

# UK adult social care system on verge of collapse

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Massive numbers of British workers who provide care to adults in nursing homes, or in their own homes, are quitting their jobs in the face of shortages and high workloads that make it increasingly impossible to work. The impact is being felt by the most frail and vulnerable in society.

According to data gathered by the charity Skills for Care, in 2015-16, an estimated 338,520 care workers left their jobs, equivalent to 928 people a day, and of those 60 percent stopped working in social care altogether. A total of over 1.3 million were employed in the adult care sector in England.

The average front line, full-time care worker earns just £7.69p an hour, or £14,800 a year. Last year the average median salary was around £27, 600 for a full-time worker in the UK.

One in four social care workers was employed on a zero hours contract, and last year it is estimated that one in 20 job vacancies remained empty, a shortage of 84,320 care workers.

These figures point to the fact that social care providers are struggling to retain staff, with the industry's staff turnover reaching 27 percent, twice the average for other professions in the UK.

The data was released at the same time as a letter written to Prime Minister Theresa May, from the chairman of the UK Homecare Association, which warned that the adult social care system has begun to collapse.

The fact that workers in the sector are often low paid, in what is a very demanding and difficult job, leads to difficulties retaining staff.

The number of people aged 85 and above in England has increased by almost a third in the last decade, and will more than double over the next two decades. This substantial section of the population will require

increased health services and care support as they get older.

Disability Free Life Expectancy (DFLE) at age 65 has been falling from its peak in 2010-12. This is a measurement of the number of people who have reached the age of 65 without having already started to suffer from a condition that leaves them in poor health beyond the age of 65.

DFLE had increased from 2005-07 to 2009-11, with men gaining 0.4 years and women 0.5 years of good health. However, since that time women have lost 60 percent, and men a staggering 75 percent, of the gains made in an earlier part of the decade.

This is leading to more people in later life living with multiple long-term health conditions, with resultant social care needs.

Class background plays an enormous role in DFLE. A woman aged 65 has an expected 3.3 years of healthy living in the poorest areas, compared to 16.7 in the most affluent areas, representing a near fivefold difference.

In the five years preceding 2015-16, there were spending cuts of £160 million in older people's social care. It is estimated that by 2020-21, total spending would need to increase by a minimum of £1.65 billion (to £9 billion) to be able to meet demographic and unit cost pressures alone.

Analysis by the Age UK charity shows that there are 1,183,900 older people over 65 who do not receive the help they need to carry out essential daily living activities, an increase of 17.9 percent over last year, and a 48 percent increase since 2010.

The charity estimates that an additional £4.8 billion a year would be required to ensure that every older person, who currently has one or more unmet needs, has access to social care--rising to £5.75 billion by

2020-21.

Local government spending on social care, meanwhile, will fall by 8.3 percent in real terms between 2015-16 and 2019-20. Spending remained relatively constant at around £8 billion a year, but has now rapidly declined, falling to just £6.3 billion in real terms in 2015-16.

Huge cuts have been made to public spending over the last decade to pay for the £1 trillion bailout of the banks that followed the 2008 global financial crash.

Total local authority spending on social care for older people has dropped by £1.57 billion in just six years. This is coupled with wider cuts to local authority budgets, with the National Audit Office estimating that local authority funding was reduced in real terms between 2010-11 and 2015-16.

The Care Quality Commission, which oversees standards of care, reports that 81 percent of councils have reduced spending on adult social care in the same period.

This has led to local authorities trying to acquire the cheapest contracts from care providers. This is part of the so called competitive tendering process, and has been a major contributory factor to the social care debacle.

An investigation by the BBC's *Panorama* found that 95 private care firms have cancelled contracts with UK councils, as they are unable to provide even the most basic social care service at the price demanded by the councils. A devastating knock on effect of this is the closure of many home care companies and attendant job losses, with 69 closing just in the three months to January.

The immense pressures that care workers face in their day-to-day work, in a demanding and vastly under resourced profession, is a major factor in the increase in the rate of suicide among care workers in the last three years.

Figures released by the Office for National Statistics (ONS) found that the suicide rate for care workers is now twice the national average. More women care workers are taking their lives than in any other UK profession.

The government claims it will invest £2 billion over the next three years in adult social care and take on more apprentices in the sector.

This in no way addresses any of the causes of the

crisis.

The exodus of workers from the profession comes as the Centre for Workforce Intelligence estimates that at least 2 million more carers will be required by 2025 for home care and care homes, just in England alone. Nothing is being done to increase low rates of pay and ease demanding workloads. There is no remedy for the fact that many employed in adult social care are on exploitative zero hours contracts—leaving them in a constant state of insecurity, not knowing if they will have work from one day to the next.

For the capitalist class the care of the elderly and disabled has become an unaffordable burden as the economic crisis deepens.

In a society marked by increasing inequality, the priority is not to look after those who have reached the end of their working lives, the disabled in need of care or the working conditions and pay of those who do their best, with few resources, to try and hold together a collapsing system of adult care.



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