

#SocialCareFuture

Growing a brighter future together

Suggestions to the Casey Commission on the future of adult social care

December 2025



Contents

Introduction and Summary

1. Power With, Not Power Over: A New Democratic Settlement for Social Care	4
2. Rewrite the National Story: Social Care as a Route to the Good Life	5
3. Rights First, Always: Embedding Human Rights in Law, Practice and Culture	6
4. Knowledge That Liberates: Information, Advice and Creative Guidance	7
5. From Assessment to Possibility: Planning That Starts with People's Lives	8
6. Real Control, Not Administrative Permission: Making Self-Directed Support Work	9
7. Money That Enables, Not Restricts: Transforming Charging and Financial Justice	10
8. Thriving Communities, Not Transactional Markets: Commissioning for Wellbeing	11
9. Prevention as Purpose: Early Action, Not Crisis Response	12
10. Measuring what matters: national standards & outcomes for living a gloriously ordinary life	13
11. A Workforce for Good Lives, Not Just Services	14



Introduction and Summary

This paper brings together the ideas, priorities and lived expertise of more than 200 people who draw on social care, their families and allies, who gathered in Manchester in September 2025 as part of the #SocialCareFuture movement. These contributions were made to help shape the Casey Commission's work on the future of adult social care. We would like to celebrate and thank the Commission team for really listening and getting involved in the day.

Where relevant we've also included some further ideas and information related to the suggestions, based on the wider work of #SocialCareFuture, which had already enjoyed the input of hundreds of Social Care Future movement members, including "Fixing the Plumbing and Wiring in Adult Social Care" and "Whose Social Care is it Anyway?".

Together they reflect a clear message: meaningful change in social care must begin with people's lives, rights and aspirations, not with services, institutions or administrative systems.

Across 11 themes, contributors call for a system grounded in shared power, human rights, early action, self-directed support, and commissioning that builds community wellbeing, not transactional markets. They want assessment and planning that begins with what matters to people, not rigid processes. They argue that information, advice and guidance should fuel choice, creativity and imagination, rather than steer people into "off-the-shelf" services. Charging arrangements must stop driving people into poverty and isolation. The workforce must be supported to work relationally, not solely within regulated task-based models.

Contributors also stress the need to change the national story about social care—to help the public and politicians understand its role in enabling people to live good lives, full of relationships, purpose and independence. They highlight that lived experience must be embedded at every level of governance and system design: "nothing about us without us" is not a slogan but a structural requirement.

Together, these themes set out a vision for a social care system that is human, trust-based, rights-driven and designed in partnership with the people it exists to support.

1. Power With, Not Power Over: A New Democratic Settlement for Social Care



People who draw on social care should no longer be on the margins of decision-making—they must be co-authors of the system. The voice, experience and expertise of people who draw on social care should shape everything: national policy, local commissioning, and day-to-day practice. People want genuine partnership: official roles in national bodies, co-production embedded “from referral to review,” and lived experience panels working on all key appointments.

Underlying concerns include commissioners working “alongside people as partners,” language that reflects shared humanity (“we and us”) and the inclusion of older people—too often consulted indirectly rather than listened to directly. Strong, well-resourced disabled and older people peer groups are seen as the infrastructure of real participation, not optional extras.

People said things like....

“Give people who draw on social care a chance to take up official roles in the Casey Commission and in health and social care policy-making.”

“Co-production must be central to every aspect of a person's support—from referral and assessment to reviews and ongoing assistance.”

“Ensure that all key appointments involve panel members with lived experience.”

“Nothing about us without us’ should also apply to older people... government and local commissioners... aren’t truly listening.”

“Set up groups at every level... to work as partners.”



2. Rewrite the National Story: Social Care as a Route to the Good Life

Social care cannot achieve the changes people want while public debate frames it as a crisis, a cost or a burden. Contributors called for a transformation in how social care is talked about—a new narrative that highlights its potential to enable people to live meaningful, connected, fulfilling lives.

This means any “national conversation” must start from wellbeing, human potential, inclusion, and the universal relevance of social care. Research-backed framing work by #SocialCareFuture shows that more hopeful, human-centred communication builds stronger political and public support.

People said things like....

“Frame any ‘national conversation’... in a way that enhances public and political understanding of social care’s potential, the primacy of wellbeing and its relevance to everyone.”

“Encourage government and public bodies to use communication frames and approaches that build stronger support for social care.”



3. Rights First, Always: Embedding Human Rights in Law, Practice and Culture



Contributors want a social care system rooted in rights, not rationing. They want rights to home, family life, autonomy and equality to be treated as non-negotiable. This requires strengthening the Care Act, replacing permissive “shoulds” with mandatory “musts,” ending the structural barriers created by Section 22, and creating a statutory duty to trust people and families.

They also emphasised the need for strong accountability mechanisms so that people can challenge poor decisions, shape assurance processes, and feel confident their rights will be upheld. Language matters too—people want to be spoken about and treated as human beings, not service users.

People said things like....

“Embed human rights at the heart of all social care policies... recognised as fundamental—not optional or aspirational.”

“Statutory duties should be explicit, replacing ‘should’ with ‘must’”

“End the Primary Health Need section... ensuring all needs are met without the current health versus social care ‘ping pong’”

“Create a statutory duty to trust people and families.”

“Avoid labelling individuals as ‘service users’ — we are human beings.”

Enforce the Care Act. Conduct a full, independent public review of the Care Act 2014, ensuring it functions as a genuine rights-based framework. Statutory duties should be explicit, replacing “should” with “must”.



4. Knowledge That Liberates: Information, Advice and Creative Guidance

Information, advice and guidance should unlock imagination and autonomy, not funnel people into standardised service options. Contributors emphasised creative, personalised, accessible advice—including for self-funders, who often face limited, transactional information.

People want approaches and technologies that position them at the centre of decision-making, enabling them to design support around their aspirations. Information should be a relationship, not a leaflet or a webpage.

People said things like....

“Invest in creative, person-centred information, advice, and guidance services.”

“Ensure self-funders can access good information and advice, beyond ‘one size fits all’”

“SCF movement members... have developed tech and approaches that can ensure people are at the heart of creative decision making.”



5. From Assessment to Possibility: Planning That Starts with People's Lives



Assessment has drifted toward system-driven, prescriptive practice. Contributors want a shift back to person-centred, flexible, creative assessment and planning. This means rethinking assessment tools, embedding creativity in reviews, and refocusing social work education on rights rather than “care management”.

A major concern is that lack of knowledge about local community resources leads to unnecessary formal packages that miss better, more personalised solutions. National guidance, training and assurance frameworks should reinforce assessments that begin with what matters to people, not service categories.



People said things like....

“Review assessment practices... to identify approaches that foster self-direction and creative, individual-level commissioning.”

“A programme that encourages creativity and flexibility... so people can do things differently and better.”

“Address the... shift away from person-centred planning.”

“Lack of knowledge about local networks... may lead to unnecessary commissioned care packages.”



6. Real Control, Not Administrative Permission: Making Self-Directed Support Work

Self-directed support should be the norm, but bureaucracy and gatekeeping undermine its potential. Contributors want national standards, strong support for direct payments and individual service funds, and the removal of unnecessary controls that restrict creativity

Direct payments should enhance lives, not generate paperwork. Flexibility, trust, and timely advice are essential. Reviews should be straightforward and respectful, focusing on outcomes, not justification.

People said things like....

“Establish national standards for self-directed support, based on best practice collected by Think Local Act Personal and others.”

“Change the focus from risk aversion to try new things – get rid of red tape.”

“Direct payments should be approached as a means to enhance individuals’ lives, rather than merely a procedural requirement.”

“Funding mechanisms must be adaptable, allowing for adjustments to accommodate evolving needs, goals and aspirations.”

“Eliminating unnecessary bureaucratic controls and gatekeeping will facilitate more innovative utilisation of personal and health budgets.”

“Direct payments should be the norm.”

“Change how we think about the reviewing process... people should not have to justify what they need help with.”

7. Money That Enables, Not Restricts: Transforming Charging and Financial Justice



Charging arrangements often drive people into poverty, undermine wellbeing and discourage early help-seeking. Contributors want urgent reform—moving toward ending charges altogether, but with immediate steps such as consistent disability-related expenditure practices, improved financial assessments and strengthened advocacy.

Benefits must enable people not just to survive but to participate in community life, friendships and activities.

People said things like....

“Move towards ending charges that leave people in poverty, restrict relationships, and discourage support-seeking at an early stage.”

“Reconsider means-tested co-payments... as they often discourage timely support uptake.”

“Make sure benefits actually give people enough money to... be included.”

“Increase awareness of disabled people’s rights around Disability-Related Expenditure (DRE).”





8. Thriving Communities, Not Transactional Markets: Commissioning for Wellbeing

Commissioning should build relationships, inclusion, capability and wellbeing, not time-and-task transactions. Contributors propose revising procurement rules, training in asset-based commissioning, strengthening co-production in commissioning, and ending practices such as online “auctions” of support.

Some advocate going much further—scrapping conventional commissioning altogether in favour of people using direct payments or supported purchasing arrangements.

People said things like....

“End practices like ‘selling’ individual support through crude, deficit-based online ‘auctions’.”

“Review national procurement rules... to maximise flexibility for councils.”

“Develop and roll out training on asset-based approaches to commissioning through national improvement and training bodies.”

“Push for commissioning that’s driven by values... not outdated specifications for time and task.”

“Scrap current commissioning and procurement... people pay for their own care or use direct payments.”

“Ensure inclusion of third-sector organisations as essential partners, not isolated entities, recognising the contributions of not-for-profits, their staff, embedded in the communities they serve.”

9. Prevention as Purpose: Early Action, Not Crisis Response



Early action must become social care's organising principle—not crisis management. People want support that prioritises relationships, connection, purpose and belonging long before eligibility thresholds are reached. Contributors proposed national test-and-learn programmes, local early action accounts, and approaches like Live More and local area coordination.

Early action is understood not as signposting but walking alongside people, engaging with their aspirations and community networks.

People said things like....

“Social care should shift from deficit-focused services to proactive early intervention.”

“Initiate a national early action test-and-learn programme during this Parliament, focusing on pioneer places and regions, and using innovative, community co-produced and embedded approaches to inform a wider national dissemination programme.”

“Fund and support the development of early-action initiatives that prioritise connection and purpose over reactive crisis management and which include robust evaluation of early action initiatives to gather stories, measure return on investment, and extract lessons for scaling up”

“Transform the first point of contact with public services... into a collaborative, resource-sharing relationship aimed at enabling people to thrive.”

“Early action means more than signposting; it involves engaging with individuals holistically within their communities.”

“Emphasise friendship and social connections rather than rules, regulations, and paid support processes.”

“Support approaches like “Live More”, which intervenes early with people with dementia, well before formal social care eligibility is reached.”



10. Measuring what matters: national standards and outcomes for living a gloriously ordinary life

People want national standards, outcomes and regulatory systems that begin and end with what matters to people. That means that standards must be co-produced and grounded in choice, control, relationships, and inclusion. Assurance must take people's complaints and feedback seriously. Regulation must allow things like personal assistants and small community supports to thrive. National outcomes must focus on wellbeing, not throughput.

People said things like...

"Ensure that any National Care Standards... reflect what matters to people who draw on social care."

"Conduct focused reviews of council commissioning, procurement, and direct payments practice."

"The current approach... hasn't been properly co-produced, doesn't reflect what matters most to people."

"People don't trust the evidence and it isn't driving change."

"Introduce stronger enforcement mechanisms and increase accountability for local authorities, giving disabled and older people more power to challenge decisions and feed into assurance. This includes addressing Clause 5 (diverse quality market and well-being) and issues around self-directed support and direct payments."

"Develop an information standard to support person-centred planning applications that link to IT systems, allowing people to manage and hold their own records."

"Review the regulation of support provision to promote innovations such as individual service funds, and ensure that personal assistants and small-scale, unregulated, community-based supports are able to flourish."

"Develop a national improvement programme, co-produced with people who draw on social care, providing targeted support to enable councils, citizens, VCSE organisations, and providers to drive change collaboratively."

11. A Workforce for Good Lives, Not Just Services



People emphasise that workforce reform must look beyond pay and professionalisation to creativity, relationships, and community-based support. That means keeping personalisation at the centre of workforce development and building workforce capability in wellbeing and early action. Crucially, in order to have choice and control it means supporting a diverse and diversifying workforce, including Personal Assistants, Shared Lives Carers, Local Area Coordinators, Circles Facilitators and people operating as micro-enterprises.

People said things like....

“There is a real risk that current workforce thinking... freezes existing service models rather than starts from the social care people want.”

“Refocus social worker education away from traditional “care management” approaches, supporting person-centred planning and greater autonomy for people drawing on support.”

