

People who fund their adult social care in York

A report by the York JSNA, 2019

Table of Contents

1. Introduction	3
2. Planning for older age.....	4
3. Self-funding care in older age.....	6
3a. Who is eligible for funded care?	6
3b. Transitioning from self-funding care to local authority funded care	6
3c. The cost of care for self-funders	8
3d. Home care costs	8
4. Estimating the number of self-funders in York.....	9
4a. Residential care.....	9
4b. Home care.....	10
4d. Reablement Services	10
5. What do we know about self-funders in York?	11
5a. Discharge from hospital.....	11
5b. What else do we know about self-funders nationally.....	11
6. The care needs of self-funders	13
6a. Evidence of care needs	13
6b. Care from family, friends, and neighbours: community assets.....	14
7. Financial information and advice	16
7a. Sources of information for people in York.....	19
8. Access to information	20
8a. Internet use.....	20
9. Recommendations.....	21
9a. Move to a community asset approach of prevention and living well in older age	21
9b. Develop a system wide vision for ageing well in York.....	21
9c. Make it easier for people to access good quality information and advice	21

1. Introduction

Most people in York can expect to live the majority of their lives in good health. However, many of us will need support with day to day activities towards the end of life.

The industry surrounding the professional paid-for care of older people in the UK is estimated to be worth £22.2 billion¹ (2013 values). Some of this care is paid for by local authorities, or through the NHS through the continuing care fund for people with complex long term conditions. The remainder is funded by individuals themselves.

This report uses what is known locally and nationally about people who self fund their care in order to provide a best estimate of the number of people who fund their care in York; their experiences of navigating the care system, the over or under use of care and the perspectives of those who advise them.

¹ Laing and Buisson, (2013). *Care of Elderly People Market Survey 2012/13*.

2. Planning for older age

Most people in York can expect to live much of their lives in good health and to maintain independence into older age. However, it is also true that many of us will need some support with daily activities in the final years of life. This can include getting washed, dressed, using the toilet, preparing meals and eating.

In 2018, 208,000 people live in York, 18.5% are aged 65 or older.

65+ years	38,600 people
75+ years	18,000 people
85+ years	5,500 people
90+ years	2,000 people

A publication in the Lancet (2017)² compared life after the age of 65 for people between from 1991 onwards and made projections for future decades. The chart below shows the life course of an average man and women after the age of 65.

Average life trajectory for people after the age of 65 (in years)		
	Men	Women
Life expectancy after 65	17	21
Full independence	11	10
Low care needs (i.e. help with housework or cutting toenails)	4	8
Medium care needs (i.e. help preparing meals, and needing help every day)	1.1	1.1
High care needs (i.e. help dressing or using the toilet, or eating)	1.1	1.9

The Lancet publication projects that over the coming decades life expectancy after 65 will continue to increase, and so will the number of years spent with medium and high care needs.

² Kingston A et al, (2017) Is late-life dependency increasing or not? A comparison of the cognitive function and ageing studies. Lancet, [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(17\)31575-1/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(17)31575-1/fulltext)

A similar pattern is found in ONS projections of life expectancy and overall health of people who are currently 65 years old.

	Men	Women
Life expectancy ^{3,4}	84.2	86.4
Healthy life expectancy ⁵	77.3	77
Disability free life years ⁶	75.8	76.3

Among people who are currently aged 65 in York; men will live 7-8 years in ill health, and women will live 9-10 years in ill health. People who live in the least deprived parts of the country have, on average, longer lives and live slightly fewer months in poor health, but most people will still have some care needs in the final years of life. For future generations, it is projected that the number of years spent in living in ill health will increase.

Increasing the number of years people live in good health is an important part of the prevention agenda both for York and the whole country. In 2018 Public Health England and the Centre of Better Ageing have signed a joint agreement to promote evidence based approaches to healthy ageing over the next five years.

Beyond thinking about care, people in England typically do not plan well for declining health and the end of life. Only 60% of adults aged 55+ have written a will which would give them control about what happens to their home and savings after death⁷. The number of people who establish a lasting power of attorney is still small but is thought to be growing, this enables people to nominate a trusted family member or friend to make decisions about their healthcare or finances on their behalf if they became unwell and unable to do this themselves.

³<https://fingertips.phe.org.uk/search/life%20expectancy#page/4/gid/1/pat/6/par/E12000003/ati/102/are/E06000014/iid/91102/age/94/sex/1>

⁴<https://fingertips.phe.org.uk/search/life%20expectancy#page/4/gid/1/pat/6/par/E12000003/ati/102/are/E06000014/iid/91102/age/94/sex/2>

⁵<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandlifeexpectancies/datasets/healthylifeexpectancyhleandlifeexpectancyleadage65byregionengland>

⁶<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandlifeexpectancies/datasets/disabilityfreelifeexpectancydflandlifeexpectancyleadage65byregionengland>

⁷ Financial advice website www.unbiased.co.uk

3. Self-funding care in older age

3a. Who is eligible for funded care?

Adult social care funding is means tested. People are required to meet the costs of their own care if they have savings in excess of £23,250. The value of a person's home is not included in this assessment unless the person moves from their home into a residential care setting.

The UK Home Care Association (2016)⁸ report that access to local authority funded domiciliary care is being restricted to those with the greatest levels of care and support needs. Similarly, Age UK⁹ estimate there has been a 25% reduction in people who are eligible for state funded care since 2010. This is correlated with an increase in people receiving care from family, friends and neighbours.

As a result of these changes to eligibility for local authority funded care a growing proportion of people will pay for their own care. These people are commonly referred to as 'self-funders'. The Kings Fund in 2016¹⁰ identify that changes to the nationally defined programs of care have meant that people who would have previously been eligible for state funded care are now longer so. They argue that 'more older people are falling outside the social care system, either because their financial means are too high for publicly funded help or their care needs are not high enough, yet knowledge about what happens to them is limited'.

3b. Transitioning from self-funding care to local authority funded care

If a person's savings fall to below the funding threshold, and they have defined care needs, they typically become eligible for local authority funded care.

This information is not routinely reported on in York, but a specific review of 2017/18 and 2018/19 case note indicates that fewer than 1 in 10 of York's self-funding cohort deplete their savings to a level that they become eligible for local authority funded care. This appears to be lower than the national rate, but reliable information is scarce.

⁸ UKHCA, An Overview of the Domiciliary Care Market in the United Kingdom (2016)

⁹https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/care--support/RB_mar18_social_care_campaignreport.pdf

¹⁰ Kings Fund (2016) <https://www.kingsfund.org.uk/publications/social-care-older-people>

Local authority funding rates

The Care Act requires that local authorities ensure that the fee level they pay for care is reasonable and allows care providers to operate sustainably whilst also ensuring value for public money.

For 2018/19 City of York Council set the weekly care home rates at:

£505.36 for residential care

£543.72 for residential care for people with dementia

The care market in York is thought to be more competitive than other parts of England. In order to secure residential placements for residents with high care needs, City of York Council will sometimes need to meet the cost of fees which are in excess of the calculated standard rate.

In the year 17/18, City of York Council reported that the average residential care placement funded by the local authority was nearer £700, this means that York ranks high against both the regional and national figures. This figure is for all City of York Council funded care placements in that year, not just those for people who were previously self-funded.

A publication by LSE¹¹ found that the median amount of time people live in care homes is 15 months, however this varies significantly as 27% of people were still living in their care home three years later. Length of stay in nursing care was shorter.

For some people, the transition to local authority funded care can be complicated. The national money advice service¹² says: “Some care providers will let you stay while you apply for funding, and they might accept a lower rate from your local authority so you wouldn’t have to move out. These days, the amount local authority’s pay is usually a lot less than care homes normally charge. If you do qualify for local authority funding, you’re not allowed to top up your care home fees yourself from your capital. If you can’t make up the shortfall in some way, such as getting friends or family to top up your contribution, or there might be a charity or benevolent fund that can help you out. Failing this, you might have to move to a cheaper or shared room, or into another care home which accepts the local authority funding as full payment.”

The national money advice service also highlights that for home owners who are receiving care in their own homes there are a range of other options such as equity release schemes

¹¹ Forder, J. & Fernández, J. (2011) *Length of stay in care homes*. PSSRU, London School of Economics and Political Science <http://eprints.lse.ac.uk/33895/>

¹² Money Advice Service <https://www.moneyadvice.org.uk/en/articles/paying-your-own-care-costs-but-the-moneys-run-out>

or agreements with the local authority to defer the payments for care. The best option will depend on the type of care the person needs, how much the home is worth, and whether any one else is living in the home.

3c. The cost of care for self-funders

The cost of care varies dependant on who is paying. Laing Buisson¹³ identified that 96% of self-funders paid more than local authorities did for the same type of room in the same home. Nationally, Age UK¹⁴ report “It is well established that these so-called ‘self-funders’ pay more than a local authority would if it was funding an identical care home placement ... The reason, of course, is that in many areas councils can use their buying power as block purchasers to drive down the prices they pay. The IPC (2015)¹⁵ comments that most care providers would find it very challenging to have a viable business model through the local authority tariffs alone; and therefore need to attract self-funders to be a viable business.

In York, a greater proportion of the care market is comprised of self-funders than is the case in other areas of England. Some care providers in York work exclusively with people who are self-funding their care and do not have any local authority funded places. This creates a different market to other parts of England where the local authority is a much more dominant provider, and can have a greater degree of purchasing power.

3d. Home care costs

The costs of care for self-funders can also vary. UK Home Care Association (2018)¹⁶ identify that the minimum cost of domiciliary care would in 2018 is £18.01 an hour. This is the minimum required for staff to be paid the living wage and for the business to operate sustainably. The UKHCA report references a statement from the Low Pay Commission which found that domiciliary care is not always charged at this rate.

To illustrate, if a person organised two hours of care a day this would amount to £13,200 annually. As a result, for many self-funders, arranging for care in their own homes represents a more cost effective option than moving to a residential setting.

¹³ Laing and Buisson (2015); “Care of Older People Market report 2015.” Referenced in http://www.ageuk.org.uk/Documents/EN-GB/For-professionals/Research/The_Health_and_Care_of_Older_People_in_England_2017.pdf?dtrk=true#page=29

¹⁴ Age UK (2016) Behind the headlines: ‘stuck in the middle’ self-funders in care homes. <http://www.ageuk.org.uk/latest-news/older-people-who-pay-way-their-own-way-in-care-homes-struggling-to-get-a-fair-deal/>

¹⁵ IPC 2015 Understanding the self-funding market in social care: a toolkit for commissioners second edition https://ipc.brookes.ac.uk/publications/publication_824.html

¹⁶ UKHCA (2018) A Minimum Price for Homecare v5.1

4. Estimating the number of self-funders in York

It is difficult to identify the true numbers of people who fund their own care in York. Care providers are not required to report this information, and there is a commercial sensitivity which dissuades many from doing so. Another option is to ask individuals themselves, however, it is widely understood that many people organise care directly with a care provider, and therefore there is no opportunity to ask this group. City of York Council does collect information about funding status for those who approach the council for advice, but these questions are voluntary and the data collected provides an incomplete picture. Therefore, the best information comes from local estimates produced by the City of York Council adult social care team who have an in-depth understanding of the local context, and a broad range of information sources.

Nationally, the IPC¹⁷ estimate that between 40% and 50% of older adults receiving care are self-funders. Prof. John Bolton¹⁸ identifies that the wealth of the local population has a significant influence on the proportion of the care market that is targeted at self-funders. York is among the most affluent local authorities in England, and therefore is likely to have a large self-funder market.

4a. Residential care

In York there are 27 residential care homes which provide support to older people, 14 of which are registered to provide nursing care to some residents. It is estimated this is a 1,218 residential bed capacity; this figure is taken from CQC inspection reports and information held by CYC adult social care.

The ASC commissioning team estimate that approximately 800 residential care places are self-funded. This would equate to 65% of the total residential care capacity in York.

CYC adult social care identify that residential care providers in York are averaging a 98% filled capacity. This indicates a high level of demand for services, and therefore a less competition in the system. This means that there is less incentive for care homes to accept the lower local authority care fees than there might be in other parts of the country with less demand for care home services.

Local intelligence suggests that some of the self-funders in York have moved into the city from the surrounding area.

¹⁷ IPC (2015) Understanding the self-funding market in social care: a toolkit for commissioners.

https://ipc.brookes.ac.uk/publications/publication_824.html

¹⁸https://webcache.googleusercontent.com/search?q=cache:fj0iJmp2NZEJ:https://ipc.brookes.ac.uk/publications/Predicting_and_managing_demand.html+&cd=2&hl=en&ct=clnk&gl=uk

4b. Home care

Despite the growth in the care home market, many older people live in their own homes. Among people aged over 85 years old, 80% are thought to live in their own home. Of the remainder, 15% live in residential or nursing care, and 5% live in specialist retirement communities. Among people who fund their own care, home ownership rates are very high.

Nationally, the UK Home Care Association¹⁹ report that of the 874,000 people in the UK receiving care at home, 228,000 people were funding their own care (26%) This finding is echoed in a research estimate²⁰, which indicated 25% of the home care market was made up of people who self-fund their care. This would not include where people arrange care through family, friends, neighbours or other informal support structures.

There are 30 home care providers in York that support older adults, plus a smaller number who are registered in North Yorkshire but who deliver care services to people who live in the York area.

There is no centralised data set of people who receive domiciliary care. The CYC adult social care commissioning team estimate that there is a little over 1,000 people in York receiving domiciliary care from a registered organisations. Of these between 300 and 400 are thought to be people who self-funded their care.

4c. Home adaptations

Making changes to the home can be an effective way for people to continue to live independently for longer. When asked as part of the York older people's survey²¹ 51% of respondents said they had fitted adaptations or aids. People who were widowed were more likely to say yes, than people who were married, as were people over the age of 90 in comparison to younger retired adults. It is not clear now many of these people have other forms of support at home, and what proportion fund their own care.

4d. Reablement Services

The reablement service offers short term intensive support over a maximum of six weeks. It is designed to help people find new ways of doing things in order to stay more independent for longer. It is particularly helpful after a stay in hospital or a period of ill health. In York, a smaller proportion of older people are offered reablement after leaving hospital than other parts of the country.

¹⁹ UKHCA Summary (2016) v.35 An Overview of the Domiciliary Care Market in the United Kingdom

²⁰ <https://www.york.ac.uk/inst/spru/pubs/pdf/sscrSelfFundSR11.pdf>

²¹ York Older People's Survey (2017) <http://www.healthyyork.org/media/62045/older-peoples-survey-2017-publication-ready.docx>

5. What do we know about self-funders in York?

Experian Mosaic combines information household characteristics to produce modelled estimates of household types. This tool has been used to estimate household demographics for self funders in York.

- Half of self-funders were aged 85-94
- The ward with the most self funders was Haxby and Wiggington, this is an affluent ward with an older population.
- 1 in 3 households were receiving 'community support' and one in 6 had received 'OT equipment and adaptations'
- Self funders most closely align with the experian profile of 'Senior Security'; suburban home ownership, at least one employment related pension, an overall moderate income, late adopters of technology.

5a. Discharge from hospital

When older people leave hospital some will find they have a greater need for care than they did before they were admitted. In some instances, older people can find that although they are medically well enough to leave hospital they are delayed because of reasons to do with needing to organise care at home or in a residential or nursing home. This is formally known as a delayed discharge.

In the three months of October to December 2018, there were 141 patients who experienced a delay in discharge. Of these, 52 were self-funders, this is 37% of the total. Within this cohort, 22 were still in hospital due to a delay in organising a package of care in their own homes, 23 were waiting for residential care, and 7 for nursing care.

5b. What else do we know about self-funders nationally

- Self-funders tend to be older; half of all self-funders are thought to be over 80.
- More self-funders are women than men. In one study looking at people aged over 75; 4% of men were self-funders compared with 10% of women.
- Despite most of the research focusing on care home places, most self-funders are home owners and live in their own homes.
- Typically self-funders live in more wealthy areas.
- Self-funders are also more likely to live alone than the general population. This may be connected with age and the likelihood of being widowed²².

²² <https://www.york.ac.uk/inst/spru/pubs/pdf/sscrSelfFundSR11.pdf>

- 68% will only visit one or two residential care homes before moving in. Although not discussed directly, this may indicate that this cohort did not fully explore their home care options before deciding to move to adult social care.
- 33% of residents reported not needing help with any aspect of daily living before moving into a care home
- 60% of people didn't have any formal care at home before moving
- 25% of self-funders received help with four or more aspects of daily living when they were at home

6. The care needs of self-funders

Regardless of a person's financial situation, everyone is encouraged to have a care assessment if they feel they need care. This care assessment is available to everyone free of charge, and is delivered by the local authority. It gives a formal understanding of a person's care needs²³ and the options available to them. Although everyone is entitled to an assessment, people who fund their own care may choose not to have this assessment.

In York, if self funders choose to have an assessment, they can subsequently opt to have their care coordinated by City of York Council. The person will be given information about the care providers which are available and can meet their care needs and are asked which provider they prefer. In York, this coordination incurs a charge of £500 annually, but the care is payable at the reduced price that the local authority has negotiated with the providers.

Alternatively, self funders may choose to co-ordinate their care package themselves by micro-commissioning directly from a care provider.

6a. Evidence of care needs

Nationally, self-funders living in care homes were less likely to have received care in their own homes before making the transition, additionally those who did organise care at home reported fewer hours than local authority funded residents²⁴. This may reflect an informed preference to move into residential care, but may also reflect a limited awareness of home care options.

Similarly, a publication by LSE²⁵ found that people who self-funding their residential care home place had a longer average length of stay than people whose care is funded by the local authority. This may suggest that self-funders were in generally better health at the time of their move than people who had their places funded by the local authority. This might also reflect the trend for local authorities to strongly preference providing care in a person's own home wherever safe and practical to do so.

²³ The Care and Support (Eligibility Criteria) Regulations 2014 <http://www.legislation.gov.uk/ukdsi/2014/9780111124185>

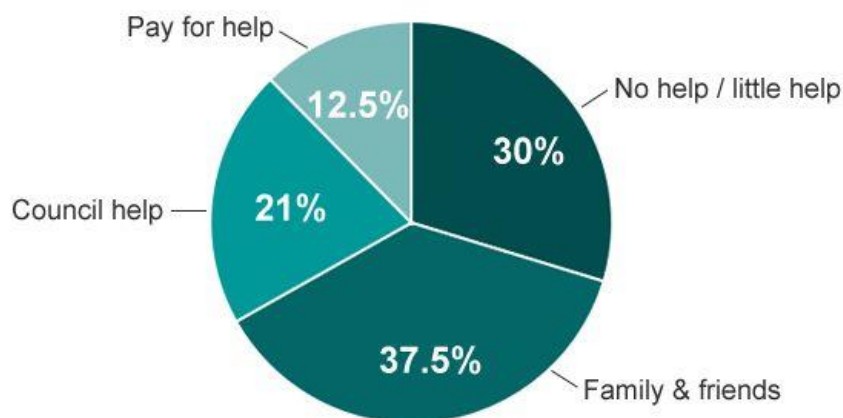
²⁴ <https://www.york.ac.uk/inst/spru/pubs/pdf/sscrSelfFundSR11.pdf>

²⁵ Forder, J. & Fernández, J. (2011) *Length of stay in care homes*. PSSRU, London School of Economics and Political Science <http://eprints.lse.ac.uk/33895/>

6b. Care from family, friends, and neighbours: community assets

A Laing Buisson²⁶ report found that among people with care needs, the majority rely on 'family and friends', or 'no help' at all in older age. It also indicated that only a third of older adults with care needs are in receipt of formally organised professional care.

Where older people in England with care needs get help



Source: Age UK, Laing Buisson, NHS Digital, Carers UK



This information emphasises the importance of community led support, and the strengths of a person's social networks through family, friends, neighbours, and community groups. For many people, the strengths of the community can delay the need for paid-for formal care, or reduce the amount of paid-for care that they need. The information above emphasises that for many people, the strengths of their social connections are a key source of support in older age.

Additionally, the best available information from Age UK²⁷ estimates that 1.4 million people nationally are not getting the support they need for day to day tasks, and the report asserts that most of these are self-funders.

Care from family and friends

Nationally, informal unpaid care is significant; involving 6.5 million people, nearly 1 in 8 of the general population. Around half of this cohort are also in paid work. In York specifically, 1,160²⁸ people claim carers allowance, this means they are caring for a person full time and are not in employment as a result of their caring responsibilities; half are over the age of 50.

²⁶ Coverage in BBC, by health correspondent Mark Trigg, 8th October 2018

<https://www.bbc.co.uk/news/health-45750384>

²⁷ Age UK (2018) care in crisis <https://www.ageuk.org.uk/our-impact/campaigning/care-in-crisis/>

²⁸ <https://www.nomisweb.co.uk/reports/lmp/la/1946157112/report.aspx?town=york>

York Carers Centre is commissioned to provide support to carers of all ages in York. In particular, the Carers Hub is designed to be a single point where carers can access information and advice, as well as assessment and signpost on to other agencies as required. There has been a growing number of carers registering with and using the service each year, and this is projected to continue to rise.

Ageing without children

The national ageing without children charity²⁹ (AWOC) estimates that 9% of people aged 65 or older in England do not have children (data source: ONS). For York this would mean that over 3,000 older people do not have children. In addition to this central cohort, there will be further people who have outlived their children or who are estranged from their children.

Nationally, AWOC identify that adult children take on many tasks to support elderly parents; for example housework or gardening, household administration, shopping, and providing social companionship.

AWOC note that people who do not have children are 25% more likely to move into a residential care setting than their peers with children; and also to make this move with lower care needs.

²⁹ <https://awoc.org>

7. Financial information and advice

The cost of care can be significant. City of York Council and other local authorities publish information and make it available to everyone. Despite this, there is some evidence that people who self-fund their care are not, or do not feel, well informed about the options available to them.

Nationally, The Independent Age chief executive (2011) commented, “We get a lot of calls to our Helpline about paying for care, and many people don’t realise that social care is means-tested and that there are costs involved. When you think about it in the context of a deposit, wedding, or family holiday, you start to realise how high and confusing care costs can be. We know that a lot of people don’t think about care in advance, but there are things you can do even if you haven’t planned ahead.

A systematic review³⁰ of available evidence reported one study that 60% of self-funders did not feel well informed about the financial impact of their care decisions. The best estimate for York would be that this is in excess of 500 people³¹. It is probably that there is a further larger cohort with care needs who are receiving informal care from family and friends; these people may also benefit from financial advice³².

The York older people survey (2017) asked people about their information needs, and whether they felt they were lacking information on any particular topic; around one-fifth of respondents thought there was a lack of information about adult care services.

Nationally, organisations such as Independent Age, Age UK, and the Money Advice Service, money saving expert and others all provide good quality information about how to make informed decisions about care and finances in older age.

York Carer’s Centre: Self-funders of care

The York Carers centre receive a small number of queries each a week about self-funding care, mostly from carers who are themselves in retirement. They recognise a steady increase in the rate of calls over the last two years.

Carers typically seek advice about finding suitable care; including care homes, home care, and respite care. The centre recognises that people ‘don’t know where to start looking for care’. The centre feels that people are often not aware that self-funders are still entitled to a care assessment. Additionally they report that “most people are not aware that the council can commission care on their behalf, that a personal account can be set up with the council

³⁰ <https://www.york.ac.uk/inst/spru/pubs/pdf/sscrSelfFundSR11.pdf>

³¹ Based on the City of York Council adult social care estimates

³² BBC, health correspondent Mark Trigg, 8th October 2018 <https://www.bbc.co.uk/news/health-45750384>

rather than a care agency and that there may be financial benefit in doing so.

The carers centre recognise that family and friends often feel a weight of responsibility about making decisions on behalf of someone else. The centre feels it is difficult for people in York to make informed decisions because of the lack of information. The centre notes that coordinating care with providers from both care homes and home care organisations can be very time consuming and onerous for the person arranging it. A resource that specifically listed providers with current vacancies would significantly improve this process in York. The carers centre does not feel that it is sufficient to leave carers and families to 'just get on with it' particularly without the information they need.

The centre also gets requests for information about the nationally defined financial assessment rules. The centre recognises a lack of local and clear information about other funding routes such as the continuing care fund.

From time to time the centre is contacted by people after their family member's savings have been exhausted and they are no longer able to pay for care. This demonstrates that, for at least some families, there is little awareness of the means testing thresholds in care. Additionally, some people who contact them do not feel there is enough information about the potential implications of arranging care in a residential placement in York with fees that are far in excess of City of York Council's funding limits. These cases are small numbers, but have significant impact for the individual and family.

The lack of financial information is also identified in a recent systematic review of the available evidence³³. The review estimates that two in three people who self-fund their care didn't feel well informed about the financial implications of the decision they were making. Other studies included in the review found that carers and relatives held similar views about the quality of the written information available.

Age UK³⁴ say that older people moving to self-funded care home places are particularly vulnerable, in part "because the decision to enter a care home is usually taken in a rush, following a health emergency such as a fall and a spell in hospital, after which it becomes clear that they are no longer able to live at home. At such an emotional time, scrutinising the fine print in a care home contract is probably the last thing on anyone's mind. Yet few legal documents will have a greater impact on an older person's quality of life, or involve larger sums of money."

³³ https://www.york.gov.uk/downloads/file/6438/care_and_support_fees_charges_allowances_and_ratespdf

³⁴ Age UK (2016) Behind the headlines: 'stuck in the middle' self-funders in care homes. <http://www.ageuk.org.uk/latest-news/older-people-who-pay-way-their-own-way-in-care-homes-struggling-to-get-a-fair-deal/>

One study in the review³⁵ found that “40% of people in care homes would benefit from an existing financial product, but that only 3% of councils provided a list of independent financial advisors would could give advice about products for funding” and 17% referred self-funders to independent financial advisors before a care assessment.

Access to clear and comprehensive financial advice can help self-funders to make the best decisions for their circumstances and relieve stress on families, and in the longer term provide savings to the local authority.

Age UK in York information service: Firstcall

In York, Age UK run a phone based information and signposting service ‘firstcall’. Annually the service receives nearly 3,000 requests for information. This figure does not include the potentially large number of people who visit the Age UK website or other information and advice websites such as Live Well York. Age UK recognise that some people value a conversation when seeking information, and do not want to use these resources.

The team are often asked about the details of the local authority financial assessment. Age UK give printed information and also recognise that City of York Council. The team also receive a number of requests for information about financial benefit entitlements, as well as requests for information about what to do once person comes to the end of their funds.

There is also recognition that whilst many older people in York live in high value homes, they have limited savings and find it difficult to downsize. The most commonly requested leaflet was the home services directory, which provides a list of CYC vetted tradesmen for home improvements.

Requests for information about care agencies were common. This included concern about the capacity or organisations to help, waiting time for support, and difficult with top-up provision.

Age UK York recognises that older people in York want to remain independent for as long as they can, and often hear from people who are seeking information with urgent care needs.

In 2017/2018 citizens advice in York only saw 5 people for information and advice specifically relating to self-funding care.

The national audit office³⁶ in 2014 also reported concerns about the degree of local support offered to self-funders: “Local authorities have had little involvement with self-funders. Few

³⁵ https://www.york.gov.uk/downloads/file/6438/care_and_support_fees_charges_allowances_and_ratespdf

³⁶ Adult social care in England overview (2014) National audit office <https://www.nao.org.uk/wp-content/uploads/2015/03/Adult-social-care-in-England-overview.pdf#page=17>

have known about, or used, their entitlement to free care assessments. Without appropriate guidance and financial advice, adults may make poor, expensive or unsustainable choices about their care and risk running out of funds or losing independence earlier, leading to greater impacts on local authorities or the NHS. The Local Government Information Unit estimated that authorities spent £425 million in 2011-12 on care home residents who had run out of private funds.

7a. Sources of information for people in York

There are many information and advice organisations in York that are able to offer advice on community led support and care in older age; there are yet further organisations in York who work alongside older people and who may be seen as trusted sources of information³⁷.

City of York Council predominantly publishes information for self-funders on both the council website www.york.gov.uk and the Live Well York website www.livewellyork.co.uk. In both instances, the information which directly mentions self-funders focuses on residential care. On the livewellyork page for self-funders, there are five sub-pages; 'what is a self-funder', 'support for self-funders' (continuing healthcare), 'deferred payment scheme', 'residential care' and 'independent financial advice'. Information on the other support options such as home adaptations, care at home, independent living communities are available on both platforms, but are not directly presented as information for self-funders.

In addition, national organisations; Age UK, Independent Age, Money Advice Service, Citizen's Advice and other similar organisations produce information on ageing well, personal care, and finances.

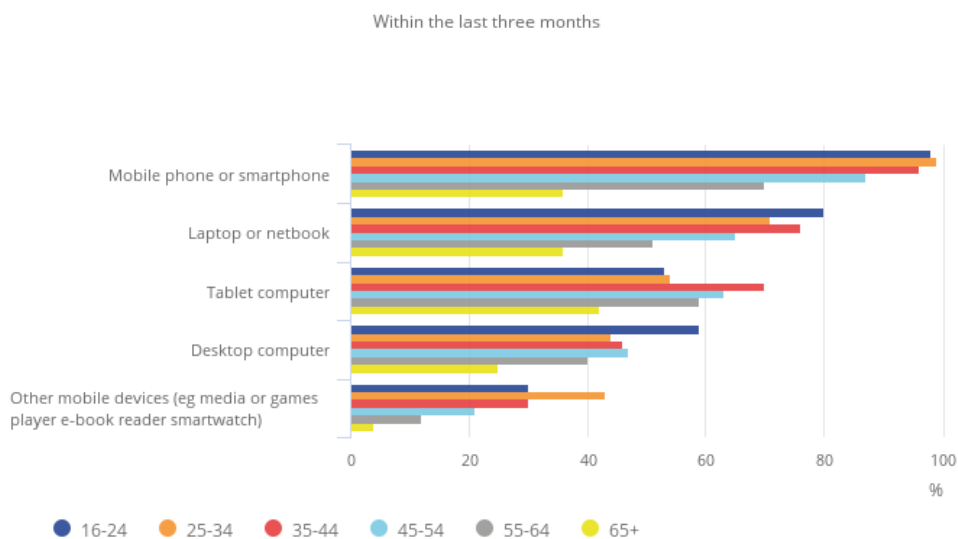
³⁷ York 50+ festival <http://www.yorkassembly.org.uk/y1/Festival>

8. Access to information

8a. Internet use

The internet remains an incomplete way at targeting older adults³⁸. The number of older adults (75+) who use the internet at all is rapidly increasing, and has doubled between 2011 and 2017, this still only accounts for around half of older adults. ONS³⁹ show the proportion of people aged 65+ who had accessed the internet within the last three months is 40%.

Figure 4: Devices used to access the internet, by age group, in Great Britain, 2018



Additionally, the York older people survey⁴⁰ in 2017 reports that almost two-thirds of older people said that they prefer to be contacted by post, and a third of people prefer to receive information in a face-to-face manner. Finally, the Experian Mosaic profile 'senior security' which most closely aligns with the known characteristics of self-funders are in part defined by the late adoption of technology, and the preference for written information.

³⁸ *Internet Users in the UK 2017* ONS, 2017 <https://www.ons.gov.uk/releases/internetusersintheuk2017>

³⁹ Internet access by household and individuals in Great Britain (2018) <https://www.ons.gov.uk/peoplepopulationandcommunity/householdcharacteristics/homeinternetandsocialmediausage/bulletins/internetaccesshouseholdsandindividuals/2018>

⁴⁰ York Older People Survey 2017 <http://www.healthyyork.org/media/62045/older-peoples-survey-2017-publication-ready.docx>

9. Recommendations

9a. Move to a community asset approach of prevention and living well in older age

- Encourage the use of community hubs and the future focus network to support people to maximise their use of community resources
- Support the development of volunteering opportunities for older people
- Use existing information platforms to promote the role of community led support, and ensure it is given sufficient weight against more traditional care approaches
- Find new ways to promote the equipment that allows people to retain a greater degree of independence for longer

9b. Develop a system wide vision for ageing well in York

- Develop a system planning approach for meeting the need of people in older age
- Seek out and incorporate the voices of older people, and opportunities for coproduction, when developing information resources and service models
- Identify and support innovative approaches for people to talk about and plan for older age. This would include the community base support, the options for personal care, financial planning, and use of power of attorney.

9c. Make it easier for people to access good quality information and advice

- Work collaboratively to ensure that people can access good quality information and advice about their care and funding options, irrespective of which organisation they approach
- Make full use of national resources which offer information and advice about personal care and financial planning in older age
- Recognise that most people have a preference for how they receive information; ensure that the same quality of information is available through websites, information phone lines, and in print media

- Highlight the importance of being able to make informed choices about care, including the financial impact of care. Offer practical information about the accreditations that a professional financial advisor would be expected to have

9d. Explore opportunities to further understand people who self-fund care in York

- Explore options to work with the ICG and partner organisations to share additional information indicating how many self-funders use residential and home care services in York.
- Explore approaches to building a richer understanding of the experience of self-funders through working directly with older people in York who are currently funding their own care.