Commissioners
(part of the NHS Confederation)

Sean Duggan
Chief Executive, Mental Health Network
(part of the NHS Confederation)

Dr Bruno Holthof
Chair, Shelford Group
Chief Executive, Oxford University Hospitals
NHS Foundation Trust

Dr Minesh Patel
Chair, National Association of Primary Care

Prof Andrew Goddard
President, Royal College of Physicians

Prof Carrie MacEwen
Chair, Academy of Medical Royal Colleges

Chris Hopson
Chief Executive, NHS Providers

Chris Askew
Chief Executive, Richmond Group of Charities

Prof Helen Stokes-Lampard
Chair of Council, Royal College of General Practitioners

Dr Katie Petty-Saphon
Chief Executive, University Hospitals Association

Prof Tahir Masud
President, British Geriatrics Society

Rachel Power
Chief Executive, Patients Association

Jeremy Taylor
Chief Executive, National Voices
Nine key principles upon which a new social care settlement should be based

1. **Integrated care:**
   Care and support should be integrated around the needs of those using the service along with those of their families and carers. The NHS, social care, housing and voluntary sectors should work together seamlessly to maximise people’s independence, health and wellbeing.

2. **Personalised care:**
   Care and support should give the maximum possible control to those receiving care and support, their families and carers.

3. **Community at the heart of a diverse sector:**
   The social care system must support a diverse and stable market of providers capable of offering service users a choice of high quality, safe options within their community.

4. **Strong and supported workforce:**
   Those who work in social care should be supported and valued to deliver the highest standards of care and support possible.

5. **Prevention is better than cure:**
   Prevention should be at the heart of health and social care provision. Health and care services should be designed to work more effectively together to provide the right treatment and care at the right time in the right place.

6. **Advice and guidance:**
   Citizens should have access to clear advice and guidance on what care and support is available, how to access it and how best to plan for their futures in terms of the social care provision both they and their families may need.

7. **Need not ability to pay:**
   Eligibility should be based on need and must be widened to ensure that those with unmet or under-met need have access to appropriate support.

8. **A fair system that lasts for generations:**
   Any new financial settlement for social care needs to provide secure, long-term, sustainable funding at a level that ensures the system can effectively function and deliver the outcomes set out as part of these principles.

9. **Parity of esteem:**
   The contribution of social care to people’s wellbeing should be fully recognised and receive parity of esteem with the NHS, including when it comes to future funding increases.