Most of us have experienced Health Care but when it comes Social Care... What do WE really know?

People often hear the words 'social care' in the media or press but do they really understand what it is? What its origins are? Or what it does?

Social care has no recognisable brand identity unlike Health Care, which is the NHS or an overarching website specifically dedicated to providing information to the public. Yet, social care is happening all around us.

In 2015, a survey carried out by Britain Thinks for Age UK showed, that many members of the public have never heard of Social Care.

They did not understand what aspects of care it covered, how to access it, or where it sits in respect to the NHS. Why is that?

To understand why, we must look back to the early beginnings of social care and the concept of the welfare state.

The Early Beginnings of Social Care

Social Care, like health care, has its origins in the Poor Laws; these laws were consistently reformed over several centuries, responding to poverty, but not preventing it. There was no will or clear vision, of what could replace them. The early insurance-based cover for health services and unemployment support, introduced by the Liberal government in 1906, could be seen as an attempt to change this. During the Second World War, a conscious effort was made to break away from the legacy of the Poor Law, and establish a new, visionary, comprehensive system.

The new system would be built on completely different principles, offering support for everyone, as of right. The Beveridge Report (1942) entitled 'Social Insurance and Allied Services' was overwhelmingly popular with the public and formed the basis of post-war 'welfare' reforms. The report laid out plans for banishing the 'Five Giants': want (caused by poverty); disease (caused by inadequate health care provision); squalor (caused by poor housing); ignorance (caused by a lack of education) and idleness (caused by a lack of jobs, or the ability to gain employment). The report proposed a system of social security which would be operated by the state and implemented at the war's end.

In 1945 the new Labour government introduced a series of welfare reforms, outlined in the Beveridge Report (1942), these laid the foundations for the 'Welfare State', key features of which remain to this day. Aneurin Bevan, Minister of Health at the time, spearheaded the establishment of the National Health Service and introduced The National Health Act in 1946 which came into effect in 1948. The Act stated that it shall be the duty of the Minister of Health to establish a health service to secure improvement in the physical and mental health of the people and the prevention, diagnosis and treatment of illness. The Act stated that the services shall be free of charge.

Following The National Health Act came the National Assistance Act passed, in 1948. This Act under Section 21 stated, that all Local Government Authorities had a duty to provide; 'residential accommodation for persons who by reason of age, infirmity or any other circumstances are in need of care and attention, which is not otherwise available to them'. This Act could be seen as the basis of the modern Social Care system we have today. Both Acts created a system of care that assumed it was possible to distinguish between the sick (people with health needs treated by the NHS) and the aged/disabled, (people with social needs, who would either be cared for by their family or would enter a local authority home). The distinction was a pivotal moment in time, the former would receive their care free of charge and the latter may well be called upon to pay.

From these two Acts we can now see how Social Care provision became separated from Health Care. So, in very simple terms - Health Care/NHS - is free at the point of use and 'makes us better when we are unwell,' whilst Social Care – 'supports people with specific needs to maintain their independence, dignity and control to 'live well' in the community.' It is managed, coordinated, and means tested by Local Government.
https://www.gov.uk/government/publications/social-care-charging-for-local-authorities-2018-to-2019.

Over time, many more pieces of legislation pertaining to both Health and Social Care were passed and implemented, however there are too many to mention here.
https://www.kingsfund.org.uk/publications/community-services-assets/timeline

What is Social Care?

To provide an insight into what Social Care is, we can look to the Dilnot Commission (2011) 'an independent body tasked by Government to review the funding system for care and support in England'. Dilnot (2011) describes the attributes and activities covered by Social Care as follows: -

"Social Care supports people of all ages with certain physical, cognitive or age-related conditions in carrying out personal care or domestic routines. It helps people to sustain employment in paid or unpaid work, education, learning, leisure, and other social support systems. It supports people in building social relationships and taking part fully in society. Social Care is part of a wider care and support system, which includes social care, the NHS, the social security system, housing support and public health services. It also includes the services provided by charitable organisations and the invaluable contribution made by carers and volunteers. The state pension and private financial products also provide income that is used for care and support needs".

Following Dilnot's Report in 2011, the Care Act was introduced in 2014. The Care Act represented the most significant reform of Social Care and support for more than 60 years. Central to this Act was the concept of well-being. First and foremost, councils now have a duty to consider the physical, mental, and emotional well-being of the individual needing care. They also have a new duty to provide preventative services. The Care Act has put people and their carers in control of their care and support and put a limit on the amount anyone has to pay towards the costs of their care.
https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#using-the-care-act-guidance

Perhaps, we can only really understand what social care is, when we experience it first-hand, for instance, when a loved one or close friend needs 'care provision. Whether this is at home (domiciliary care) or in a residential/nursing care home or, 'one to one' specialist care, or in a supported living environment. From my experience of being my Mum's full time carer, finding the route to Social Care support services wasn't easy or clear at first. Signposting for the 'person needing care' and their family or supporter is crucial, especially after a stay in hospital. Both parties can find it difficult to know the next steps, where to go for help and advice, especially when emotions are high. A discharge from hospital assessment should determine whether more care is required after being in hospital. This is a vital time and often needs the supporter or family to take control and manage the process, otherwise it can hold up forward going care provision, if required.

NHS

Health Care

Health Care (NHS): The act of taking preventative or necessary medical procedures to improve a person's well-being.

This may be done with surgery, administering of medicine, or other alterations in a person's lifestyle.

These services are typically offered through a health care system made up of hospitals and physicians.

Social Care

Social Care supports people of all ages with certain physical, cognitive or age-related conditions to maintain their independence, dignity and control.

Help and support is provided with everyday tasks in the broadest sense, these activities enable people of all ages with diverse needs, to live their lives to the fullest.

Social Care is part of a wider care and support system, which includes social care services, the NHS, the social security system, housing support and public health services.

Local government has the main responsibility when it comes to publicly funded Social Care.

The type of care and support provision provided can depend on factors associated with the 'person in need of care', their health care needs, their support needs, their well-being, and their personal circumstances. All of these different factors surrounding the person need to be considered in their package of care.
https://www.nice.org.uk/guidance/ng86/chapter/Recommendations

Accessing Social Care Provision

Adult Social Care supports people from 18 to 70 and over, with some people aged over 100 years. The assumption is often made that social care only supports older people, when in fact its activities enable people of all ages with diverse needs, to live their lives to the fullest.

The pathway to finding Social Care provision is via the gate keeper - your GP. Talk to them first about your situation. They will refer you to specific social care services that can assist you. You can also talk to Adult Social Services, provided by your Local Authority, about a package of care. In Oxfordshire, Adult Social Care services are provided by Oxfordshire County Council.
https://www.oxfordshire.gov.uk/residents/social-and-health-care/adult-social-care

If you are a carer, you can register with your GP; they will put you in touch with organisations that can support and advocate for you, such as Age UK Oxfordshire and Action for Carers, or Carers Oxfordshire. As well as other more specific organisations, depending on the situational need. For more information about finding Care Providers in Oxfordshire see our Care Finder Directory on page 37) and/or visit the approved Personal Assistant online directory at https://oacp.org.uk/support-with-confidence-directory/

To effectively deliver the mantra 'high quality care for all' Health Care and Social Care will need to work ever more closely together. The move to person centred care is driving change via co-production, shaping the future of health and social care provision. Personal Assistants under a system know as Self-Directed Support is giving people the choice to choose the kind of help they receive and where they get it from.

Assistive technology is also being looked at as method of monitoring a person's care from a distance.

However, what is needed in England and in Oxfordshire, right now, is key to the continuity and provision of all care services. Care workers to work in Adult Social Care are required across all job roles and at all levels, to fill the numerous jobs available across the County! The need to find dedicated, friendly and caring people who are willing to step forward, has never been greater! Could you be the next social care professional today or in the future! Visit our jobs portal go to: https://oacp.org.uk/jobs

The Here and Now

Last year the Health/NHS celebrated its birthday, 70 years since its inception and with a quiet diginity and understanding of its own successes so did Social Care!

"Social care may not be the most visible public service but that doesn't make it any less vital'. Anita Charlesworth Director of research and economics at the Health Foundation.

In January 2018, the Department of Health rebranded to recognise 'Social Care'. It is now entitled the Department of Health and Social Care. Finally, Social Care has its place, shoulder to shoulder with Health (NHS), where it can be rightfully, yet clearly acknowledged, in the hearts and minds of the people it serves.

Article by
Jane Wood OACP