

Rural Services APPG

All-Party Parliamentary Group on Rural Services

3rd July 2018 at 3.30pm

Room C1, 1 Parliament Street

INQUIRY INTO THE FUNDING OF ADULT SOCIAL CARE IN THE RURAL CONTEXT

The Purpose of the Meeting was the first discussion on matters relating to the funding of Adult Social Care (ASC) in the rural context. The APPG had decided to conduct an Inquiry into this matter in the light of a proposed Government Green Paper on the subject across both urban and rural areas.

It had recently been announced by the then Secretary of State for Health and Social Care (The Rt. Hon. Jeremy Hunt, MP) that the publication of the Green Paper would not now be until “the Autumn” (of 2018).

PRESENT

Philip Dunne MP Co-Chair (in the Chair)
Rebecca Pow MP Co- Chair
Lord Cameron of Dillington
Lord Crathorne
Peter Aldous MP (Waveney)
David Drew MP (Stroud)
Holly Bragg - Office of Ruth George MP
Eleanor Millar - Office of Ruth George MP
Jonny Haseldene - Office of Anne Marie Morris MP
Tim Goodship (Defra)

In attendance (Secretariat)

Graham Biggs MBE -RSN
Ivan Annibal – National Centre for Rural Health & Care
Jessica Sellick – National Centre for Rural Health & Care

Apologies

Anne-Marie Trevelyan MP (Berwick-upon-Tweed)
Anne-Marie Morris MP (Newton Abbot)
Rt Hon Owen Paterson MP (North Shropshire)
Tim Farron MP (Westmorland & Lonsdale)

The Rt Rev. the Lord Bishop of St Albans (House of Lords)
Martin Gorringe (Defra)
Jessica Parsons (Defra)
Cllr Cecilia Motley (Shropshire Council)
Paul Blacklock (Rural England CIC & Calor)

MINUTES

The Minutes of the Meeting held on 24th April, 2018 (including the letter sent to the Transport Minister following the meeting) had been circulated and were approved as a correct record.

A copy of the response received from the Minister had been circulated and was noted

The Chairman, Philip Dunne, reported that the Department of Transport were advising both Local Authorities and Community Transport providers not to take any precipitate action but to await the Government's response to the Consultation

INQUIRY INTO THE FUNDING OF ADULT SOCIAL CARE IN THE RURAL CONTEXT

(a) Joint Secretariat for the Purpose of this Inquiry

The RSN is the APPG's standing secretariat. The NCRHC is a new body which has been formed to address the challenges of providing Health and Social Care across Rural Settings in the UK. It is a Community Interest Company with representatives on its board drawn from: The Academic Health Science Network, Local Government, Public Health England, the Rural Services Network and the Voluntary and Community Sector. It has a lead Academic Partner – the University of Lincoln and has received funding from a number of bodies including Health Education England. The organisation has four themes associated with its mission: workforce, technology, data/insight and research. The two organisations have agreed to work together to support the APPG in the conduct of the Inquiry.

(b) The Seven Principles which will Guide the Government's thinking

The Minister responsible is the Health and Social Care Secretary, (then Jeremy Hunt, MP) who in March 2018 set out the seven principles, which will "guide the Government's thinking ahead of the social care green paper". These are:

- quality and safety embedded in service provision [SEP]
- whole-person, integrated care with the NHS and social care systems operating [SEP] as one [SEP]
- the highest possible control given to those receiving support [SEP]
- a valued workforce [SEP]
- better practical support for families and carers [SEP]
- a sustainable funding model for social care supported by a diverse, vibrant and stable market [SEP]

- greater security for all – for those born or developing a care need early in life and for those entering old age who do not know what their future care needs may be ^{SEP}

Care for younger adults, which accounts for almost half of all council spending on adult social care and includes the fastest growing element, learning disability, is to be excluded from the green paper. Instead, it will be reviewed by “a parallel programme of work” led jointly by the departments of health and communities and local government.

(c) Proposed Activities

The main focus of the APPG’s Inquiry will be the seven principles referenced above as they relate in the rural context

The Secretariat prepared an initial evidence base for the APPG to consider drawn from both primary and secondary data.

The secondary data analysis was based on a Rapid Evidence Assessment of published data. The aim of the review will be to draw together key evidence from academics, policy makers and practitioners. It will involve the collation of a range of journal articles, reports, discussion papers and think pieces from organisations and professionals involved in issues relating to the above themes. It will use a search string approach based on key words pertinent to the subject. It will include exclusion criteria, inclusion criteria and limitation criteria to enable us to hone the search as effectively as possible. A number of data sources will be used: (i) Academic databases and search engines (e.g. Web of Science, Interscience, CABI) (ii) Internet search engines (i.e., Google). (iii) Relevant businesses and consultancies (iv) Relevant professional and technical bodies.

The primary data review followed the form of a call for evidence distributed amongst all first-tier authorities with a significant rural component. The call for evidence was distributed to Directors and Portfolio Holders with responsibility for Adult Social Care by the RSN. It will also be distributed to key stakeholders involved in other aspects of rural social care by the NCRHC. The theme of the call will be their views on the how the seven principles referenced for the review manifest themselves in their operational settings.

(d) Discussions at this initial meeting of the APPG Inquiry

The Joint Secretariat had circulated a report which had three parts:

- Part 1 – Context for the APPG Inquiry (summarised above)
- Part 2 – Survey Results from the Primary Data Review
- Part 3 – Broader Context

A copy of the submission of the RSN to the Joint Health and Communities Select Committees Call for Evidence was also circulated as further Context.

The discussion covered the following areas:

Care workers / staffing:

- Distance to travel to provide care.
- The recruitment and retention of care staff e.g. issues of seasonality, churn and reasons for leaving.

- The high cost of housing in rural areas for care staff (both private rented and for sale).
- Examples of good practice in the care sector e.g. Community Catalysts.

The health and care needs of older people:

- The increasing ageing population in rural areas compared to urban areas yet there are variations in the funding formulae.
- Where do older people want to move to / live when they retire or downsize?

Funding

- What is the cost of care per head?
- Bringing the NHS funding formula closer to parity – within 5% of average CCG per capita. The importance of understanding where the formula came from and how it has developed was underlined. There was a discussion around how the current formula (as with most formulae which distribute national funding is often skewed in favour of metropolitan areas.
- Rural proofing.

Housing

- Adapting a family home for an older person i.e., a granny or granddad flat.
- The role of supported and extra care housing.
- Providing aids and adaptations to help older people maintain their independence in their own home – these aids and adaptations may need to change over time to respond to changing health and care needs.
- Enabling housing in rural areas, not a ‘no build’ approach.
- How people aged 85+ years that stop driving find it increasingly difficult to live in a rural area and have to move to a town, away from their support network.

Transport

- Lack of public transport in rural areas.
- The cost of travel in rural areas to get to services.
- Seasonality and impact of winter driving conditions on older people.
- Examples of successful community transport / volunteer driver schemes?
- How can we provide care closer to the home to prevent older people from having to travel to meet their health and care needs e.g. access GP surgery? E.g. Bainbridge Care Home acts as a service hub for wider rural community in addition to supporting its residents.

Technology

- How to maximise access and referrals to e-medicine and tele-health.
- Importance of high quality Broadband
- How there is not a technological solution to every health and care matter.

Gaps

- Working age care and children’s services – these will be parallel work streams undertaken by Government and will not directly form part of the Green Paper.

- It was noted in Kent how spending on children's services now outweighs spending on adult social care.

(e) Next Steps

- 1. The Joint Secretariat to seek to gather further data and evidence, including:
 - contacting the county trade associations in each county, particularly in the 12 rural areas where responses to the evidence call were received to find out about rural staff costs (and how these compare to costs in urban settings) and any cost challenges in rural areas.
 - the 12 Local Authorities responding to the evidence call be asked to confirm their increase in spending on social care.
 - the Chairs of the APPG ask the House of Commons Library for data on ageing population projections by each Local Authority area, including the 12 areas that submitted information to the evidence call.
 - Sourcing good practice examples – including inviting Sian Lockwood from Community Catalysts to provide written submission to the APPG and/or oral evidence in the autumn.
 - Providing this updated / more in-depth evidence base would generate a better understanding of: (a) the percentage of older people in rural areas with health and care needs and projecting this forward [how does this compare to urban areas?] and (b) identify where the rural pinch points are and how these are distinctive from urban areas. (c) If/how Local Authorities are planning for these health and care needs – prevention and/or funding?
 - The updated paper resulting from this revised evidence base would focus on 2 main areas: (1) funding – rural premium/fair distribution of funding, and (2) preventive and other solutions/good practice in rural areas. The paper should be a composite of the existing work, new/updated data and evidence and be produced in advance of the Green Paper. The need to avoid special rural pleading was highlighted.
 - The APPG will reconvene to discuss the paper in the middle of September (between 4th September when Parliament resumes after the Summer Recess and 13th September when the Party Conferences take place (House returns 9th October).
 - The Chairs of the APPG indicated they may have a discussion with Ministers (e.g. health, communities & local government) in the Autumn.