Adult Social Care (ASC) provision in the UK, which largely concentrates on supporting those with needs arising from illness, disability, old age or poverty, is the subject of a myriad of damning reports.

Driven by a toxic mix of government budget cuts, coupled with the need by private providers to make a profit, ASC workers, and those who rely on it for support, confront unprecedented levels of exploitation.

The previous Conservative-led coalition dishonestly claimed that a major ambition was “to support people to live a full and active life, to live independently and to play an active part in our local communities.” In order to justify the slashing of funds to the National Health Service (NHS), they cynically claimed that they wanted to invest more in social care to look after patients in their own homes and in their communities rather than in hospitals.

The current sorry state of affairs in social care refutes such claims.

The continuous austerity demands of the current Conservative government have deepened the crisis that originated under the free market policies of Margaret Thatcher’s government. Privatisation of social care started in 1979 and continued under the Labour government from 1997. Today ASC provision is dominated by the private sector. In an industry worth £43 billion in England alone, the sector employs more than three-quarters of the 1.5 million workforce.

The previous government’s cuts to ASC funding by nearly £5 billion have led to a 40 percent decline in adults receiving social care, from 1.5 million in 2010 to just 800,000. The service faces a further cut of over £1 billion this year.

A recent study has found that between 2008 and 2013, an estimated 483,000 elderly and disabled people either have lost their care support, or are no longer eligible. At the same time, the number of people age 65 and over has increased by one million.

Early this year, Local Government Association (LGA) chair, David Sparks, warned, “The combined pressures of insufficient funding, growing demand, escalating costs and a 40 percent cut to local government budgets across this Parliament mean that despite councils’ best efforts they are having to make tough decisions about the care services they can provide.”

Local councils anticipate a £4.3 billion funding gap in ASC—a third of the current annual budget—by 2020 and that is just to maintain services at their current unsatisfactory level.

According to an LGA press release in October 2014, “Over the last year alone, councils were forced to divert £900 million funding from other budgets to simply maintain the current level of service, despite making efficiency savings and receiving additional money from the 2010 Spending Round.”

At the same time as announcing swingeing cuts to local authority budgets, Chancellor George Osborne announced in July’s budget that workers over age 25 had to be paid a minimum of £7.20 an hour from April next year, rising to £9 by 2020. The increased financial pressures this will put on social care provision was spelled out by the UK Homecare Association, which warned Osborne that unless extra funding was provided, “there is a serious risk of catastrophic failure” and that some providers may be driven out of the market.

Further cuts and increases in the minimum wage will force the ASC companies to seek other ways to exploit their workers in an industry which is already infamous for zero-hour contracts, temporary employment, stressful and harsh working conditions, unpaid travel
time, and inadequate training and supervision for its workforce. The Resolution Foundation, a think tank conducting research on living standards, estimates that around 10 percent of ASC workers in Britain are paid less than the minimum wage, meaning, “they miss out on £815 a year on average.”

In 2013, one ASC provider was ordered to pay £600,000 in stolen wages to 3,000 workers, after it refused to pay workers for travelling time and other hours worked. In February this year, East Midlands Crossroads was ordered to pay nearly £38,000 pocketed from the wages of 184 of its workers. Currently up to 100 private social care companies are under investigation for failing to pay their staff the minimum wage.

ASC workers have to be able to deal with a wide variety of complex needs required by care recipients, including different feeding methods, how to dress wounds, offer emotional support, administer medication, lift and move people.

At the same time, they often have little time to minister to these needs. Several reports have revealed that many people receiving social care in their own home are being forced to decide between being washed or fed during their carer’s rushed 15-minute visit (which is becoming the “standard” time in many areas). In some instances, to maximise profits, care workers were told by employers not to start conversations with their clients, in order to fit in more home visits.

Even the wretched 15-minute visit is being squeezed with reports, that between 2010 and 2013, some 593,000 home care visits to pensioners paid for by councils to private contractors lasted five minutes or less. What sort of care can be administered in such a short time?

To extract additional profit, many private care providers cut back on training. According to a report published in March by Skills for Care, a workforce development body, only two-thirds of ASC workers receive a job induction course on commencement of employment and only half had a recognised social care qualification. Further, only 10 percent had first aid training and only one-third had had any formal training to help dementia patients.

The quality of care offered in residential care homes has also come under the spotlight on numerous occasions in recent years. The Care Quality Commission (CQC) highlighted last year that one in five nursing homes failed to provide enough staff to ensure “residents received good, safe, care”.

Recorded allegations of abuse and neglect of recipients of social care are hitting record levels. In the first six months of this year, a staggering 30,000 allegations of abuse and neglect were reported to CQC.

However, rather than the inherent nature of the profit system coming into question for this terrible situation, the guilt, as always, is placed upon the unqualified, low-wage and massively exploited care workers. Even Andrea Sutcliffe, the Chief Inspector of Adult Social Care at the CQC, which is supposed to regulate and inspect the industry, had to admit recently “a broken system is turning good people into bad carers.”

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