

UK local councils close remaining elderly care homes

Kelly Taylor, Paul Mitchell
3 October 2012

Local councils across the country are closing what still remain of their care homes for the elderly, leaving them at the mercy of private providers.

Conservative-controlled Hampshire County Council has decided, despite widespread protests, to close three care homes in Gosport, Winchester and Fleet, claiming that £4.5 million would be needed to continue running them. The council has over £300 million in its reserves.

Earlier this month Bristol City Council, where the Liberal Democrats are the largest party, announced plans to close eight care homes and seven day centres. A petition of 3,000 names opposing the closures organised by the Bristol Anti-Cuts Alliance, and Unison and GMB unions, was ignored. Labour-controlled Sheffield City Council also announced plans to close the last remaining care home Newton Grange, Stocksbridge, with the loss of up to 31 jobs. All six council-run care homes on Anglesey in North Wales may close in a bid to save £15 million from the council's budget by 2016. The island has been run by five commissioners appointed by the Welsh Assembly under "special measures" legislation since 2009. More than 600 council-run care home beds have been lost in Wales over the past five years.

Funding long term care for the elderly has become a life and death issue for millions of individuals and families. Age UK estimate that there are 1.8 million pensioners living below the poverty line, with 1 million living in severe poverty.

Despite this, £1.3 billion has been slashed from local authorities' annual budgets for help for the over-65s as part of more than £100 billion in cuts nationally. The government's own figures reveal that in 2010-2011 councils in England spent £6.3 billion on social care for

the over-65s compared to £7.6 billion in 2009-2010—a cut of 17 percent.

Over recent years, nearly all councils have stopped providing support to people deemed to have low needs. Only a fifth of councils provide help to those with moderate needs compared to half six years ago. More than three-quarters of councils only give help to elderly people with the most acute problems, i.e., needing help throughout the day. The number of older people given help to live independently in their own homes has fallen by 120,000 in the last year.

Currently, care for the elderly is means-tested. Care home costs average £27,000 per year. Those assessed to require residential care in England with less than £14,250 in savings or assets, including the value of their home, can qualify for local authority long-term care. All those with above £23,250 must pay the full cost of their care. Nearly 500,000 people are paying their own costs and another 800,000 go without proper care despite needing help.

On top of this, there have been large rises in the cost of the Meals on Wheels service and transport for elderly people needing to get to places such as day-care centres. The impact of lack of care for elderly people is already being felt, with increased numbers presenting at casualty for treatment as their health fails.

The wholesale privatisation of care homes began following the Conservatives election victory in 1979 and accelerated under Labour from 1997. Now, nearly 70 percent of care homes are privately run, leaving residents with dementia, disabilities and the frail elderly subject to market constraints and exploitation by the ever increasing body of private equity group-owned service providers eager to profit from the £4 billion a year industry.

Last year, Southern Cross, the largest care home company in the UK, with 750 homes housing 31,000 people, went bankrupt. Using the “sale and lease-back” model whereby the company’s properties were sold off and then leased back, CEOs and shareholders were involved in an asset-stripping operation that made them millions.

When the scandal of abuse at the privately-run Bristol-area Winterbourne View care home for mentally impaired adults was exposed publicly earlier this year, disgust was widespread among the general public. The graphic images aired on BBC’s *Panorama* programme were crippling painful for the viewer; the clear distress of the residents combined with the brutal handling of the “carers” plain for all to see.

A report by independent expert Dr. Margaret Flynn found that residents were subjected to terrible “institutional abuse” and that the care home owners Castlebeck Ltd, controlled by a Swiss private equity firm, had taken “the financial rewards without any apparent accountability.”

She revealed that there had been 379 physical interventions in 2010 and that residents had to be taken to accident and emergency departments 76 times in three years. Castlebeck were paid £3,500 a week by the NHS for every patient in Winterbourne View.

Following the revelations, the Mencap charity’s chief executive Mark Goldring said that “There is a very real risk that another Winterbourne View will come to light.”

The vast media coverage relayed the usual outcries of anger and calls for “reform” that have been going on for years. When a Royal Commission in 1999 recommended free personal care, Tony Blair’s Labour government refused to implement it. Instead, it sought to use the growing crisis in elderly care to call for the onus for its provision to be taken away from the state and placed onto the individual—including a compulsory levy on pensioners.

Following the 2010 election, the Conservative/Liberal-Democrat coalition government commissioned yet another report into elderly care from economist Andrew Dilnot.

Much was made of Dilnot’s suggestion of a cap of £35,000 for care bills, but the main thrust of his report was to limit state provision to funding the cost of “basic” care homes—those that are cheaper and of a poorer quality—and forcing people to take out private insurance to cover anything better. Nevertheless, the government has stonewalled Dilnot’s report, arguing that the cap should be much higher because there is not the money to fund the estimated £2 billion needed.

For its part, Labour says there are “no simple solutions” and cross-party co-operation is needed.

All three major parties are agreed that full state funding for care, whether at home or in care, is out of the question, and the money needed will have to be taken from the pockets of working people in one way or another.

None of them address the real cause and solution to the crisis in elderly health care. Under the existing social system, advances in medical science that have greatly extended the average human life span are regarded as creating a financial burden upon the state. Having abandoned the premise upon which it was founded—universal and free health care for all, from the cradle to the grave—the National Health Service is now capable of providing only selective care.

In a situation of ever more acute shortages, it is the weak and vulnerable who are the first to lose out. Free high quality care must be provided to all elderly people that need it so they can spend their last days without fear of poverty, loneliness or abuse.



To contact the WSWS and the Socialist Equality Party visit:

wsws.org/contact