



## Commons Health Committee

### Inquiry into Elder Abuse

#### Memorandum of Evidence from the Continuing Care Conference (CCC)

##### Introduction: CCC

1. The Continuing Care Conference (CCC) welcomes the Committee's inquiry into Elder Abuse and is pleased to have the opportunity to submit written evidence to the inquiry.
2. The Continuing Care Conference (CCC), which was established in 1992, is a unique coalition of commercial, charitable and public service organisations with a mutual interest in providing better care for current and future generations of older people. Members include care providers and commissioners, financial service providers, trade and professional bodies and providers of information, advisory and advocacy services. It has no political affiliation and does not seek to represent any single sectoral interest group.
3. CCC's mission statement is: "*We believe that all older people in Britain should live their lives in dignity, comfort and in a place of their choosing. We want all elements of society to make the necessary individual and social investment to ensure that happens. Our task is to ensure that policy-makers pursue this goal and to encourage the public to join with us in our mission to persuade them to do so*".
4. A list of members is attached, for the Committee's information. Individual CCC members will be responding separately and in more detail on several aspects of the inquiry, according to their specific expertise and experience. CCC's evidence concentrates on broad issues affecting the care sector which we believe to be relevant to this specific inquiry and also to the wider question of ensuring good care. Our memorandum does not claim to offer a complete analysis, merely to point out some 'macro' points that we believe should be taken into consideration by the Committee when evaluating the totality of evidence. Our recommendations are therefore limited to specific points; they are not intended to cover the full range of measures required to improve the experience of older people, particularly vulnerable older people, receiving care.

##### Causes of Elder Abuse

5. **Inappropriate or Inadequate Commissioning:** One of CCC's long-standing concerns relates to inappropriate or inadequate commissioning of care. Contractual arrangements for long-term care relate more to the quantity and cost of care than to considerations of quality.

6. The concerns of residential care providers about the level of fees are well documented. A report from the Joseph Rowntree Foundation published in June 2002 concluded that the fees that councils are prepared to pay are between £75 and £85 below the reasonable costs of running an efficient and good quality care home. Furthermore, a survey commissioned by CCC in 2000 found little correlation between the quality of care and the price paid by the commissioner. At that time, only 11% of local authorities 'rewarded' providers who delivered higher quality services through the payment of higher fees<sup>1</sup>. Other market factors, such as undersupply of care beds in some areas, staffing difficulties and some care being provided by homes struggling on in the face of financial difficulty, can contribute to situations which fall short of the ideal.
7. Examples of such external factors are:
  - A shortfall of care beds leading to a tolerance of care homes that are not 'fit for purpose'
  - Residents being accepted by care homes that are ill equipped to provide appropriate care. For instance, care homes that are struggling financially due to inadequate local authority funding may find themselves having to accept any and all residents offered to them.
8. CCC has always argued that better care standards and increased funding must to hand in hand. Whilst drawing attention in this submission to difficulties caused for care homes by the lack of local authority funding, CCC recognises the difficulties faced by local authorities themselves .

## Recommendations

9. **Training**: Good practice is fostered in many ways. Of these, we would point to the importance of widely available adequate training at all levels of the workforce. Staff training on the Identification of Abuse and the Protection of Vulnerable Adults should become an integral part of the internal policies of care homes.
10. Regrettably, adequate training is made difficult by local authorities which pay care homes for care with no specific consideration for the support and development of the infrastructure of training within an organisation. We believe that there should be a national rate, regionally adjusted as appropriate, paid to care homes by local authorities. Such a rate would be increased in line with inflation.
11. **Comprehensive Safeguards**: CCC recommends that Criminal Records Bureau (CRB) checks should be required across all provider sectors. Currently statutory social services do not have to undergo CRB checks. Another useful tool would be the development of a Protection of Vulnerable Adults list, similar to that used in child

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<sup>1</sup> The 2000 survey of local authority purchasing policies related to the provision of residential care and nursing homes places for older people. 145 questionnaires were sent out to local authority contracts units on 31 January 2000. 107 completed questionnaires were returned, a response rate of 74%., The results of this survey can, therefore, be assumed to be representative of the total population of local authorities.

protection, which would identify those individuals who are deemed unfit to work with vulnerable adults in any care setting.

12. **Publicising Good Practice Initiatives:** CCC encourages and supports any efforts made to identify, publicise and spread good practice within the sector.

Dr Clive Bowman  
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