

Reshaping public services (England)

July 2018

In reshaping public services, Government at all levels should take account of the needs of an ageing population



“There’s a lack of sufficient finances for local services – sometimes it means services are moved and accessibility is difficult”
Older voters, Britain Thinks

Also see positions on [Age-friendly government](#), [Age-friendly neighbourhoods](#) and [Digital inclusion](#).

The changing role of Government

Over the past decade, the state has stepped away from its role as default provider of services in a number of areas, and has instead opened up provision to a diverse range of providers, with the aim of increasing choice and competition. The Government has also pursued a policy of transferring responsibility away from central government.

For example, NHS England was established five years ago by the Health and Social Care Act 2012 as a statutorily independent board, responsibility for public health has passed to local government, and there has been a move

Key statistics

£16bn cut

In core Government funding to local councils¹

A gap of a third

On social care spending between the top tenth and bottom tenth of local authorities².

One-third

Of the English population now live in an area with a directly elected ‘metro mayor’³.

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away from central government funding of local authorities in favour of allowing them to levy and retain more income locally through business rates and a 'social care' precept. A wider range of powers has been devolved to some major cities and regions, and a third of the population, including in London and Manchester now have a directly elected 'metro mayor'.

The pressure on public spending

Recently there are signs of a return to a more centralised system, as policies to constrain public spending have affected statutory and community capacity at the local level. While older people's benefits have been largely protected, the pressure on public spending has led to cuts in funding for public services of particular importance to older people, such as social care. The increased focus on local funding also risks increased inequality, as central government funding has not always followed devolved responsibilities and poorer areas find it harder to raise revenue than richer areas.

There is also concern about inequalities across the population, as incomes have risen only slowly since the 2008 financial crisis, which has led to concerns about intergenerational unfairness. Age UK rejects the notion of intergenerational conflict: our research shows that inequalities within age groups are just as important as inequalities between age groups.

The role of the private sector

Many essential services such as public utilities and residential care are provided by private companies, but competitive marketplaces do not always work well for older people, particularly if low income, poor physical or mental health or digital exclusion restrict their choice or make it difficult to act as empowered consumers. Effective regulation, collective voice and legislation (including universal service obligations in some areas) are therefore vital to ensure access and protect people against neglect and abuse.

The role of civil society

Organisations such as Age UK have tremendous potential to work alongside public services to improve outcomes for citizens, mobilising community resources and ensuring that the public and voluntary sectors complement each other to make the impact greater than the sum of the parts.

However, it is vital not to confuse recognition of the strengths of the voluntary sector with an assumption that it can do what the statutory sector does, but cheaper. Cuts to public funding have had a serious impact on the capacity of local organisations, with the loss of many contracts for preventative services and community grants. The Government must address this when developing its civil society strategy.

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A person-centred approach

Research has shown that where health and care services work collaboratively with individual service users, outcomes improve. So, as public services and voluntary organisations evolve, they should consider how they can move away from traditional top-down models of delivery to more person-centred approaches that are co-ordinated around the individual's needs and circumstances.

What is a person-centred approach?

- I am listened to and treated with dignity and compassion
- I only have to tell my story once
- I am treated as an individual
- My culture and lifestyle are respected
- I am provided with information that is easy to understand
- I can access information that is about me
- I am at the heart of decisions about my life
- My support network is recognised and involved according to my wishes and needs
- I am given the time and support that I need to identify the solutions that are right for me
- I am supported to develop my strengths and abilities, enabling me to lead the life that I choose
- The people who are involved in my support and care work together and include me in planning the help I receive
- My support and care is well-coordinated and timely
- If I receive a number of different services I can access a single point of contact
- I can use my experience to help shape, develop, deliver and evaluate services



Public Policy Proposals

Age UK believes that in reforming public services government should meet the following principles.

- Commissioners of public services should secure the most appropriate services for older people. There must be meaningful consultation and co-production with older people on decisions affecting their lives, and commissioners should drawing on the expertise of third sector organisations that support them.
- Older people must be able to expect health, care and other services to be coordinated and person-centred. Integration should be seen not as an end in itself but as an operating principle of all public services.
- Public services are not free-standing functions, they have a role in promoting equality, social inclusion and community cohesion. Services must add value to our communities and promote the growth of social capital.
- Public services must embrace the principles of user engagement and co-design, and consult older people about the design of services for them. This will require a recognition that responsive and efficient services are guided by an ethos of active public and service user participation.
- Public services must be able to demonstrate delivery of high quality evidence-based services, including a commitment to adopting and sharing best practice.
- Equality and Human Rights legislation must inform the reshaping of our public services to meet the needs of our diverse older population and to gain the benefits of empowering them to participate in age friendly communities.
- Neither promoting competition, nor providing a choice of providers can be ends in themselves – they must remain a means to an end. The end product must be affordable, quality services that meet individuals' needs and facilitate integrated care and support. Choice and competition policy must be guided by these aims.
- There must be absolute transparency about accountability – both to the service user and the commissioners or elected representatives who are responsible to the community as a whole. Accountability includes access to an independent complaints-handling system that is accessible to all.
- Even if public services are sub-contracted to the private or third sector, there must be no blurring of the responsibility to ensure services are delivered, which must remain clearly located within statutory organisations. Government, locally and nationally, has the potential to deliver beyond the statutory minimum and should financially support local capacity and innovative solutions for an ageing society.

- Third sector organisations often bring unique expertise in delivering services, particularly to hard to reach groups or people with complex needs. However some may lack the resources to compete in large or expensive tenders. It is important that tendering practices are flexible and appropriate and allow full cost recovery, and commissioners should work across sectors to ensure there is a level playing field.
- Service sustainability is often vital in public services provision. Risk of failure must be reduced and arrangements in place to continue services at a level which maintains essential services, social relationships and human rights in the event of failure. However arrangements must be proportionate to the overall risk that provider failure poses.

Want to find out more?

Age UK has agreed policy positions on a wide range of public policy issues. Our policies cover money matters, health and wellbeing, care and support, housing and communities. There are also some crosscutting themes, such as age equality and human rights, age-friendly government and information and advice

Further information

You can read our policy positions here:

www.ageuk.org.uk/our-impact/policy-research/policypositions/

Individuals can contact us for information or advice here:

www.ageuk.org.uk/informationadvice/ or call us on 0800 169 8787

Further information

i *Person-centred care made simple*, The Health Foundation, 2014

<https://www.health.org.uk/sites/health/files/PersonCentredCareMadeSimple.pdf>

1 *Local Government funding: Moving the conversation on*, Local Government Association, 2018

https://www.local.gov.uk/sites/default/files/documents/5.40_01_Finance%20publication_WEB_0.pdf

2 Spending was less than about £325 per adult resident in a tenth of council areas, while it was more than about £445 per adult resident in another tenth of council areas in 2015–16: Institute for Fiscal Studies

<https://www.ifs.org.uk/publications/9123>

3 <https://www.instituteforgovernment.org.uk/blog/why-new-metro-mayors-matter>