



# Care Act 2014: 10 Years On

Research Report – Survey of lead members

March to April 2024



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## Contents

Care Act 2014: 10 Years On .....	1
Summary .....	1
Background.....	1
Key findings .....	1
Introduction.....	3
Methodology .....	3
Care Act 2014 10 years on – Survey of adult social care lead members.....	6
Meeting statutory duties under the Care Act.....	6
Ranking of the biggest issues facing the sector .....	9
Actions to take to address adult social care issues.....	12
Evaluation of the 2014 Care Act.....	14
Importance of adult social care to the public.....	15
Views on preventative measures .....	16
Views on the new assurance process .....	17
Views on adult social care as a local service .....	18
Views on integrated care systems.....	19
Views on the balance between positive and negative messages.....	20
Further comments .....	22
Annex A: Questionnaire.....	24

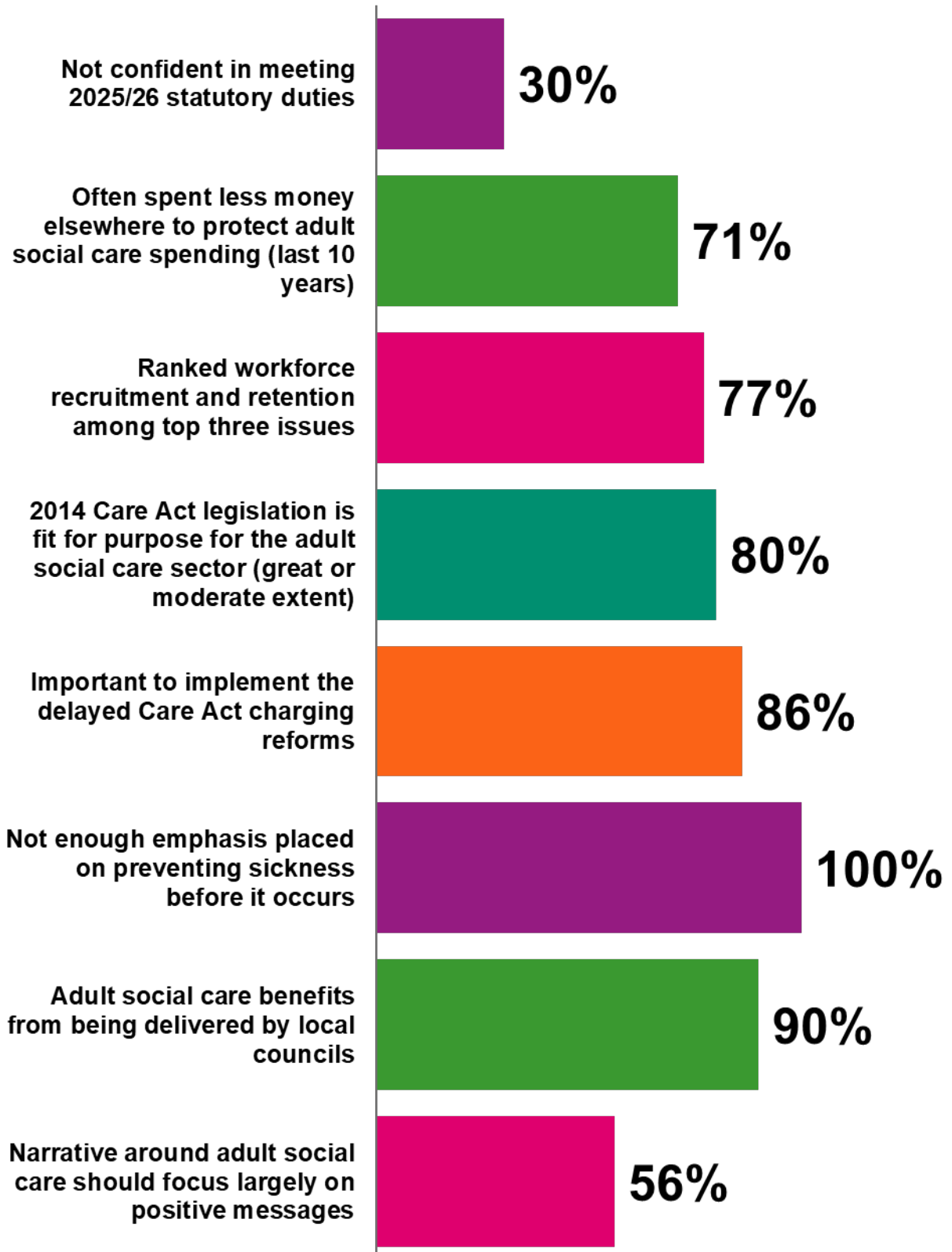
# Summary

## Background

In March and April 2024, the LGA sent an online survey to lead members for adult social care at English single-tier and county councils, to gather their insights on the impact of the 2014 Care Act a decade after receiving royal assent, and to provide their thoughts on the current status of the adult social care sector. A total of 49 responded – a response rate of 32 per cent.

## Key findings

- Three in ten respondents were not very confident or not at all confident that their council would meet all of its statutory duties in the 2025/26 financial year
- Over seven in ten said that their council very or frequently spent less money on other council services, in order to protect adult social care spending, over the last 10 years
- Workforce recruitment and retention was the issue facing the sector that was most frequently ranked among its biggest challenges, ranked by 77 per cent of respondents
- Eight in ten said that the 2014 Care Act's legislation is fit for purpose for the adult social care sector
- A large majority (86 per cent) thought that it is very or fairly important to implement the delayed charging reforms laid out in the Care Act
- All respondents (100 per cent) agreed that not enough emphasis is placed on preventing or reducing sickness before it occurs
- Ninety per cent agreed that adult social care benefits from being a local service delivered by local councils
- Over half (56 per cent) said that the narrative around adult social care should focus largely on positive messages, with some negative messages



## Introduction

In March and April 2024, the LGA sent an online survey to lead members for adult social care at English single-tier and county councils. The survey sought to gauge leading council members' insights on the impact of the 2014 Care Act a decade after receiving royal assent, their assessment of the current state of the adult social care sector, and their thoughts on what the sector's priorities for the future should be.

## Methodology

Of the 153 English councils involved in providing health and social care services, a total of 49 provided a response – a response rate of 32 per cent. This level of response rate means that these respondents should not necessarily be taken to be widely representative of the views of all adult social care lead members. Rather, they are a snapshot of the views of this particular group of respondents.

Table 1 shows the response rate broken down by type of local authority. This shows that response to the survey was highest among county councils, at 48 per cent, and lowest among unitary authorities, at 27 per cent. London boroughs and metropolitan districts had intermediate levels of response, at 30 and 33 per cent respectively.

**Table 1: Response rate by type of council**

Type of council	Number of questionnaires	Number of responses	Response rate
County	21	10	48%
London borough	33	10	30%
Metropolitan district	36	12	33%
Unitary	63	17	27%

Table 2 shows the response rate broken down by region. This shows that the region with the highest response rate was the South West, at 53 per cent, followed by Yorkshire and the Humber (47 per cent), the South East (42 per cent), and the East Midlands (40 per cent). Lower levels of response were received from the North West (33 per cent), Greater London (30 per cent), the West Midlands (21 per cent) and the Eastern region (nine per cent). There were no responses received from the North East region.

**Table 2: Response rate by region**

Region	Number of questionnaires	Number of responses	Response rate
Eastern	50	1	9%
East Midlands	39	4	40%
London	33	10	30%
North East	12	0	0%
North West	36	8	33%
South East	70	8	42%
South West	29	8	53%
West Midlands	33	3	21%
Yorkshire and Humber	15	7	47%

To make the results of this survey more representative of lead members for adult social care across England, responses have been weighted to be proportionate to the national breakdown of local authority type. It was not possible to weight by region, due to the small numbers of responses received from some regions.

In addition, the following should be considered when interpreting the findings of this survey:

- Where tables and figures report the base, the description refers to the group of people who were asked the question. The number provided refers to the unweighted number of respondents who answered each question. Please note that bases can vary throughout the survey
- Throughout the report, percentages may not appear to add up to exactly 100 per cent due to rounding



## Care Act 2014 10 years on – Survey of adult social care lead members

This section contains analysis of the full results from the survey.

### Meeting statutory duties under the Care Act

Respondents were asked how confident they were that their council would meet all of its statutory duties under the Care Act from its budget, for the financial years 2024/25 and 2025/26.

Table 3 and Figure 1 show the results for this question, demonstrating that a large majority (84%) were very or fairly confident in meeting their statutory duties in the financial year 2024/25, consisting of 27 per cent who were very confident and 58 per cent who were fairly confident. However, when anticipating meeting statutory duties in 2025/26 confidence fell to 68 per cent, with eight per cent very confident and 59 per cent fairly confident. Among those who were not confident, those not very confident rose the most between the two financial years, increasing from seven per cent in 2024/25 to 22 per cent in 2025/26. Those who were not at all confident rose, but only slightly, from six per cent in 2024/25 to eight per cent in 2025/26.

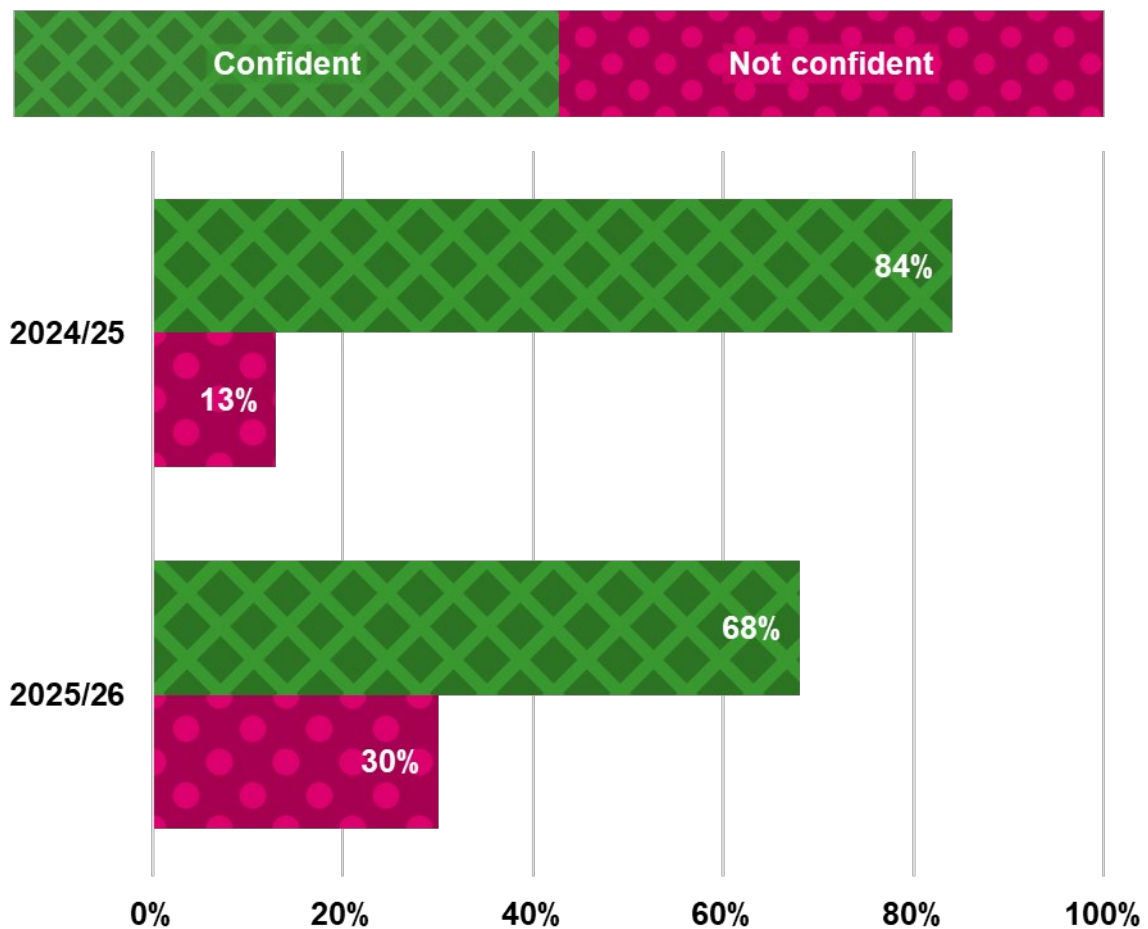
Understandably, the proportion of respondents who did not know their confidence increased slightly for 2025/26, rising from two to three per cent.

**Table 3: How confident are you that your council will meet all of its statutory duties under the Care Act from its budget, over the next two financial years?**

	2024/25 (Number)	2024/25 (Per cent)	2025/26 (Number)	2025/26 (Per cent)
Very confident	13	27%	4	8%
Fairly confident	28	58%	28	59%
Not very confident	3	7%	10	22%
Not at all confident	3	6%	4	8%
Don't know	1	2%	1	3%

Base: all respondents who answered this question (49 for 2024/25, 47 for 2025/26).

**Figure 1. Confidence in meeting Care Act statutory duties by year**



Respondents were asked how often in the previous ten years their council had to spend less money on other council services, in order to meet their statutory duties in adult social care, or to protect adult social care spending more generally. They were also asked how often they anticipated this happening over the following five years.

Table 4 shows the results for this question, demonstrating that 89 per cent of respondents had had to spend less money on other council services to protect adult social care spending in the preceding decade. This consisted of 28 per cent who had done so very often, 43 per cent fairly often, and 18 per cent who had not done this very often. Over the next five years, the percentage who anticipated spending less money on other services rose to 91 per cent, with 44 per cent anticipating this happening very often, 35 per cent fairly often, and 12 per cent who did not anticipate this happening very often. This shows that spending less on other services very often was the most common anticipated outcome, even though spending less fairly often had been the historical norm to date. It should also be borne in mind that the historic ten-year period was twice the length of the anticipated five-year period, so that spending less very often in the latter period could reflect as much as double the spending cuts as in the former.

**Table 4: Frequency of councils having to spend less money on other council services, in order to protect adult social care spending and to meet statutory duties in adult social care, over the last 10 years and next five years**

	Last 10 years (Number)	Last 10 years (Per cent)	Next five years (Number)	Next five years (Per cent)
Very often	13	28%	22	44%
Fairly often	21	43%	17	35%
Not very often	9	18%	6	12%
Never	4	9%	2	5%
Don't know	1	2%	2	4%

Base: all respondents who answered this question (48 respondents over the last 10 years, 49 over the next five years).

### Ranking of the biggest issues facing the sector

Respondents were asked to choose and rank up to three of a range of issues facing the adult social care sector which they thought presented the biggest challenges to the sector. The option was provided to specify additional issues, if required.

Table 5 shows the results for this question. The issue that was ranked by the most respondents was the recruitment and retention of a workforce with the right skills, including personal assistants, which 77 per cent of respondents selected as one of the three biggest issues facing the sector. This was followed by the increased amount and complexity of demand, including safeguarding needs (65 per cent), which was also the issue most often ranked first in importance (32 per cent). Other prominent issues included an inability to invest in adult social care prevention due to pressure on budgets and acute care needs (56 per cent), and people waiting for needs assessments, changes to their care plan, and/or a review of their care plan (42 per cent).

**Table 5: Below are a number of issues facing the adult social care sector. Please choose up to three of these issues which you think present the biggest challenges, and rank them in order of priority in the box provided.**

	Ranked any	Ranked first	Ranked second	Ranked third
Recruitment and retention of a workforce with the right skills (including personal assistants)	36 (77%)	13 (27%)	15 (32%)	9 (18%)
Increased amount and complexity of demand (including safeguarding needs)	31 (65%)	15 (32%)	11 (23%)	5 (11%)
Inability to invest in adult social care prevention due to pressure on budgets and acute care needs	26 (56%)	13 (28%)	7 (14%)	6 (14%)
People waiting for one or more of: an assessment of their needs; care and support or a direct payment to begin; a review of their care plan	20 (42%)	3 (7%)	6 (12%)	11 (23%)
Provider stability	12 (25%)	1 (2%)	4 (8%)	7 (16%)
Supporting hospital discharge	9 (19%)	4 (8%)	2 (4%)	3 (7%)
Diversity of provision and mix of care models, including housing	7 (14%)	0 (0%)	5 (10%)	2 (4%)
Strain on unpaid carers	6 (12%)	0 (0%)	1 (2%)	5 (10%)
Other (please specify)	0 (0%)	0 (0%)	0 (0%)	0 (0%)

Base: all respondents (49 respondents).

Figure 2. Most prominent issues facing adult social care



## Actions to take to address adult social care issues

Respondents were asked to list up to three key actions, excluding additional funding, which their council, or central government, could take to address current issues facing adult social care in the short- and medium-term. These actions were provided in the form of free text, and the actions provided fell into the following broad categories, in approximate order of prevalence from more frequent to less frequent:

- A range of measures aiming to improve recruitment and retention in the sector, including training and development, improved support for employees, varied routes into different professions, improved promotion prospects, and apprenticeships
- Concentrating more on early intervention and preventative measures
- Improved use of IT and assistive technology to co-ordinate and provide support, including use of artificial intelligence (AI)
- Improved co-ordination and integration between organisations, particularly between local authorities and NHS bodies
- Closer working between stakeholders in the fields of adult social care and housing
- Generally rethinking and re-examining social care from the foundations upward, and establishing nationwide reforms of the sector
- Measures to improve and facilitate hospital discharges
- Meshing the approach to social care with immigration and asylum issues, including offering refugees and asylum seekers employment within the social care sector
- Improving recognition and support strategies for unpaid carers
- Implementing the delayed measures to replace the Deprivation of Liberty Standards (DoLS)
- Improved collection, sharing and usage of data in social care

- Improve communication and co-ordination between the different departments of individual local authorities
- Developing more specialist services locally to reduce reliance on out-of-area placements
- Improved communication and co-ordination within and between different central government departments
- New methods and strategies for adult social care recruitment
- Decentralising NHS services
- Addressing the current issues facing dental care
- Developing “age friendly communities” through establishing support networks across the third sector and the general public
- Ensuring that NHS continuing care responsibilities are met
- Creating an effective national workforce strategy
- Removing shared funding models
- Expanding personalised budgets
- Fast-tracking intermediate community care
- Expanding flexible working patterns
- Implementing a version of the 2010 Dilnot Report
- National commitment to delivering the Second Phase of the Care Act
- Working with hospital trusts to reduce usage of care hotels
- Improving the public profile and visibility of adult social care
- Reducing usage of agency support staff
- Supporting earlier transitions from children’s social care



## Evaluation of the 2014 Care Act

Respondents were asked to what extent they thought the legislation of the 2014 Care Act is fit for purpose for the adult social care sector. In answering this question, they were asked to answer with regard to the Act itself, rather than the extent to which funding and other pressures and developments have enabled or impeded the realisation of its objectives.

Table 6 shows the results for this question, demonstrating that 80 per cent of respondents said that the Care Act's legislation is fit for purpose for the adult social care sector to a great or moderate extent, including 29 per cent who answered "to a great extent" and 51 per cent who answered "to a moderate extent". Thirteen per cent answered "to a small extent", although no respondents answered "not at all". Three respondents (seven per cent) did not know what they thought on this question.

**Table 6: To what extent, if at all, do you think the legislation of the 2014 Care Act is fit for purpose for the adult social care sector?**

	Number	Per cent
To a great extent	14	29%
To a moderate extent	25	51%
To a small extent	6	13%
Not at all	0	0%
Don't know	3	7%

Base: all respondents (48 respondents)

Respondents were asked how important they think it is to implement the charging reforms laid out in the Care Act, the implementation of which had been delayed since the Act was passed. As Table 7 shows, 86 per cent of respondents said it was very or fairly important to implement these charging reforms, whilst nine per cent said implementing the reforms was not very important, and four per cent said this was not at all important. One per cent did not know what they thought on this question.

**Table 7: How important do you think it is to implement the charging reforms laid out in the Care Act, the implementation of which has so far been delayed?**

	Number	Per cent
Very important	20	41%
Fairly important	22	45%
Not very important	4	9%
Not at all important	2	4%
Don't know	1	1%

Base: all respondents (49 respondents).

### Importance of adult social care to the public

Respondents were asked how important they thought adult social care is to the public, including both those in their council area and those across the country. Table 8 shows the results for this question, demonstrating that 61 per cent of respondents thought that adult social care is very or fairly important to their local residents, whilst 45 per cent said the same of the national population. The largest group of respondents, however, said that adult social care was not very important to the public, at 39 per cent for their own residents and 51 per cent for the national population. No respondents said that adult social care was not at all important to their residents, and only four per cent said this of the population of the country as a whole. No respondents did not know their answer to this question.

**Table 8: How important, if at all do you think adult social care is to the public, both in your council area and nationwide?**

	Local residents (Number)	Local residents (Per cent)	National population (Number)	National population (Per cent)
Very important	13	27%	13	26%
Fairly important	17	34%	9	19%
Not very important	19	39%	25	51%
Not at all important	0	0%	2	4%
Don't know	0	0%	0	0%

Base: all respondents (49 respondents).

### Views on preventative measures

Respondents were asked to agree or disagree with the following statement:

"Our system of health and social care places too much emphasis on treating sickness and not enough on preventing or reducing sickness before it occurs."

Table 9 shows the results for this question, demonstrating that 100 per cent of respondents agreed with this statement to a great or moderate extent, consisting of 87 per cent who agreed to a great extent and 13 per cent who agreed to a moderate extent. This demonstrates strong support among the respondents for an increased focus on preventative measures and early intervention within the health and social care system.

**Table 9: To what extent, if at all, do you agree with this statement: "Our system of health and social care places too much emphasis on treating sickness and not enough on preventing or reducing sickness before it occurs."**

	Number	Per cent
To a great extent	43	87%
To a moderate extent	6	13%
To a small extent	0	0%
Not at all	0	0%
Don't know	0	0%

Base: all respondents (49 respondents).

### Views on the new assurance process

Respondents were asked how confident they were that the new process of adult social care assurance being overseen by the Care Quality Commission will help contribute to ongoing improvement in adult social care performance in their councils.

Table 10 shows the results for this question. This shows that the largest group of respondents were fairly confident that the assurance process would contribute to ongoing improvement in adult social care in their council, at 48 per cent. This was followed by 31 per cent who were not very confident. Small numbers of respondents (8 per cent each) were very confident or not at all confident, and five per cent did not know the effect on their council the assurance process is likely to have.

**Table 10: How confident are you, if at all, that the new process of adult social care assurance overseen by the Care Quality Commission ("assurance") will help contribute to ongoing improvement in adult social care performance in your council?**

	Number	Per cent
Very confident	4	8%
Fairly confident	23	48%
Not very confident	15	31%
Not at all confident	4	8%
Don't know	3	5%

Base: all respondents (49 respondents).

### Views on adult social care as a local service

Respondents were asked how far they agreed or disagreed that adult social care benefits from being a local service delivered by local councils. As Table 11 demonstrates, 90 per cent of respondents agreed with this statement, including 70 per cent who strongly agreed, whilst eight per cent neither agreed nor disagreed and one respondent (1 per cent) disagreed. No respondents did not know their answer to this question.

**Table 11: How far would you agree or disagree that adult social care benefits from being a local service delivered by local councils?**

	Number	Per cent
Strongly agree	34	70%
Tend to agree	10	20%
Neither agree nor disagree	4	8%
Tend to disagree	0	0%
Strongly disagree	1	1%
Don't know	0	0%

Base: all respondents (49 respondents).

### Views on integrated care systems

Respondents were asked the extent to which collaborative working with integrated care systems (ICSs) supports them to deliver better outcomes for people. As Table 12 shows, 38 per cent of people said that this was true to a great extent, whilst a further 38 per cent said it was true to a moderate extent. Twenty per cent said that collaborative working with ICSs supported them to deliver better outcomes to a small extent, whilst four per cent said this was not true of their situation at all. No respondents did not know their answer to this question.

**Table 12: To what extent, if at all, does collaborative working with integrated care systems (ICSs) support you to deliver better outcomes for people?**

	Number	Per cent
To a great extent	19	38%
To a moderate extent	19	38%
To a small extent	10	20%
Not at all	2	4%
Don't know	0	0%

Base: all respondents (49 respondents).

### Views on the balance between positive and negative messages

Respondents were asked what balance the narrative around adult social care should strike between positive messages, demonstrating the value of the sector, and negative messages, emphasising the challenges it faces and making a case for a higher level of support.

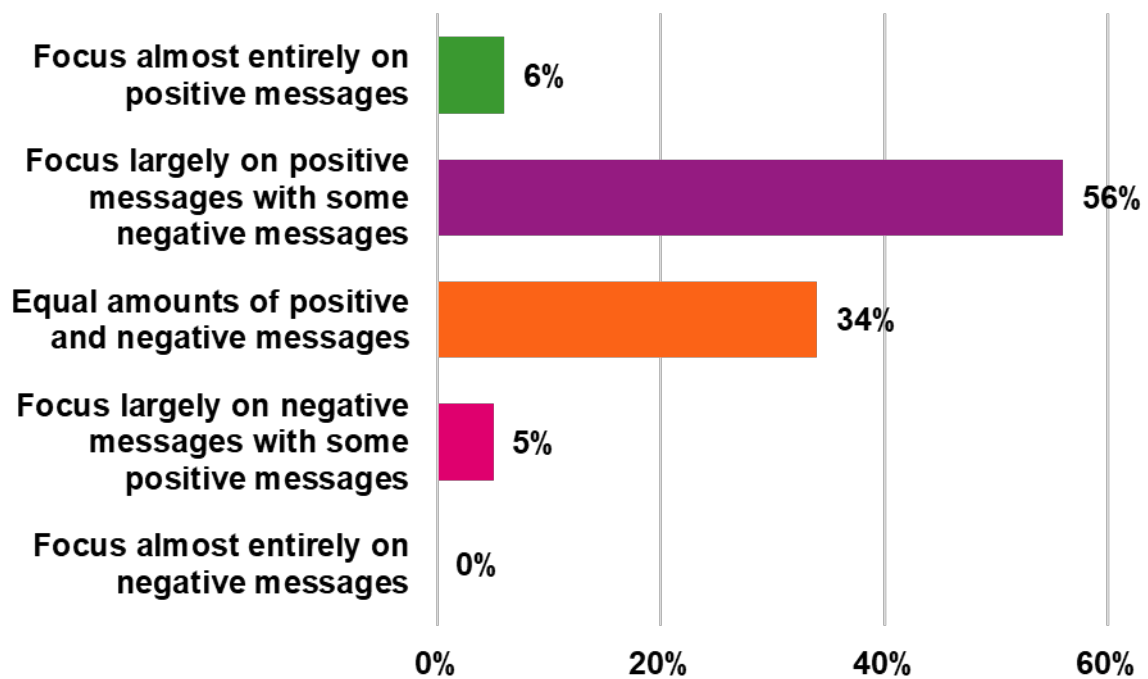
Table 13 shows the results for this question. This demonstrates that a majority of respondents (56 per cent) thought that the narrative around adult social care should focus largely on positive messages, with some negative messages to emphasise the challenges the sector is facing. The next largest group of respondents (34 per cent) thought that the narrative should contain equal amounts of positive and negative content. Smaller groups of respondents thought that the narrative should focus almost entirely on positive messages (6 per cent), or largely on negative messages with some positive messages (5 per cent). No respondents thought that the narrative should focus almost entirely on negative messages, and no respondents did not know their answer to this question.

**Table 13: What balance would you say the narrative around adult social care should strike between positive and negative messages?**

	Number	Per cent
Focus almost entirely on positive messages	3	6%
Focus largely on positive messages with some negative messages	27	56%
Equal amounts of positive and negative messages	17	34%
Focus largely on negative messages with some positive messages	2	5%
Focus almost entirely on negative messages	0	0%
Don't know	0	0%

Base: all respondents (49 respondents).

**Figure 3. Preferred balance of positive and negative content in the public narrative on adult social care**





## Further comments

Respondents were invited to share any further comments they had on the topics covered by the survey. Their responses fell into the following broad categories, arranged in approximate order of prevalence from more frequent to less frequent:

- Observations that adult social care is largely unknown and underappreciated by the general public, until the point at which they or their loved ones require support, at which point the sector becomes of the utmost importance to them
- Observations that media focus on the sector is predominantly negative, leading to a distorted and harmful perception of adult social care services
- Support for open and realistic communication with the public, making them aware of the difficult circumstances the sector is facing along with its value and potential
- Assessments that it remains too early to fully assess the impact of integrated care systems (ICSs) on local authorities' adult social care activities
- A perception that ICSs have an overly narrow view of adult social care as being only about older people and hospital discharge, when in fact it covers a far wider range of areas
- A call for ICSs to bring greater involvement and input from people using adult social care services
- A call for central government to make health and social care a top priority, and to transform the sector into something more fit for purpose
- Recognition of the need to provide and share good examples of best practice, evidence-based care outcomes and shared care models with the NHS
- An observation that improved use of technology is necessary to ensure that people retain their independence for longer

- A caution that charging reforms risk exacerbating the financial crisis facing adult social care, if the administrative burden of collecting the additional funds outweighs their value
- A call to centralise and standardise adult social care funding
- A call to provide greater certainty and security in funding to better enable long-term planning by local authorities
- A call to update the funding formula to no longer rely on outdated data from the 2011 Census
- An observation that valuable and talented social care teams are nevertheless exhausted and overwhelmed by the pressure facing the sector and the demands they are required to cope with

## Annex A: Questionnaire

How confident are you that your council will meet all of its statutory duties under the Care Act from its budget, over the next two financial years?

Columns:

- Very confident
- Fairly confident
- Not very confident
- Not at all confident
- Don't know

Rows:

- 2024/25
- 2025/25

Over the last ten years, how often has your council had to spend less money on other council services, in order to protect adult social care spending and to meet statutory duties in adult social care? How often do you anticipate this happening over the next five years?

Columns:

- Very often
- Fairly often
- Not very often
- Never
- Don't know

Rows:

- Last ten years
- Next five years

Below are a number of issues facing the adult social care sector.

Please choose up to three of these issues which you think present the biggest challenges, and rank them in order of priority in the box provided.

Click and drag each concern into the box - they will automatically be numbered in order of priority.

- Recruitment and retention of a workforce with the right skills (including personal assistants)
- Provider stability
- Diversity of provision and mix of care models, including housing
- Strain on unpaid carers
- People waiting for one or more of: an assessment of their needs; care and support or a direct payment to begin; a review of their care plan
- Supporting hospital discharge
- Inability to invest in adult social care prevention due to pressure on budgets and acute care needs
- Increased amount and complexity of demand (including safeguarding needs)
- Other (please specify)

Excluding additional funding, what are three key actions your council, or central government, could take to address current issues facing adult social care in the short-term and medium-term?

- Action 1 (open text)
- Action 2 (open text)
- Action 3 (open text)

The Care Act 2014 received royal assent ten years ago this May.

To what extent, if at all, do you think the legislation of the 2014 Care Act is fit for purpose for the adult social care sector?

Please answer only with respect to the legislation of the Care Act itself, rather than the extent to which funding and other pressures and developments have enabled or impeded the realisation of its objectives.

- To a great extent
- To a moderate extent
- To a small extent
- Not at all
- Don't know

How important do you think it is to implement the charging reforms laid out in the Care Act, the implementation of which has so far been delayed?

Charging reform encompasses: A cap on the maximum personal care costs an individual has to pay; An extension to the financial means test thresholds to make the means test more generous; and the ability for people self-funding their care to request their council arranges their care for them at the council-funded rate.

- Very important
- Fairly important
- Not very important
- Not at all important
- Don't know

How important, if at all do you think adult social care is to the public, both in your council area and nationwide?

By "important", we mean the extent to which adult social care services are valued and/or prioritised by members of the public.

Columns:

- Very important
- Fairly important
- Not very important
- Not at all important

- Don't know

Rows:

- Your local residents
- The national population

To what extent, if at all, do you agree with this statement:

"Our system of health and social care places too much emphasis on treating sickness and not enough on preventing or reducing sickness before it occurs."

- To a great extent
- To a moderate extent
- To a small extent
- Not at all
- Don't know

How confident are you, if at all, that the new process of adult social care assurance overseen by the Care Quality Commission ("assurance") will help contribute to ongoing improvement in adult social care performance in your council?

- Very confident
- Fairly confident
- Not very confident
- Not at all confident
- Don't know

How far would you agree or disagree that adult social care benefits from being a local service delivered by local councils?

- Strongly agree
- Tend to agree
- Neither agree nor disagree
- Tend to disagree

- Strongly disagree
- Don't know

To what extent, if at all, does collaborative working with integrated care systems (ICSs) support you to deliver better outcomes for people?

- To a great extent
- To a moderate extent
- To a small extent
- Not at all
- Don't know

In general, the public narrative surrounding adult social care tends to focus on the crisis, pressures and challenges facing the sector. Narratives emphasising the value and opportunities provided by high quality care and support for people and communities, and the successes of partnership working in providing it, tend to be emphasised less often.

What balance would you say the narrative around adult social care should strike between positive and negative messages, in order to build support for adult social care and to strengthen the case for additional investment?

- Focus almost entirely on positive messages
- Focus largely on positive messages with some negative messages
- Equal amounts of positive and negative messages
- Focus largely on negative messages with some positive messages
- Don't know

Please provide any further comments on this topic in the box below. (open text)



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