Care homes in England
The least desirable option - the theory

• Policies in England have continually stressed the desirability of enabling older people to remain in their own homes to the end of life, wherever possible.

• Residential care is regarded as synonymous with institutionalization

• Service development is generally aimed at finding alternatives – supported housing, extra-care housing, home care, telecare etc.
The care home market – the practice

• Care homes continue to be a major part of the picture of services for older people,
• In UK 418,000 older people live in residential or nursing homes (approx 4.2% of over 65s)
• Expenditure on care services increased by 19% between 2000 and 2008, the proportions remained more or less constant
• (57%) of net council spending in England on social care for older people is on care home placements

**Figure 6: Spending on care services for older people**

<table>
<thead>
<tr>
<th>Financial year</th>
<th>Spending (£ billions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000-01</td>
<td>4.2</td>
</tr>
<tr>
<td>2001-02</td>
<td>5.1</td>
</tr>
<tr>
<td>2002-03</td>
<td>6.2</td>
</tr>
<tr>
<td>2003-04</td>
<td>7.3</td>
</tr>
<tr>
<td>2004-05</td>
<td>8.4</td>
</tr>
<tr>
<td>2005-06</td>
<td>9.5</td>
</tr>
<tr>
<td>2006-07</td>
<td>10.6</td>
</tr>
<tr>
<td>2007-08</td>
<td>11.7</td>
</tr>
</tbody>
</table>

Source: NHS Information Centre, Audit Commission
Demographics and estimates of future need

- By 2034 estimated 25% of UK population will be aged 65+ and 4% will be aged 85+
- Evidence suggests that scale of demand for care homes will rise and type of demand will change in line with changing needs (eg more places for people with dementia or complex health needs)
Smart high-end care home
Bristol
Not-for-profit care home in Bristol
Another home from same agency
For-profit sector care home room (residential + nursing)
The figures and trends

- 2000-2010 the **numbers of older people** living in UK care homes dropped by around 50,000 to **418,000** (relatively stable since 2005).
- 2008 there were 10,383 **registered care homes** for older people in England. Some ‘dual registered’
- A continuing trend of **falling numbers of care homes** but **increasing capacity**
- The average number of places in a home is 34.7. Nursing homes are larger with average of 44 places compared to 18 in residential homes.
Size of care homes (England)
Who runs care homes?

- In England 91% of places in care homes are in the independent sectors, 75% in for-profit companies.
- A drop in the numbers of care homes run by not-for-profit agencies and local councils (investment in alternatives).
- Market share of for-profit providers has risen significantly over past 15 years.
- Corporate and larger owners are becoming more dominant. Major providers managed 55% of for-profit capacity in 2010.
‘Care homes in the balance as Southern Cross struggles’ (Guardian)

- Southern Cross made a loss of £300m last year. Might be bankrupted or have to sell homes
- It runs 750 homes around the UK with 31,000 residents and 44,000 staff
- Some districts have almost all their care homes with Southern Cross (eg Liverpool)
- Complex set of reasons – they sold their properties then didn’t earn the income to pay the rents
Who lives in care homes?

- Key factors: age, gender and marital status. Probability of living in a care home increases with age, women are more likely to live longer and to be widowed.
- Public authority rationing of budgets for care means that residents tend to be more frail and dependent than used to be the case.
- Fewer than 10% admitted for reasons other than clinical need. Around 84% care homes have at least 1 resident with dementia.
Specific needs of older care home residents 2008

<table>
<thead>
<tr>
<th>Need</th>
<th>% living in care home</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dementia</td>
<td>40.2%</td>
</tr>
<tr>
<td>Impaired vision</td>
<td>34.8%</td>
</tr>
<tr>
<td>Physical disability</td>
<td>27.7%</td>
</tr>
<tr>
<td>Impaired hearing</td>
<td>22.8%</td>
</tr>
<tr>
<td>Other mental health needs</td>
<td>10.0%</td>
</tr>
<tr>
<td>Learning disabilities</td>
<td>2.3%</td>
</tr>
<tr>
<td>Drug dependency</td>
<td>1.0%</td>
</tr>
<tr>
<td>Alcohol dependency</td>
<td>0.8%</td>
</tr>
</tbody>
</table>
Going into a care home

• Choice of care home not necessarily made by the person who will live there (could be a statutory social worker or a relative).

• The more sick and disabled people are the less likely they are to have a choice and the more likely it is that the move will be made at a time of crisis.

• In most areas the choice is limited, (or non-existent) especially for people who need financial assistance.
Who pays for them?

- Individuals can have a place purchased for them with public funds in any sector care home as long as they are eligible.
- Increasing numbers of self-funding residents. Up from 30% - 40% over 10 years (rationing by public authorities, home ownership reduces eligibility)
- Care home fees: approx £350 - £750 per week for standard accommodation and personal care and £500 - £1,100 per week for nursing care (2010)
Care homes registration and inspection

• All care homes must be registered with the Care Quality Commission to be able to operate.
• All must comply with the National Minimum Standards and a ‘star-rating’ system operates
• Registration is initially done on-line through a self-assessment questionnaire
• Inspections of care homes have reduced in number in the past years. The CQC is responsible for running the inspection system
• Regulation has been shifted between 4 different bodies in the past 5 years.
• Inspection reports are publicly available (www.cqc.org.uk)
• Care homes owners/managers complete an annual self-assessment form, the CQC does a risk assessment and does a site visit if necessary
• 28 standards and associated expected outcomes.
Standards

- Respect for and involvement of people who use services
- Consent to care and treatment
- Care and welfare of people who use services (safe and appropriate)
- Nutritional needs met
- Safeguarded from abuse
• Cleanliness and infection control
• Management of medicines
• Safety and suitability of premises
• Safety availability and suitability of equipment
• Requirements relating to workers’ qualifications and skills
• Appropriate number of staff
• Staff well supported and supervised
• Service assessed and monitored for quality
• Complaints and comments will be listened to
• Records are accurate, secure and confidential
• Co-operation with other providers – safe co-ordinated care
How good are English homes?

The evidence is mixed

- 2007 Relatives and Residents Association surveyed a sample of 1 star care homes and found failure to meet some standards.
- Office of Fair Trading 2011 review – some improvement since 2005 review
- Great concern by Age UK concerning current and future public spending cuts
- Staffing a major concern – Trade Unions