

**ADASS  
AUTUMN  
SURVEY  
2020**

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The Association of Directors of Adults Social Services is a charity. Our objectives include:

- Furthering comprehensive, equitable, social policies and plans which reflect and shape the economic and social environment of the time
- Furthering the interests of those who need social care services regardless of their backgrounds and status and
- Promoting high standards of social care services

Our members are current and former directors of adult care or social services and their senior staff.

## FOREWORD

The coming months present one of the most challenging, if not the most challenging, winters for the country as a whole and specifically in relation to older people, working age disabled people, those of us living with mental health conditions, and those who are carers. We face unprecedented challenges in terms of the sufficiency of care and support, the availability of a skilled workforce, ongoing pressures on incredibly committed and compassionate care staff and unpaid carers, growing pressures in our NHS and the potential impacts of European Union Exit on 1st January 2021. These challenges have only been magnified by the onset of Covid-19.

Every year ADASS runs a short, snap Autumn survey. This year is not surprisingly particularly significant given the on-going Covid-19 pandemic. This report builds upon the evidence that we presented in our two reports published in June 2020. The first of these focused specifically on the response by ADASS members to the Covid-19 pandemic. The second, the ADASS Budget Survey, set out and explored the wider financial impact of Covid-19 for adult social care in England.

Given the impact of Covid-19 on adult social care, the survey repeated a number of the questions that were asked in the ADASS Budget and Coronavirus Surveys in order to provide an additional temperature check of the on-going pressures within the sector. It also provides additional evidence of the challenges that the sector is facing to support the 'asks' of Government that we have made for the winter ahead and for the forthcoming One-Year Spending Review.<sup>1 2</sup>

What continues to be clear is that the human cost of this pandemic is immeasurable, whether this is on an individual who accesses care and support services, their families and carers, or people that work in social care or society as a whole. This survey highlights in stark numbers the differing degrees to which Directors of Adult Social Services feel that they are able to deliver the minimum care and support that they are obliged to by law. These underpin the basic human rights of any of us in a civilised society, including safeguarding people with care and support needs from abuse and neglect. It also continues to highlight that many organisations that deliver are becoming increasingly unsustainable, with more and more people impacted by closures of providers or contracts being handed back to local authorities as they are no longer financially viable.

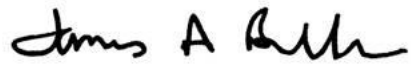
This is not simply another report about local councils and funding, it is a report about people and the continuity of care that they need to live their lives, with independence and dignity. It is my hope that this report is read and responded to by Government on this basis. Adult social care could be so much more than it currently is, it can be truly transformative for people and enable them to live the lives they want to lead. By investing in social care, we will reap the benefits as a society and as an economy. Social care is not a problem to be solved, it is an opportunity to create a better society, to reduce inequalities and to genuinely 'level up'.

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<sup>1</sup> [Winter 2020/2021- Prioritising care at home and support for unpaid carers this winter, Association of Directors of Adult Social Services, November 2020](#)

<sup>2</sup> [Government Spending Review 2021/22- Laying the Foundations for the Future, Association of Directors of Adult Social Services, November 2020](#)

Covid-19 has shown the true value of social care to our society, now it's time for this Government to deliver on this once in a generation opportunity for real and long-lasting change.

A handwritten signature in black ink that reads "James A Bullion". The signature is written in a cursive style with a large, prominent initial 'J'.

**James Bullion**  
President  
Association of Directors of Adult Social Services

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## FOREWORD

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## KEY MESSAGES

Key messages from this ADASS Autumn Survey are:

***The onset of the pandemic has led to an increase in the number of people presenting with adult social care needs to local authorities, with concerning increases in older and disabled people presenting for domestic abuse and safeguarding and carer breakdown since June 2020.*** Since March 2020, 69% of respondents have seen an increase in people presenting with needs related to domestic abuse and safeguarding. This figure was 42% in our June 2020 report. 64% of Directors also said that the number of individuals presenting with need to local authorities as a result of carer breakdown, sickness or unavailability increased due to Covid-19. In June 2020 this was 53%.

***The precarious financial position of adult social care means that Directors confidence in meeting what they have to do in law, which is the cornerstone of meeting basic human rights, continues to diminish year on year.*** Nearly a quarter (23%) of Directors have reported that they have no confidence in their budgets being sufficient to meet all of their statutory duties in 2020/21, with 53% only partially confident. For 2021/22, 86% of Directors have either partial confidence or no confidence that their budgets will be sufficient to meet all of their statutory duties, increasing from 76% in June 2020. This means they doubt their ability to provide the full range of information and advice, support wellbeing and prevention, provide assessments and direct payments or the arrangement of care and support, maintain care markets and safeguard people with care and support needs from abuse and neglect, or at risk of being deprived of their liberty.

***Since the onset of Covid-19 the risk of already fragile care markets failing has significantly heightened.*** In the past 6 months 60% of Directors reported that providers in their area had closed, ceased trading or handed back local authority contracts, impacting upon 3,309 people in total. This compares to 43% reported in the 6 months prior to the ADASS Budget Survey which was published in June 2020. Looking forward, a substantial majority of Directors (80%) stated that they were concerned about the financial sustainability of some residential and nursing providers since the Covid-19 outbreak.

***Adult social care services are facing significant financial pressures in 2020/21, with an overspend of £468m predicted nationally, as a result of the additional need and costs that have emerged as a result of the onset of the pandemic and despite additional funding for Covid-19 from Government.*** A significant number of Directors are predicting overspends for 2020/21 due to additional financial pressures as a result of the ongoing impact of Covid-19. This is despite Government having provided some funding so far to try and offset some of the cost pressures facing local authority services more broadly. This has led to some Directors being forced into making additional in-year savings to offset these budgetary pressures. This will have a direct impact on the availability of essential services for people with care and support needs.

# 1. INTRODUCTION

## 1.1 CONTEXT

Prior to the pandemic, adult social care already faced significant and ongoing challenges. These included, but are not limited to, the following:

- Fragile care markets;
- Increasing demographic pressures and more people living with complex needs;
- Increasing levels of unmet and under-met need;
- Insufficient resources to invest in early intervention and prevention in a meaningful way;
- Recruitment and retention of the workforce;
- Issues relating to a potential no deal EU Exit, including significant related workforce issues; and
- The use of short-term and time-limited funding settlements to support adult social care budgets, including the Infection Control Grant and Improved Better Care Fund (iBCF);

Since 2010 local authorities have had to make savings of £7.7bn, which would have reached £8.3bn in 2020. However, the onset of Covid-19 means that this year a large proportion of these will not be realised. Despite these ongoing funding challenges, Directors of Adult Social Care are still required to contribute to the savings options to support their council's wider budget pressures to ensure that they can meet the statutory duty to deliver a balanced budget year on year.

The onset of Covid-19 has only served to magnify these challenges and bring them into view of society more broadly. It has also made it abundantly clear that adult social care cannot continue to limp from year to year, relying on short-term or time limited funding settlements.

## 1.2 METHODOLOGY

The ADASS Autumn Survey was conducted by the Association of Directors of Adult Social Services (ADASS) and was sent to every Director of Adult Social Services in England. These directors are full members of ADASS. The survey was distributed via an online link and remained open between 22<sup>nd</sup> October and 13<sup>th</sup> November 2020.

There are 151 local authorities in England with adult social care responsibility. For this survey, there were 101 completed returns. Not all questions have been completed by all respondents, but the report makes clear where samples have been used to make national projections.

## 2. COVID-19: CHANGES IN AND CHALLENGES TO MEET PEOPLE'S NEEDS

During the period this report covers, there were significant changes in how people approached local authorities for social care help and support. Some of this appears to have been a result of the anticipated surges after the first wave of the pandemic and lockdown which saw some concerning reductions in referrals for support. Some is potentially a result of people struggling for too long without care, support or safeguards.

### *Changes in the number of people presenting to local authorities with adult social care needs*

Directors reported that the largest increase in people presenting increased adult social care needs to their local authorities since the beginning of March 2020 are people being discharged from hospital, with 70% of respondents indicating that this is the case. This compares to 55% of respondents in the ADASS Coronavirus report that was published in June 2020. 45% of respondents also said that there were increases in the numbers of people presenting with need as a result of not being admitted to hospital. This is likely to be linked to people's reluctance to go to hospitals; this figure has declined slightly from June 2020 when it was 50%.

69% of respondents have seen an increase in people presenting needs related to domestic abuse and safeguarding. It is important to note that these are people with care and support needs who are experiencing or at risk of abuse or neglect. This figure was 42% in our June 2020 report. In the ADASS Coronavirus report 35% of Directors had indicated that they had seen fewer people presenting, which was a likely consequence of the nationwide lockdown and people potentially not getting the help they need, whereas for this survey this figure is 8%. It seems clear that as lockdown measures were eased, more people presented with needs relating to domestic abuse and safeguarding. Therefore, the decrease in referrals experienced in some areas earlier in 2020 actually 'hid' the extent of safeguarding concerns for some people. It will be important for local authorities and Government to understand these trends when reviewing the impact of Covid-19 and where and why they occurred to inform future pandemic planning.

The proportion of individuals presenting with need to local authorities as a result of carer breakdown, sickness or unavailability increased due to Covid-19, with 64% of Directors indicating that this was the case. In June 2020 this was 53%. We know from Carers UK that unpaid care increased during the pandemic, both in terms of the numbers of people taking on caring roles and in terms of the intensity of care provided. In many cases, if an unpaid carer falls sick, there may be no one else available, or capable, or providing the care and support that their family member or friend requires. In such cases it is often adult social care who provide emergency support to the people they are caring for.

Two-thirds of respondents (66%) indicated that the temporary closure of services, such as day services, has led to an increase in the number of people presenting with needs to their local authority. This figure is slightly down from 74% in June 2020 and



may be the result of some services re-opening in a Covid-19 secure manner or alternative means of meeting need having been developed over the past few months.

There has been a decline in the number of respondents indicating that an increased number of people are presenting social care needs as a result of providers' concerns about accepting new clients. This has decreased from 80% in June 2020, to 65% in our latest survey that informed this report. This shift may in part be due to people and their families being more confident in PPE and therefore of letting carers into their homes, providers, local authorities and Government having a better understanding of how to safely isolate people, the increased availability of PPE and the upscaling in the availability of testing.

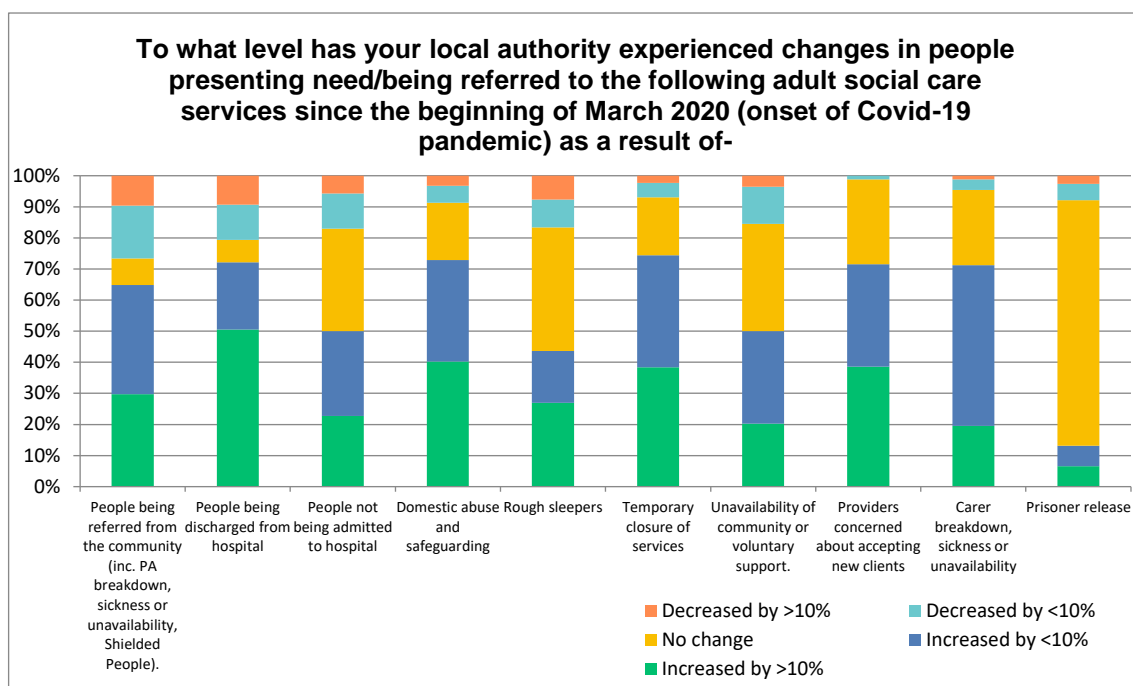
Similarly, the proportion of people being referred from the community (including as a result of personal assistant breakdown, sickness or unavailability, Shielded People) also increased in 63% of respondent's areas. This has increased significantly from 41% in June. Whilst there was a reported decline in people presenting with need in 33% of respondent's local authorities for this reason in June 2020, in November 2020 this figure has declined slightly to 28%. Overall, evidence suggests that needs in this area are increasing.

The unavailability of community or voluntary support as a result of Covid-19 has led to an increase in the number of people presenting needs in 43% of respondents' local authority areas as of November 2020. By comparison, in June 2020, when the ADASS Coronavirus report was published, 46% of Directors indicated that there had 'no change' in people presenting need as a result of the unavailability of community or voluntary support, with 31% indicating an increase.

Since March 2020 there has been an increase in 35% of respondent's local authority areas in the proportion of rough sleepers presenting with social care needs. This has slightly decreased since June 2020 when Directors reported a 40% increase (as reported in the ADASS Coronavirus Survey). The increase, in part, is likely to be attributable to the Government's direction to local authorities in late March 2020 to find emergency accommodation for all rough sleepers in England. This commitment would have allowed individuals to be assessed for a range of needs and for support to be provided if required.

The proportion of people presenting with need as a result of prisoner release remained fairly static, with 63% of respondents stating that there had been no change since March 2020. This figure has declined significantly since the ADASS Coronavirus Survey was published in June 2020 where 93% of Directors stated that there had been no change.

Figure 1: Reported change in numbers presenting with a social care need



### 3. ADULT SOCIAL CARE BUDGETS

#### *The Impact of Covid-19 on Adult Social Care Budgets*

To-date Government has provided £4.3 billion of funding tackle the cost impact of COVID-19 on local authorities, which is intended to cover all council service areas, as well as £1.146bn for adult social care through the Infection Control Fund.

On average local authorities are predicting a £3m overspend on their adult social care budget for 2020/21. If this average overspend is applied across all 151 local authorities with adult social responsibilities in England, then this would constitute a budget gap for adult social care of £468m just for the current financial year. This figure is likely to be subject to significant change given that we are on the cusp on winter and the impact of this on services and budgets is as yet unclear.

It is important for Government to consider the impact of addressing overspends, such as that listed above, on adult social care and other essential local authority services going into the 2021/22. Some local authorities may be able to deliver additional savings to budgets or fund overspends using one-off reserves in this financial year to deliver a legally obligated balanced budget year on year. This will not be the case across the board. For example, London Borough of Croydon Council has recently issued a S114 notice.<sup>3</sup> This will leave Directors in the unenviable position of having to make further savings, above and beyond the £7.7bn made in the past decade, to adult social care services which may leave many stripped back to the statutory minimum and resultantly will mean in many cases that care and support is only provided at the point an individual faces a crisis.

<sup>3</sup> [S114 notice will make cost-cutting 'more stringent and tough', Inside Croydon, 11 November 2020](#)

13% local authorities indicated that they have been asked to make additional in-year savings to their adult social care budgets for 2020/21 above and beyond those already planned. Across these local authorities the additional total savings required was £23m. If these savings are extrapolated to 13% of all of the 151 local authorities with adult social care responsibilities, then the total is just under £36m.

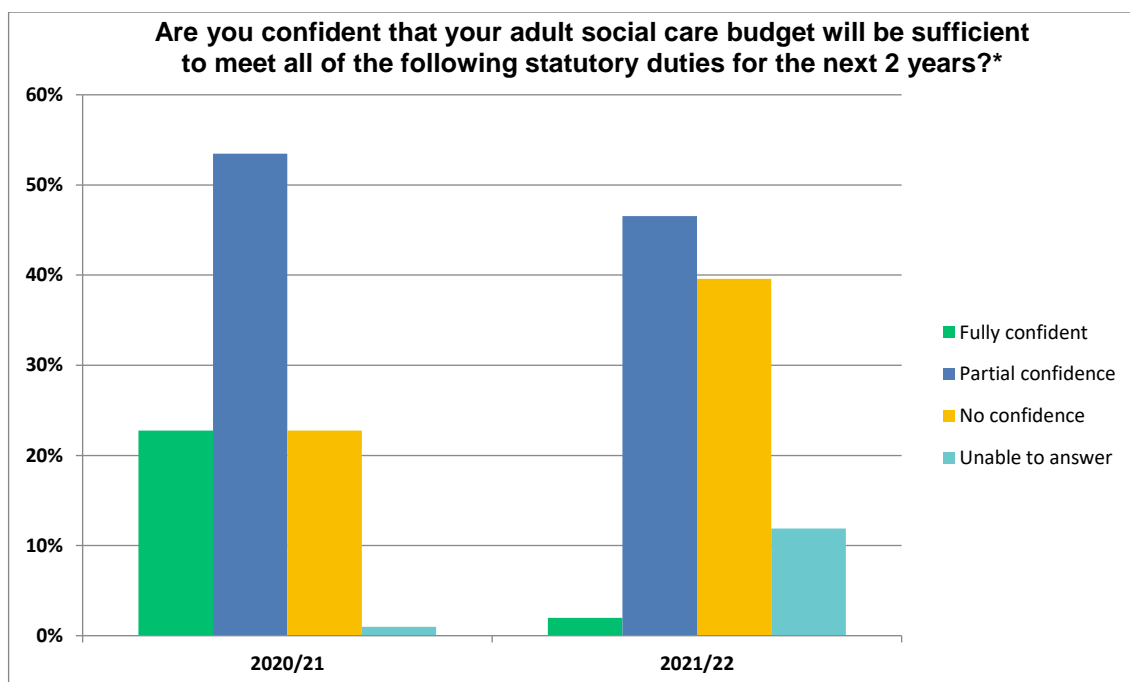
### **Impact of Covid-19 on Directors of Adult Social Services' ability to meet statutory duties**

The onset of the pandemic, and the additional financial and demand pressures faced by local authorities has led to a significant change in the Directors' confidence in meeting their statutory duties relating to adult social care.

For the current financial year (2020/21) only 23% of Directors are fully confident that their budget will be sufficient to meet the duties they are required to meet in law. 53% of Directors are partially confident that their budgets will be sufficient to meet their statutory duties for the current financial year. Most significantly, nearly a quarter (23%) of Directors have indicated that they have no confidence in their budgets being sufficient to meet all of their statutory duties.

In 2021/22, 86% of Directors have either partial confidence or no confidence that their budgets will be sufficient to meet all of their statutory duties, this has increased from 76% of Directors that was reported in the ADASS Budget Survey in June 2020. Only 2% of Directors indicated that they were fully confident and 12% stated that they were unable to answer.

Figure 2: Levels of confidence that budget will be sufficient to meet statutory duties



\* Note: Statutory duties included in the list were: Information and advice, Prevention and Wellbeing, Assessment (carers and people using services), Personal Budgets/services sufficient to meet eligible needs (not just physical and biological needs), Safeguarding, DoLS/LPS and Market Sustainability (including National Living Wage)

### **What is Needed to Support the Adult Social Care Response this Winter**

Directors were asked what their top five areas would be for additional financial support, beyond the Infection Control Funding already made available by Government to-date, to manage the adult social care response this winter.

86% of respondents to the survey indicated that additional resources for likely fee uplift demands from providers due to increased costs, such as insurance premiums, were the most important area where investment would be most valued.

During the pandemic Government has been providing additional funding for new or extended health and care support for a period of up to six weeks, following discharge from hospital. 78% of respondents to this survey stated that Government should provide additional funding to cover costs beyond the six weeks currently funded through the NHS.

74% of respondents to this survey indicated that they would value additional funding to cover the increased costs of complex and intensive care packages.

The onset of Covid-19 has also led to a significant shift in the type of care and support people want to access to meet their needs. Individuals and their families are increasingly opting to remain in their own homes, through domiciliary care, utilising direct payments to employ personal assistants or accessing other forms of community support such as Shared Lives. 68% of respondents to this survey highlighted that additional funding to cover the costs for people who need additions to existing care packages to remain at home.

*Figure 3: Beyond the second tranche of Infection Control Funding (£585m). What additional financial support is required to help you manage the adult social care response to the forthcoming winter? (please highlight 5 most important)*

<b>Priorities for Potential Areas of Funding</b>	<b>%</b>
Funding for likely fee uplift demands from providers due to increased costs such as insurance premiums	86
Funding to cover costs beyond the six weeks that NHS will currently pay for	78
Funding to cover the increased costs of complex and intensive care packages	74
Additional funding to cover the costs for people who need additions to existing care packages to remain at home (as they do not want to enter residential/nursing care due to perceived risks of contracting Covid-19)	68
Funding to deliver extra mental health support	56
Funding for increased support for carers	53
Funding for increased staffing costs to provide 7-day cover	52
Support to attract & recruit staff	51
Funding to cover the increased use of alternative provision due to the reduced availability of day services	50
Funding to cover increased needs for people as a result of NHS backlogs	47
Increased Mental Health support	45
Funding to cover for personal assistants sick or self-isolating	36
Funding to cover additional residential respite	36

Funding to facilitate an increase in Third Sector support to people shielding/ vulnerable people	36
Funding for increased demand for services as a result of family carers returning to work after furlough scheme ends	34
Funding to cover the cost of technology to connect families	34
Funding for extra drug and alcohol support	30

#### 4. COVID-19- CARE MARKET SUSTAINABILITY

##### *Hourly rates for home care*

Average hourly rates for home care were requested for each local authority area, 75 responses were received to this question. At the time of completing the survey, the national average hourly rate planned for home care in 2021/22 is £18.49 (based upon responses). It is impossible for such a national average to reflect the complexities of the economic circumstances of different council areas, or the variations in geography and demographic make-up. This figure represents an increase of 4.64% when compared to the average rate of £17.64 for 2020/21 reported in the ADASS Budget Survey published in June 2020. Whilst this increase is not unexpected or needed, given that 70% of those receiving care and support do so outside of the residential and nursing care settings, it is clear that this will only add further pressure to already stretched local authority budgets unless fully funded by Government.

##### *Provider closures and contract hand backs*

It is important to recognise that when reading the figures in this section of the report that every closure, or contract hand back, has a direct impact upon the health and wellbeing of that individual and also their families. Unplanned care home closures are known to impact on mortality.

In the past 6 months 60% of local authorities reported that providers in their area had closed, ceased trading or handed back local authority contracts; these have impacted upon 3,309 people in total. This compares to 43% reported in the 6 months prior to the ADASS Budget Survey (October 2019-March 2020). The remaining 40% have not experienced any provider closures, cessation of trade or contract hand backs over the past 6 months.

The proportion of local authorities reporting closures, or providers ceasing to trade, for home care is 22% for the past 6 months. This compares to 15% prior to the onset of Covid-19 (October 2019-March 2020) and 48% in the full year of 2018/19, which included the failure of Allied Healthcare, which led to the cessation of trading of the business and forced several thousand people who accessed care and support services through them to transition to new providers. The concerning thing about the loss of such providers is it that it comes at a time of increasing demand for home and community-based care as opposed to residential or nursing care.

Over the past 6 months 41% of local authorities have experienced the closure, or cessation of trading, of residential and nursing homes. For the six months prior to the onset of Covid-19 this figure was 25%, whereas in the year 2018/19 35% of local

authorities experienced the closure, or cessation of trading, of Residential and Nursing Care homes.

638 people have been impacted by the closure or cessation of trading of home care providers in the past 6 months. This is an average of 30 people per local authority that has indicated that one or more providers have ceased trading or closed in the past 6 months. In residential and nursing settings, 1,225 people have been impacted by the closure or cessation of trading of providers. This is also equivalent to 30 people per local authority.

1,057 people have been impacted by contract hand backs by home care providers in the past 6 months. This is equivalent to 50 people per local authority that has indicated that they have been subject to contract hand backs. For residential or nursing care providers, 389 people have been impacted by contract hand backs from in the past 6 months. This is equivalent to 30 people per local authority area that has been subject to contract hand backs.

Figure 4: Proportion of councils reporting provider closures, or cessation of trading

	Providers closed or ceased trading					
	Proportion of councils Oct 2018-March 2019 (based on 150 responses to survey)	Reported number of people affected Oct 2018-March 2019 (150 responses)	Proportion of councils Oct 2019-March 2020 (146 responses)	Reported number of people affected Oct 2019-March 2020 (146 responses)	Proportion of councils May 2020-Oct 2020 (101 responses)	Reported number of people affected May 2020-Oct 2020 (101 responses)
Home care	48% (72 LAs)	7,019	15% (24 LAs)	1,100	22% (21 LAs)	638
Residential/Nursing care	35% (52 LAs)	1,173	25% (37 LAs)	948	41% (41 LAs)	1,225

Figure 5: Proportion of councils handing back contracts

	"Handed back" contracts within the last 6 months					
	Proportion of councils Oct 2018-March 2019 (based on 150 responses to survey)	Reported number of people affected Oct 2018-March 2019 (150 responses)	Proportion of councils Oct 2019-March 2020 (146 responses)	Reported number of people affected Oct 2019-March 2020 (146 responses)	Proportion of councils May 2020-Oct 2020 (101 responses)	Reported number of people affected May 2020-Oct 2020 (101 responses)
Home care	25% (38 LAs)	3,464	25% (36 LAs)	2,098	22% (21 LAs)	1,057
Residential/Nursing care	8% (12 LAs)	310	6% (9 LAs)	224	13% (13 LAs)	389

### ***Concerns about the financial stability of providers***

80% of Directors stated that they were concerned about the financial sustainability of some residential and nursing providers since the Covid-19 outbreak. 17% Directors are concerned about most of their residential and nursing providers. 3% were worried about all of their providers and only 1% worried about none.

The picture for home and community care is similar, with 78% of Directors concerned about the financial sustainability of some of their providers. Of the remaining responses, 7% of Directors are concerned about most of their home and community care providers, 3% about all and 12% about none.

The costs of delivering care and support are increasing at the same time that Directors have indicated that the numbers of viable providers are decreasing. This is clearly unsustainable and is detrimental to local authorities being able to deliver on their Care Act duties to shape and commission a vibrant, diverse, sustainable and high-quality markets. Most importantly it hinders the quality and choice of provision of those people with care and support needs.

## **5. ADASS AUTUMN SURVEY 2020 CONCLUSIONS**

The evidence presented in this report emphasises the urgent need for Government to provide increased resources to local authorities for adult social care for this winter, as well as 2021/22 which will be the focus of the forthcoming One-Year Spending Review. Without investment in care at home and to unpaid carers, the whole care and health system is at risk.

Prior to the onset Covid-19, adult social care was already in crisis and having significant impact on older and disabled people, their carers and the care workforce. We have clearly set out the causes and effects of this over a number of years through our ADASS Budget Survey reports. Years of cuts to council budgets, increasing needs of older and disabled people and their families and increasing cost pressures had created a perfect storm.

The current and ongoing impact of the pandemic on people is immeasurable. This survey highlights the significant concerns that Directors have in meeting their statutory duties. This terminology undersells the human impact that significant shortfalls in adult social care budgets could have on people's basic rights such as safeguarding people from harm, assessing the needs of disabled and older people and their access to care and support services. This is not simply about numbers in this report. Most importantly it is about real lives and how the decisions made at a national and local level impact upon the ability of people to live the lives they want to lead.

This report sets out the reality on the ground, not just from the onset of the pandemic, but the decisions to address austerity for the decade before and the impact on local authority budgets.

**Therefore, we are recommending that for the current financial year (until 31 March 2021) that Government:**

- i) Provide an additional £468 million to local authorities to address the significant level of projected overspends for adult social care and safeguard the essential care and support services that have been at the frontline of the Covid-19 response.***
- ii) Invests an additional £480 million into local care markets to provide increased care at home, home first, shared lives and community support capacity.***
- iii) Invest £1.2 billion to provide an urgent package of support for unpaid carers in the form of an extra payment of £50 per week for 20 weeks to be used flexibly for essential breaks to enable them to continue caring.***

The Infection Control Fund has been invaluable in contributing to increasing safety in residential homes, but without an increase in care at home and support for unpaid carers there are significant knock-on effects to hospitals and the whole of the health and care system.

**For the One-Year Spending Review and forthcoming Local Government Finance Settlement 2021/22 we recommend that Government:**

Funding:

- iv) Provide certainty about funding for Adult Social Care.*** Directors of Adult Social Services require certainty about funding ahead of a longer settlement, which will accompany reform. It is only through this that they can re-shape care, supports and safeguards, alongside older and disabled people and their carers. It would be extremely helpful for the Government to signal its commitment beyond a single year framework which would place social care on a similar footing to schools and the NHS. This is an investment, not a drain.
- v) Fully-fund the ongoing, legacy costs and loss of income relating to Covid-19.*** This will include the continuation of funding for Infection Control measures, additional resources to support the continuation of Discharge to Assess arrangements, an uplift in funding to enable an increased proportion of people needing to receive care and support in their own homes and funding to cover future surges relating to people who have been reluctant to ask for help, emerging issues relating to safeguarding and domestic abuse, mental health and other 'hidden' needs and harms.



- vi) Guarantee the continuation of all existing funding streams for adult social care,** recognising that the £1bn funding for social care covered children's and adults' social care and is not ringfenced to adult services.
- vii) Provide a minimum of £1.3bn to fund demographic and inflationary pressures** as well as financial pressure due to increase in complex care packages.
- viii) Provide a financial settlement that ensures the sustainability of all essential local government services,** or risk adult social care having to make additional savings to contribute to local authorities delivering a legally required balanced budget.
- ix) Take account of additional costs that may arise from sleep-in judgements or provider failure.**

Investment in the Adult Social Care Workforce:

- x) Increase the funding available to local authorities to enable them to commission providers to pay an adult social care living wage of a minimum of £10.90.**

Upscale Early Intervention and Prevention, including:

- xi) Provide a significant uplift in funding for prevention, reablement and rehabilitation services,** including Occupational Therapists, Floating Support, Mental Health and Targeted Support to enable people who are mentally ill, with learning disabilities or who misuse substances to avoid the criminal justice system and get care not custody.
- xii) Provide additional investment for the Voluntary and Community and Social Enterprise Sector (VCSE),** channelled through local authorities, to maximise the community assets available to enable an individual, or their carer, to live the life they want to lead.

**Doing nothing is not an option.**

## ADASS

ADASS is the Association of Directors of Adult Social Services in England. We are a charity, a leading, independent voice of adult social care.

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