

# Annexe C

## General research findings

May 2005

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# 1 SUMMARY

- 1.1 This Annexe draws together a range of basic results about the care homes sector that are available from administrative and other government statistical sources.
- 1.2 Drawing mainly on information provided by the registration and inspection activities in each of the four countries of the United Kingdom (UK), the OFT estimates that there are roughly 15,700 care and nursing homes providing 450,000 places that can be accessed by paying consumers – either paying for their own care or with Authority support.
- 1.3 There are more than 12 million people in the UK over 60 years of age, of which 752,000 are between 85 and 89, and 376,000 aged 90 or over. Up to age 64 only three people in every 1000 are living in communal nursing and residential care establishments. This grows to seven in every 1000 for those aged between 65 and 74, but after this increases rapidly to around 250 per 1000 for those aged 90 and over.
- 1.4 Only a little over four per cent of current residents in care and nursing homes are from a minority ethnic background, but this is generally consistent with the ethnic mix of this age group.
- 1.5 The Government Actuary produces the official national 'population projections' for the UK and its constituent countries. Based on the latest projections for the UK, if the current rate at which elderly people live in care should continue to apply in the future, then demand is likely to grow rapidly driven primarily by increases in the population aged 75 years and over.
- 1.6 It can be roughly estimated that, **in the absence of any change in rates**, demand might increase by roughly 25 per cent by 2013, 60 per cent by 2023 and by 150 per cent by 2043.
- 1.7 Among all current residents in care and nursing homes, we estimate 32 per cent are self funding. The remaining 68 per cent attract Authority support for their funding, but divide into 65 per cent (44 per cent of the total) fully supported and 35 per cent (24 per cent of the total) with a third party contribution or 'top up'.

## 2 CARE HOMES AND PLACES

### Sources

2.1 UK statistics on care homes and places are not available from a single source. Each of the four constituent countries of the UK publishes information separately and, to some degree, in differing formats. The sources and statistics are presented below separately for each country and in the following section aggregated to give an approximate UK picture.

### Results by UK country

#### Scotland

2.2 The primary source of statistics for Scotland has been taken as the Scottish Executive National Statistics publication: *Care Homes Scotland*. The information is derived from the *Scottish Care Homes Census*. Returns are made to the Scottish Executive by individual care homes directly, or via Scottish Authorities. Estimates are available up to September 2004. The table below is reproduced directly.

**Table 2.1 - Scotland: Care homes for older people by sector, places and residents, September 2004**

	Sector			All
	Authority/NHS	Private	Voluntary	
Number of care homes	187	637	151	975
Number of places	5,890	27,581	4,506	37,977
Number of residents	5,116	24,890	4,053	34,059
Occupied places	5,120	24,906	4,054	34,080
Vacant places	566	2,239	367	3,172
Unavailable places	204	436	85	725
Occupancy rate	90%	92%	92%	92%

## England

- 2.3 Statistics for England are drawn from the work of the Commission for Social Care Inspection and its predecessor the National Care Standards Commission. The table below is reproduced from the report '*How do we care? The availability of registered care homes and children's homes in England and their performance against National Minimum Standards 2002-03*'.

**Table 2.2 - England: Profile of homes registered for older people October 2003 by provider type**

	Homes	Places
Authority	749	22,919
Private	10,462	299,915
Voluntary	1,640	44,473
Others	143	3,931
All	12,994	371,328

## Wales

- 2.4 The activities of the Care Standards Inspectorate for Wales (CSIW) are reported annually. This body is comparatively new and has published annual reports covering 2002/03 and 2003/04. However, the contents of these reports provide statistics for care homes (1,409 as at March 2004) and places (27,745 as at March 2004) encompassing **all adult care**.
- 2.5 In relation to care provision for older people, statistics from the Welsh Digest of Welsh Local Area statistics appear to provide a more direct measure of places for older people, although the figures currently on the National Assembly website date from March 2000.

**Table 2.3 - Wales: Residential care homes for older people and people with physical or sensory disabilities**

	Homes	Places
Table 2.30: Authority homes	159	5,053
Table 2.31: Independent homes	536	10,087
Table 2.32: Private nursing homes	385	11,701
All	1,080	26,841

Source: Digest of Welsh local area statistics: March 2000

## Northern Ireland

2.6 Prior to April 2005, the work of inspecting was undertaken by four Registration and Inspection Units within the NI Social Services Inspectorate.<sup>1</sup> Results were published in Registration and Inspection Units in Northern Ireland Summary of Statistical Results. The most recently available report provides data either covering 2001/02 or as at March 2002.

**Table 2.4 - Northern Ireland: Registered establishments for older people with estimated places**

Registered establishments for older people	Homes	Sample with place information	Estimated average places	Estimated total
Nursing homes	170	43%	34.8	5,920
Residential:				
Statutory	70			
Private	103			
Voluntary	104			
All residential	277	71%	13.9	3,850
Small homes (fewer than 4)	97	-	2.0	190
Dual registered homes	80	100%	41.7	3,340
All	624			13,300

<sup>1</sup> More details of the ongoing changes to the inspection and regulation of care homes in Northern Ireland can be found in Annexe J.

Source: Department of Health, Social Services and Public Safety

Social Services Inspectorate: Registration and inspection units in Northern Ireland 2001/02: Summary of Statistical Results

2.7 Information on the number of available beds is only available for a proportion of registered homes (approximately 55 per cent). In the table above, estimates of total places in NI have been made by the OFT on the basis of the Northern Ireland report.

### **UK aggregate estimates**

2.8 Given the differences in the format of the published statistics, and further differences in the most recently available data, the UK aggregate estimates below are approximate.

**Table 2.5 - United Kingdom: Broad estimates of care and nursing home places for older people**

	<b>Homes</b>	<b>Places</b>
England	12,994	371,328
Northern Ireland	624	13,300
Scotland	975	37,977
Wales	1,080	26,841
All	15,673	449,446

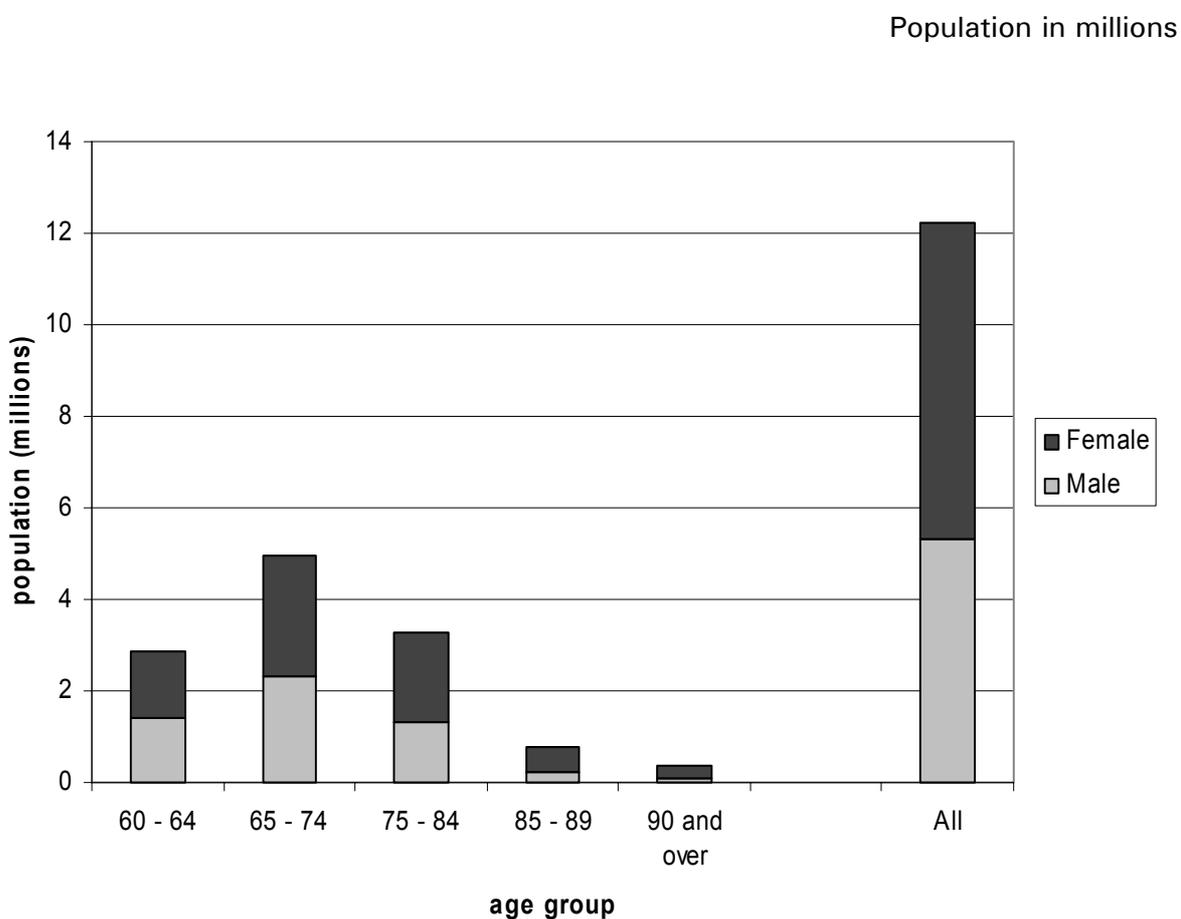
Sources: As above

### 3 UK DEMOGRAPHIC STATISTICS

#### Summary statistics of older people in the UK

3.1 The 2001 census estimated that there were over 12 million people in the UK over 60 years of age, of which 752,000 are between 85 and 89, and 376,000 aged 90 or over. In these older age groups the number of women exceeds the number of men. The imbalance increases with age so that among those aged 90 or more years, women outnumber men by a ratio of more than three to one.

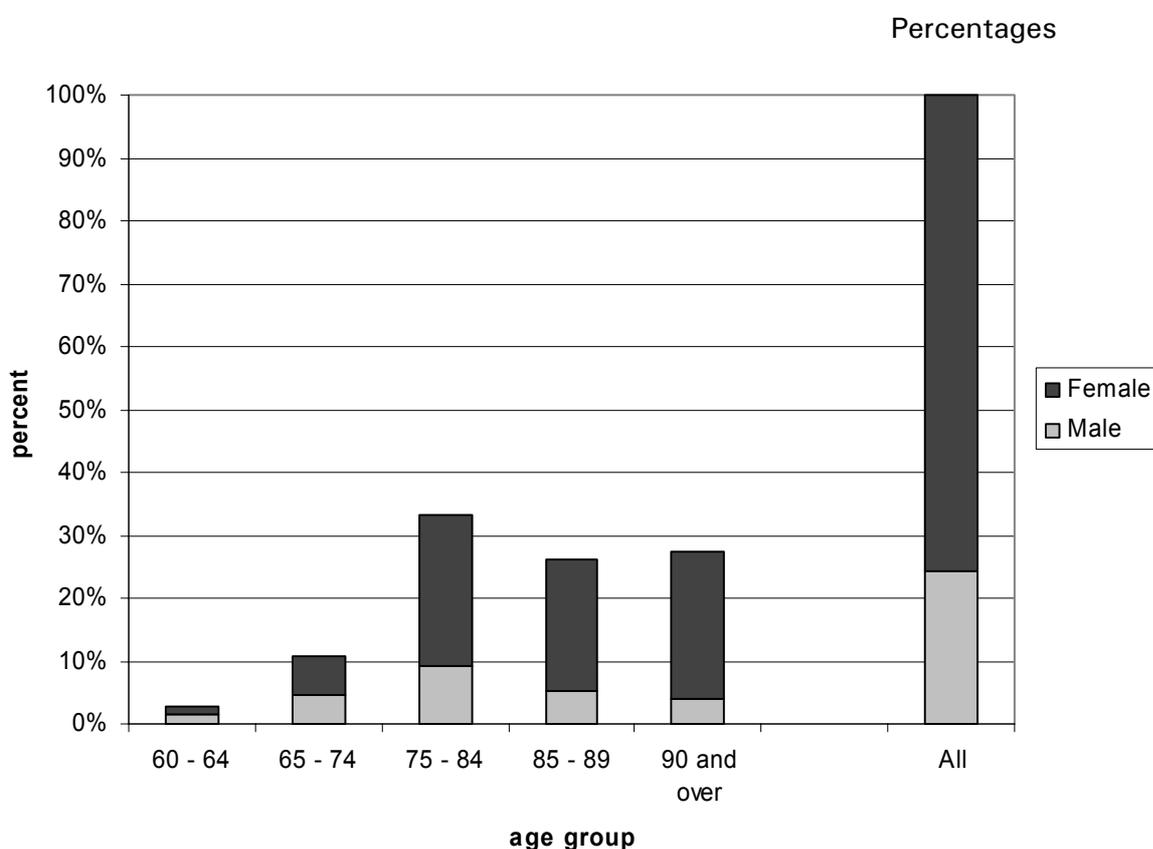
**Chart 3.1 - Summary statistics of older people in the UK**



## Older residents in communal establishments

- 3.2 About three-quarters of all residents in care and nursing homes are female. Females outnumber males for all age groups but the imbalance is especially pronounced among the oldest group, which reaches as high as six females to every one male.
- 3.3 Residents tend to be 75 or older, and though the biggest single group is those between 75 and 84 years of age (33 per cent) more than half are over 85. Only 13 per cent are under 75, and just 2.6 per cent under 65.

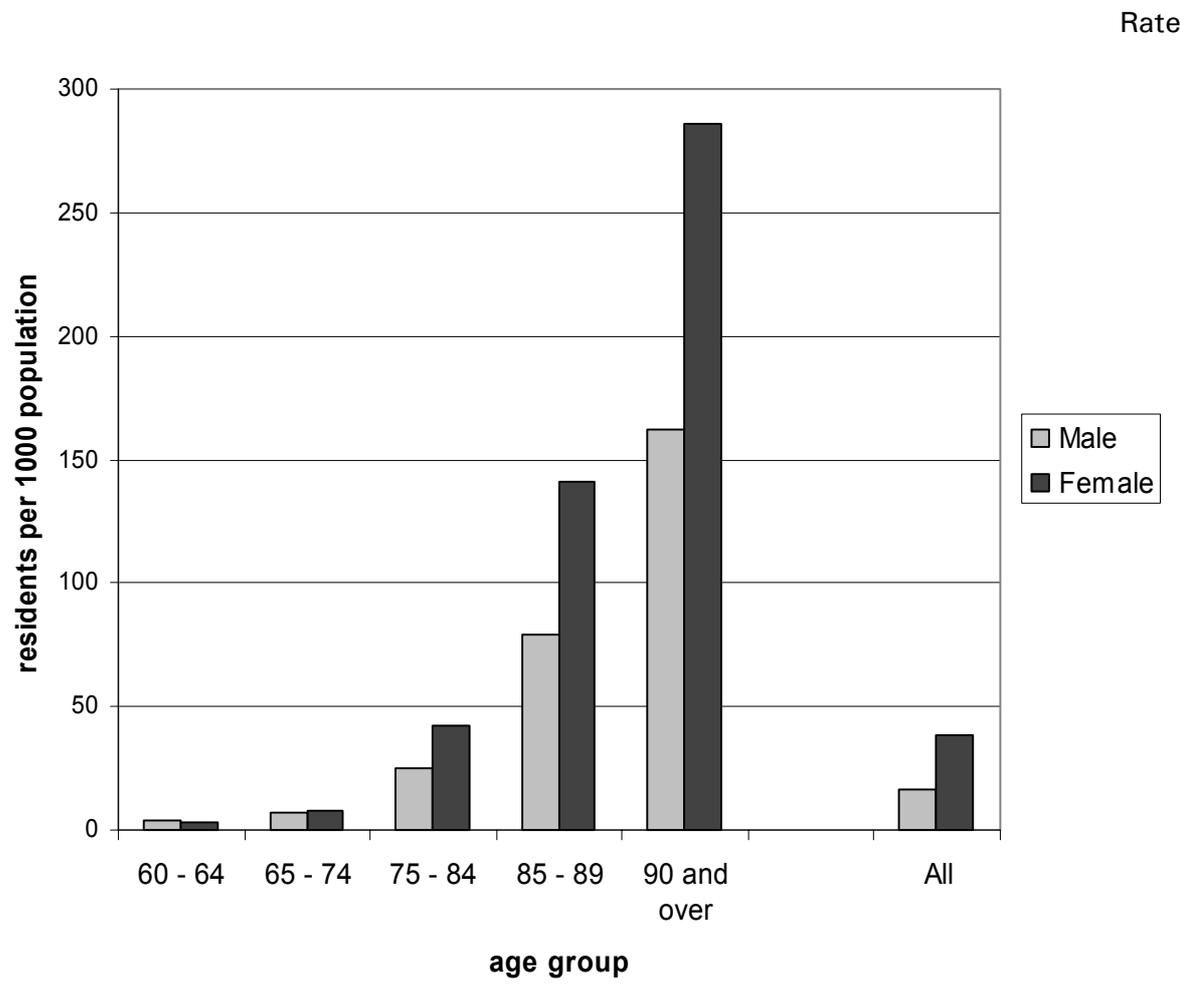
**Chart 3.2 - Older residents in communal establishments: Distribution of age and gender:**



## **Older residents in communal establishments: Rates per 1000 population**

- 3.4 Rates increase rapidly with age. This analysis of rates is based on the 353,000 people identified in the 2001 census as resident in the types of communal establishment described in the source notes below, exclusive of resident staff or their families and aged 60 years or more.
- 3.5 Up to age 64 only three people in every 1000 are living in communal nursing and residential care establishments. This grows to seven in every 1000 for those aged between 65 and 74, but after this increases rapidly to around 250 per 1000 for those aged 90 and over.
- 3.6 In the higher age ranges especially, the rates for women considerably exceed those for men. This analysis does not attempt to explain the differences. However, it should be noted that this is not the direct result of the overall population imbalance in men and women. The figures presented in this section are rates and will have accounted for any differences in population numbers.
- 3.7 More likely (though this is cannot be concluded from these results alone) is that more older women are left to cope alone and without the help of a partner. It may therefore be a tendency for single older people to move into care more often than older people living as couples, that generates the imbalance.
- 3.8 This information is presented in chart 3.3 below. For completeness, table 3.1 below presents the detailed data on which the chart is based.

**Chart 3.3 - Older residents in communal establishments, rates per 1000 population: Person aged 60 and over**



**Table 3.1 - Older residents in living in communal nursing and residential care home establishments: Rates per 1000 population by age range**

<b>Age range</b>	<b>Male</b>	<b>Female</b>	<b>All</b>
60 – 64	4	3	3
65 – 74	7	8	8
75 – 84	25	42	36
85 – 89	79	141	122
90 and over	162	286	258
All	16	39	29
All 65 and over	21	48	37
All 85 and over	102	192	167

Source: Census 2001: People resident in communal establishments.

Reference tables:

Northern Ireland Statistics and Research Agency: Standard tables S301

Scotland: (SCROL – Scottish Census Online Results) S232

England and Wales: National Statistics Stat base: S126

National statistics: Population trends

Inclusive of NHS psychiatric hospitals and homes, Northern Ireland NHS or HSSB psychiatric hospitals and homes, Authority nursing and residential care homes, other nursing and residential care homes, other medical and care homes. Age range 60 +: Exclusive of resident staff.

## 4 ETHNIC POPULATION IN CARE

- 4.1 The 2001 census can also be used to examine the ethnic background of older people in care. The overwhelming majority of older people in care are from a white British background. However, to a large extent the data reflect the general ethnic mix of older people. People from minority ethnic backgrounds make up smaller proportion of older people than younger age groups.
- 4.2 There is evidence that older people from some ethnic backgrounds are more likely to be resident in care and nursing homes than the overall average, and some less. The census data reveal that older people from an Asian or British Asian background are less likely than average to be resident in care, and those from a mixed ethnic background or a Black or Black British background somewhat more likely.

**Table 4.1 – Older people aged 75 and over: Ethnic background: Persons resident in care and nursing homes and UK population**

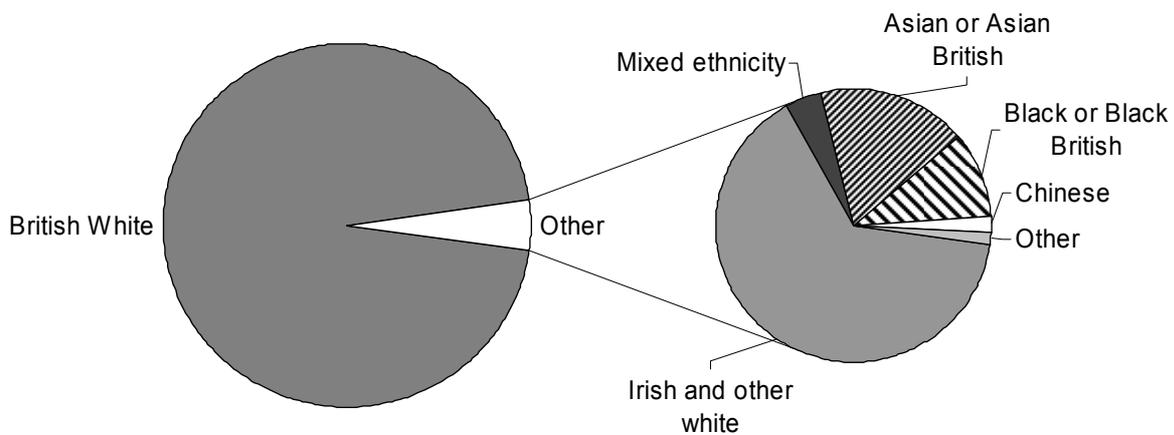
Ethnic background	<i>Per cent</i>	
	Resident in care	All UK population
British White	95.8%	95.5%
Irish and other white	2.6%	2.9%
Mixed ethnicity	0.3%	0.2%
Asian or Asian British	0.5%	0.8%
Black or Black British	0.6%	0.4%
Chinese	0.1%	0.1%
Other	0.1%	0.1%

- 4.3 Currently, the ethnic mix of older people resident in care and nursing homes is very similar to the mix in the older population in general. The position is illustrated in the two charts below, based on the data presented in table 4.1.

**Chart 4.1 - Older people in care: Ethnic background of all residents in care and nursing homes aged 75 and over**



**Chart 4.2 - Ethnic background of all UK population aged 75 and over**



Source: Census 2001: People resident in communal establishments.

Reference tables:

Northern Ireland Statistics and Research Agency: Standard tables S303

Scotland: (SCROL – Scottish Census Online Results) S201

England and Wales: National Statistics Statbase: S101

## 5 POPULATION PROJECTIONS

### Government Actuary's Department: Population projections

- 5.1 The Government Actuary produces the official national 'population projections' for the United Kingdom and its constituent countries. The projections are produced at the request of the Registrars General of England & Wales, Scotland and Northern Ireland. The assumptions on which they are based are agreed in consultation with the statistical offices of the four countries. The primary purpose of the projections is to provide an estimate of future population which is used as a common framework for national planning in a number of different fields.
- 5.2 The latest (2003 based) principal projections for the United Kingdom and constituent countries were published on 30 September 2004. These are 'interim' projections and they replace the previous 'full' set of 2002 based projections. The table below shows projections for 10, 20 and 40 years ahead.

**Table 5.1 - Government Actuary Department: Population projections for the United Kingdom: Base 2003**

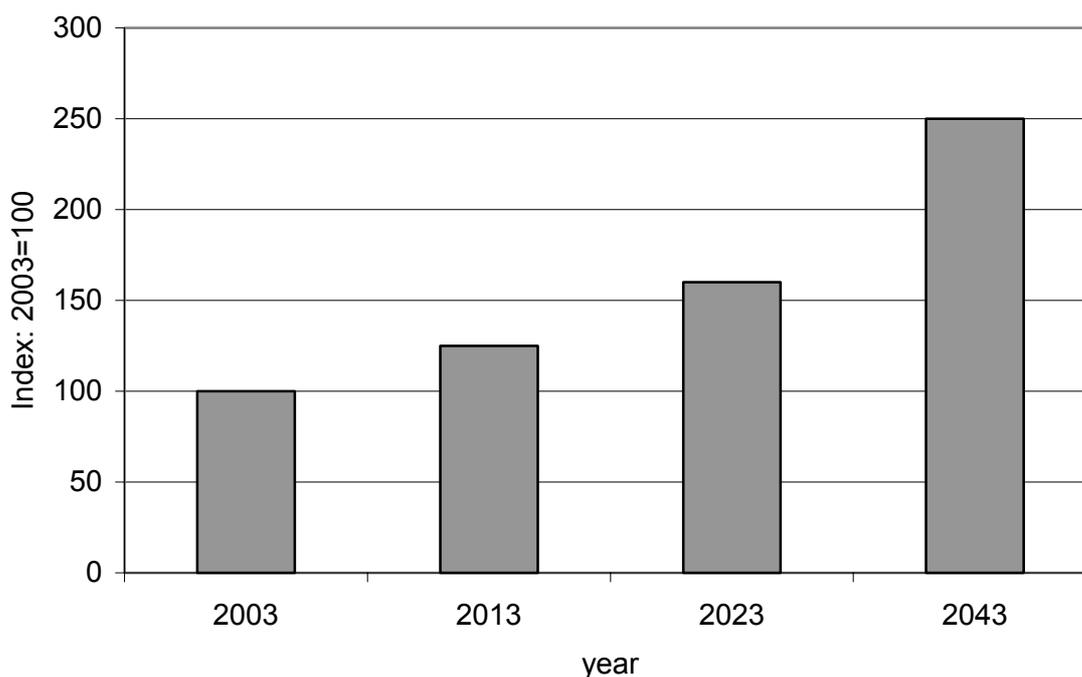
Thousands

Age group	2003	2013	2023	2043
60-64	2,943	3,522	4,075	3,753
65-74	5,005	6,018	6,535	7,118
75-84	3,401	3,635	4,682	6,314
85-89	706	936	1,178	1,789
90 and over	399	535	745	1,511
All 60 and over	12,453	14,646	17,215	20,485
All ages	59,554	61,881	64,288	66,629

- 5.3 Section 2 above discusses the rate at which older people were resident in communal establishments, and demonstrated that it tended to increase with age, and was especially high for age groups over 85 years of age.

- 5.4 There is no way of being sure that similar rates will apply in the future. These rates might be substantially changed by different social care policies and developments in health care and the treatment of certain diseases of old age.
- 5.5 If similar rates should apply in the future then demand is likely to grow by a considerable amount, driven primarily as a result of the large increases observable in table 5.1 for age groups of 75 years and older. Combining the projections in table 5.1 with the rates at which older people live in care (as shown in chart 3.3.), it can be roughly estimated that, **in the absence of any change in rates**, demand might increase by roughly 25 per cent by 2013, 60 per cent by 2023 and by 150 per cent by 2043.

**Chart 5.1 - Broad projections of potential demand for care and nursing home places: Assuming current rates**



## 6 REGIONAL SUPPLY OF CARE HOME PLACES

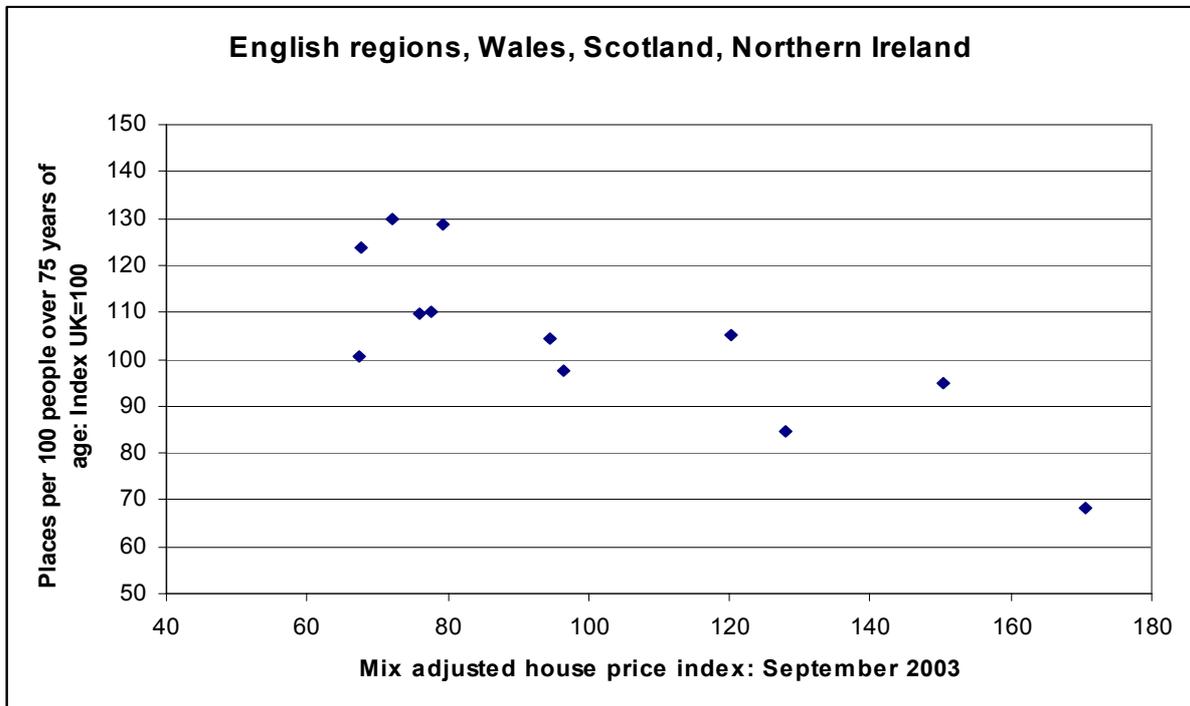
6.1 There are observable differences in the supply of care and nursing home places between the different English regions, Scotland, Wales and Northern Ireland. Across the UK, provision of places is typically 10 care and nursing homes places for every 100 people aged 75 years and over, but varies from about seven places per 100 in London to about 13 in Northern Ireland. The same data depicted as a chart illustrates a degree of association between places and regional house prices.

**Table 6.1 - Estimated supply of care and nursing homes places per 100 people aged 75 and over: Mix adjusted house price index**

Country/Region	Mix adjusted house prices		Places per 100 people aged 75 and over	
	Price	Index	Over 75	Index
North East	£97,000	68	12.4	124
North West	£113,000	79	12.9	129
Yorks & Humber	£111,000	78	11.1	110
East Midlands	£135,000	94	10.5	104
West Midlands	£138,000	97	9.8	98
East	£183,000	128	8.5	85
London	£243,000	171	6.9	68
South East	£214,000	150	9.5	95
South West	£172,000	120	10.5	105
Wales	£108,000	76	11.0	110
Scotland	£96,000	67	10.1	101
Northern Ireland	£103,000	72	13.0	130

Sources: Regional and national estimates of numbers of care homes drawn from Inspectorate sources: House prices: Office of the Deputy Prime Minister: Mix adjusted house price index

**Chart 6.1 - Places per 100 people aged 75 and over: Mix adjusted house price index: Third quarter 2003**



## 7 RESIDENTS' FUNDING SOURCES

7.1 We used our survey of care home providers to establish what proportions of residents in care were self and Authority funded. For the latter group we also established the proportion fully supported by the Authority and the proportion making a third party contribution or top up. Full details are provided in the Annexe describing the survey of care home providers, but basic summary information is also provided in the table below.

**Table 7.1 - Residents' funding sources and third party contributions**

	% of residents within homes			
	Authority funded			All
	Self funding	Without third party contribution	With third party contribution	
All homes	32%	44%	24%	100%

## 8 TOTAL SIZE OF THE SECTOR

- 8.1 Combining results from various research sources we can very roughly estimate the total size of the sector as roughly £8 billion. Most of this will be private for-profit provision but the sector includes also some Authority provision and some charitable/voluntary sector provision.
- 8.2 The estimate is calculated from 448,000 places with an occupancy rate of 91 per cent (taken from our survey of care home providers) implying roughly 408,000 occupied places. In addition our business survey also provided an estimate of the UK average weekly fee of £378, or £19,660 per annum. The estimated £8 billion combines a number of results, each of which may be subject to sampling and other errors and should be regarded as a broad rather than a precise estimate.
- 8.3 However, the result is generally consistent with independent observers of the sector. In their report, *Care of Elderly People, UK Market Survey 2004*, Laing and Buisson estimate the total annualised value of the market at April 2004 is £10.4 billion, but this includes a proportion of NHS and other care that is not part of the sector accessible to elderly paying consumers. Laing and Buisson also estimate the total annual market value of the private for profit nursing and residential care of older people at April 2004 is £7.3 billion.<sup>2</sup>

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<sup>2</sup> Source – page 1, Executive Summary.

## 9 ACRONYMS

<b>ADSS</b>	Association of Directors of Social Services
<b>ADSW</b>	Association of Directors of Social Work
<b>ASA</b>	Advocacy Safeguards Agency
<b>CCH(S)A</b>	Community Care and Health (Scotland) Act 2002
<b>CHAI</b>	Commission for Healthcare Audit and Inspection
<b>CSA</b>	Care Standards Act
<b>CSCI</b>	Commission for Social Care Inspection
<b>COSLA</b>	Convention of Scottish Local Authorities
<b>CRAG</b>	Charges for Residential Accommodation Guidance
<b>CSIW</b>	Care Standards Inspectorate for Wales
<b>DH</b>	Department of Health
<b>DHSSPS</b>	Department of Health, Social Services and Public Safety
<b>EAC</b>	Elderly Accommodation Counsel
<b>ECCA</b>	English Community Care Association
<b>EMI</b>	Elderly Mentally Impaired
<b>FAC</b>	Fair Access to Care
<b>FPNC</b>	Free Personal and Nursing Care
<b>HPSSRIA</b>	Health and Personal Social Services Regulation and Improvement Authority
<b>LASSA</b>	Local Authority Social Services Act

<b>LGA</b>	Local Government Association
<b>LGO</b>	Local Government Ombudsman
<b>NCSC</b>	National Care Standards Commission
<b>NHS</b>	National Health Service
<b>NI</b>	Northern Ireland
<b>OFT</b>	Office of Fair Trading
<b>OPAAL</b>	Older People's Advocacy Alliance
<b>OPRSI</b>	Older People Researching Social Issues
<b>PEA</b>	Personal Expenses Allowance
<b>POVA</b>	Protection of Vulnerable Adults
<b>PSSRU</b>	Personal Social Services Research Unit
<b>RHA</b>	Registered Homes Act
<b>SAGE</b>	Senior Action Group Edinburgh
<b>SAP</b>	Single Assessment Process
<b>SPAIN</b>	Social Policy Ageing Information Network
<b>SSA</b>	Single Shared Assessment
<b>SSIW</b>	Social Services Inspectorate for Wales
<b>UTCCRs</b>	Unfair Terms in Consumer Contracts Regulations

## 10 GLOSSARY

### **Advocacy**

There are many different definitions of advocacy and various models in operation at present, but this outline from the Older People's Advocacy Alliance (OPAAL) is the most appropriate in the context of our recommendations: '*A one-to-one partnership between a trained, independent advocate and an older person who needs support in order to secure or exercise their rights, choices and interests. The three key principles are independence, inclusion and empowerment*'.

### **Authority**

The **care needs assessment** and the **financial assessment** are carried out by the individual's Local Authority, Primary Care Trust or in Northern Ireland the Health and Social Services Board. These bodies should also provide information and support through the process of choosing a care home, for example by providing a list of care homes in the areas. We refer to these bodies collectively as 'Authorities'.

### **Care home**

The term 'care home' generally refers to a home registered under the Care Standards Act providing personal and residential care for older people. We use the term to also include homes that provide nursing care (**nursing homes**). Generally, care homes provide day to day care and support for older people that are unable to manage at home.

### **Care home directory**

A list of all the care homes in the local area provided by the relevant Authority.

## **Care needs assessment**

An assessment carried out to establish a person's need for long term care. It considers the person's ability to perform activities of daily living such as moving about, eating and drinking, using the toilet, getting washed and dressed and preparing snacks and meals. The availability of support and the existing home environment may also influence the assessment.

## **Choice of Accommodation Directions**

The rights of individuals to choose their care home accommodation are set out in various acts of Parliament. In October 2004, the Department of Health issued new guidance to Authorities explaining the implication of these regulations as Local Government Circular LAC (2004)20. In simple terms, the guidance sets out that where someone has a preference for a particular care home, the Authority should arrange for accommodation in that home subject to certain conditions being met. Those conditions are that the home is suitable to meet the individual's assessed needs; that it does not cost more than the Authority would pay to accommodate someone with those assessed needs, that it is available and that the care home is willing to enter into a contract on the Authority's usual terms.

## **Consumer groups**

Organisations that represent the interests of consumers in this sector, for example Which? and the Relatives and Residents Association.

## **Devolved administrations**

The executive bodies of the three devolved regions of the UK: the National Assembly for Wales, the Scottish Executive, and the Northern Ireland Department of Health Social Services and Public Safety ('DHSSPS'). Care for older people is a devolved matter, which means that policy in this area is set by the relevant devolved administration.

## **Domiciliary care**

Care provided in the individual's own home. For example, a care worker may visit the person's home to help them wash and dress, carry out housework and grocery shopping.

## **Extras**

Additional services provided by care homes that are not covered by the fee for accommodation and care. For example, a care home may offer to arrange for a hairdresser or chiropodist to visit the residents for an additional fee.

## **Financial assessment**

This is the process that is used to determine, based on means testing criteria, the individual's ability to pay for their care needs and what, if any, level of contribution they should pay towards their care. The basic process of the financial assessment is the same across the UK, although the upper and lower limits for financial assets differ. Individuals with capital below the lower limit are fully funded by their Authority, while those with capital above the higher limit are liable to pay the full rate for their care. Those with a level of financial assets between the two limits will be expected to pay a varying contribution towards the cost of their care.

## **Government Actuary's Department**

The United Kingdom Government Actuary's Department is a government department providing actuarial consultancy within the public service, and advising on a comprehensive range of topics. The Government Actuary produces the official national 'population projections' for the UK and its constituent countries. The primary purpose of the projections is to provide an estimate of future population which is used as a common framework for national planning in a number of different fields. The projections, especially for older age groups, have relevance to future demand for long term care.

## **Intermediate care**

Intermediate care is a short term intervention to preserve the independence and establish the best long term care solution for people who might otherwise face unnecessarily prolonged hospital stays or inappropriate admission to hospital or residential care. Intermediate care places great emphasis on rehabilitation and maximising independent living, but also seeks to find the most appropriate care solutions for individuals.

## **Local Government Ombudsman**

The Local Government Ombudsmen investigates complaints about maladministration by Authorities and certain other bodies. They investigate complaints about most Authority matters including housing, planning, education, social services, consumer protection, drainage and council tax. The Ombudsmen can investigate complaints about how the Authority has done something, though they cannot question the decision the Authority reached unless the process followed was flawed.

## **National Minimum Standards**

Under the Care Standards Act 2000 (CSA), care homes for older people must operate to a set of standards set out by the governments of each country in the UK. The standards are used by the regulatory and inspection bodies to determine whether registered care homes in their regions are providing adequate care, are meeting the needs of the persons who live there and are otherwise being operated and run in accordance with regulatory requirements. The governments of each country are able to review standards, and may publish amended standards when appropriate.

## **Nursing home**

The term nursing home generally refers to a home registered under the Care Standards Act providing nursing care for older people, in addition to personal residential care.

## **Protection of Vulnerable Adults**

Protection of Vulnerable Adults (POVA) is a scheme designed to provide a workforce ban on care workers who have harmed vulnerable adults in their care. The POVA scheme covers both registered providers of care homes and domiciliary care agencies, and employment agencies and businesses who supply care workers to these providers.

The POVA scheme gives protection to vulnerable adults by placing care homes under a statutory duty to check that potential new care workers are not on the POVA list before allowing them to work in a care position. Care homes also have a responsibility to refer care workers to the POVA list where such workers have harmed vulnerable adults in their care.

## **Regulation and inspection bodies**

These are the four bodies in the UK responsible for the registration of care homes for older people, and subsequent inspection under the Care Standards Act to ensure they comply with National Minimum Standards. They are respectively

Commission for Care Standards Inspection (England)

Care Standards Inspectorate for Wales

Social Services Inspectorate: Registration and Inspection Units Northern Ireland

The Care Commission (The Scottish Commission for the Regulation of Care)

## **Self funding**

An individual who does not receive funding for their care from their Authority and who therefore pay their fees in full from their own income or other resources.

## **Care plan**

Under the National Minimum Standards each service user's health, personal and social care needs, are set out in an individual plan of care. Such a plan should be drawn up with each service user to provide the basis for the care to be delivered. The plan sets out in detail the action which needs to be taken by care staff to ensure that all aspects of the health, personal and social care needs of the person are being met. It should be regularly reviewed by care staff in the home, and updated to reflect any change in the needs and objectives for health and personal care.

## **Single assessment processes**

This describes efforts under which agencies responsible for assessing older people's care needs work together to minimise duplication of efforts. In England, this is known as the Single Assessment Process for Older People or SAP. In Wales, there is a unified assessment process and care management system for older people. In Scotland, there is a Single Shared Assessment (SSA) which seeks to achieve the same goals, and extends to both older people and other community care groups. In Northern Ireland, a comprehensive assessment of health and social care needs takes place within the context of an integrated health and personal social services.

## **Statement of terms and conditions**

For individuals who have their care funded by their Authority, the contract for care will exist between the care home and the Authority. The individual should receive a written record of the relevant terms of the contract, so that they are clear about the roles and responsibilities of the care home, the Authority and the resident. This written record is known as a Statement of Terms and Conditions.

## **Statutory notification**

Where a home has contravened or failed to comply with regulations, the regulator may issue a statutory notification setting out the regulations that have not been complied with, what actions need to be taken and the period within which the action needs to be completed.

## **Super-complaint**

A super-complaint is a complaint about how a market works in general rather than about the operation of one or more individual companies in the market. Under the Enterprise Act such complaints may be brought to the attention of the OFT by a number of designated bodies, including *'Which?'* (formerly the Consumers Association), the body responsible for the super-complaint about the care homes sector considered in this report.

## **Top up or third party contribution**

Some care and nursing homes have fees that are higher than the rate the Authority would usually expect to pay for an individual's assessed need. If an older person eligible for Authority funding wishes to stay in such a home, they need to find a third party willing to pay the cost above the Authority's funding level. This contribution is known as a third party contribution or more commonly as a 'top up'. In Wales, the top up may be paid for by the resident as well as a relative, whereas in England, Scotland and Northern Ireland the top up cannot be paid by the resident themselves. Charities may make a grant towards a top up.

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