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Care Bill becomes Care Act 2014

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Care and Support Minister Norman Lamb talks about the biggest reforms to the social care system in more than 60 years.



The Care Act represents the most significant reform of care and support in more than 60 years, putting people and their carers in control of their care and support. For the first time, the Act will put a limit on the amount anyone will have to pay towards the costs of their care.

And, crucially, the Act delivers key elements of the government's response to the Francis Inquiry into the awful events at Mid Staffordshire hospital, increasing transparency and openness and helping drive up the quality of care across the system.

Care and support is something that nearly everyone in this country will experience at some point in their lives; even if you don't need care yourself, you will probably know a family member or friend who does, or you may care for someone. And many more of us will need care in the future so it is important for us to have a modern system that can keep up with the demands of a growing ageing population.

Until now it's been almost impossible for people who need care, carers, and even those who manage the care system, to understand how the previous law affecting them worked. Over nearly 70 years it has been added to again and again and is out of date and confusing. The Care Act has created a single, modern law that makes it clear what kind of care people should expect.

To help make things clearer we have introduced a minimum eligibility threshold across the country – a set of criteria that makes it clear when local authorities will have to provide support to people. Until now, local authorities have been able to decide this threshold themselves, meaning decisions varied from place to place. And, in the face of financial pressures, a number of councils have raised their threshold level in recent years. In future, councils will not be allowed to tighten their thresholds beyond this minimum threshold, giving those who are eligible peace of mind that they won't have their care taken away from them because of some arbitrary change to the criteria.

This isn't just about making things easier to understand – it's also about changing the way we care for people. Central to the Act is the concept of wellbeing. First and foremost councils will now have a duty to consider the physical, mental and emotional wellbeing of the individual needing care. They will also have a new duty to provide preventative services to maintain people's health.

Until now, we've had a one size fits all approach to care. The focus has been on what disabilities someone has, or what services local authorities can provide, rather than on the individual. That's disempowering. So for the first time the system will be built around each person – what they need, how they can best be cared for, and what they want. By providing and legislating for Personal Budgets in the Care Act we are giving people the power to spend money on tailored care that suits their individual needs as part of their support plan.

We know that one of the biggest concerns people have is how they'll pay for their care. Until now people have unfairly faced losing almost everything they've worked hard for in order to get the care they need – in the worst cases, many have to sell their home or exhaust their life savings.

That's why in 2010 we asked the economist, Andrew Dilnot, to look into how this system of funding social care in England could be changed to make it fairer. Following his recommendations we are bringing in new measures to give people greater peace of mind that they'll get the support they need without the worry of facing unlimited costs.

We have put forward a new system which will cap the amount people have to spend on the care they need, regardless of how much they have in savings or assets. Once that cap on care of £72,000 is reached the state will pay those costs. On top of this we have increased the means testing level so that government help kicks in far earlier than before, meaning people with modest wealth will be eligible for state help towards that cap. This will mean 35,000 more older people will get help with their care costs when the system comes into force from April 2016. And by 2024 to 2025 up to 100,000 more people will benefit financially as a result of our reforms.

Councils will have to offer information and advice to help everyone understand what support they'll need to help them better plan for the future. And every council will have to offer a deferred payment scheme, meaning no one should be forced to sell their home during their lifetime in order to pay for their residential care. People pay for their care costs now, and will continue to do so in the future subject to the cap, but these changes will give people more choice and control over how they'll pay for it.

As well as giving people more choice we have to give them better information in order to identify good care – and give them an opportunity to give feedback on the service they're getting. We've set up new online provider profiles (a description of the care offered) on the NHS Choices website that will help people choose, compare and comment on care homes and other care services. A fully open and transparent system like this will leave bad care with nowhere to hide, meaning better standards across the board.

We're also getting tougher on those who deliver bad care. We're bringing in stronger regulatory powers, including prosecution where necessary, and the Chief Inspector of Social Care will be able to hold providers of care to account when they provide poor care.

And this Act isn't just about those who receive care – in an historic step forward we're giving carers new rights to support that put them on the same footing as the people they care for. In the current system, local authorities weren't required to provide support to carers. We are changing that. All carers will be entitled to an assessment. If a carer is eligible for support for particular needs, they will have a legal right to receive support for those needs, just like the people they care for.

And of course, we have to find a way to fund all these changes. That's why the £3.8 billion announced in the Spending Review settlement to bring together health and social care budgets, and make sure everyone gets a properly joined up service, is so important. All too often we see people falling through the cracks between the NHS and care and support provided in the community – different parts of the system don't talk to each other or share appropriate information, so people don't get the support they need. That's why we have made a commitment to make joined-up health and care the norm by 2018.

Over 4 years we have worked collaboratively to develop the most comprehensive overhaul of social care since 1948 and together we now need to focus on making these reforms a reality. We will shortly be launching a consultation on draft regulations and guidance for Part 1 of the Care Act (<http://careandsupportregs.dh.gov.uk/>) and I urge you to participate and continue to share your knowledge, experience and expertise with us.

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