



Personal Care at Home Bill

Bill No 11 of 2009-10

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The *Personal Care at Home Bill* was presented in the House of Commons on 25 November 2009 and is due to have its second reading on 14 December 2009.

In September 2009, the Government announced that it would be introducing free personal care for people living in their own home with the highest care needs. The Bill follows proposals announced earlier in the year in the *Shaping the Future of Care Together* green paper to create a new National Care Service for social care. It is intended that the introduction of free personal care will be the first step in setting up the National Care Service.

Subject to the Bill's passage through Parliament, the Government expects that the provision of free personal care in England would be available from October 2010.

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Contents

- Summary** **1**
- 1 Policy context** **2**
 - 1.1 Introduction 2
 - 1.2 Personal care in England and Wales 4
 - Free personal care 5
 - Statistics on personal care at home 5
 - 1.3 Personal care in Scotland 6
- 2 The Bill** **6**
 - 2.1 The Bill provisions 7
 - Personal care defined 8
 - Who would benefit? 8
 - Eligibility 9
 - 2.2 Reaction 10

Summary

In England, the prime responsibility for the provision and commission of social care services rests with local authority social services departments. For residential care, charges are subject to nationally-set guidelines with very little discretion left to local authorities. For home care services, local authorities have discretion to charge for provision, subject to Government *Fairer Charging* guidance. The discretionary charging system has led to a wide variation in funding between councils for equivalent services and consequently, criticism has been directed at the lack of fairness and transparency of the system.

There are limited circumstances, under existing legislation, where local authorities cannot charge for certain home care services. Under the *Community Care (Delayed Discharges etc) Act 2003*, specified care services have to be provided free of charge for a period of up to six weeks.

In 1999 the Royal Commission on Long Term Care recommended that personal and nursing care should be provided for free and financed from general taxation. It defined personal care as personal hygiene, continence management, assistance with eating, personal assistance and simple treatment. Nursing care, on the other hand, was defined as the provision of a registered nurse providing, delegating or supervising care. Although accepting a number of the Royal Commission's other proposals, the Government rejected the recommendation for free personal care and instead, opted for the more limited alternative proposal of exempting nursing care provided by a registered nurse from the means-test for care home charges.

Earlier this year, the Government published its social care green paper for England, *Shaping the Future of Care Together*, in which it acknowledged that means-testing, in order to assess eligibility for care services, was not the fairest system. However, it ruled out a universal, fully state-funded system for social care. The green paper proposed establishing a National Care Service which would allow everyone to get a consistent service wherever they live in England, and help with their high-level care costs. It included proposals for prevention services to help people stay independent, such as the right to targeted 're-ablement' services for people leaving hospital to relearn and practice personal care tasks. The consultation on the green paper proposals ran until 13 November 2009. The Government has said that responses will inform a white paper in 2010, followed by legislative change.

During the consultation period on the green paper, the Government announced, at the Labour Party Conference, that people with the highest care needs would be offered free personal care in their own homes. The *Personal Care at Home Bill* provides the legislative basis for that policy. It was published in 18 November 2009 and is due to have its second reading in the House of Commons on 14 December 2009. The Bill would amend the *Community Care (Delayed Discharges etc) Act 2003* so as to remove the six week limit on the period for which personal care can be provided for free in a person's own home.

The Bill extends to England and Wales. It would amend section 15 in the 2003 Act which applies to England and have the effect of broadening the regulation-making powers of Welsh Ministers under the Act. As the Bill would make provision for a matter within the competence of the National Assembly for Wales, a Legislative Consent Motion is expected to be sought in Wales. This paper provides details of the proposals as they would affect England.

The Bill has been welcomed by groups representing the elderly and disabled. However, questions have been raised about the timing of the announcement mid-way through a consultation on wider social care reform.

1 Policy context

1.1 Introduction

In 1997, the Labour Government set up the Royal Commission on Long Term Care, to be chaired by Professor Sir Stewart Sutherland. In its 1999 report, *With Respect to Old Age: Long term care – rights and responsibilities*,¹ the Royal Commission recommended that:

The costs of long-term care should be split between living costs, housing costs and personal care. Personal care should be available after assessment, according to need and paid for from general taxation: the rest should be subject to a co-payment according to means.²

Personal care was defined as personal hygiene (such as bathing), continence management, assistance with eating, personal assistance (such as dressing) and simple treatment. Nursing care, on the other hand, was defined as the provision of a registered nurse providing, delegating or supervising care.

In effect, the Commission proposed that personal care, including nursing care should be free at the point of delivery following an assessment, but individuals who received care would still have to pay towards their housing and living costs according to their ability to pay.³

The Government accepted many of the Royal Commission's recommendations.⁴ However, the provision of universally free personal care, funded from general taxation, was rejected by the Government on the basis that it did not believe the policy would be the best use of resources.⁵ Instead, the Government partially adopted the policy by making NHS nursing care free in care homes, to bring it into line with the equivalent care provided in hospitals.⁶

Free personal care was, however, introduced in Scotland. Following its introduction in Scotland, the Westminster Government confirmed its rejection for England. Lord Hunt of Kings Heath, then Parliamentary Under-Secretary of State for the Department of Health, told the House of Lords:

We chose a different course because we believed that if we instituted free personal care, we should not produce a single extra service as a result but would benefit many better-off people. We considered that the £1 billion cost of free personal care in England would be better spent on providing services such as intermediate care for all older people to enjoy and to help them rehabilitate, rather than having to enter institutionalised care.⁷

The issue of free personal care was again raised in July 2009 when the Government rejected a fully tax-funded system to pay for a basic level of social care for all who required it as part of proposals in its social care green paper, *Shaping the Future of Care Together*.⁸ Instead the green paper proposed establishing a National Care Service which would allow everyone to get a consistent service wherever they live in England, and help with their high level care

¹ The Royal Commission on Long term Care, *With Respect to Old Age: Long Term Care - Rights and Responsibilities*, March 1999; Cm 4192-I

² *Ibid*, recommendation 6.4

³ *Ibid* Chapter 6

⁴ Department of Health, *The NHS Plan: The Government's response to the Royal Commission on Long-Term Care*. July 2000.

⁵ *Ibid* p8

⁶ *Ibid* para 2.5

⁷ HL Deb 2 July 2002 c123

⁸ Department of Health, Cm 7673

costs. It included proposals for prevention services to help people stay independent, such as the right to targeted 're-ablement' services for people leaving hospital to relearn and practice personal care tasks.

The green paper asked for views on three different funding models as part of a consultation process. They preferred funding models under consideration are:

- A **Partnership** approach which shares costs between the individual and the state.
- An **Insurance** approach which would enable people to choose to take out insurance against the risk of having high care and support costs.
- A **Comprehensive** approach in which everyone who could afford to would be required to pay in and would get free care and support in return.

Further information on the green paper proposals is available in Library standard note: [Shaping the Future of Care Together: the 2009 social care green paper.](#)⁹

At the 2009 Labour Party Conference, the Prime Minister, Gordon Brown announced that the Government would be introducing in England, free personal care, for those people with the highest needs.¹⁰ The proposal would form part of the package of reforms announced in the earlier social care green paper to create a new National Care Service. In his speech the Prime Minister said:

We have an ageing society and new rightful demands for dignity and for support in old age. And so we need social care for our elderly which is not subject to a post code lottery, but available to all – to the hard working majority, and not just the few who can pay.

And so we will say in Labour's manifesto that social care for all is not a distant dream, that to provide security for pensioners for generations to come – we will bring together the National Health Service and local care provision into a new National Care Service. That is the change we chose.

And we can start straight away.

Today more and more people see their parents and grandparents suffering from conditions like Alzheimer's and dementia, and they see their dignity diminish

And for too many families the challenge of coping with the heartbreak is made worse by the costs of getting support.

The people who face the greatest burden are too often those on middle incomes, who have savings which will last a year or two, but then they will see their savings slip away. And the best starting point for our National Care Service is to help the elderly get the amenities to do what they most want: to receive care and to stay in their homes as long as possible.

And so for those with the highest needs we will now offer in their own homes free personal care.

It's a change that makes saving worthwhile, makes every family in this country more secure and is a much needed reassurance for the elderly and their children.

⁹ SN/SP/5183

¹⁰ [Prime Minister Gordon Brown, Labour Party Conference, 29 September 2009](#)

This is the change we choose; change that will benefit not just the few who can afford to pay, but the mainstream majority.¹¹

1.2 Personal care in England and Wales

Social services authorities provide a variety of home care services which vary from area to area. Such services may not be necessarily be called personal care services, although they often cover the sort of help defined by the Royal Commission as personal care, for example, help with tasks in an individual's home such as getting up and dressing, washing and bathing and getting ready for bed. Under section 17 of the *Health and Social Services and Social Security Adjudications Act 1983*,¹² social services departments can charge for personal care services. Charging frameworks must comply with minimum standards set out in the *Fairer charging policies for home care guidance*,¹³ issued under section 7 of the *Local Authority Social Services Act 1970*. The *Fairer charging* guidance requires that a user's net income must not fall below a defined level after charges are applied.^{14,15} This discretionary charging system has led to a wide variation in funding between councils for equivalent services and consequently, criticism has been directed at the lack of fairness and transparency of the system.¹⁶

The provision of home care also varies between local authority areas because councils have wide discretion when setting eligibility criteria. In England, the [Fair Access to Care Services](#)¹⁷ (FACS) guidance provides councils with a framework for setting their eligibility criteria for adult social care. It is based on four eligibility bands - critical, substantial, moderate and low - which describe an individual's needs and associated risks to independence or other consequences if needs are not addressed.¹⁸ The Government has said that the proposals in the Bill will help those with the highest needs¹⁹ – that is people in the critical FACS band. The criteria for the critical band are as follows:

Critical – when

- life is, or will be, threatened; and/or
- significant health problems have developed or will develop; and/or
- there is, or will be, little or no choice and control over vital aspects of the
- immediate environment; and/or
- serious abuse or neglect has occurred or will occur; and/or
- there is, or will be, an inability to carry out vital personal care or domestic routines; and/or

¹¹ *Ibid*

¹² Section 17

¹³ Department for Health, [Fairer charging policies for home care and other non-residential social services: guidance for Councils with Social Services Responsibilities](#); September 2003

¹⁴ *Ibid*, para 9

¹⁵ Supplementary guidance has been issued by the National Assembly for Wales: [NAFWC 11/07](#), March 2007

¹⁶ CSCI, *Cutting the Care Fairly: CSCI review of eligibility criteria for social care*, 2009

¹⁷ *Fair access to care services - guidance on eligibility criteria for adult social care* (2003), Department of Health, para 3

¹⁸ The framework in Wales, set out in [Creating a Unified and Fair System for Assessing and Managing Care](#), [NAFWC 05/2002](#) is also based on the four eligibility bands of critical, substantial, moderate and low.

¹⁹ Department of Health Press Office, *Personal Care at Home Bill*, 18 November 2009

- vital involvement in work, education or learning cannot or will not be sustained; and/or
- vital social support systems and relationships cannot or will not be sustained; and/or
- vital family and other social roles and responsibilities cannot or will not be undertaken.²⁰

The FACS guidance provides that when setting eligibility criteria, councils should take account of the resources allocated to them for adult social care,²¹ and when placing individuals in the bands, councils should not only identify immediate needs but also needs that would worsen for the lack of timely help.²²

Because of the different resource positions of councils, the guidance does not require councils to reach similar decisions on eligibility, or to provide similar services, to people with similar needs. This has led to variations in the eligibility thresholds across the country with some local authorities restricting services to those with critical or substantial needs.²³

Free personal care

There are limited circumstances where the local authority discretion to charge for services does not apply. Section 15 of the *Community Care (Delayed Discharges etc.) Act 2003* allows the Secretary of State to make regulations requiring that the provision of certain qualifying services is to be free of charge for up to six weeks.²⁴ The services include accommodation under Part 3 of the *National Assistance Act 1948* and personal care provided to a person in any place where that person is living.²⁵

Statistics on personal care at home

A range of information exists about the number of people who currently receive home care that is wholly or partially funded by local authorities. Less exists about the number of people who pay for care themselves privately or who might want personal care but do not receive it.

Local authority home care – the current situation

The gross expenditure on home care services – which include personal care services – by councils with adult social services responsibilities in England was £2.7 billion in 2007/08.²⁶

In one survey week in 2008, 328,600 households and 340,600 individual service users received home care or home help. Of these households, 32 percent received intensive home care, defined as more than 10 contact hours and 6 or more visits during the week.

Of the households receiving intensive home care in 2008, 73% included a service user over 65, 11% were under 65 and included someone with a physical disability, 13% were under 65

²⁰ All four FACS bands are set out in paragraph 16 of the [Fair Access to Care Services](#) guidance

²¹ *Ibid*, para 3

²² *Ibid*, para 17

²³ The Government does not collect data on the eligibility criteria applied by local authorities and whether they charge for services

²⁴ Section 16 of the *Community Care (Delayed Discharges etc.) Act 2003* allows the National Assembly for Wales to make equivalent regulations for the provision of free services in Wales.

²⁵ Section 15(4), *Community Care (Delayed Discharges etc.) Act 2003*

²⁶ Information Centre for Health and Social Care, [Community Care Statistics 2008, Home care services for adults, England](#),

and included someone with learning disabilities and 2% were under 65 and included someone with mental health problems.²⁷

1.3 Personal care in Scotland

Unlike England, Scotland adopted the Royal Commission's recommendation for universally free personal care. It was introduced in Scotland in July 2002 allowing people aged 65 and over, who have been assessed as needing care, to claim personal care payments, which contribute towards the cost of their care.²⁸ It can be claimed for care in a care home or in a person's home.

Guidance issued by the Scottish Government states that personal care includes help with a variety of tasks such as: bathing, personal hygiene, dressing, getting in and out of bed, continence management, assistance with eating and special diets.²⁹

People of any age who need nursing care are eligible to apply for nursing care payments. These payments are made to everyone assessed as eligible, regardless of income or capital. Further information on Scotland's policy on free personal and nursing care, with particular reference to the impact on social security benefits, is available in the Library standard note: [The future of Attendance Allowance and other disability benefits for older people](#).³⁰

2 The Bill

The *Personal Care at Home Bill* was presented in the House of Commons on 25 November 2009. The Secretary of State for Health, Phil Hope made the following statement:

The Personal Care at Home Bill, published today, contains new proposals costing £670 million, which are the Government's first step towards setting up a new National Care Service—a simple, fair and affordable care system for everyone.

Subject to parliamentary approval, from next October, older people and younger disabled people will be better helped to live independently for longer in their own homes—something they tell us they really want.

The Bill guarantees free personal care for the 280,000 people—including those with serious dementia or Parkinson's disease—with the highest needs. Some of those already get free care—this Bill will protect their savings from future charges. Others will get free care for the first time. We will also help around 130,000 people who need home care for the first time to regain their independence.

This intensive help or "re-ablement" will help people to regain their independence and prevent ill health. This means people will maintain their dignity and rebuild their confidence so that they can live at home for longer. Helping people to stay in their own homes could involve adapting their homes.

New equipment installed in people's homes to help them stay there could include electronic pill dispensers or movement activated alarms using the voice of a grandchild to remind an elderly person to close the door, for example. Helping people

²⁷ Note that local authorities needed to choose one service user group for each household when submitting the information on which these statistics were based. This means that each household should be counted only once in these figures.

²⁸ Section 1, *Community Care and Health Act (Scotland) 2002*,

²⁹ Scottish Government, [Guidance on free personal and nursing care in Scotland](#), July 2003

³⁰ SN/SP/5136

to stay in their own homes and adjust their living conditions so they can stay safely, puts prevention at the heart of the system.³¹

The free provision will be aimed at adults receiving social care, regardless of age.

A consultation document, *Personal Care at Home: a consultation on proposals for regulations and guidance*,³² was published alongside the Bill. It seeks views on what should be included in regulations made under the Bill and in accompanying guidance, and how funding for the policy should be allocated to councils. The consultation will run until 23 February 2010.

2.1 The Bill provisions

This research paper provides an overview of the Bill and the related impact assessment and consultation documents. A detailed explanation of the Bill is available in the explanatory notes³³ to the Bill which are available, together the impact assessment and other related documents, on the Library's [Bill Gateways pages](#).³⁴

The Bill contains only two clauses. Clause 1 would amend section 15(4)(b) of the *Community Care (Delayed Discharges etc) Act 2003* so as to remove the six week limit on the period for which personal care can be provided for free in a person's own home.³⁵

The six week limit for personal care provided in care homes would remain unaffected by the Bill.³⁶ Personal care provided in connection with an adult placement scheme would not however be limited to six weeks.³⁷

In relation to the provision of free personal care the Bill would allow regulations to:

- impose functions on local authorities relating to eligibility;
- make provision for the issuing of statutory guidance; and
- authorise local authorities to make eligibility conditional on undergoing a process designed to maximise the person's ability to live independently. This is referred to in the Bill's accompanying documents as 're-ablement'.

Clause 2 would extend the Bill to England and Wales.³⁸ It would amend 15 of the 2003 Act which applies to England and have the effect of broadening the regulation-making powers of Welsh Ministers under section 16 of the 2003 Act. The House of Lords Delegated Powers and Regulatory Reform Committee explain in its memorandum:

The proposed extension of section 15 will have the effect of extending the power in section 16 for Wales because section 16 is parasitic on section 15. As the Bill is making provision for a matter within the competence of the Assembly a Legislative Consent Motion is expected to be sought in the National Assembly for Wales.³⁹

³¹ HC Deb 25 November 2009 c82-3W

³² Department of Health, *Personal Care at Home: a consultation on proposals for regulations and guidance*, July 2009

³³ Bill 11-EN

³⁴ Available to Parliament intranet users only. Similar information is on the [internet](#).

³⁵ Clause 1(2)

³⁶ *Ibid*

³⁷ Clause 1(3). Adult placement schemes within the meaning of the *Safeguarding Vulnerable Groups Act 2006*

³⁸ Clause 2(1)

³⁹ Memorandum for the House of Lords Delegated Powers and Regulatory Reform Committee, para 6

Personal care defined

The Bill provides the framework for the free personal care policy; it does not define personal care or set out the criteria for eligibility for services. The consultation document proposes that the definition of personal care would be set out in regulations and revised FACS guidance would identify specific needs to determine eligibility. The proposed working definition for personal care is:

- (a) physical assistance given to a person in connection with -
 - (i) eating or drinking (including the administration of parenteral nutrition),
 - (ii) toileting (including in relation to the process of menstruation),
 - (iii) washing or bathing,
 - (iv) dressing,
 - (v) oral care, or
 - (vi) the care of skin, hair and nails (with the exception of nail care provided by a chiropodist or podiatrist); or
- (b) the prompting, together with supervision, of a person, in relation to the performance of any of the activities listed in paragraph (a), where that person is unable to make a decision for themselves in relation to performing such an activity without such prompting and supervision.⁴⁰

The definition would not cover costs attributable to:

- Cleaning and housework;
- Laundry;
- Shopping services;
- Specialist transport services (eg dial-a-ride);
- Sitting services where the purpose is company or companionship.⁴¹

Who would benefit?

The Government has made it clear that the policy is aimed at adults with the highest needs who live in their own home. The intention is to remove the current means test for those who need the highest levels of care, thereby benefitting 'a number of people currently excluded on grounds of income and assets.'⁴²

Although the free provision would be made to all qualifying adults, regardless of age, the Government anticipate that older people would be the main beneficiaries as they are the

⁴⁰ Department of Health, *Personal Care at Home: a consultation on proposals for regulations and guidance*, July 2009, p13

⁴¹ *Ibid*

⁴² *Impact Assessment of Personal Care at Home Bill*, para 7.10

main demographic who receive social care.⁴³ Children would not be covered by the policy as children's social care is provided under a separate legislative framework.⁴⁴

Eligibility

In order to assess whether an adult falls within the highest need category, it is envisaged that an individual would have an initial assessment on first contact with a local authority. The impact assessment to the Bill provides:

Where appropriate... the Council would provide a period of intensive intervention or re-ablement to build or re-build skills and functioning – supporting people's independence. They would also identify whether specific adaptation or interventions such as telecare might be appropriate to reduce dependency levels. Only at this stage would a formal community care assessment be undertaken which should identify the range of needs, the personal care component and appropriate Fair Access to Care Services (FACS) banding. A significant number of people undergoing this process would have been supported to reduce their levels of dependency through a re-ablement package - hence reduce the overall numbers in the highest category of need.

An individual placed in the highest FACS Band – Critical – would have as part of this, an assessment of personal care needs and where they need help with four or more Activities of Daily Living (ADLs), be offered an indicative sum to cover the cost of their personal care. Not everyone in the Critical Band will have high personal needs, but we anticipate that most of the older people in this band will need high levels of personal care.⁴⁵

According to the [Impact Assessment for the Personal Care at Home Bill](#), a total of 280,000 people are estimated as being eligible for free personal care under the Government's proposals – approximately 170,000 older people and 110,000 younger adults. Table 1 gives more information on these people.

Table 1: Estimates for the number of people in main beneficiary groups: 2011/12

Group	Number of people
Older people	
Already receiving state-funded care	76,000
Making a means-tested contribution	37,000
Self-funding or have an unmet need	46,000
People who switch from residential care	2,000
People who switch from informal care	5,000
Total for older people	167,000
Younger adults	
Already receiving state funded care	c. 90,000
Self-funding or have an unmet need	c. 20,000
Total for younger adults	c. 110,000
Total for all ages	277,000

Source: *Impact Assessment of Personal Care at Home Bill*

⁴³ *Ibid*, para 7.9

⁴⁴ Para 7.8-9. Namely the *Children Act 1989*.

⁴⁵ *Ibid*, paras 4.5-6

The total cost of providing free personal care at home to the main beneficiary groups is estimated to be £537 million in 2011/12.

The estimates on the number of people who would benefit and the costs of the proposals are based on a number of assumptions and modelling, as information in this area is limited. Data on the number of people who would be eligible for free personal care at home – those who are defined as FACS Critical and need help with four or more Activities of Daily Living – is not something that the Government routinely collects. The impact of these reforms on people who currently fund their own care is also unknown. It is not clear how many people will receive personal care at home rather than going into a residential home under the Government's proposals and it is also not clear how informal care (for example from family carers) would change under the proposals.

According to the impact assessment, 130,000 people might benefit from re-ablement each year. This estimate is based upon an assumption that re-ablement would cost £1,000 and there would be an annual budget of £130 million for re-ablement.

2.2 Reaction

The Bill was generally welcomed by groups representing the elderly and disabled. However, criticism was directed at the lack of information on how the policy would be funded and who it would benefit. Lord Warner, a former health minister said, "There has been no proper impact assessment, and no data to show how this would work."⁴⁶

Andrew Harrop, head of policy for Age Concern and Help the Aged stressed:

It will be essential that councils are properly funded to provide this care so that there is not an incentive for them to push older people into care homes or claim that their needs are not critical enough to warrant free care at home.⁴⁷

Niall Dickson, the chief executive of the health think-tank, the King's Fund, welcomed the Government's policy but questioned the timing of the announcement:

This government deserves credit for at last putting social care funding near the top of the political agenda. The fact that ministers are committed to fundamental change in this critical area is also good news. The problem is these latest proposals seem to have been hastily put together and appear to cut across the options set out in the government's own Green Paper. After all, the government has only just finished consulting us on the very different proposals set out in that document.

Trying to fix one bit of the system creates its own difficulties and there has to be a real danger of perverse incentives. Instead, what is needed is a comprehensive solution which deals with all those who need long term care and support. That is why the government is right to support the idea of a National Care Service – for now though it is far from clear how it will work in practice.⁴⁸

Jane Ashcroft, chairman of the English Community Care Association, also queried why the Government had not introduced the policy at the same time as the green paper on social care. She added:

⁴⁶ Telegraph, [Gordon Brown defends Personal Care Bill after criticism by Labour Peers](#), 19 November 2009

⁴⁷ Quoted on the [BBC website](#)

⁴⁸ [The King's Fund statement on the Free Personal Care Bill](#), 18 November 2009

It is unhelpful to just have one piece of the jigsaw. Ultimately, the proposals could lead to an even greater drain on public resources without having a tangible impact on the quality of life of our older people.⁴⁹

Consumer watchdog, Which? viewed the Bill as ‘a missed opportunity’ to improve the provision of products and services, such as grab rails and back up services, that would prolong people’s independence as they get older.⁵⁰

Steve Ford, chief executive of the Parkinson's Disease Society, expressed concerns that the policy would not benefit younger people. He said:

While we are pleased to see additional funding for personal care at home, we are extremely concerned that younger people with conditions like Parkinson's will be at risk of falling into severe financial difficulty, with reduced independence because the new funding isn't directed at all those in greatest need.⁵¹

Lord Lipsey, a former member of the Royal Commission on Long Term Care, was highly critical of the timing of the proposals and the policy. He said:

What has gone wrong is that in the middle on the consultation... the prime minister has declared that it is government policy that people with severe care needs in their own home should be paid in full.

I think it is a bad policy but also a very bad way to do policy just to find a nice highlight for your Labour Party conference speech.

A more considered approach was needed to maximise funding for care from existing NHS and social services budgets and to ensure people could access advice and support more easily, he added.

I am afraid that what has happened is that into this very complicated but important policy process has been injected something which is a bit of gimmick.

I hope Gordon Brown will reflect on whether this proposal is in the national interest or merely designed to achieve party political interests.⁵²

⁴⁹ Telegraph, ‘[Gordon Brown defends Personal Care Bill after criticism by Labour Peers](#)’, 19 November 2009

⁵⁰ ‘Personal Care at home Bill is a missed opportunity, says Which?’ 18 November 2009

⁵¹ Telegraph, ‘[Gordon Brown defends Personal Care Bill after criticism by Labour Peers](#)’, 19 November 2009

⁵² Quoted on the [BBC website](#), 19 November 2009