



Royal College of Nursing's response to the Department of Health's consultation on the Care Act 2014: how should we deliver the 2016 reforms to cap care costs and manage appeals?

With a membership of around 420,000 registered nurses, midwives, health visitors, nursing students, health care assistants and nurse cadets, the Royal College of Nursing (RCN) is the voice of nursing across the UK and the largest professional union of nursing staff in the world. RCN members work in a variety of hospital and community settings in the NHS and the independent sector. The RCN promotes patient and nursing interests on a wide range of issues by working closely with the Government, the UK parliaments and other national and European political institutions, trade unions, professional bodies and voluntary organisations.

This statement responds to the Department of Health's (DH) request for views on on the draft regulations and guidance needed to introduce the cap on care costs and proposals for a new appeals system.

Background

Nursing staff regularly work at the boundary between health and social care, and know there are challenges when providing free health care and means-tested social care, which particularly affect vulnerable and older patients. Getting funding right in the social care system is crucial for the future sustainability of both social care and the NHS and for the quality of care that patients and service users receive. The RCN has always called for a system based on fairness, equal access, simplicity, and high quality care.

The RCN would like to make the following statement relating to this consultation:

The RCN has already stated that it welcomes a cap on care provision costs to alleviate the financial pressures upon individuals, however, we are disappointed that the Government did not set the cap between £25,000 and £50,000, as advocated by the Dilnot Commission. At £72,000 we are concerned about how many people the cap will affect. We feel that it remains unclear if these new proposals will actually help those most in need or go any way to alleviate the current issues with the system regarding complexity, assessment duplication, and unequal eligibility. We also feel that while care accounts could potentially be useful in providing account updates, the set up costs to Local Authorities could prove particularly costly at a time of budget cuts.

And finally, any appeals process needs to be fair, transparent and above all, fast; our work on the Clwyd review (NHS complaints) has highlighted the need for clarity on access and procedures as well as timeliness in terms of response.

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