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Care report

Tackling the care question

2020

Welcome

WILL HALE
CEO of Key

The challenge faced by the Government, local authorities and individuals and families when it comes to funding care in old age has never been more high-profile.

The coronavirus crisis has shown how important the people who work in residential care homes and provide care at home are and how much we rely on them. It has also brought into focus the simple fact that services are more stretched than ever and that how we pay for care needs to be carefully considered.

Key first highlighted the issue of how we fund our social care system for the elderly in a report in 2019 and research then showed a strong desire among the majority of over-55s to remain in their own homes combined with a lack of preparation and knowledge about how to pay for care.

The basic facts on the need for care are stark – as a country we are getting older with most people likely to need some form of care at some stage of their life. There is strong demand[1] – the most recent NHS Digital figures show there were 1.36 million new requests for care from over-65s in the year to March 31st, 2019 in England.

Government is committing more money to funding social care and has promised the "initiation of cross-party talks on the long-term reform of adult social care".

But Government and local authorities are under even more financial pressure than before and it is likely that many individuals and families will have to pay for it themselves at least in part.

That can be expensive – Government figures[1] show the average cost of residential care is £636 a week in the year to March 31st 2019 up from £604 in the previous year while the average cost of nursing care in the same period is £678 a week compared with £638. A cost which fluctuates depending on region.

Key's research has shown growing concern about how to fund social care – more than a third[2] (35%) of over-55s say they are worried about how to pay for care in later life. That compares to just over a fifth[3] (21%) who were concerned when we first asked the question in 2019.

There is support from Government and local authorities but inevitably there are rules on how to access it and on who is entitled to support. There is even the possibility that if people's financial circumstances change that the money can be clawed back.

Our research[2] found understandable levels of confusion – nearly 30% are not sure whether Government and local authority support is means-tested and just 27% are aware that if you have assets of £25,000 or more that you have to pay for your own care.

The care issue is one that we all will have to consider at some stage in our lives – whether it is for ourselves or family. There is help available but the worry is that people will find it difficult to navigate the complexities of the system.

A vital first step is always to gather as much information as possible before the need for care becomes acute and to speak to an adviser who can help you to make sensible choices for your or your family's long-term future on care funding and how to do it. Good impartial advice is the key to unlocking the care question.

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Contents

The care crunch

The rise in concern about funding care in just over a year has been stark – around[2] 35% of over-55s are now worried about being able to pay for their care in later life compared with just 21% when the research[3] was conducted for Key in 2019.

Across a range of issues covered by the study there are signs that people are becoming more worried about funding care and less confident about their ability to do so in the future.

In 2019[3] the study found;

- 15% of over-55s said they had no idea how they would meet care costs if they needed to – that has now almost doubled to 28%[2]
- 13% of over-55s believed they were wealthy enough to meet any care costs – that has now halved to 6%[2]
- Around 8% of over-55s believed they would never need care – that has also now halved to 4%[2]

However, the numbers who have made some provision for care in later life have not changed in the past year – around 21% of over-55s said they had made some provision in 2019[3] and that is roughly the same at 20% this year.[3]

One area which has shown a change is the numbers who believe the council will pay if they cannot – that was 10% in 2019[3] and is now 18%.[2]

Unfortunately, what many people don't realise is that in order to access Local Government support, they will need to go through an assessment process and may find that even with modest savings or property wealth they are not eligible.

The research showed the numbers who do not want to be a burden on families is rising – it was 35% in 2019[3] and is now risen to nearly half of over-55s (46%).[2]

Over-55s overwhelmingly[2] want to remain in their own homes – nearly half (47%) say they wish to remain in their current home with carers coming in to help while 14% plan to downsize to move to a more manageable home.

The costs that will need to be faced whatever the decision are going to be challenging.

The care challenge

You may be able to rely on family and friends or your partner to support you in old age which will be relatively low cost.

But if family and friends cannot help or it becomes overwhelming for them and you need expert support the costs can quickly mount up. Money Advice Service figures[4] show the cost of a residential care home place in the UK can range between £27,000 and £39,000 a year and between £35,000 and £55,000 a year if nursing care is required. Prices vary depending on where you live and are likely to be more expensive in the South East of England.

Paying for care-at-home or domiciliary care is less expensive but can still cost around £14,000 a year for two hours of help a day depending on where you live, and the rates councils pay. For some there is the need for 24-hour live in care at home, but it can be as much as £41,000 a year and even as much as £83,200 if people have very complex needs.

Which? has an online calculator giving an idea of how much you might have to pay for the different types of care in England.

Which? calculator

Care help is available

The costs seem daunting and there is help from the Government and local authorities available – but there are strict rules and financial limits on who is eligible and how much money is available. It also continues to vary from region to region and country to country.

Local authorities have a legal duty to carry out a care needs assessment to find out what help people need. This assessment will be used together with a review of your finances – referred to as a means test – to determine how much they will contribute. They might pay for all your care, some of it or nothing at all.

As part of the care needs assessment, they will consider which of the 'activities of daily living' you can manage. These include the ability to feed yourself, dress yourself, maintain levels of personal hygiene and move around. Only clients who have critical or substantial needs typically receive support with the rest receiving information and referrals to other support services.

If you are deemed to need support, they will undertake a means test. In England and Northern Ireland if you have assets and savings including your home worth more than £23,250 then the local authority will expect you to pay all care home fees. In Scotland the figure is £28,500 but they do operate a slightly different system in that 'personal care' is free. In Wales the capital limit for people needing residential care (£50,000) is different from those needing domiciliary care (£24,000). That said, the maximum charge for domiciliary care (irrespective of the size or cost of the package) is £100 per week.

However applicants still need to be assessed by the local council on whether they need care and if the type of care they need is not classed as 'personal care' such as help changing beds then they will have to pay it for themselves. Nursing care from the NHS in Scotland in your own home is free and should be provided by the local GP service. However in practice most applicants in Scotland pay something towards their care.

While peoples home is typically their largest asset, across the UK its value is not taken into account for these purposes in certain situations such as if you live with your spouse or a dependent child or adult. If you opt for care at home the value of your house is not taken into account, but you do have to pass the care needs assessment.

Local authorities have a legal duty to carry out a care needs assessment to find out what help people need

Care funding

Assessing the national challenge

While this may well be the first time you have needed to ask for support, you are certainly not alone.

NHS Digital figures[1] for the year to March 31st, 2019 show 1.36 million new requests for care and support were made by over-65s in England.

For this report, Key repeated Freedom of Information (FOI) requests[5] to better understand the size of the challenge facing councils across Great Britain.

Over a fifth (21%) were either unable or unwilling to respond in full – often due to lack of data or time constraints – and only 22 councils (11%) said they recorded who approached them for support and advice on paying for care. While this figures has doubled since 2018/19, this is still extremely low and very worrying when you consider the information needed to plan for the growing demand for care.

The table below shows how the numbers who are fully funded and partially funded vary across the country and how the numbers have changed.

There was 10% drop in the number of people receiving some form of financial support for care between 2018/17 (568,867) and 2019/20 (512,816)**. Against the back drop of increasing demand and more over-55s worrying about how they fund this essential support, this suggests that councils are being increasingly cautious around who they are able to fund.

		Partially funded over 65s		
	Location	**2017/18**	**2019/2020**	**YOY Change**
1	East Midlands	27,402	31,367	14%
2	East of England**	13,813	12,632	-9%
3	London	27,596	29,459	7%
4	North East	8,045	5,542	-31%
5	North West	20,023	31,662	58%
6	Scotland*	24,817	24,479	-1%
7	South East	74,671	43,936	-41%
8	South West	29,920	31,273	5%
9	Wales*	14,826	14,675	-1%
10	West Midlands	27,710	23,077	-17%
11	Yorkshire	31,464	26,740	-15%
	Great Britain	**300,287**	**274,842**	

* Both Scotland and Wales operate slightly different care systems to England so this may influence how they record and classify the support they provide.

		Fully funded over 65s		
	Location	**2017/18**	**2019/2020**	**YOY Change**
1	East Midlands	6,019	15,223	153%
2	East of England	29,334	28,499	-3%
3	London	22,937	32,448	41%
4	North East	2,980	2,353	-21%
5	North West	11,609	10,317	-11%
6	Scotland*	8,108	4,444	-45%
7	South East	37,350	17,906	-52%
8	South West	27,509	30,074	9%
9	Wales*	3,124	4,709	51%
10	West Midlands	11,124	11,548	4%
11	Yorkshire	15,162	13,356	-12%
	Great Britain	**175,256**	**170,877**	-2%

** Figures include councils who are unable to break down figures into fully and partially funded care places and instead reported a single figure for both.

43% of over-55s say they or someone they have appointed would inform the council if their circumstances changed

That is just the national average and the picture varies around the country. Local authorities in London (52%) are the most likely to say they provide full funding care while in the North West (19%) significantly less likely. On the other hand, the South East (71%) is more likely to provide partial funding while East of England (18%) the least. As part of this FOI, Key also asked if councils knew how many people were 'self-funders' – a crucial metric as once a person's assets decrease councils will need to start paying. Over half (55%) of councils claim to collate this data saying that just 47,027 people were financing their own care. This is significantly below other estimates and is likely to reflect the fact that councils track those who have interacted with them rather than all of those within a local area.

The FOI also explored how many councils record the numbers of people inquiring about care and the figures showed major differences in how authorities record the data with many authorities not recording it at all. Only local authorities in the South West appeared to do so with 73% in the region recording the data. In every region the level of recording was very low with the South East at 12% the second best.

Once council funding for care is obtained, many families may be tempted to think that the financial challenges have been met. However, the FOI found that there is no guarantee that councils will continue to fund a person in care for the remainder of their lives if their circumstances change.

While, in Scotland almost a third (31%) of councils contacted said they would guarantee funding for the rest of a person's life, this was certainly not the case nationally. Indeed, in several regions none of the councils contacted guaranteed to maintain payments for life raising the possibility that if people's financial circumstances change for the better that payments could be clawed back. This may come as a nasty shock to over-55s as 24% believe that once the council starts paying for care, this will continue indefinitely. Councils used a variety of methods to ascertain if someone was eligible for continued support with care fees with 73% saying they expected families to notify them, 58% conducting regular reviews of peoples funding eligibility and 25% expecting care homes to notify them.

To understand how potential care recipients viewed this approach, Key asked over-55s what they might expect to happen if someone who was receiving care saw their financial circumstances change. Almost half (43%) of over-55s say they or someone they have appointed would inform the council if their circumstances changed while 38% would rely on the council to conduct regular reviews of their finances.

However, irrespective of where you live it is evident that local authorities across the country are under major financial pressure to cope and that pressure is increasing.

The impact of ageing

We are all living longer as the country grows older, figures from the Office for National Statistics[6] show.

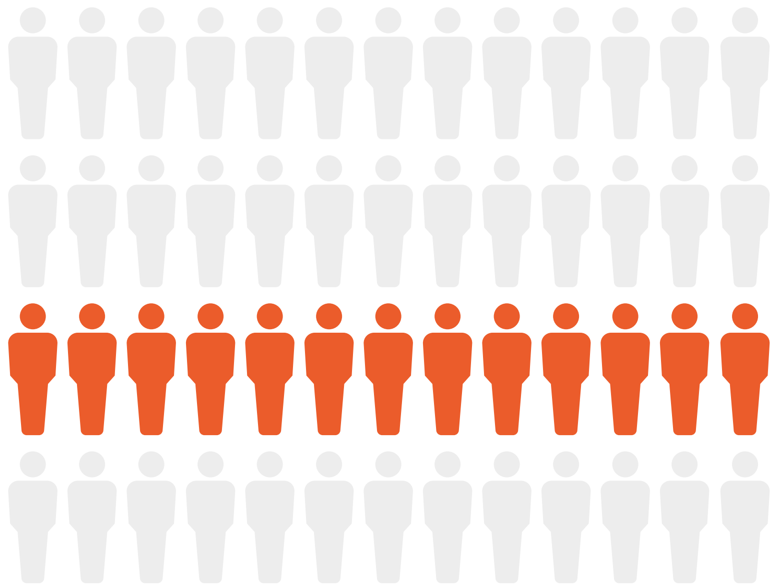
A 65-year-old man today in the UK, can expect to live on average until 83.6 while a woman of the same age can expect to live to 85.9.

Unfortunately, that does not necessarily mean a healthy life expectancy. Many will be fit and active until the end, but the likelihood is that as we age physical and mental health declines.

ONS[7] figures show that men and women at the age of 65 can expect to be healthy for half of their remaining life. The average 65-year-old male can expect to live 18.6 years but will only be healthy for 10.3 of those years while the average 65-year-old woman can expect to live 20.9 years with 10.9 of those years in good health.

The country has got dramatically older over the past 20 years and is forecast inevitably to get even older over the coming years[8]. However, while the Government[1] spent £18.7 billion on total adult care funding in England in 2018/19, that figure is unchanged in real terms since 2005/06 – although it has increased in 'cash terms' by 25%. It will need to increase to meet the needs of the ageing population as the table below shows. By 2046, nearly one in four of the population will be over-65.

Year	% aged 65-plus	How many
1976	14.2%	7.982 million
1986	15.4%	9.296 million
1996	15.9%	9.248 million
2006	15.9%	9.671 million
2016	18.0%	12.473 million
2026	20.5%	14.317 million
2036	23.9%	17.533 million
2046	24.7%	18.856 million



24.7%

By 2046, nearly a quarter of the UK population with be over 65

The rapidly ageing population will increase the burden on local authorities and while the table above shows the national picture it varies across the country with some local authorities facing far higher demand than others.

By 2036[8], over half of local authorities are projected to have 25% or more of their local population aged 65 and over with many of the highest percentages among authorities in southern England. In mid-2016 it was estimated that West Somerset was the highest at 33.3% and Tower Hamlets was the lowest at 6%.

We are also seeing increasing numbers of elderly retirees. In 1996, there were no local authorities with more than 3% of their population aged 85 and over. In 2006, most authorities had 2% to 3% of their local population aged 85 and over and by 2016 over half of local authorities had more than 3% of their population aged 85 and over.

By 2026 very few authorities will have fewer than 3% of their population aged 85-plus and very few will be below 4% in 2036. Southern authorities including Rother, East Devon and Dorset have the highest proportions, while London Boroughs such as Tower Hamlets, Islington and Hackney are consistently among the lowest with a very old population.

The scale of the challenge is something that Government is acutely aware of and has been exhaustively debated with potential solutions such as the Care Act being introduced in 2015. While the second part of the Care Bill which looked at a cap on care costs has not been introduced, the Government Green Paper on Care announced in the March 2017 Budget has still not been confirmed. It was reportedly been upgraded to a White Paper by the current Government which has pledged an additional £1 billion for social care until 2023/24. It has promised the initiation of cross-party talks on the long-term reform of adult social care but without a timetable for when they will start.

For the foreseeable future individuals and families will need to plan for care costs and rely on their own resources.

Assessing the care funding challenge

Our research[2/3] has tracked how people believe they will be able to fund their care costs in old age and shows a shift in the past year. Historically low interest rates following the Bank of England decision to cut them to 0.1% and ongoing investment market volatility as the UK and world economy heads towards recession is adding to the uncertainty.

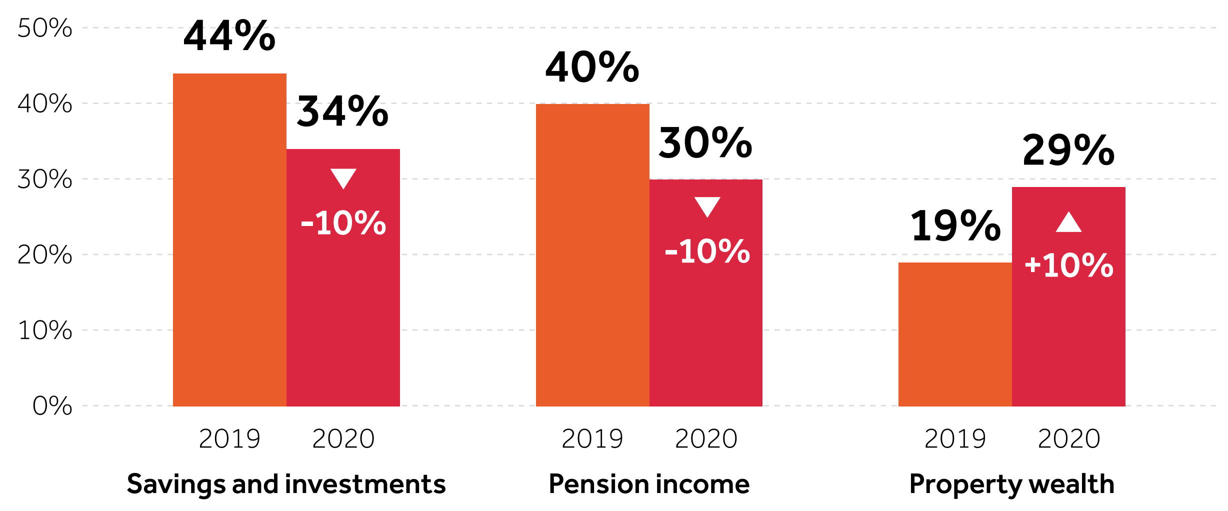
Last year saw savings and investments and pension income firmly established as the best sources of funding for care needs. However, as the table below shows over-55s now are less confident in their nest eggs and pensions and are increasingly looking at property wealth as a major source of funding for care.

With almost two-thirds (61%) of people keen to receive care in their home, equity release provides them with the opportunity to access the value tied up in bricks and mortar to meet these costs. Indeed, the loan only needs to be repaid when they go into a care home or pass away.

In an effort to provide additional options as to how property can be used to pay for care, councils launched Deferred Payment Agreements (DPAs) which allow homeowners to use the value of their home to fund residential care and repay the local authority when their house is sold, or they die. However, the rules governing their availability are strict and few homeowners are able to access them.

Planning ahead is clearly the best approach as the need for care can come as a shock.

Sources of Care Funding



Paying for care

So where will the money come from to fund care and maintain a comfortable lifestyle in retirement if you are not eligible for local authority support?

Homeowners have property wealth they can use – Key's Pensioner Property Equity[9] Index shows over-65s own property without mortgages worth more than £1.133 trillion and the table below shows how it breaks down across the country. There is considerable property wealth which could help the over-65s when they need to fund care.

Over-65s who own their home outright is worth more than

£1.133tn

	People aged 65+			
Location	**Estimated property equity in homes owned outright**	**Estimated percentage of total value of property equity**	**Number of households in the region owned outright**	**Number of households in the region**
South East	£214.273 billion	18.9%	656,000	1,130,300
London	£174.017 billion	15.35%	366,000	674,780
South West	£162.764 billion	14.36%	626,600	787,000
East Anglia	£137.484 billion	12.13%	472,000	782,690
North West	£113.641 billion	10.02%	671,000	873,590
East Midlands	£85.287 billion	7.52%	431,200	591,900
West Midlands	£73.198 billion	6.46%	358,400	701,270
Yorks/Humbs	£47.804 billion	4.22%	288,600	653,860
Wales	£45.663 billion	4.03%	264,600	419,380
Scotland	£43.653 billion	3.84%	282,000	660,070
North East	£35.945 billion	3.17%	275,000	335,430
Great Britain	**£1.133 trillion**	**n/a**	**4,691,400**	**7,610,270**

Age group	Financial wealth	Private pension wealth	Household contents and assets
65–74	£25,000	£162,000	£46,000
75–84	£21,000	£61,000	£38,000
85+	£16,000	£13,000	£29,000

ONS[10] figures show over-65s have other sources of wealth they can tap into as the average amounts of wealth across different assets for each age group below outlines. Unfortunately, the table however shows that the older you get the less you have, and people are likely to be funding care when they are older.

Homeowners could downsize and move to a smaller house to raise cash for care funding.
Specific financial products are available to help provide funding such as investment bonds or immediate care needs annuities.

Increasingly equity release is making a major contribution to retirement lifestyles. Key's figures[11] show the average retired homeowner is releasing an average £75,631 in property wealth through equity release with the money used for a variety of expenses.

Home is where the care is

For most homeowners, their property will be the major source of wealth they have and could provide funding for care.

Needing care in later life is an extremely emotive topic for the person who needs support as well as their wider family. The overwhelming preference is for this care to take place in their home (61%) – either their current property or a property they have downsized to.

While each person has individual needs and preferences, there is strong evidence that suggests that allowing a person to remain part of the community they live in and in familiar surroundings is beneficial. Indeed, data suggests that after six months in a care home environment the MMSE (Mini Mental State Examination) and ADL (Activities of Daily Living) scores of the majority of patients declined [12].

Depending on the level of care needed, there are also financial benefits and it puts less pressure on the NHS as well as the services provided by Local Government. That said, it is vital that people take proactive steps to take into account the potential need for care in later life as making choices when – for example – a fall has happened mean that they need to be made more quickly and with less opportunity for discussion.

As part of this, 'age proofing' a home might seem sensible and our recent research[2] shows around two-fifths (38%) of over-55s plan to make improvements to their homes so they are more suitable for retirement with 20% saying they will make substantial improvements.Over-55s estimate that they would need £8,100 in order to do this.

A significant proportion of people (63%) who use equity release use the proceeds of the plans to improve their homes or gardens and 17% of the cash released is used for this purpose.

Adjustments such as improving bathrooms, upgrading windows and central heating as well as replacing white goods can mean that not only is a property more cost effective to run but also easier for someone with reduced mobility.

Fundamentally, it is about finding the right option for the individual but taking steps to 'age proof' a home, discuss someone's wider desires as well as concerns and looking at potential costs means that more considered choices can be made if and when support is needed.

£75,631
average equity release amount

38%
improve their home to make it retirement ready

£8,100
average spend to make homes suitable to receive care and support

What government can do

The social care sector has been at the forefront of the current health crisis. Yet our report has found that the system faces increasing financial pressure due to a population which is ageing rapidly, but which remains largely unprepared to meet its future care needs.

The social care sector has been at the forefront of the current health crisis. Yet our report has found that the system faces increasing financial pressure due to a population which is ageing rapidly, but which remains largely unprepared to meet its future care needs.

Among policy-makers, this begs a question - how will social care be funded, and how can this be achieved fairly? The uncertainty, which has frequently positioned this issue in the 'too difficult' category, now needs to be replaced with a positive vision.

The Government's 2019 General Election manifesto committed to a three-point plan for social care. £1bn additional funding per year and working towards a cross-party consensus are moves we welcome. However, the Government's 'red line' - that no-one should have to sell their home to pay for social care - is a narrow response to a complex challenge. It assumes an approach to later life planning that ties living standards largely to pension income, in turn restricting opportunity for people to enjoy the comfortable, enjoyable retirements they deserve. It seems short-sighted when modern products are available to unlock housing equity and allow people to widen their options beyond selling the home or relying on pension income.

Our research has found that while over-55s understandably lack knowledge or experience in anticipating later life costs, they are not ill-equipped to meet them. As we've shown, many people do have a major source of wealth tied up in their property, which could be tapped into to provide financial support, and peace of mind, in later life.

Whether unlocking this wealth helps cover the cost of domicilary care, or of 'age-proofing' the home, there is clear benefit to including property wealth as part of later life planning.

To this end, we would like Government/regulators/local authorities to:

- Government set out clear plans for reaching a cross-party consensus on social care, and consider long-term reform and funding of the care system.
- Government recognise the value of equity release as part of the solution towards better futures for those with personal care needs.
- Government ensure more consistent outcomes in care across local authority areas, with the previously promised additional funding distributed directly to local authorities according to a fair funding formula which takes into account:
  - Differences in levels of demand for care.
  - Differences in ability to raise funds from local taxation.
- Local authorities improve engagement with residents who seek help and advice with later life planning. Promote best practice and foster consistency of approach across local authorities.
- Government and local authorities raise public awareness of the benefits of making homes retirement-ready and preparing for later life financing more generally, improving the likelihood that older people can remain at home for longer.
- Regulators ensure that advice for over-55s about any borrowing against the value of their home - including retirement interest only mortgages and later life mortgages - includes questioning about whether they have thought about how they may meet any future care needs. Currently, as part of the equity release advice process these questions are asked.

An experts view

The year 2020 will certainly go down as one to remember. Those involved in giving both regulated and non-regulated care advice in the UK have had to scramble to quickly assess the impact of the Coronavirus Act 2020 on clients and their family members in need of care.

JACQUELINE BERRY
CEO of My Care Consultant

For those with clients in England, this has involved understanding the process of 'easements' by which local authorities are able to suspend or dilute many of their responsibilities under the Care Act 2014. When it comes to healthcare we've seen significant temporary changes such as the suspension of NHS Continuing Health Care assessments as well as new rules (since 19 March 2020) in respect of hospital discharge that must be adhered to. These changes have compounded the many issues already being faced by those navigating the care system, resulting in increased levels of confusion and anxiety, and some not getting access to the services they need.

Social care provision and funding has long been in crisis and thousands of people have been forced to navigate the system and make funding choices without a clear set of consistent guidelines. However, the COVID-19 pandemic has undoubtedly put a spotlight on the urgent need of a complete system overhaul. Many will remember that in June 2010, Sir Andrew Dilnot was asked by the then government to chair the Commission on Funding of Care and Support. The Commission published its report in July 2011 but it was never introduced.

Those who got their head around the originally proposed £72,000 cap soon realized that it wasn't as generous as it initially seemed, as it didn't' include significant parts of the overall cost of social care incurred by individuals. It will be interesting to see if these proposals will be given a new lease of life come the autumn budget as rumors have indicated. There has been talk of more radical options being factored in in e.g. the government funding of care directly rather than via Local Authorities, and the introduction of a new tax scheme. No government wants to take this on, but at least it looks like there may be some possibility of the funding of social care being brought back onto the agenda.

We'll just have to watch this space and examine any proposals when they are eventually available, and, irrespective of what transpires from a political perspective, it is safe to say that the need for accurate and reliable 'care' and 'paying for care' advice has never been greater for those that need care now, and their families.

Using property to pay for care

Yvette Smith, 84, London, released £110,830 to help pay for care at home

Yvette*, a retired accountant from London has severe arthritis and needs regular care and assistance. Following a temporary stay in a care home after a fall, she was adamant she wanted to continue live in her own home and maintain her independence.

"When my daughter got married 10-years ago, my husband and I gave her a fairly substantial amount to get on the property ladder. However, he died two years and I found that he hadn't taken out a joint-life annuity so my income fell sharply and I needed to be very careful with money.

After speaking with some friends who recommended equity release, I decided to look into it further. I bought my house in 1954 for £2,300 so it was astonishing to hear that once it had been valued it was now worth £750,000! I was sitting on all this money which could be helping me to have a better quality of life.

"Key were very helpful and given the current situation they arranged a ZOOM appointment with one of their advisers to discuss my circumstances and find the best options for me. I had already has a care needs assessment from the council and while they were sympathetic and provided some ideas around support, the system wasn't user friendly and they could not do much to help.

"Thankfully the ZOOM appointment allowed my daughter and son to attend and ask any questions they liked. They were very supportive of me using equity release as they live further away than I like and they want me to have the support I need. After much discussion, I chose a drawdown policy as I can reserve funds and then take them as and when I need them. I was really impressed with how helpful and stress-free the whole process was and I couldn't believe there was no mandatory monthly repayments with a lifetime mortgage.

"The funds have made a big difference to my life as I was able to install a chair lift, renovate the bathroom and buy some simple gadgets which make living with arthritis much easier. I can also afford to have carers come in several times a week to help with the bigger jobs and ensure that I can remain relatively independent.

"I anticipate that I might need more support in future but I am comfortable that the flexibility of the drawdown plan means I can access funds if I need to."

> *The funds have made a big difference to my life*

* = This case study is fictional and while based on issues faced by people every day, bears no resemblance to a specific person or set of personal circumstances.

Planning for the future

Nobody looks forward to needing care in retirement – but the sad inevitability is that many of us will need it.

Funding care might seem daunting but there are plenty of options to explore. Whether you can stay in your home or not, or you can rely on family to help you or not, the best approach is to get advice.

An independent adviser can help you with working out any benefits you are eligible for and what local authority support is available. Some care funding is straightforward, but some options are more complex. Advisers can also help on issues such as informing councils when your financial circumstances change while you are in care.

Good advice is key to navigating the care conundrum and ensuring that you and your family can prepare for the future.

Between August 2019 and February 2020, the Key Group Research team contacted over 200 councils across the UK to gain responses to a standardised set of questions. The tracking questions are the same as those asked in 2018/19 and provide a good view of how Councils are providing long term care services. In addition, research on 2,035 over-55s across the UK was used to track attitudes and options to paying for care.

All other sources are outlined below:

Sources and methodology

1. NHS – Adult Social Care Activity and Finance Report – 2018/19
2. Research conducted by Opinion Matters among 1,011 adults aged 55-plus between March 9th and March 13th, 2020
3. Research conducted by Opinion Matters among 1,024 adults aged 55-plus between November 30th and December 5th, 2018 and 1,010 adults aged between 30 and 55 conducted between November 30th and December 5th, 2018
4. Money Advice Service – Paying for Care
5. Key data from a Freedom of Information request to 205 local authorities across England, Scotland and Wales and analysis is based on data received from 201. Local authority reporting periods vary between financial year reporting and calendar year reporting
6. Office for National Statistics (ONS) – National Life Tables, UK 2015 to 2017 – September 2018
7. ONS – Health State Life Expectancies, UK: 2015 to 2017 – December 2018
8. ONS – National Population Statistics: 2016-Based – October 2017
9. Key's Pensioner Property Equity Index tracks the amount of equity held in property by people over 65 years old in Great Britain. Figures are based on analysis of data from the ONS Family Spending Report (2014), the UK House Price Index, Registers of Scotland House Price Statistics and ICM (2014) and Key's UK Equity Release Market Monitor.
10. ONS – Wealth in Great Britain – Wave 5 – 2014/16 – February 2018
11. Key market data for 2019 The Monitor uses Key's data to reflect the market. The data reflects both members and non-members of the Equity Release Council, and provides the most detailed analysis of the equity release sector.
12. Improving Wellbeing Through Care At Home – The Good Care Group

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