

Living good lives in the place we call home



An outline programme for the next government to ignite the transformation of care and support

What is social care for?

“We all want to live in a place we call home with the people and things we love, in communities where we look out for one another, doing the things that matter to us”.

#SocialCareFuture, a growing movement for change, believes that the function of social care should be to support everyone to achieve this, at every age and stage of life. Big change is needed to realise this. It is time to lay the path for this change.

Currently, social care is both under resourced and under imagined. Understandably and appropriately many have given serious attention to the former, while the latter has largely been neglected. However we do see many pockets of brilliance today, with creative, resourceful initiatives, that could grow, thrive and spread to begin the sustainable shift towards our shared vision. They show us that a brighter future is possible. This is the challenge and opportunity for the next government – to take the first steps towards this future.

The shift we need

Currently the system struggles and often fails to realise its statutory purpose to promote individual wellbeing. Systems for assessment, care planning and commissioning are largely focussed on rationing and directing people into “placements” from a very limited menu of options mostly focussed on time and task, life and limb care. This isn’t something any of us want for ourselves or our loved ones. As well as resource scarcity and capacity issues this

system is underpinned by elements of policy, regulation and practice that have kept it frozen and struggling to innovate and humanise.

This approach to social care is unsustainable, struggling to “respond to demand” rather than tapping into, releasing and helping grow the resources of communities and other public services and benefitting from the ideas and experience of the people simply deemed “users”. This is inefficient and wasteful.

It doesn't have to be like this. We believe a different approach will bring into being a thriving wellbeing ecosystem of formal and informal services, relationships and resources that we and people we care about can draw on to live our lives with meaning, purpose and connection at every age and stage of life. More resources are needed, but they also need to be much better used.

Section 1 of the Care Act 2014 places local authorities under a general duty to promote individual wellbeing. We believe that this, and tackling wellbeing inequality, is the right focus for adult social care policy and practice, and offers a best focal point for coordination and integration with other areas of policy and services, including our health system. However, the ambition of the Care Act to give effect to a shift from ‘arranging care’ to promoting individual wellbeing has yet to be realised.

All of our material and spiritual wellbeing derives from and is sustained through being able to live safe and well in the place we call home, through positive, nourishing relationships, through doing the things that matter to us from which we derive a clear sense of purpose and by having and feeling ourselves to have agency and control over our lives. Supporting people to achieve, sustain or repair these elements of wellbeing at every age and stage of life should be the business of adult social care. This is the best way for social care to help grow a sustainable approach to promoting health and to contribute towards the building of connected, resilient communities as we navigate the many challenges of the coming decades.



(Illustration from Crowther, N (2022) ‘Place, People, Purpose and Power – promoting the wellbeing of people living with dementia through personalised care and support’ published by DCAN)

Moreover, noting that s2 of the Care Act requires local councils to take steps to prevent or reduce the need for care and support, we believe a rebalancing is required, investing

resources in the building blocks of wellbeing through early action, deep personalisation and imaginative, flexible solutions. This demands a reimagining of when, where and how needs should and can be met, flexibly and creatively drawing on and stitching together formal paid support with informal resources and relationships, operating at the interface of social care, public health and community development.

Making a start

It's clear that the number of us who have reason to draw on support of some kind is already unmatched by the public resources that are being made available for adult social care. Our public social care system is fraying. This gap will continue to grow without a new financial settlement, which we hope a new government will prioritise. Of equal importance though is how our existing and future public resources are invested. We can begin to change this now.

We propose concerted action at every level, via a partnership involving national and local government, public services, voluntary groups, local communities and individual citizens, to give effect to three interlocking shifts in focus, effort and ways of working. These are:

Early action – from crisis management to acting “upstream”

It has long been common sense that ‘prevention is better than cure’, yet our shared public resources are overwhelmingly devoted to addressing the acute symptoms of having failed to act before problems escalate. This has only accelerated through the longstanding under-investment in the budgets committed to social care and public health. The effect has been a ‘doom loop’ whereby dwindling investment in early action, caused more of us to experience acute and costly challenges in our lives. Redirection of a portion of public resources ‘upstream’ to reach people before significant challenges emerge or escalate makes good sense socially and economically and focuses necessary long-term support appropriately.

Sharing power - doing with people, not to people

As people, families and communities we are creative, innovative and enterprising and willing to support one another, but we are too often denied the chance to influence decision-makers, direct how public resources are invested or self-direct individual solutions that we know will work best for us. Public services too often ‘do to’ people, not with, alongside, or in support of people’s own agency. Moreover, people are too often in the dark about their rights, entitlements or possibilities and the system undermines people’s own capacity, for example through charging for care in ways that make people poor. Changing this promises to building confidence and to untap huge energy, ingenuity and social innovation.

Unlocking all resources – harnessing, growing and making best use of all available resources

Our public finances are severely stretched and our publicly funded social care system is as a result focused above all else on managing scarcity. Yet ironically this often means that the range of resources of our communities and the opportunities for diversification and growth are overlooked. Targeted investment and reforms to commissioning could begin to unlock resources and energy in our local communities, with broad social and economic benefits – building assets not responding to deficits

National and local government action

Other groups and bodies concerned about social care will present powerful arguments for resources to “stabilise” social care with a particular focus on funding to build capacity and support the “workforce” to sustain and build levels of support which are under very great strain. We support calls for significant additional funding. We also caution that attending to the under-resourcing problem without a focus on the under-imagining challenge will leave social care both unsustainable and unacceptable. Resources and attention directed only at existing models of support and workforce roles will not be enough. A new government has the opportunity to set social care off in a positive new direction by creating some space for longer term transformation. Starting with some affordable actions in a first term will open up this space.

To start to make this shift there are key roles for local and central government. Local government (and their partners) need to work in closer partnership with people who draw on support and local communities to begin the shifts to policy and practice. We have welcomed [Time to Act](#), published by the Association of Directors of Adult Social Services (ADASS) as a roadmap to support councils and their partners in starting this change. *Time to Act* also calls on central government to create an enabling resource, policy and regulatory infrastructure that can help change the direction of social care. Here we focus on how central government can help. In the first term of a new government, some impactful actions, setting the direction for a larger longer-term shift would be:

To lead by example in key areas

National government has a significant leadership role to play. For example, it has been clear for many years that while ‘prevention’ and ‘personalisation’ have been advocated in government policy, their implementation has been frustrated or unsupported by the way the Treasury allocates funding and in how local councils are expected to account for expenditure and overall performance. Ensuring that the systems of finance and accountability nationally drive forward and do not frustrate transformation should be an early priority of the next government. The proposals of [Demos and the Health Foundation for a new public spending framework centred on prevention](#) are a valuable starting point to these ends.

Sharing power should be a principle guiding how national government develops policy, with responsible government departments practicing and modelling co-production in the formulation, implementation and oversight of policy. There are examples to build on and models to deploy – one being the process of developing the Care Act and its guidance.

Finally, #SocialCareFuture believes that [narrative change](#) is a core component of driving the social and system change necessary to bring about the transformation we outline in this paper. National government communications have a significant impact on how the public imagines and understands social care and the role it plays and hence could play a decisive role in building public support for investment and reform. Social Care Future, ADASS and other partners have undertaken initial work on changing public thinking on social care. Government should align with this as it develops setting an example for others including major national charities.

To co-create a space to seed, incubate and evaluate key components of transformation

We propose that national government, in partnership with funders of the voluntary and community sector and research bodies, establishes a dedicated programme to support and model the shifts outlined in this paper. We further propose that in the early part of the first term the government, could start to build the capacity for early action and better support models. Taken together these actions would both demonstrate early commitment to grow capacity for early action and to using learning to create the underpinning conditions for bigger long-term change:

- A £500 million endowment would fertilise, nurture and celebrate innovations centred on early action, sharing power and unlocking all resources and be genuinely transformative, while helping to position Britain globally. It could span technology, social innovation, housing and product design and consider new models of interdisciplinary, person-centred working, as well as considering the enabling regulatory, legal, financial and other conditions necessary for such innovation to take root, grow and spread. A priority for this endowment would be to demonstrate how many more people could be supported to stay in or return to their own homes (see for example “Home Fit” and Wellbeing Teams below) Impactful early outcomes should then be incorporated into planning for wider spread. A good model for this endowment model would be *Power to Change*
- A dedicated programme across councils to start to build a network of VSCE led neighbourhood level coordinator teams, taking a ‘strength’ and ‘asset based’ approach, weaving together & helping to coordinate formal (health, social care, housing etc) and informal support (such as circles of support, volunteers, local civic society assets) around what matters to people and communities would be a gamechanger. This approach could draw on the shared DNA of things like [Local Area Coordination](#), Sure Start, the best social prescribing link workers, mutual aid, community development, Supporting People, family conferencing and the approaches being developed by [New System Alliance](#). Its animating principle would be mutuality, working with local people to strengthen places and communities.

To reform assessment, care planning and commissioning

Work by #SocialCareFuture and others has consistently shown that care management systems, processes and practices are operating in ways that run counter to the goals of the Care Act. Instead of helping people create good lives of connection, purpose and inclusion, using a range of resources they too often operate simply as ration and place mechanisms. There is increasing understanding about the causes and of promising solutions to this including examples of practice supporting creative solutions and use of personal, service and community resources, These can be built upon.

- Government should fund a significant demonstrator programme modelling approaches to assessment and planning that are fully person centred, co-productive and make creative use of all resources. This would include modelling both professional autonomy and peer support approaches. This should be designed with people who draw on social care, and key professional groups including the Principal Social Workers Network. The programme should be at a sufficient scale and evaluated to underpin rapid spread across the country in a second phase. Government should also ask the Care Quality Commission to undertake themed

inspection of assessment, care planning and review, coproduced with people who draw on social care to inform the demonstrator programme and underpin spread following it. This programme is now urgent.

With great exceptions, few in our movement see local authority commissioning driving innovation. Sadly in too many cases the opposite is the case. Capacity to think and co-design with local citizens and providers has been driven out, often leaving just procurement. Commissioning will need to become increasingly asset and place based, supporting the shift to early action and use of all resources. It needs to better promote diversification and innovation in approaches to support, and move beyond rigid “procurement” processes.

- Government should undertake a rapid review of council commissioning in coproduction with people who draw on social care and using learning and examples from innovative places and programmes followed by a “Commissioning the Future” programme of activity. The review should take achieving the Care Act wellbeing requirements as its focus. Following the review government should work with the Care Quality Commission in co-production with people who draw on support and innovative commissioners to develop CQC assurance of commissioning and require CQC to undertake a themed programme of inspections. The findings of these activities should inform the development of new commissioning frameworks, guidance and training.

To strengthen self-direction, rights and redress

Being and feeling in control of our lives is central to our wellbeing and our ability to pursue the lives we want to lead. Moreover, as a party to the UN Convention on the Rights of Persons with Disabilities, the UK has undertaken to ensure that disabled people enjoy the right to choice and control on an equal basis with others, including over living arrangements, support and day-to-day life.

The 2023 Direct Payments Summit, which brought together people using direct payments, system leaders, professionals and others responsible for the operation of local systems, showed that self-direction as initially envisaged is fully possible. Government should use findings from the summit and from work underway on the “plumbing and wiring” of adult social care to set clear direction for councils on self-directed support including Direct Payments and others approaches such as Individual Service Funds. A plan of action should be agreed with ADASS and LGA in coproduction with people who draw on social care and supported by targeted CQC assurance. This would focus on removal of bureaucratic barriers and establishment of peer led support infrastructure and other scaffolding, such as that offered by digital technology.

Rights to choice and control over living arrangements and support should be strengthened, going beyond the Care Act 2014 to ensure compliance with the UN Convention on the Rights of Persons with Disabilities. The Equality and Human Rights Commission has published proposed legal reforms to these ends which can be built upon. The new government should also take note of [EHRC's 2023 inquiry into challenging decisions about social care](#), and set about building stronger modes of redress and consumer protection as well as mediation support to benefit all.

Annex: Another social care is possible

In this annex we offer a non-exhaustive outline of Ideas building on existing initiatives around the country that could spread and proliferate given more fertile conditions

Home-fit

Safe, accessible and affordable housing is the bedrock of wellbeing, and of being able to live safely and independently in the community. A 'home fit' programme would bring together support with home energy and insulation, home maintenance, aids and adaptations and smart home technology. This could be delivered via new individual home first budgets or personalised 'home fit' plans. A home fit assessment, based on existing reablement programmes, could be offered to everyone at age 75, in response to all inquiries concerning adult social care, or as now, following a hospital admission.

Wellbeing Teams

Jointly commissioned [wellbeing teams](#) bringing together the functions of social care and health domiciliary care, hospital avoidance and reablement support using person centred approaches offer the opportunity to shift from time and task, life and limb "homecare" models and the disconnect across these functions which currently has harmful effects on many. Advantages include better use of joint resources and skills to offer attractive employment opportunities and to facilitate reduction in hospital admission/readmission/better lives by co-designing support that attends to people's connections, relationships and purpose. Helpful learning on setting up and operating such teams and their impact already exists.

Community touchpoints

Some areas are already seeing the benefit of having made modest investments in warm, welcoming spaces, embedded in neighbourhoods, where people can find company and mutual support, as well as draw on professional advice if needed. As well as tackling isolation and loneliness, initiatives such as Talking Points in Warrington and Community Loungers in Stoke-on-Trent – blend local citizen knowledge and mutual support with professional advice and referrals. They are helping to reach people earlier, resolve issues before they escalate, overcome isolation and loneliness and focus on the things that matter to people. As the National Development Team for Inclusion notes 'Longer waiting times (for social care assessments) increase the potential for a crisis response while decreasing the potential for community-based solutions. Strength based, early conversations are extremely effective in reducing or removing pre assessment waiting lists. Areas implementing [Community Led Support](#) have reported performance reductions in waits for initial contact falling from an average of 13 weeks to around 9 days.'

Neighbourhood coordinators & mutual support

[Local Area Coordinators](#) support people and families to recognise their capabilities, gifts, networks and practical resources instead of immediately looking to services. The approach helps people to become connected, contributing citizens to their communities. As well as scaffolding existing support, Local Area Coordination is intentionally designed to nurture individual and community power, helping people to avoid and reduce reliance on services.

[KeyRing support networks](#) involve a group of around 10 people who form a supportive community, facilitated by support staff who provide guidance, encouragement, and assistance as needed. Network Members explore what they want from life, identify goals,

connect with local resources, and coordinate activities that promote social engagement and personal development. By fostering a sense of belonging and supporting mutual aid, KeyRing empowers individuals to overcome challenges and live meaningful lives within their communities. The need for formal support is reduced as connection, confidence and skills grow. The impact includes reduced isolation and loneliness, reduced anti-social behaviour, increased income from paid work opportunities, increased volunteering, improved health and wellbeing, active citizenship and reduced use on services.

Scaffolding choice and control

As well as being a fundamental right, people having more choice and control over support is the most effective way to ensure that it is focused on the things that matter most to our wellbeing, and moreover, that our own ideas and solutions shape how it is organised to best effect. But too many of us can feel like we're alone, lack the confidence or inspiration to direct our own support, struggle with the administrative responsibilities, or feel constrained by the imposition of rules and close monitoring of local councils. Scaffolding choice and control can be achieved through investment in platforms for communities of peer support, in digital tools and in information, advice, guidance and brokerage. Work by disabled people's groups and the best system learning has been brought together by [Think Local Act Personal](#) and at a joint summit in 2023. This work points to existing great examples of support infrastructure that can be built upon

Diversifying and growing new local sources of support

'Capacity' – as in ensuring the supply of support meets existing and projected demand – is a nationwide challenge, as is promoting choice and control for those with reason to draw on support. Some areas are creatively and more sustainably aligning these goals, through action to diversify the sources and range of wellbeing support and opportunities available in their areas. In particular, areas have invested in the growth of [community micro-enterprises](#) and [local community businesses](#), in [shared lives carers](#) and in the more effective deployment of volunteers to support people with help around the home and in the community. Through doing so, these areas are helping to generate new, more sustainable sources of support, which in turn create good local employment, as well as strengthening the cohesion of their communities.

Meanwhile, some forward looking providers are overcoming the recruitment challenges faced by other parts of the sector by reimagining and redesigning job roles to focus on supporting people to live great lives, rather than 'caring for' people. Doing so has led them to a 'social care of all the talents' approach, building bridges and successfully widening the pool of prospective workers. This approach runs counter to the current total focus on professionalisation and registration of 'careworkers' which risks erecting barriers, not opening up possibilities.